THE STATUS OF FRONTLINE HUMANITARIAN WORKERS

Research study

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Designed and illustrated by Liddy Greenaway

The illustrations throughout this report are inspired by the job titles and roles of the frontline humanitarian workers who contributed to this study.

Contents

we put our lives on the line to save others \ we have been targeted by armed groups \ no one ever talks about PTSD and how to treat it \ humanitarian access and civic space are closing \ such negative impacts on mental health \ exploitation of workers \ precarious working conditions \ no voice \ undervalued, underpaid, but expected to perform well at all times \ no promotion \ they don't let women grow \ the commitment, extra hours put in, with little pay \ explosive devices \ revenge killing \ it is discrimination \ high-risk situations without adequate safety measures or support \ our work is based on commitment, to serve vulnerable communities \ we get more inspired, and more productive, if we are also being cared for by the institution we work for \ sense of belonging \ invest in mental health \ persecution against humanitarian workers \ strong feeling of purpose \ humanitarian work is exhausting \ not being there for my children and my family \ it is also the responsibility of donors, who allow a system of total job insecurity \ I need to put in more effort to be equal to a man \ fear of reprisals \ pay delays \ provide safety and security to female staff \ may the sacrifices of humanitarian workers be appreciated \ safety should not be compromised \ a political environment that persecutes and criminalizes humanitarian workers \ lack of funding \ we are doing our best \ **humanity should start in the workplace**

Foreword

Frontline workers are the bedrock of the humanitarian sector. They are rooted in their communities, thereby exposed to the same daily challenges including extreme weather, health hazards, accidents, and the security risks of working in insecure areas, particularly in war and conflict zones. In light of this, does the sector consider them human enough to be accorded fair treatment? My decades of experience do not confirm so.

One of the characteristics of colonialism is placing differential value on human lives, and that is so evident in the humanitarian sector. Frontline workers, mostly working with local and national organisations, are treated as dispensable human resources. This was evident during the COVID-19 response. Many international organisations call it a good example of localisation, as more funding was passed on to local actors. I consider it the ugliest example of localisation. Risks were transferred together with funding, without addressing institutional needs or safeguarding frontline workers. I hear from peers that it's mainly frontline workers of local organisations who go into war zones in Ukraine to deliver aid. They are also expected to take photos and videos for their international donors and intermediaries, often without acknowledging their own role. Despite billions of dollars available for the Ukraine response, less than 0.07% has been passed on to local actors. Humanitarianism seems to be missing once again in humanitarian aid.

Thankfully, the discourse on localisation is now often informed by the prevailing colonialism and the coloniality of power in the aid sector. We have to understand the status of the frontline workers from that perspective, hence this study.

The emergence of the North-led aid architecture has given a new pattern to settler colonialism through the country offices of international actors in Southern countries. These country offices are perpetuating and consolidating the coloniality of power by controlling the knowledge production system, widening resource disparity and exploiting local and national organisations for their own capitalist interests. It's a serious risk not only to the local knowledge system but also to the possessors of this knowledge, i.e., frontline workers. The categorisation of knowledge into explicit and tacit has created a hierarchy in the knowledge system. The tacit knowledge of frontline workers has become subservient to the explicit knowledge of highly educated and professionally trained humanitarians, often working with big agencies. This is epistemic violence, which has marginalised frontline workers within their own context. Decoloniality is essential to acknowledge, respect and properly compensate those who hold valuable practical knowledge.

Localisation discourse often focuses on the percentage of funding being passed on to local actors, without analysing the further implications of insufficient and infrequent compensation of frontline workers, mostly without any kind of social security. This income and job insecurity either causes brain drain, impacting intellectual capital and institutional sustenance of local organisations, or compels a poor quality of life for those who choose to stay with local organisations. I have encountered scores of frontline workers doing two jobs to make ends meet and to meet the basic requirements of their families. Does the humanitarian system think about what happens to such workers and their families, if they succumb to the risks they face in their daily work lives? It's time that we provide visibility to such a large number of invisible workers. A system can never be strong if its basic foundation is eroding.

This study does not only aim to document the challenges facing frontline workers. We are determined to use these findings to build a powerful case for the recognition and betterment of frontline workers, including setting up a global fund to provide essential support to workers and their families during life's most critical and demanding moments. We are extremely thankful to Mr Marvin Parvez and CWSA for arranging the necessary funds to support this study.

Sudhanshu S. Singh

Sudanshu S. Singh
Founder and CEO
Humanitarian Aid International (HAI)

Executive summary

Purpose

Frontline humanitarian workers are vital to the delivery of aid and humanitarian services in some of the world's most challenging crises. Despite their critical role, they encounter numerous challenges, including inadequate compensation, job insecurity, and exposure to serious security risks.

This study set out to assess the working conditions of frontline workers, better understand their unique challenges and needs, and offer practical recommendations to enhance their wellbeing and effectiveness. Specifically, it aimed to address the following four questions:

1. What are the **environmental and working conditions** of frontline workers?
2. To what extent do frontline workers have **access to resources, training and support systems**?
3. What contractual **terms and conditions, compensation and benefits** are available to frontline workers?
4. How do these factors affect the **wellbeing, resilience, and effectiveness** of frontline workers, and what can be done to improve support?

The report's recommendations aim to guide funders, policymakers and humanitarian organisations to craft interventions that account for frontline workers' welfare, ensuring that humanitarian responses are more resilient.

Scope and methodology

At the heart of this paper is a survey of 734 frontline workers. To the best of our knowledge, this is the first survey to capture global perspectives on the working lives of frontline humanitarians, from their perceptions of risks, to their contract terms, and views on mental health support. The survey was distributed in six languages and reached frontline workers in over 60 countries across 6 regions, exploring global trends alongside crisis-specific experiences. It is complemented by a document review and qualitative input from 20 interviews and 16 focus group discussions.

While this study provides a unique overview of the views of frontline humanitarians on their work, it had several limitations. It relies on self-reported data, which makes it hard to capture comparative experiences across different locations. Responses to the survey were also much higher in some countries (such as the DRC, with 107 responses) than in others (such as Ukraine, with just 3 responses). Although we supplemented the survey data with qualitative data to understand reported differences, the complexity of humanitarian settings and the variability in organisational support structures underscore the need for further research.

In harm's way

**Our findings build on existing research to underscore the significant risks faced by both aid workers and crisis-affected communities.** In 2023 alone, over 595 aid workers were attacked and 280 fatalities recorded - the highest to date - with Gaza, South Sudan and Sudan the most dangerous places to be an aid worker. Ethical dilemmas further complicate daily life. Workers described pressures to prioritise aid based on local political interests. Deciding how to allocate limited resources often forced workers to compromise between reaching accessible areas and addressing severe but more remote needs. Female workers also experienced distinct security risks, particularly gender-based violence and harassment.

Organisational support

Humanitarian organisations have a legal and ethical duty to create a safe, inclusive working environment as outlined in the Core Humanitarian Standard. A landmark 2015 ruling against the Norwegian Refugee Council led many international organisations to rethink their duty of care, increasing the focus on risk assessments, training, and accountability mechanisms to protect staff better.

Yet, international organisations do not extend these protections to their local and national partners. **Frontline staff in local partner organisations often face the most significant risks, but have far less access to organisational protection.** Fewer than 50% of workers in local or national NGOs had access to evacuation plans, accident insurance, security infrastructure, or risk monitoring resources. Local and national NGO leaders told us that project-based funding models do not usually allow them to cover costs for essential protections, such as health and accident insurance or radios for emergency communication.

Effective management is crucial for fostering a supportive environment where staff feel safe and empowered to perform their duties. The survey found a lack of skilled management in some organisations, including workplace bullying and harassment. Respondents described a lack of transparency, ineffective reporting systems, and hierarchical structures that create an environment where staff feel undervalued and hesitant to raise concerns. Smaller, local NGOs were often perceived as more supportive environments, with 70% of sub-national and local NGO workers reporting their organisations to be supportive, compared to 39% in INGOs.
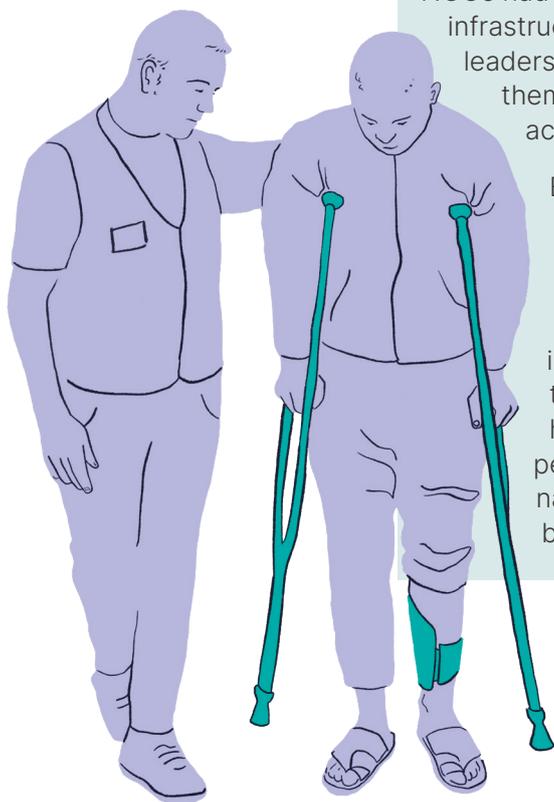
Contracts and compensation

As well as weakening protection for workers, project-based funding cycles also lead to job insecurity. Among the people we surveyed, 94% of INGO staff had a formal contract, compared to only 57% of staff in sub-national or community-based organisations. Short-term contracts dominate, with 47% of frontline workers on contracts shorter than a year, and a further 19% having no formal contract at all. Many workers that participated in the study described stress about future job prospects and financial stability; 30% of surveyed workers worry about job insecurity every week, and 44% reported that short contract lengths negatively impact their mental health.

Pay varied widely, with expatriate frontline workers earning over four times that of national frontline workers and INGO workers earning twice that of staff in sub-national and community-based organisations, which reflects the findings of previous research. Many frontline workers supplement their income, with 38% taking additional jobs in the past two years, a rate that rises to 54% among local organisations.

Impacts on wellbeing and resilience

The safety risks, volatility and work pressures faced by frontline workers can take its toll on mental resilience. One-third of participants (34%) said they felt "overly stressed" on a daily or weekly basis, to the point that it affected their ability to work, and 12% described their mental health as poor or very poor. The greatest stressors were safety concerns (51% of respondents), contract length (42%), low pay (41%), and lack of social protection benefits (38%). High workloads, inflexible project deadlines, ethical dilemmas and feelings of inequity between local and international staff exacerbated these pressures.

Aid workers often experience feelings of hyper-vigilance and helplessness, compounded by limited access to mental health support. While some larger organisations provide mental health resources, such as psychological training, counselling, and peer support, access to these services was inconsistent and many smaller organisations lacked resources. **Yet it is the stigma around mental health that remains one of the greatest barriers**: some workers feared repercussions if they admitted to struggles, some said they didn't have time to access wellbeing initiatives, and others described cultural barriers. Previous research has shown that stigma is often compounded by beliefs that workers should be more resilient, due to their relatively better conditions compared to crisis-affected communities.

For many participants, stress and low morale arose from poor organisational management and culture, including hierarchical power dynamics, lack of support, and lack of trust and team-building. We found a positive relationship between how supportive people perceived their organisations to be and how highly they rated their wellbeing.

Conclusions

The humanitarian sector operates with a hierarchical model where international actors often control funding, decision-making, and risk allocation, leaving LNNGOs to operate with limited resources while shouldering disproportionate risks. Despite commitments to localisation under frameworks like the Grand Bargain, LNNGOs receive only a fraction of global humanitarian funding directly. Project-based funding models with low overhead allocations constrain their ability to build organisational capacity and invest in staff welfare, and many LNNGOs must make difficult decisions between investing in their staff and investing in systems that could improve access to future funding or meet immediate programmatic demands. **The funding disparity, coupled with the practice of risk transfer by international organisations and donors, has created a systemic imbalance where LNNGO are inadequately equipped to fulfill their duty of care, provide fair compensation, or protect their staff.**

Addressing these structural inequities requires significant shifts in how the humanitarian sector operates. International organisations must move toward more equitable, respectful partnerships that empower LNNGOs through capacity-sharing, quality funding, and shared accountability. **Sustainable, flexible, and predictable funding models are needed for LNNGOs to build resilience, improve staff retention, and meet the growing demands of humanitarian crises.** This would help ensure aid recipients receive assistance from frontline workers who are well-supported and treated with dignity.

Summary recommendations

Recommendations for funders and intermediaries

- Allocate indirect costs (ICR)/overhead payments to local and national NGOs, which is vital to sustain operations and invest in staff. Fair overhead payments are the foundation for stronger local organisations and better treatment of frontline workers.
- Reserve a percentage of emergency pooled funds for frontline workers, ensuring that resources are available to pay for life and accident insurance and personal protective equipment.
- Adopt respectful hiring practices that recognise the unique challenges local and national NGOs face during periods of rapid surge of international organisations.
- Support pooled wellbeing services at the country level, including services for counselling, debriefing, and peer support.

Recommendations for organisations employing frontline workers

- Develop a 'Bill of Rights' outlining the minimum standards for treatment, compensation, wellbeing, and safety of frontline humanitarian workers. Advocate collectively for these rights to be upheld.
- Provide life and injury insurance for frontline workers and advocate this is covered in sub-contracts from international organisations.
- Create a dedicated fund to support frontline workers and their families.
- Implement specific practices to protect female and LGBTQIA+ workers.
- Prioritise staff wellbeing, including through management training.

Abbreviations

CHS	Core Humanitarian Standard
CWSA	Community World Service Asia
DRC	Democratic Republic of the Congo
FGD	Focus Group Discussion
GBV	Gender-Based Violence
HAG	Humanitarian Advisory Group
HAI	Humanitarian Aid International
IASC	Inter-Agency Standing Committee
IDPs	Internally Displaced Persons
ICRC	International Committee of the Red Cross
IFRC	International Federation of Red Cross and Red Crescent Societies
ILO	International Labour Organization
INGO	International Non-Governmental Organisation
IRC	International Rescue Committee
LNGO	Local Non-Governmental Organisation
LNNGO	Local or National Non-Governmental Organisation
LGBTQIA+	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual and Other identities
NGO	Non-Governmental Organisation
NNGO	National Non-Governmental Organisation
NRC	Norwegian Refugee Council
PTSD	Post-Traumatic Stress Disorder
R&R	Rest and Recuperation
RCRC	Red Cross Red Crescent
SN/LNGO	Sub-National/Local Non-Governmental Organisation
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme

1 **Introduction**

Global humanitarian needs are continuing to rise at an unprecedented pace, showing no signs of slowing down. In 2023, a record 339 million people required humanitarian assistance, an increase from 274 million people in 2022 (UNOCHA, 2023). This places immense pressure on a sector already stretched by the lasting impacts of COVID-19, escalating crises and conflicts, and the worsening effects of climate change (Goldberg, 2024).

At the same time, political shifts have led some donor governments to scale back foreign aid commitments (ALNAP, 2022). **Strains on the global economy, driven by rising costs, inflation and disrupted global supply chains, have put additional pressure on organisations' limited resources.** Humanitarian organisations also face shrinking political space and mounting operational risks.

This financial strain has led many international humanitarian organisations to reassess their priorities and restructure their operations. In 2023, the ICRC projected funding shortfalls of up to 25% and entered a period of cost reductions and redundancies (Loy, 2024). In 2024, Save the Children announced hundreds of job cuts to address its projected budget gap (Goldberg, 2024). Other large organisations, including the IRC, have announced substantial cuts. Smaller organisations are also struggling (Worley, 2024), often without the financial reserves and institutional resilience to withstand prolonged and unpredictable funding cuts.

These challenges have called into question the growth model that many large INGOs have pursued - and an "entire sector incentivised around expansion and bringing in more money" (Worley, 2024). This model, centred on the need to attract more funding and demonstrate greater impact, is now facing increased scrutiny.

It is critical to recognise the effects this will have on frontline workers, who will bear the greatest burden of funding losses, heightened demands, and shifting organisational priorities. Yet, this moment also offers a critical opportunity to shift toward more sustainable, locally-led approaches, fostering resilience, local leadership and lasting impact for communities.

Essential humanitarians

Frontline workers are the backbone of the humanitarian system. They are crucial to delivering life-saving assistance to communities affected by crises. They are the first responders in the wake of an emergency, often affected by crises themselves, and working in extremely challenging environments.

Frontline workers live in close proximity to affected populations and are directly involved in on-the-ground operations (Ndiaye et al., 2023). They include search and rescue volunteers, community mobilisers, medical

and health workers, other technical workers, project coordinators and local support staff. Their work relies on local knowledge and cultural understanding, building trust and adapting humanitarian interventions to local contexts. Such hands-on roles allow vital services to reach the most vulnerable communities, and are the foundation of successful responses.
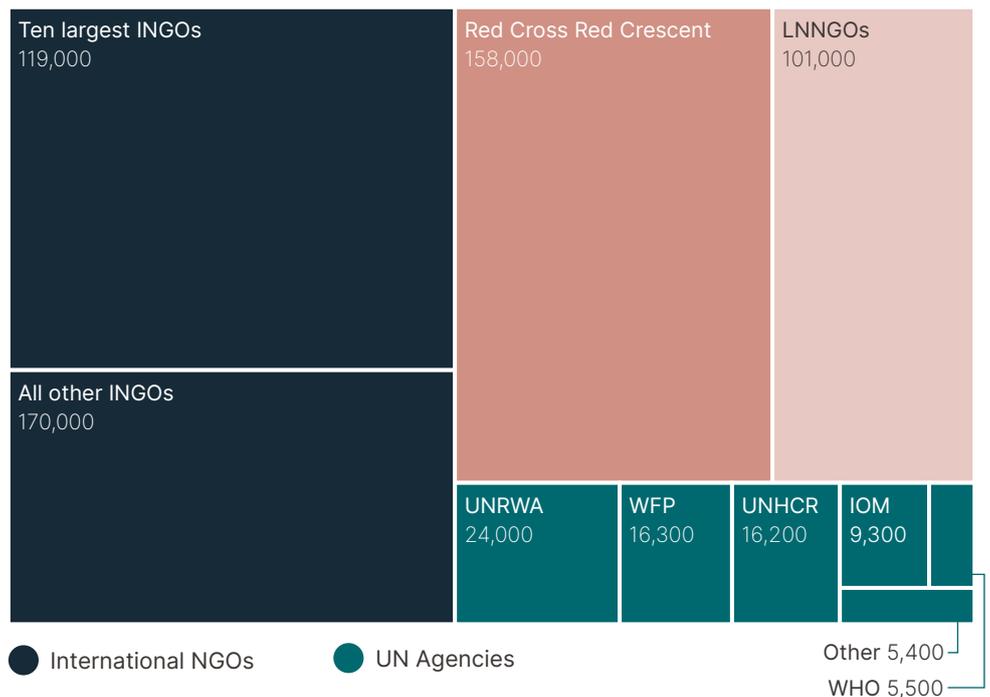
Communities bear the primary responsibility for the first-line humanitarian response, often stepping in as unrecognised volunteer responders in the days and weeks after a crisis. Humanitarianism is deeply embedded within many crisis-affected communities, driven by long-standing cultural values of generosity and mutual assistance that far pre-date the modern humanitarian architecture (Carruth, 2021). Many frontline humanitarians are intimately connected to the crises they address, and a significant proportion of these workers have experienced personal impacts from the disasters they respond to, including the loss of loved ones, destruction of homes, or displacement and disruptions to their lives. This dual role of responder and survivor brings unique strengths and challenges, as these individuals combine lived experience with local knowledge to support crisis-affected populations. However, this context can also intensify the emotional and logistical complexities they face in providing effective assistance.

A high proportion of frontline workers are employed or contracted by local and national humanitarian actors. The 2022 State of the Humanitarian System report estimated that 5,000 humanitarian organisations exist globally[1], of which approximately 3,900 are local and national NGOs and 930 are INGOs (ALNAP, 2022). Over 90% of all humanitarian staff are nationals of the countries they work in. Although there was no available data on frontline workers, it is likely that a majority are based in community-based, sub-national, or national organisations, including Red Cross Red Crescent (RCRC) national societies (see Figure 1).

1 This excludes staff in local and national governments and organisations that are not engaged in the international humanitarian system, such as those funded exclusively through local donations.

Figure 1. In-country humanitarian staff by organisation type, 2020
Source: ALNAP, 2022. Numbers of staff are estimated and rounded to the nearest thousand.

Ten largest INGOs
119,000

All other INGOs
170,000

Red Cross Red Crescent
158,000

LNNGOs
101,000

UNRWA
24,000

WFP
16,300

UNHCR
16,200

IOM
9,300

Other 5,400

WHO 5,500

● International NGOs   ● UN Agencies

Despite the commitments made under the 2016 Grand Bargain to support local and national actors by providing at least 25% of global humanitarian funding, recent data reveals minimal progress. As of 2023, an estimated 0.6% of humanitarian aid went directly to local and national actors, and the transparency of intermediaries remained a challenge (Development Initiatives, 2024). As a result, **local and national organisations face substantial challenges in attracting, supporting and retaining staff**, within a hierarchical aid model that hinders localisation and capacity-building efforts (ALNAP, 2022).

This research study explores the experiences of frontline staff across international, national and local organisations, encompassing the perspectives of both national staff and those from other countries. Humanitarian staff are widely exposed to risk, but local workers often face additional challenges, including low compensation, job insecurity, and limited security support (GISF and Humanitarian Outcomes, 2024). **The rising number of humanitarian crises is amplifying exposure to risk, and underlines the urgent need for improved management, training, and social safety nets to ensure worker protection.**

Objectives of this report

As global crises grow in complexity and frequency, the effectiveness, resilience and wellbeing of frontline workers are paramount. **This study set out to hear the experiences and perspectives of frontline humanitarian workers and to examine the broad range of conditions that affect them**, from mental and physical health, to pay disparities, and support systems. It aimed to:

- Assess the current working conditions faced by frontline workers operating in humanitarian contexts, including roles, responsibilities, and the environments in which they operate.

- Identify the specific challenges and needs of frontline workers, including (but not limited to) terms and conditions, safety and security concerns, access to resources, training and support systems, and psychosocial wellbeing.

- Provide evidence-based insights and recommendations to inform policy development, programmatic interventions, and organisational practices to enhance frontline workers' wellbeing and effectiveness.

The experiences and insights that frontline workers shared are critical to understanding how to improve humanitarian outcomes and to ensuring that principles of equity and justice are upheld within the sector.

2 **Approach**

Who we spoke to

We surveyed **734** frontline workers and spoke to **107** national staff via focus group discussions (FGDs).

Survey participants

👤

Gender

218 women (30%)

506 men (69%)

👥

Age

123 21-30 year olds (17%)

453 31-50 (62%)

137 51+ (19%)

♿

Disability status

46 people with disabilities (6%)

767 without disabilities (92%)

🏳

Nationality

647 national staff (88%)

54 expatriate staff (7%)

▦

Type of organisation

273 INGO staff (37%)

321 NNGO (44%)

106 SN/LNGO (14%)

34 other (5%)

Conceptual framework

A conceptual framework was developed to guide the research study, based on the objectives outlined in the Introduction. The framework was structured around four key questions related to working conditions, organisational resources and support, and terms and conditions. These areas were explored through a total of 18 sub-questions, which informed the development of the data collection tools and analytical approach used in this study.

Guiding research questions (see Annex 1 for more detail):

1. What are the **environmental and working conditions** of frontline workers?
2. To what extent do frontline workers have **access to resources, training and support systems**?
3. What contractual **terms and conditions, compensation and benefits** are available to frontline workers?
4. How do these factors affect the **wellbeing, resilience, and effectiveness** of frontline workers, and what can be done to improve support?

Methodology

Document review

The research team reviewed over 30 academic papers, reports and articles published between 2015 and 2024. This included a combination of global studies and country-specific studies, looking at the humanitarian system, localisation, and the working conditions and mental health of aid workers. The papers were systematically reviewed based on the guiding research questions.

Survey of frontline workers

A digital survey was designed to collect responses from frontline workers about their working conditions, terms and conditions, and experiences and perceptions of work, including effects on mental health and stress.

A pilot survey was developed and shared in July 2024 and 18 responses were submitted. The survey was adapted based on analysis of the data. The finalised survey was translated and distributed in six languages via HAI's website and through HAI and partners' global networks, reaching aid workers in over 60 different countries and across six regions.

A total of 818 survey responses were submitted between 8 August and 16 September 2024. Responses were categorised as 'frontline' and 'non frontline' workers (see Definitions), and 734 respondents were identified as frontline workers. For the purposes of this report, analysis was conducted on this subset of 734 responses.

📍

Location

299 Africa (41%)

248 Asia (34%)

136 MENA (19%)

33 Caribbean & Latin Am. (4%)

5 Europe (1%)

5 Oceania (1%)

🔥

Crisis context

318 conflict setting (43%)

276 natural disaster (38%)

160 health crisis (22%)

137 refugee setting (19%)

209 IDP setting (28%)

Focus group discussion participants

📍

Location

18 Pakistan

15 Afghanistan

15 Bangladesh

15 Philippines

13 Indonesia

10 South Sudan

9 India

7 Iraq

👤

Gender

44 women

55 men

An index methodology was used to analyse the responses. Data was categorised into 5 key areas based on the guiding research questions: Safety and security; Job security; Organisational support; Pay and benefits; and Mental health and wellbeing. Index scores were disaggregated by organisational type, crisis context, region, nationality and gender to understand differences. See Annex 3 for further details.

Key Informant Interviews
Interviews were conducted with 20 humanitarian thought leaders and practitioners, exploring perceptions of aid worker terms and conditions, localisation, disparities and challenges, examples of best practice, and future opportunities. Interviews were conducted remotely using a semi-structured approach and analysed against the research questions.

Focus Group Discussions
A total of 16 in-person Focus Group Discussions (FGDs) were conducted with frontline workers in Afghanistan, Bangladesh, India, Indonesia, Iraq, Pakistan, the Philippines, and South Sudan. An additional FGD was conducted remotely with senior staff based in multiple contexts. FGDs were facilitated, transcribed and translated by trained humanitarian workers, and transcripts were analysed by the research questions.

Job description review
A review of job descriptions was carried out to identify typical contracts for frontline workers. The review was limited to online adverts. A total of 208 job descriptions were extracted from ReliefWeb, LinkedIn and OptionCarriere (DRC) in September 2024 for open frontline roles based in 9 contexts (Afghanistan, Bangladesh, DRC, Guatemala, Nigeria, Palestine, the Philippines, Somalia and Venezuela). Job descriptions were coded by title, roles and responsibilities, contract length, salary, benefits (such as insurance and pension), and training provision.

Definitions

For this study, frontline workers in the humanitarian sector are defined as professionals directly engaged in delivering humanitarian aid and services, particularly those who operate in challenging environments. This includes three categories of staff and volunteers:

- Workers employed or volunteering for local, sub-national and national organisations directly involved in the delivery of aid;
- Workers employed by international NGOs (INGOs) or United Nations (UN) agencies who are directly involved in fieldwork and local operations on a day-to-day basis; and
- Senior leaders within local or national humanitarian organisations who, despite their managerial roles, operate under significant capacity and resource constraints and are often directly engaged with crisis-affected communities.

We recognise the significant roles played by frontline workers employed by local and national Governments, however this study did not have the funds or access to include such workers in primary data collection.

3 In harm's way: The physical and emotional toll of crisis work

> 66
>
> National NGO staff often operate in environments with less security and inadequate health and social insurance. Many are exposed to precarious working conditions, which can include high-risk situations without adequate safety measures or support.
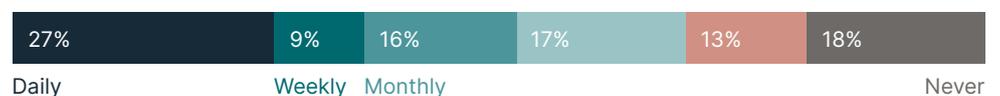>
> Frontline worker, Ethiopia

Key findings

1. **Humanitarians are exposed to numerous physical and emotional hazards**, including threats of violence, disease outbreaks, and the psychological strain of navigating complex crises. Ethical challenges, such as balancing neutrality with local political pressures and managing limited resources, are additional pressures.

2. In many contexts, **local and national NGOs bear a greater exposure to threats**, including violence, kidnappings, and hazardous environmental conditions. INGOs rely on partner organisations to operate in high-risk areas. Their partnership arrangements further exacerbate this imbalance, leaving local workers vulnerable.

Frontline humanitarian workers operate in some of the most dangerous and challenging environments in the world. They are exposed to natural disasters, extreme weather conditions, conflict, violence, and security threats, making their work both physically and emotionally exhausting. In the past decade, humanitarian work has become increasingly complex with pressure on organisations to do more with less and shrinking operational space.

Our global survey asked over 700 frontline workers to identify the risks that they face in their work. **Respondents identified a range of environmental and social risks, most frequently associated with natural disasters, illness, and disease, but also armed conflict, kidnapping and sexual violence.** More than a third (36%) of workers said they face these threats on a daily or weekly basis, and 24% said that they feel unsafe or very unsafe in their work.

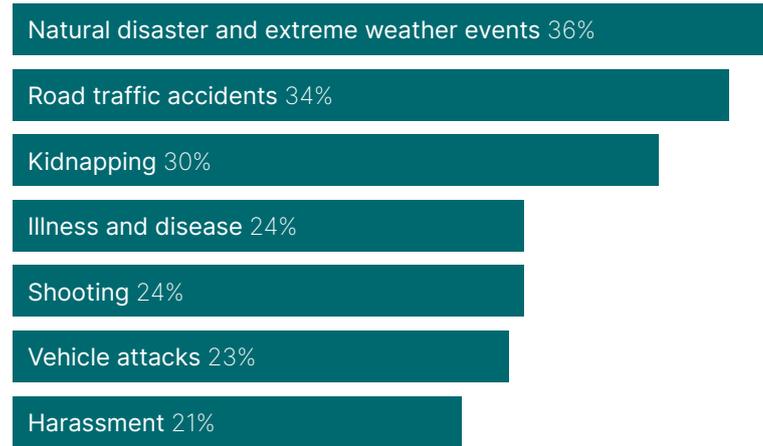Figure 2. How often do you encounter safety and security threats in your work?

27%	9%	16%	17%	13%	18%
Daily	Weekly	Monthly			Never

Figure 3. What type of safety and security threats do you face in your work?

Natural disaster and extreme weather events 36%

Road traffic accidents 34%

Kidnapping 30%

Illness and disease 24%

Shooting 24%

Vehicle attacks 23%

Harassment 21%

> " There is not a lot of data on the specific risks faced by local actors. We often focus on security-related risks, but malaria, stomach issues, and lack of clean water, for example, are really significant safety concerns.
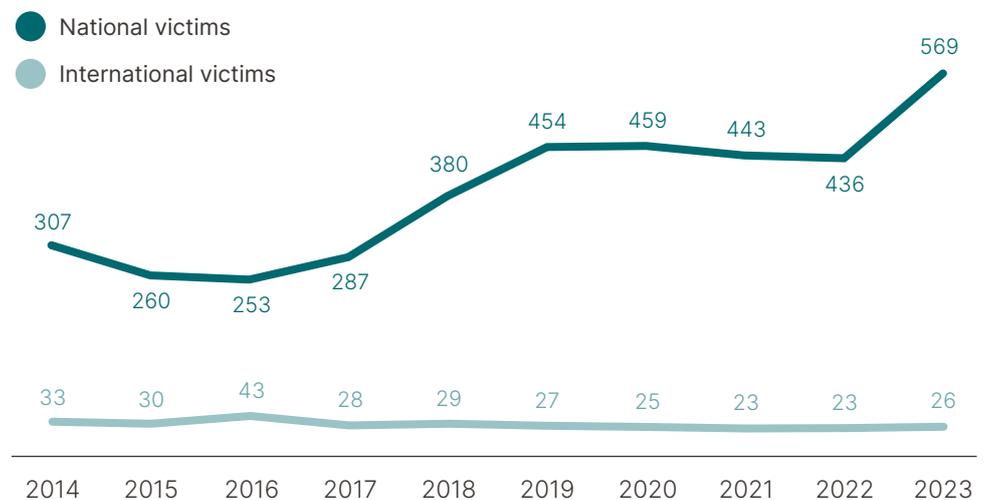>
> Key Informant Interview

Violence

Aid organisations are sometimes targeted deliberately by armed groups, but most often, frontline workers face the same risks as the local population and often find themselves in the wrong place at the wrong time.

This is particularly challenging in areas where there are multiple armed groups and different local authorities. In the Central African Republic, for example, up to 13 different armed groups control various portions of the country, along with numerous smaller criminal bands which is a strain on workers' capacity to understand and manage risks (GISF and Humanitarian Outcomes, 2024).

According to the most recent Aid Worker Security Report, in 2023 alone over 595 humanitarian workers were affected by violence (Humanitarian Outcomes, 2024). There was a significant increase in aid worker kidnappings in 2022 (rising to 185 from 117 in 2021), and although kidnappings decreased again in 2023, this remained a major concern for many of the frontline workers we spoke to.

Figure 4. National vs. international aid worker victims, 2014-2024
Source: The Aid Worker Security Database.
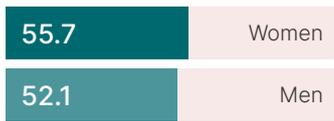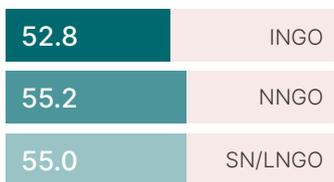
● National victims
● International victims

National victims: 307, 260, 253, 287, 380, 454, 459, 443, 436, 569

International victims: 33, 30, 43, 28, 29, 27, 25, 23, 23, 26

2014 2015 2016 2017 2018 2019 2020 2021 2022 2023

Safety and security

Survey index average score
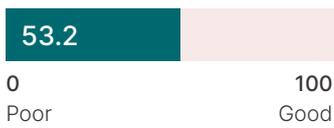
53.2

0	100
Poor	Good

Difference by gender

55.7	Women
52.1	Men

Difference by organisation

52.8	INGO
55.2	NNGO
55.0	SN/LNGO

Difference by region

46.7	Africa
63.7	Asia
50.8	MENA

Difference by crisis

42.0	Conflict
55.6	ND
47.9	Health
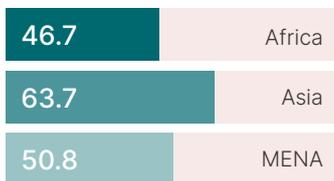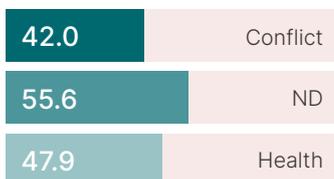
ND: Natural disaster

Index scores were calculated by standardising quantitative responses to the survey questions, categorised by theme (e.g. safety and security). Non-responses were excluded, and an average score was calculated per respondent. Overall averages enable comparisons between demographic groups. See Annex 3 for further detail.

National and local NGO workers shoulder the majority of the risk in conflict zones (see Figure 4). In 2023, 569 (96%) of workers who were victims of violence were national staff (Humanitarian Outcomes, 2024). Although major attacks affecting aid workers took place in 33 countries in 2023, 62% of victims were based in just three contexts: Gaza, Sudan, and South Sudan.

INGOs increasingly rely on national partner organisations to operate in high risk locations, where they are unwilling to send international staff or where they are denied access. In 2022, the number of casualties among national NGOs surpassed those of INGOs for the first time since 2013. However, in 2023, the highest numbers of victims were based in UN agencies in the intense and ongoing conflicts in Gaza and Sudan (Humanitarian Outcomes, 2024).

Environmental risks

The physical environment can also present risks, due to extreme weather conditions, damaged infrastructure, and limited resources for safe transport, accommodation, or communication. In South Sudan, participants told us that heavy flooding makes roads impassable, forcing frontline workers to walk long distances to reach some communities. This adds to their physical strain and exposure to security threats in isolated areas, where communication with their organisation can be limited. In Afghanistan, respondents said poor and unsafe roads make travel dangerous, especially in winter, when snowfall can block roads, delaying access and increasing the risk of accidents.

Direct and prolonged exposure to hazardous environments also increases the risk of infectious diseases for workers interacting closely with infected individuals or contaminated surfaces. Insufficient protective gear, inadequate training, and limited access to medical care exacerbate these risks.

Harassment and sexual violence

Female aid workers face distinct security challenges, which are often rooted in cultural norms, gender roles, and the high prevalence of gender-based violence (GBV) in crisis areas (Raftery et al., 2022). Of survey respondents, 31% of women said they faced harassment and 17% risked sexual violence. Focus group participants and interviewees said that the prevalence of sexual harassment and violence is often underreported due to poor accountability mechanisms and cultural barriers to speaking out. Recent reporting has also shone a light on sexual violence against men during conflict, particularly in some contexts, such as Ukraine (UN, 2023).

In South Sudan, women said they are at risk of rape and sexual harassment during fieldwork, especially when travelling to very rural areas. In Iraq, women said they must put in considerably more effort than men to gain equal recognition, both within their organisations and in broader society, which adds to the emotional burden and security risks inherent to their work as people question their roles in the workforce.

In Afghanistan, the restrictions placed on women by the Taliban require that women travel with a male guardian (Mehram) or work remotely. Previous research echoes the profound stress and mental health impacts of the edict on women aid workers. It also raises dilemmas for organisations on whether they should make decisions on behalf of women, asking them not to work, or

to work from home on the grounds of safety, or whether women staff should be given informed choices about whether or not to take risks in continuing to work (Bowden et al., 2023). This organisational dilemma is likely to apply in other contexts as well.
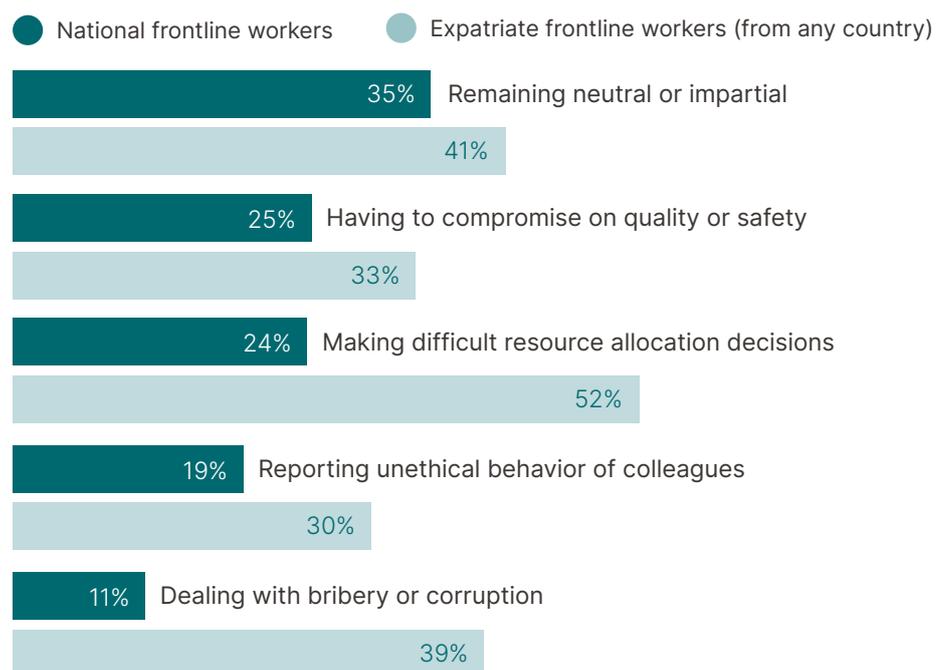
Red tape and moral dilemmas

Humanitarian work often takes place in politically volatile areas where access to affected populations is restricted. In addition to the direct risks to their life and health, **two-thirds of the frontline workers we surveyed said they face ethical and moral dilemmas in their work**.

The most common dilemma was 'Remaining neutral or impartial when carrying out aid work', something that a third of all frontline workers said they struggle with. Survey participants described pressure from local authorities to prioritise particular projects or target areas based on political affiliations. Several described being forced to make an impossible choice between acting according to humanitarian principles and complying with these demands to maintain operational access, a sentiment that has also been described elsewhere (Ndiaye et al., 2023).

Bureaucratic and political hurdles can exacerbate security risks for frontline workers. In one country, workers said obtaining permission from local authorities, including religious leaders, is an arduous process that can increase the time aid workers spend in insecure environments, leaving them vulnerable to political interference or community backlash if aid delivery is delayed or perceived as biased. In another, respondents said local power dynamics make it difficult for workers to engage safely with target communities, while expectations from political parties can pressure organisations to select certain groups for aid. In one focus group, aid workers told us they were accused of espionage by local authorities after an ill-timed raid occurred shortly after an NGO's workshop.

Figure 5. Do you face any of the following moral or ethical dilemmas at work?

- National frontline workers
- Expatriate frontline workers (from any country)

	National	Expatriate
Remaining neutral or impartial	35%	41%
Having to compromise on quality or safety	25%	33%
Making difficult resource allocation decisions	24%	52%
Reporting unethical behavior of colleagues	19%	30%
Dealing with bribery or corruption	11%	39%

These political and social suspicions can turn communities against aid workers, creating an environment where frontline staff are viewed not as neutral humanitarian actors but as agents of external groups (Ndiaye et al., 2023).

In other contexts, frontline workers have grappled with the challenges of remaining neutral in the face of disproportionate harm. In Ukraine, civil society organisations argued that strict neutrality can, at times, have negative consequences and have called for international organisations to stop using arguments of neutrality to withhold support (GFCF, 2022).

More than a quarter (27%) of frontline workers were faced with 'Making difficult decisions about the allocation of resources' and 25% struggled with 'Having to compromise on quality or safety'. For example, frontline workers described sometimes having to prioritise aid to areas that are easier to reach, safer, or closer to main operation centres, while providing less support to remote communities that also had significant needs.

Some workers (13%) said they struggled with 'Dealing with bribery or corruption'. Interestingly, this was more commonly reported by expatriate workers (39%). Research on ethical dilemmas in Afghanistan has illustrated how junior staff members are "often left to handle dilemmas stemming from demands of local power brokers, such as deciding whether to pay bribes, agree to share beneficiary lists, favour a power broker's candidate for contractual jobs, or report diversion or taxation" (Bowden et al., 2023).

A range of other dilemmas were highlighted by a smaller number of respondents, including power-plays between local and international stakeholders, organisational issues of micromanagement, delayed salaries, and excessive meetings. Organisational leaders emphasised that cybersecurity risks are increasing and are overlooked for local actors, who are often more at risk due to lack of resources. **These examples show the delicate balance humanitarian actors must maintain to ensure aid delivery is fair, needs-driven, and well-run.**

Conclusions

This chapter has provided an overview of the crucial safety and security challenges encountered by frontline humanitarian workers, including threats of violence, disease outbreaks, and the psychological strain of navigating complex crises. In the next chapter, we explore the support provided by aid organisations to help workers navigate these risks and illustrate why poor contracting practices from international organisations limit the ability of smaller NGOs to deliver their duty of care.
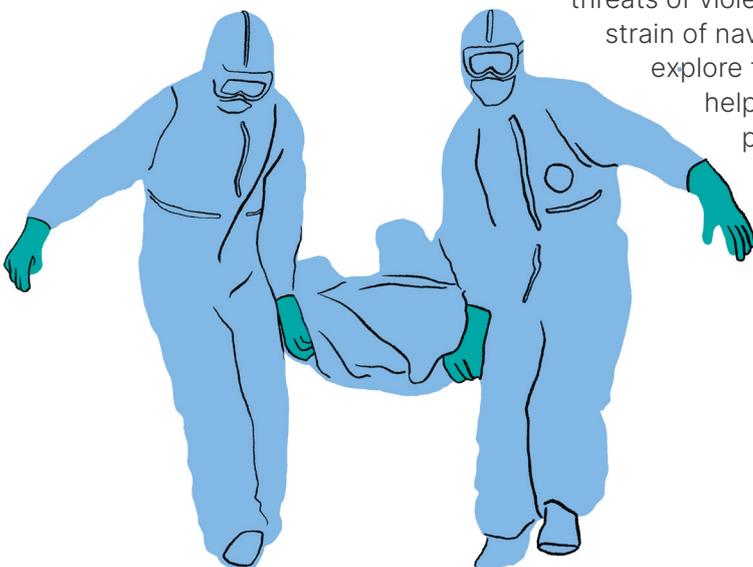
4 Duty of care: Safety, security and organisational support

Key findings

1. Security training and infrastructure is disproportionately allocated toward expatriate workers in less risky roles. **Many local workers lack access to safety protocols and evacuation plans.**

2. **Local NGOs' resource constraints** hinder their ability to provide adequate safety equipment, insurance, and gender-sensitive safety measures.

3. **Risk-sharing strategies could help to protect frontline workers better.**

Duty of care refers to an organisation's legal and ethical responsibility to ensure employees' and volunteers' safety, wellbeing, and protection. For humanitarian organisations, this includes providing a safe working environment, adequate training, mental and physical health support, security protocols, and ensuring that staff are not put at undue risk (Merkelbach and Kemp, 2016).

Organisations' duty of care for its staff is inextricably linked to its duty of care for crisis-affected communities. This is articulated in the Core Humanitarian Standards: **crisis-affected communities have a right to engage with respectful, competent and well-managed staff and volunteers**. This commitment requires humanitarian organisations to provide a safe, inclusive working environment with processes to manage human resources, reporting systems, and a clear code of conduct.

A safe working environment?

The 2015 Oslo District Court ruling against the Norwegian Refugee Council (NRC) for gross negligence in the kidnapping of aid worker Steve Dennis was a pivotal moment in the sector's approach to duty of care (Riglietti, 2023). The landmark case underscored **the legal and ethical obligations organisations have toward their employees and prompted reforms to staff safety and wellbeing.**

- Leadership, staff and volunteers promote and demonstrate an organisational culture of quality and accountability.
- Maintain a safe and inclusive working environment, taking measures to protect the safety, security and wellbeing and dignity of all staff and volunteers.
- Ensure all staff and volunteers have the necessary support, skills and competencies to fulfil their roles and responsibilities effectively and accountably.
- Ensure all staff and volunteers understand and adhere to a code of conduct, which, at a minimum, prohibits any form of exploitation, abuse, harassment or discrimination against people or any misuse of resources.
- Ensure there are safe, confidential and accessible ways for all staff and volunteers to raise concerns and report misconduct, with appropriate protection for those reporting.
- Take timely, appropriate actions to address misconduct of all staff and volunteers in line with recognised good practice.
- Establish a coherent organisational approach to ensure that human resources are managed effectively in a fair, non-discriminatory and transparent manner, in line with recognised good practice.

2 *Australia, Jordan, Switzerland, Indonesia, Sierra Leone, the United Kingdom, Japan, Brazil, and Colombia.*

3 *Joint statement towards a new declaration for the Protection of Humanitarian Personnel, Australian Minister for Foreign Affairs.*

In response, international organisations established more comprehensive risk assessments, training, and policies, and emphasised their commitment to accountability. They introduced new mechanisms for reporting and addressing safety concerns (Clamp, 2022).

The escalation of security challenges in Sudan, South Sudan, Ukraine, and Gaza has also promoted renewed efforts. In September 2024, a coalition of nine governments[2] came together to form the Ministerial Group for the Protection of Humanitarian Personnel. A Joint Statement made by the group stated its commitment to upholding and advancing international humanitarian law to protect humanitarian personnel[3].

However, the local and national NGOs we consulted face significant challenges in fully implementing their duty of care. Most smaller NGOs rely on project-based funding, which does not provide for capital expenditure or security provisions such as insurance, evacuation support, or expensive communications. Respondents in South Sudan and Afghanistan, for example, told us that their organisations cannot provide health insurance, life insurance, or security equipment such as vehicles or radios, leaving them very vulnerable when things go wrong.

Table 1 summarises provisions discussed during this study and illustrates disparities in access to risk monitoring, medical and accident insurance, and evaluation protocols. In general, national staff and those in local and national organisations are less likely to have access to security infrastructure or support (Humanitarian Outcomes, 2024).

The poor coverage for life and accident insurance is especially stark and leaves frontline workers and their families in precarious situations when things go wrong. Several organisations are working to address this: for example, the IFRC introduced a global accident insurance scheme intended for National Societies that do not already have insurance. This provides basic cover for volunteers for the cost of 1.50 Swiss Francs per volunteer per year (IFRC, 2018). However, in many locations, national and local organisations struggle to find insurance companies that can provide suitable cover or are unable to pay the costs for large volunteer or low-wage staff. There were also significant barriers to providing adequate insurance and health care in volatile, low-resource environments, such as the DRC, where medical infrastructure is limited and disease outbreaks are common.

Because local NGOs often operate in high-pressure environments with urgent humanitarian needs, they face difficult decisions about how to use their resources. Some organisations told us that staff chose to have a slightly increased salary rather than insurance payments, underscoring the precarity of their income. NGOs also have to decide how much to spend on benefits and social protection for their workers versus investing in systems that will allow them to access more and better funding in the future, or to meet immediate programmatic goals. Keeping small humanitarian organisations running can be very challenging, and safety and security measures are one set of concerns among many.

The power dynamics between international organisations and LNGOs also affect the implementation of duty of care. Previous research found that local and national NGOs unanimously said they faced recurrent refusals from donors or financial partners to include "coverage for any security staff position, basic security equipment and infrastructure, or full staff salary

Table 1. Types of security provisions for humanitarian workers.

Type of provision	Examples highlighted by participants	Issues and gaps identified by participants
Security training	Training sessions on emergency procedures, stress management, first aid, and security drills. These efforts aim to improve workers' readiness to respond to crises.	• Smaller organisations don't have funds to conduct frequent or comprehensive training. • Lack of follow-up and failure to update protocols regularly. • Many international organisations don't routinely include partners in basic security training. • Hostile Environment Awareness Training is primarily attended by expatriate staff. Its high cost ($1,000 to 7,000+ USD) is impossible for smaller organisations and LNNGOs (Humanitarian Outcomes, 2024).
Risk monitoring	This includes real-time security updates, briefings and alerts.	• Formal risk monitoring services are expensive and mostly used by international organisations.
Incident reporting	Standardised procedures and tools for reporting, categorising, and responding to incidents.	• Implemented inconsistently. • Frontline workers may feel unable to report incidents due to cultural norms or risks of organisational push-back or losing work.
Security infrastructure	This includes armoured vehicles, satellite, and radio communication.	• Small organisations often rely on project-based funding. • Funders often prevent organisations from including capital assets in project-based funding.
Evacuation support	Organisations develop systems for monitoring risks, triggers for removing staff, pre-designated safe routes for evacuation, transport, and agreed safe-havens.	• Only 49% of participants said their organisation has emergency evacuation protocols (37% of staff in national-level organisations). • Even where protocols are in place, smaller organisations may rely on international partners to provide transport and security for evacuations.
Accident insurance covering disability and death	This includes basic accident, death and disability pay-outs for staff injured during their work.	• Insurance is often unaffordable. • Even with funding, NNGOs in some contexts are unable to find insurance companies that will provide cover. • Families of aid workers injured or killed during their work can be left in very precarious financial situations. • Only 21% of those surveyed said they have insurance covering accident or death.
Medical insurance	Emergency medical care.	• 77% of INGO workers said they had access to medical insurance, compared to 34% of workers in national, sub-national or local organisations. • Insurance is often unaffordable. • Even where insurance is in place the available healthcare provision may be limited.

packages including insurance" in their project costs (Ndiaye et al., 2023). At the same time, overhead costs for local and national NGOs, which range from 4-12% (IASC, 2022), are often lower than those awarded to INGOs and insufficient to cover such costs. **It is typically LNNGOs that face more direct exposure to conflict, natural disasters, and political unrest, yet lack the resources to manage these risks effectively.** Meanwhile, donors and INGOs control more funds and have more robust security systems, but (in many contexts) face fewer direct risks. For example, during the Covid-19 pandemic, national staff often remained in contact with infected populations. Yet, many lacked basic protective equipment, vaccinations, or medical evacuation plans, which were provided for expatriate staff.

> "
>
> There are no good and sufficient insurance companies in Afghanistan. For one of our UN-funded projects, we were required to provide insurance to the staff, but we couldn't find a company that fit our needs, so we provided self-insurance.
>
> Frontline worker, Afghanistan

Donors, UN agencies and INGOs openly describe their "risk transfer" model for reducing the risks they must manage and mitigate. **National actors are pushed to take on more risk than they are prepared for**, particularly when they lack the resources to track and record risks and access to security training and resources. Most international entities do not systematically record incidents affecting their LNNGO partners, which creates a major information gap (GISF and Humanitarian Outcomes, 2024).

One interviewee described current practices as "risk laundering" and said that donors need to take responsibility for the risks they transfer to local actors. This includes understanding the local context and providing adequate support.

The Dutch Relief Alliance and Netherlands MFA (2024) have recently published findings from three small pilots of risk-sharing systems that aimed to explore how this could work in practice, ensuring that local actors did not bear an unfair portion of the risks while receiving insufficient support and resources to manage them. They reported that local partners began "communicating more openly with international counterparts, holding them accountable, and raising questions and concerns more freely".

It is also important to remember that **local staff and organisations provide a vital network of local knowledge and relationships during security incidents**. While international organisations invest significantly in risk monitoring and mitigation, when things go wrong, they often rely on local partners to provide knowledge of evolving threats, and navigate and broker relationships with the community. For example, one interviewee told us that their organisation uses expensive risk management contractors but seeks local advice on staff movement and that when a staff member was kidnapped it was a local religious leader who was able to negotiate their release.

Safety and inclusion for women and LGBTQIA+ aid workers

The previous chapter highlighted some specific risks faced by women, including harassment, exclusion, and gender-based violence. **Most survey respondents said they had access to a process to report and address gender-based discrimination, harassment or safety concerns** (80%), although this fell to 66% among SN/LNGO workers. However, the extent to which these were well-managed and actually used by staff was dependent on variable organisational cultures, as well as the context of harm.

Discrimination and harassment also exist within many organisations, and this can be complicated for women to report and address. For example, a female frontline worker in Indonesia said: "I experienced gender discrimination by my co-workers. It was known to my co-workers and leaders, including the NGO that was accompanying us, but everyone was silent. I don't know how to seek justice." (Indonesia)

Infrastructure can also increase women's safety and inclusion. The majority of frontline workers said they had access to gender-separated toilets (reported by 79% of men, and 79% of women), and about a third said their organisation provided transportation outside working hours (27% of men, 35% of women), which can be important for women's safety. The provision of child-care facilities was uncommon, and interestingly this was less commonly reported by women (17% of men, 9% of women). This may contribute to

barriers to women's inclusion, although this is not unique to the humanitarian sector.
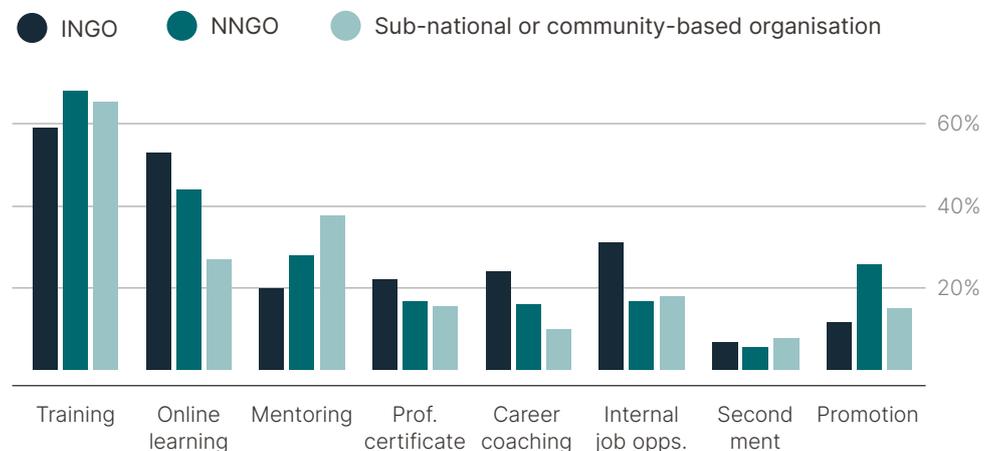
Interviewees also highlighted the additional risks faced by LGBTQIA+ aid workers, who can face significant discrimination and harassment in many countries where homosexuality remains illegal and/or severely stigmatised. Research on this topic is extremely limited, particularly on the experiences of national LGBTQIA+ aid workers. However, a report by RedR suggests **national LGBTQIA+ aid workers face greater risks than international workers, due to increased stigma, a lack of support systems and resources, and limited inclusion training of other staff** (RedR and EISF, 2016).

Support, skills and competencies

In addition to ensuring a safe, inclusive working environment, the CHS requires organisations to ensure workers develop the skills and competencies needed to be effective in their roles.

Most survey respondents reported having access to at least some opportunities to develop their skills and competencies within their organisation, most commonly through in-person training or online learning. Staff in national and local organisations had slightly better access to mentoring compared to INGO staff, which may be indicative of the more personal, informal forms of support and development at the local level, whereas INGO staff had better access to centralised resources such as online learning, as well as more internal job opportunities.

Figure 6. What career development opportunities are currently available to you in your organisation?

Over a third (37%) of frontline workers said they were satisfied with the development opportunities available to them. Some participants cited structured training programmes and certificates provided by their organisations, as well as more informal efforts to "promote and progress people ... to develop their abilities and raise their status" (Iraq).

However, the data indicated a high level of variability in people's experiences and perceptions. Development opportunities are not always implemented consistently and fairly. While core staff in managerial roles tend to have access to training and capacity building programmes, there are limited opportunities for those in temporary frontline roles, such as community mobilisation. Some local workers also said they struggle to

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Career development is not happening to all organisation staff, except some few who do capacity strengthening on the project.

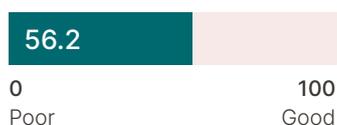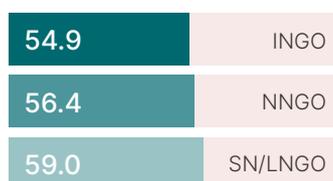Frontline worker, South Sudan

Organisational culture and support

Survey index average score

56.2	

0 — Poor   100 — Good

👤

Difference by gender

57.4	Women
55.5	Men

🮑

Difference by organisation

54.9	INGO
56.4	NNGO
59.0	SN/LNGO

📍

Difference by region

53.4	Africa
60.5	Asia
53.6	MENA

🔥

Difference by crisis

54.7	Conflict
58.5	ND
56.9	Health
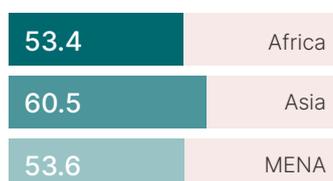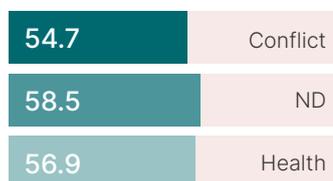
ND: Natural disaster

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access online training even when it is available due to language barriers. In Afghanistan, women have less access to training due to restrictions on their participation in formal education and employment.

This can hinder workers' skills development and growth. The majority of frontline workers had not received a promotion (70%) in the past two years, and 28% said they were unsatisfied with the development opportunities available to them. Some participants commented on needing to wait a long time for promotion due to the small size of their team, with senior positions rarely becoming available - which can contribute to turnover as workers seek growth elsewhere. Several frontline workers were frustrated with what they saw as unfair or 'political' promotion decisions, including nepotism, which suggests broader issues around how some organisations structure and communicate career development pathways.

People's perceptions of their skills development are shaped by varying local and national contexts; many frontline workers are based in contexts of precarious employment, with poor education opportunities, high unemployment rates, and limited public and private career options. Frustrations with the lack of opportunities are likely to reflect these broader economic challenges, and are often not unique to the humanitarian sector. While longer-term funding for local partners can help organisations invest more sustainably in individuals, many of the challenges around skills and career development are not straightforward for local humanitarian organisations to address.

Organisational culture, effective management and raising concerns

Finally, the CHS requires that staff and volunteers are well-managed and provided with a supportive environment, including confidential, accessible ways for staff to raise concerns and report misconduct, and a coherent approach to managing human resources in a fair, non-discriminatory and transparent manner.

Many of the respondents said they work for organisations that do provide supportive environments. For some small community-based teams, there is a strong sense of pride, camaraderie and mutual support. Some participants described their colleagues as "family" and "brothers and sisters", and reported feeling well cared for. One worker in India described: "As a humanitarian worker, I feel very proud, happy and blessed. My organisation is taking good care of its staff [and] respects me well." Frontline workers in organisations with a positive culture of care had a strong sense of morale and job satisfaction that helped ease the difficult working conditions.

However, the findings also point to hierarchical structures, where decision-making power is concentrated at higher levels, and frontline or local staff may feel undervalued, unheard, or excluded from key processes. Some frontline workers, of both INGOs and LNNGOs, reported poor management, bullying, corruption, and a lack of transparency and accountability. Such experiences were associated with low morale, feeling isolated, and a lack of purpose, with several respondents saying they felt they had no option left but to resign.

One respondent commented: "International humanitarian organisations, in their internal operations, in many cases do not apply the principle of

humanity towards their work teams. It's the same in some UN offices, the cost-efficiency relationship prevails and means that we only think based on results." (Venezuela)

Another told us: "We are bound to do whatever the boss wishes - meeting in the off time or off day, less or no leave, etc., it creates stress to us ... If I try for a job elsewhere and my boss knows it, I will lose my job immediately. If I luckily get a job, my boss will not provide me a clearance certificate to join. So, there is a risk of losing jobs from both sides." (Bangladesh)

The majority (75%) of frontline workers reported access to a process to report and address workplace feedback or complaints. However, even when such processes are available, workers may not always feel comfortable using them. In environments lacking a supportive organisational culture, some employees fear that raising concerns could lead to conflict or even job loss. There are also risks associated with workplace cultures that frame the organisation as a "family", as this can inadvertently discourage staff from voicing complaints.

Conclusions

Risk management and mitigation strategies vary significantly across different countries and organisations, and are contingent upon organisations having sufficient overhead funding. Core funds allow organisations to develop their security infrastructure, secure insurance coverage, and implement contingency plans.

The CHS illustrates that an organisation's duty of care extends beyond staff safety and includes proper management, skills training and ways for staff to raise concerns. The research indicates a high level of variability; while some frontline workers have long careers in organisations that provide mentoring, care, and long-term investment, others struggle with short-term and volatile contracts in organisations they experience as extractive and impersonal.

Team dynamics and organisational culture are foundational to enabling staff to learn, grow and do their jobs effectively. There is a need for co-responsibility in the humanitarian sector to create an enabling environment in which CHS Commitment 8 is upheld, and in which staff are well-trained, well-managed and well looked after. As a starting point, longer-term, more sustainable partnerships and funding mechanisms can provide national and local organisations with the resources to invest in staff, including training and development and organisational culture and management.

> ❝
>
> We are in the Province of Tanganyika in the DRC, an area which no longer seems to interest many donors, yet there is still instability here. Every day we learn of the fires caused by the incursion of this or that armed group.
>
> Frontline worker, DRC

Attacks on aid workers in the DRC 2023-2024

▲ Fatal

▲ Non-fatal injuries
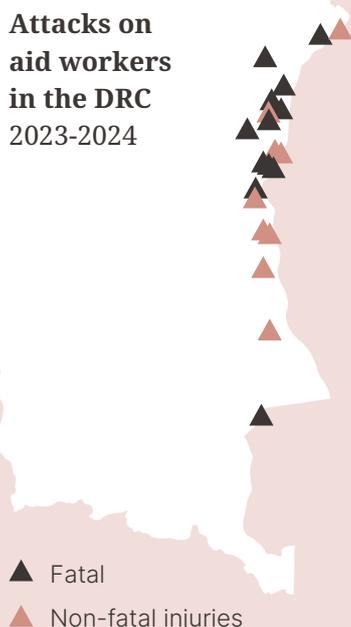
Spotlight: Democratic Republic of the Congo

The DRC faces one of the most protracted and complex crises in the world, characterised by "deadly confrontations between armed groups, rampant violence, frequent flooding, high-impact epidemics, acute food insecurity, and inadequate or absent basic infrastructure" (UNHCR, 2024). Violence in eastern DRC has escalated in recent years, after new attacks against the Congolese army in late 2021.

In 2023, 700,000 people were newly displaced, increasing the total number of IDPs in the country to 6.2 million, and adding to more than a million refugees from the DRC hosted in other African countries (UNHCR, 2024). The country has also experienced repeated outbreaks of Ebola, putting additional pressures on an already limited health care system.

In June 2024, a convoy of aid vehicles was attacked on the way to Beni in north-eastern DRC. Two Congolese staff of Tearfund, Jonas Masumbuko and John Amahoro, were killed (Mitchell, 2024). While civilians also face attacks and are caught in the middle of fighting between numerous armed groups, this comes at a time of increased distrust in aid organisations. In the first half of 2024, 170 security incidents directly targeted humanitarian workers and more than a dozen workers were reported to have been kidnapped (Ngorora, 2024). Of the 15 aid workers killed in the DRC in the past two years, all were national staff (The Aid Worker Security Database).

The 107 frontline workers based in the DRC who responded to our survey reported risks of vehicle attacks (65% of respondents), kidnapping (62%) and shooting (50%). Women also reported threats of harassment (44% of women, 26% of men) and sexual violence (36% of women, 18% of men). Nearly half of workers (45%) experience these risks on a daily or weekly basis, and 40% said they feel unsafe or very unsafe when carrying out their work. Previous stories have highlighted the overwhelming and emotionally exhausting situation for aid workers in the DRC who work tirelessly to support communities and have themselves faced a lifetime of instability (TNH, 2013).

Support for frontline workers in the DRC remains limited. Although medical insurance was available to most (80%), only 22% had access to life insurance. Participants also raised **a lack of danger pay for national workers, despite requirements to enter high-risk areas.** This is an additional allowance for staff who are required to work in particularly dangerous locations and is a standard part of the International Civil Service Commission, which sets UN staff compensation and allowances. However, similar payouts are implemented differently by international NGOs, and are largely absent among national and local organisations.

Participants also raised the need for better access to psychosocial support and time off for rest and recuperation for national workers, highlighting the relationship between safety and security, duty of care and wellbeing. Although most had access to some paid time off (86%), several workers raised a need for more regular leave and transport allowances in order to be able to return home to rest and spend time with their families. These needs highlight the toll humanitarian work can take on local workers, and the critical need for a more equitable approach to organisational support.

Map data source: [The Aid Worker Security Database](). Approximate locations of 25 recorded attacks on aid workers, from 1 January 2023 to 31 October 2024.

5 The value of frontline work: Contracts and compensation

The disparity [between LNNGO and INGO pay] can impact morale as many of us feel that our roles and responsibilities, which involve significant on the ground challenges and risks, should be more adequately recognised and compensated.

Frontline worker, Pakistan

Key findings

1. **Frontline workers across all organisations face poor job security**, often limited to short-term contracts that require them to continuously search for new opportunities and manage unpredictable gaps in income.

2. **International frontline workers earn four times more than national colleagues**, and national workers at INGOs earn twice as much as those at sub-national and local NGOs. This contributes to low morale and motivation.

3. **National workers feel undervalued** for the challenging and high-risk environment they work in, and the pivotal roles they play in humanitarian programmes.

4. **National, sub-national and local NGOs are not able to provide the same level of access to social security benefits**, including insurance, pensions and paid time off, compared to INGOs.

Contract duration and job certainty

Job security is an issue that affects frontline workers across different humanitarian contexts. The nature of humanitarian work is volatile and unpredictable, particularly at the outset of a crisis. Funding is typically awarded based on project cycles, and organisations hire on this basis.

There is a high level of informality in the sector. **A lot of emergency frontline work is carried out in a voluntary capacity, and many aid workers move between paid and unpaid roles over the course of their lives.** The Red Cross Red Crescent movement relies on the voluntary contributions of over 16 million people worldwide, including in protracted humanitarian crises. For many informal and community-based organisations, and frontline workers, humanitarianism is "an extension of societal value" and "acts of caring and kinship," (Carruth, 2021).

Job security

Survey index average score
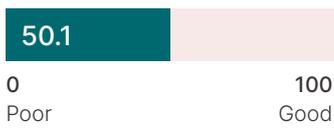
50.1

0   100
Poor   Good

Difference by gender

50.3	Women
50.1	Men

Difference by organisation

52.8	INGO
49.9	NNGO
46.0	SN/LNGO

Difference by region

50.2	Africa
50.6	Asia
50.9	MENA

Difference by crisis

50.5	Conflict
52.1	ND
50.0	Health

ND: Natural disaster

Founders and staff of local and national NGOs will often work unpaid to establish organisations, sustain activities between projects, or with the hope or expectation of future salaried employment (Moro et al., 2020). Some even use their own resources to support the organisation, often by working for international organisations (Moro et al., 2020).

Notably, almost a fifth (19%) of frontline workers in our survey did not have a formal contract. This varied by organisation type; 94% of INGO staff had a contract, but this fell to 79% for NNGO staff and 57% for staff based in sub-national or c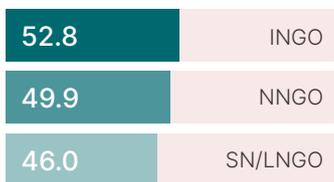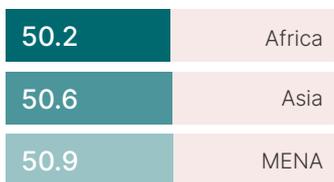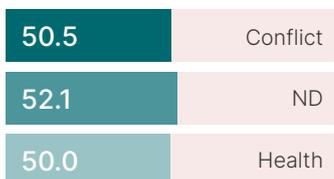ommunity-based organisations. The lack of a formal contract can have implications for workers' legal rights, access to benefits, and job stability.

For those with contracts, these are often short term; 47% of surveyed frontline workers were on temporary contracts or contracts shorter than a year. INGO staff had somewhat more secure contracts, but only 20% of all frontline workers held permanent positions. In a review of 208 online INGO job adverts, half listed a contract duration, and of these, the majority (85%) were advertised as positions of less than a year.

This has a knock-on effect on frontline workers. In the survey, 30% said they worry about job uncertainty more than once a week, and the lack of a secure income contributes to stress and an inability to plan for the future: "It affects day-to-day decisions. If I enrol my children in a good school, I worry about how I will support them if I lose my job." (Afghanistan)

Participants described needing to continuously search and apply for jobs, and needing to cope with being out of work for extended periods of time. Some reported running part-time small businesses in order to supplement their income and improve their resilience between projects. Most frontline workers (85%) reported taking steps to cope with job uncertainty, including looking for other jobs (47%), seeking training opportunities (45%) and saving money (31%).

Some frontline workers, however, raised that local and national organisations tried hard to retain them, despite having to use project-based contracts. Workers expressed pride in their organisations and, particularly among local organisations, some workers reported a strong sense of belonging despite the challenges. For example: "I never felt insecure [for 6 years working in the organisation] because the management ... is always looking and seeking solutions and projects for us. We feel a sense of belonging and do the work with all our heart." Although only 20% of workers reported having a

Figure 7. What is the length of your current contract?

● Undefined   ● Temporary / project-based   ● Fixed term of less than 1 year
● Fixed term of 1 year or more   ● Permanent position

INGO

13%	35%	28%	21%

NNGO

12%	34%	14%	21%	19%

SN/LNGO

18%	29%	14%	18%	20%
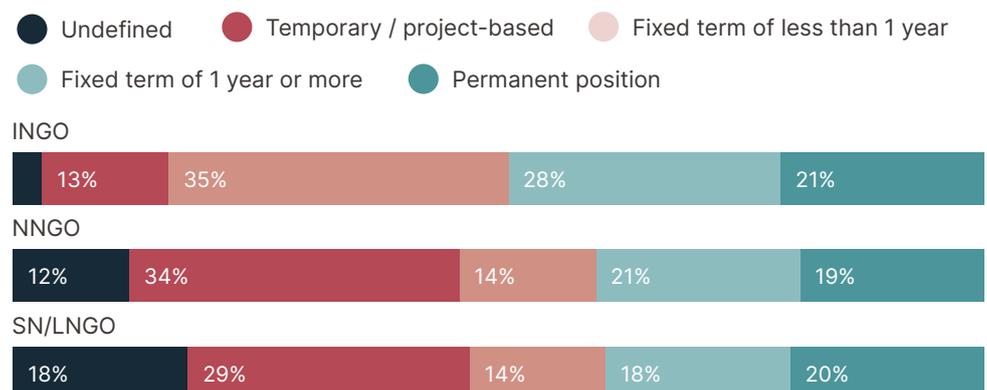
Pay and benefits

Survey index average score
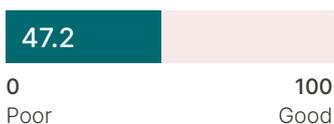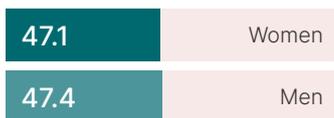
47.2	
0	100
Poor	Good

Difference by gender

47.1	Women
47.4	Men

Difference by organisation

57.5	INGO
43.3	NNGO
33.5	SN/LNGO

Difference by region

50.1	Africa
46.2	Asia
46.7	MENA

Difference by crisis

50.8	Conflict
47.0	ND
47.0	Health
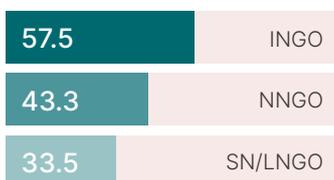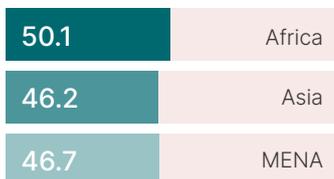
ND: Natural disaster

permanent contract, 57% had worked in their organisation for over 3 years, and this was slightly higher among local and national organisations (62%) compared to INGOs (49%).

Disparities in compensation

Several studies over the last several decades have highlighted **major disparities in the compensation of aid workers**, between different types of workers at the same organisation, between organisations and their partners, and between different organisation types and levels. The ADDUP study, conducted from 2007-2010, revealed that local workers were paid four times less than international colleagues, and even nine times less in the Pacific region, which was found to impact local workers' morale, motivation, and teamwork (Strempel, 2016). Our survey revealed similar findings, with surveyed expatriate frontline workers earning just over four times the average income of national frontline workers.

This pay disparity is complex; large international organisations are faced with the challenge of setting equitable pay scales for globally mobile staff who have homes and families in places with widely disparate costs of living. There is also an expectation that high salaries are needed to attract staff to work in dangerous and difficult contexts relative to their home country. However, at the same time, international aid workers are often given housing and food allowances and are often able to save the majority of their pay while posted. National and local staff, on the other hand, receive much lower pay, despite the often higher risks they face, and do not typically receive additional allowances.

The disparity is also indicative of the higher salaries accessed by more senior and technical positions available to workers with greater mobility, international experience and technical skills, and fluency in Global North languages. This is an issue rooted in colonial histories and the types of skills and roles that are most valued and rewarded in the aid sector. Organisations depend on local workers for essential roles such as government liaison, partnership building, and accessing communities in high-risk locations, but these vital skills tend to be undervalued.

The survey also revealed disparities in pay depending on the type of organisation, with the highest earners based in the UN or INGOs, and the lowest in local community-based organisations. **INGO staff received twice as much, on average, as those at sub-national and community-based organisations.** The reliability of these findings are limited by the low sample size per country, but are consistent with previous research, such as the State of the Humanitarian System 2022 report, which found that "on average, UN staff were paid more than double their INGO peers, and staff of international organisations as a whole were paid on average more than six times the salary of local and national NGO staffers" (ALNAP, 2022).

In focus groups, local and national NGO workers reported feeling underpaid for the challenging and often dangerous work they do, and said they struggled to make ends meet on their current salary, particularly in combination with the precarious job security they often face. Of the survey respondents, more than a third (38%) had to work additional jobs in the past two years in order to supplement their income, and this rate was higher among workers of sub-national and community-based organisations (54%).

> **"**
>
> It is slightly unfair because [international workers'] salary is high but when we look at the work that we do, local workers like us are more capable. However, we are not that competitive when it comes to the reports because we are not as fluent as them in English.
>
> Frontline worker,
> The Philippines

Local staff said they felt their vital local knowledge and the long hours they worked were undervalued.

Workers commented that their lower pay affects morale, motivation and performance, and it is also thought to contribute to high turnover from national and local organisations. Previous research has also highlighted that disparities in pay between staff can contribute to tensions and hierarchies of power that hinder teamwork (Strempel, 2016).

Access to social protection benefits

It is not only pay that varies, but also social protection benefits, such as a pension, insurance and paid time off. The temporary or project-based nature of frontline workers' contracts typically lack access to these kinds of benefits, and even those on longer-term contracts had limited benefits. The survey indicated a stark difference in benefits provided by different types of organisations, with INGO staff having better access than staff in local organisations.

Figure 8. Do you have access to the following social security benefits through your organisation?

Legend: ● INGO ● NNGO ● Sub-national or community-based organisation
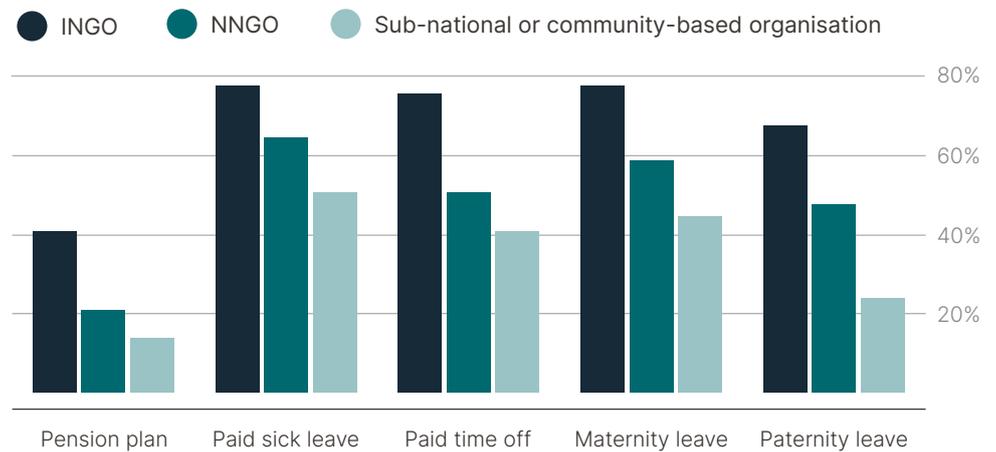
Limited access to social security benefits puts frontline workers in a precarious financial position, and can have a negative impact on morale and wellbeing (see Chapter 6). However, as we have seen, the sector's project sub-contracting model (Vention, 2022) accompanied by low overheads of local organisations constrains them from increasing salaries or providing benefits. There is strong downward pressure for local organisations to keep costs as low as possible, partly due to competition between organisations to access these projects.

One respondent commented: "Some donors impose budget limitations, pushing local partners to provide limited funds for staff salaries. As a result, they often have to reduce staff salaries, leading many employees to prefer working with big NGOs that offer better benefits." (Afghanistan)

An additional issue is that national employment laws vary vastly from country to country. **While international workers often benefit from high global standards, policies for national workers are often aligned to relevant national labour laws.** As a result, national staff salaries and benefits can vary significantly according to the unique labour market in each country, and in some countries, labour laws are less than adequate.

Labour laws and protection for informal workers

In **India**, the informal economy accounts for more than 80% of non-agricultural employment, defined by workers having no written contract, paid leave, or other benefits (ILO, n.d.). Several legal frameworks have been enacted to protect informal workers, including the Unorganized Workers' Social Security Act, 2008, which introduced benefits for informal workers, including life and disability cover, access to health care, and maternity benefits. The e-Shram portal, launched in 2021, was set up to establish a national database of informal workers to enable them to self-declare their occupation and access government social security benefits.

In **Lebanon**, labour laws and social protection remain fragmented. Its social security system primarily covers workers in the formal private sector through the National Social Security Fund (NSSF) and public servants through separate schemes. However, access to social protection is not a basic right, and is dependent on belonging to specific occupational groups. There are no protections for informal workers, leaving a significant portion of the workforce with no social security coverage (Abed et al., 2020).

> "
> We have access to life insurance but other benefits like sick pay, pension, and mental health services and parental leave are not provided. The lack of these has caused significant challenges, particularly when it comes to managing health issues, planning for the future, and balancing work with family responsibilities.
>
> Frontline worker, Pakistan

Complexities and routes forward for improving equity

Addressing pay disparities between international and national staff presents significant economic challenges. There is a concern that increasing the salaries of local INGO staff to match those of international colleagues risks creating new inequalities between local staff and local people. Wage increases can also distort local economies and labour markets, and make it even harder for small NGOs to attract and retain talent (Strempel, 2016).

Several interviewees cited examples of the challenges and unintended consequences they experienced when attempting to establish fairer pay. One INGO, for example, found that increasing national staff salaries led to public sector staff leaving to join INGOs. Efforts by another INGO to address internal pay disparities deepened disparities between internal staff and staff of their national members. A donor that looked at increasing benefits for staff involved in delivering its projects found that this would introduce disparities between staff within the same organisation.

Given the systemic nature of these challenges, collective action is needed. There has been a slow but growing movement towards seeking pathways for greater pay equity, even if equality is out of reach. One network told us they had initiated a project to map out salary and benefit structures in different countries to bring equity to staff. In 2017, the CHS Alliance launched Project FAIR: Fairness in Aid Remuneration in an attempt to identify best practices and support organisations to ensure equitable pay, although it was noted that this remains difficult to implement in practice.

At a minimum, organisations should ensure that they and their partners pay workers a living wage. While minimum wages are now set in about 90% of countries, this still leaves 57 million workers without protection, and in some countries, minimum wages remain below the poverty line and have not been updated for many years (ILO, 2024). In recent years, the call for 'living wages' has gained momentum. In 2024, the ILO defined the living wage as "the wage

level that is necessary to afford a decent standard of living for workers and their families, taking into account the country circumstances and calculated for the work performed during the normal hours of work (ILO, 2024a). The 2024 ILO agreement specifies that living wages should be calculated using evidence-based methods and consultations with workers' and employers'. Calculations should be transparent, publicly accessible and take into account regional, local and cultural contexts (ILO, 2024a).

Additionally, ensuring national staff have access to social security benefits, including insurance, health care, pension plans, and paid time off, is vital to improving equity. These benefits should be factored into funding allocations provided to local and national partners. INGOs can also do more to ensure their partners are able to take good care of frontline workers; while some donors and INGOs may review their partners' employment policies, they can be far removed from frontline realities and practices, and have limited knowledge of the compensation and benefits local staff members receive.

Higher pay and better benefits at INGOs and the UN also creates challenges for national and local NGOs to attract and retain talent. It is important that national workers are not excluded from opportunities to move between organisations and advance their careers, but current recruitment practices by INGOs can be harmful to local organisations, including disruption to programmes, financial impacts and diminished response capabilities (HAG, 2023). **There is a critical need for respectful recruitment practices**, including sufficient notice periods, adequate handover, and long-term contracts and job security for national workers, as well as providing recruitment and human resources support to national and local partners (HAG, 2023).

Figure 9. Disclosure of benefits in online job adverts

Salary — 74% / 2%
Insurance — 88% / 28%
Time off — 88% / 9%
Security protocol — 59% / 6%
Training — 56% / 10%
Pension — 38% / 2%

● Expatriate (specified or implied)
● National (specified or implied)

Lack of transparency in salary and benefits

In a review of 208 jobs advertised online, 20% of all postings specified a salary, with an average salary of 3,227 USD per month.

However, it was not possible to compare national and expatriate salary differences, as there was **a notable disparity in the transparency of salary information depending on the expected nationality of the position**.

Of the 208 postings, 64 specified or implied the job should be filled by a national worker. Yet, of these 64 positions, only one advertised a salary (2%), for a consultant position. On the other hand, salary information was listed for 74% (25 of 34) of positions that specified or implied that the position should be filled by an expatriate worker. Other social security benefits were also much more transparent for expatriate roles, most notably insurance, paid time off, security protocols and access to training.

This analysis was limited to online job adverts and the difference may in part be due to most national staff positions being advertised through local or non-digital channels. Nonetheless, it is a stark difference - particularly given the widespread increase in online communication - and indicates a very different set of standards and practices among INGOs when recruiting international or national workers.

Figure 9 source: Job description review. Percentage of job descriptions that specified or implied worker nationality that listed compensation and benefits.

> "
>
> **Surviving on reduced pay and 2 months' renewable contracts has such a negative impact on mental health.**
>
> Frontline worker, Kenya

For large international organisations, questions around pay equity raise questions about their role in the humanitarian sector. INGOs must decide how to position themselves: either maintaining a presence and employing national workers directly, and committing to fair compensation and respectful recruitment practices, or by working primarily through local frontline organisations and providing those partners' with organisational and human resource support, and ensuring adequate funding for fair compensation and benefits.

One international faith-based organisation, for example, has reduced staff numbers at headquarters over the past decade, while also increasing funding and capacity support to local partners, and reducing the number of deployed international staff. The organisation's approach to recruitment now focuses on allocating funding for partners to build capacity and retain staff. Their new programme strategy includes a multi-tier funding approach which is intended to give partners the space to invest in their staff.

Conclusions

This chapter explored the persistent disparities in compensation and benefits among frontline humanitarian workers, by nationality and by type of organisation. It discussed some of the challenges and constraints in addressing these disparities. It also posed possible routes forward to achieving greater equity in the sector, including improving access to social protection benefits and ensuring respectful recruitment practices to mitigate the high turnover that comes with differential pay.

Spotlight: the Philippines

The Philippines is extremely vulnerable to natural disasters and extreme weather events. Located on the 'typhoon belt' in the Pacific, the country faces frequent typhoons, flooding and earthquakes, further exacerbated by the increasing effects of climate change. Local humanitarian workers are integral to disaster mitigation, response and recovery work.

Though sample sizes were small, our survey data suggested that INGO staff in the Philippines earn more than double that of sub-national and community-based organisation staff. Previous research also indicated large gaps between expatriate and national worker salaries, with expatriate workers earning over four times more (Ong and Combinido, 2017).

Despite recognising these disparities, local Filipino workers had complicated perceptions of what this meant for them. Most face precarious employment and significant job insecurity, with many on short-term contracts tied to specific projects. However, this volatility is commonplace in the Philippines, which can obscure perceptions of the adequacy of the compensation and benefits they receive: "Unlike international aid workers who are motivated to swap stressful and extractive labour relations for a meaningful, adventurous, and less competitive career, local aid workers who themselves have survived disaster uniformly enjoyed a status upgrade, expressing gratitude for their newfound, if temporary, economic opportunities" (Ong and Combinido, 2017).

A number of Filipino participants expressed that they were motivated by the value of their work's mission, rather than compensation, another factor that complicates perceptions of fair pay. They also referenced that although their pay is low, they feel grateful because they are better off than the affected communities they serve. This was also a common sentiment in other locations, and is explored further here.

There was also recognition that funding resources are extremely limited for local NGOs, and that they simply don't have enough funds to pay staff. One participant commented: "It's not because [local NGOs] want us to have low pay, less compensation, less benefits. It's just that all the resources are being sniped by the INGOs who have much bigger salaries."

However, **lack of compensation has a knock on effect on social security and risk taking**. Workers said they prefer to take cash over insurance when given the option, to raise their monthly income. Participants also said that other benefits, such as a pension and paid leaves, were rarely available, which can be demoralising given their long working hours and high workload.

> "
>
> Sometimes I hear others say that it brings down their morale if we consider the wage disparity, but if you see a sense of fulfilment in what you are doing, you won't be able to think about those things.
>
> Frontline worker,
> The Philippines

Major natural disaster events, 2010-2024

◉ Earthquake

▲ Volcanic eruption

🌀 Typhoon

6 Beyond physical safety: The impact on wellbeing and mental health

"

As a long time frontline practitioner in the Philippines, I would be very grateful if it is a must for organisations to consider stress management and practical care for the care givers. Vulnerable frontliners [have] no voice in articulating their felt need during the execution of their work.

Frontline worker,
The Philippines

Key findings

1. A large minority of frontline workers reported poor mental health, with 34% of respondents feeling "overly stressed" to the point that it affects their ability to work on a daily or weekly basis. Previous research echoes these findings, with **high rates of depression and PTSD observed among aid workers**. Safety risks, unpredictability of humanitarian work, and organisational stressors were cited as significant contributors to mental health challenges.

2. Some organisations provide wellbeing support such as training, R&R and access to counselling but this **support is less likely to be available to local staff or those working for community-based or sub-national organisations**.

3. Participants emphasised the **significance of a positive organisational culture in fostering resilience and wellbeing**. Organisations with strong interpersonal bonds and mutual respect were more likely to provide supportive environments.

For most organisations, duty of care focuses on physical health and safety. However, **researchers have been reporting the challenges of mental health for humanitarian workers for some time**. A 2015 survey found approximately 79% of surveyed aid workers had experienced mental health issues, with almost [one-]half declaring they were diagnosed with depression (Macpherson and Burkle, 2021). Another study found that 30% of expatriate aid workers returning from complex, stressful and dangerous humanitarian environments had indications of PTSD (Antares Foundation, 2012).

Our survey asked frontline workers to describe their current mental health on a scale of 1 (very poor) to 5 (very good). On average, participants rated their mental health as 3.2, with 12% of respondents describing their mental health as poor or very poor. Over a third (34%) of respondents said they felt "overly stressed" by their work, to the point that it affects their ability to work, on a daily or weekly basis.

Previous research has indicated demographic differences in the risk of mental health challenges, although the research methodologies differ and the sample sizes are often small. Aid workers away from home appear more likely to experience burnout[4] as well as younger workers and those in an unfamiliar setting (Jachens et al., 2019). In our study, 19% of expatriate workers described their mental health as poor or very poor. National workers were less likely to describe their mental health as poor, but slightly more likely to say that stress impacts their ability to work on a daily basis.

Women were slightly more likely to report lower mental health; 17% of women described their mental health as poor or very poor, compared to 10% of men. However, the frequency in which stress impacts their ability to work was the same. There was little difference in the responses from aid workers in different types of crises.
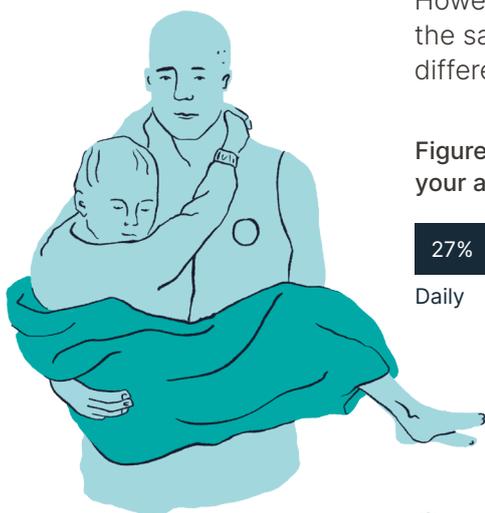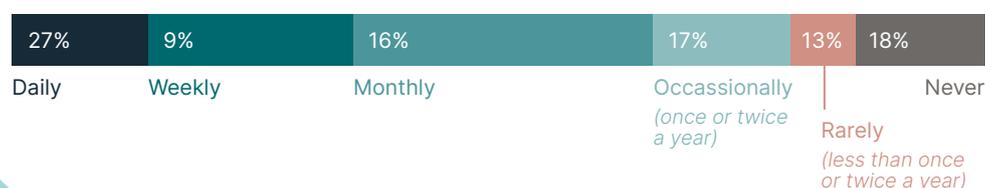
Figure 10. How often do you feel overly stressed by your work, to a point that affects your ability to work?

27%	9%	16%	17%	13%	18%
Daily	Weekly	Monthly	Occassionally *(once or twice a year)*	Rarely *(less than once or twice a year)*	Never

Conditions contributing to poor mental health

Multiple factors compound to create an environment that poorly affects the mental health of frontline workers. The unpredictability of humanitarian environments and the heightened sense of vulnerability may create feelings of helplessness and hyper-vigilance, which, over time, can erode an individual's mental resilience (Houldey, 2021). Previous research also emphasises the normalisation of stress (Macpherson and Burkle, 2021) and overwork (Ong and Combinido, 2017).

For survey respondents, the safety and security risks of working in humanitarian environments were extremely challenging, with most saying it negatively (51%) or very negatively (19%) affected their mental health. There was a moderate positive correlation between people's overall wellbeing and levels of safety and security (Pearson r=0.4734[5]).

There is a high risk of vicarious trauma among humanitarian workers, both on the frontline and away from it (GISF and Humanitarian Outcomes, 2024). **The harsh conditions and the burden of addressing dire humanitarian situations with limited resources were recurring themes in the focus groups.** In Iraq and Afghanistan, workers described the high emotional toll of dealing with distressed communities and witnessing human suffering. Senior staff in these locations also noted that certain projects, such as those involving tracing families of missing persons, had a particularly disturbing emotional impact.

Similarly, aid workers in several countries in Asia described stress from high community expectations and the complex environments they operate in, including political suspicions and accusations of bias. Most survey respondents said that the ethical dilemmas they face in their work have a negative (48%) or very negative (15%) effect on their mental health.

4   *Defined as emotional exhaustion and diminished personal accomplishment.*

5   *Measured using Pearson correlation coefficient, comparing indexed survey responses (see Annex 3 for a description of the index methodology). A Pearson 'r' of more than 0.4 is indicative of a moderate positive correlation between two variables.*

Wellbeing

Survey index average score
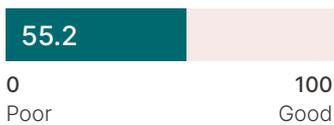
55.2	

0 — Poor　　　　　100 — Good

Difference by gender

53.4	Women
56.0	Men

Difference by organisation

55.8	INGO
53.6	NNGO
58.1	SN/LNGO

Difference by region

52.5	Africa
61.9	Asia
49.8	MENA

Difference by crisis

49.5	Conflict
59.0	ND
55.4	Health

ND: Natural disaster

This echoes similar sentiments found in previous research on the mental health of aid workers. For example: "Operational stresses associated with delivering humanitarian aid can be dramatic and the resulting problems involving staff mental health are seldom clear cut. Their work's physical consequences can be dangerous, but the constant ethical and moral quandaries that confront them are often cumulative. No matter how hard humanitarian workers try to handle it, constant exposure to death, starvation, and mayhem affect their belief in justice and human rights. Every personal and professional value they hold is under assault. As Romeo Dallaire writes: [It is the] moral injuries that ravage our minds, our souls [and repeatedly] assaults ... our most sacred and fundamental values and beliefs" (Macpherson and Burkle, 2021).

High workloads, tight project deadlines, and irregular work exacerbate the mental health challenges for some humanitarian workers. Previous studies have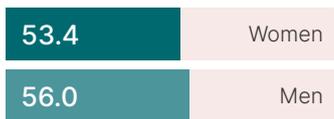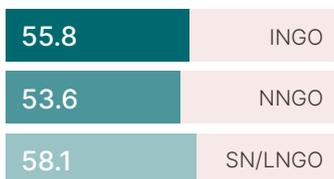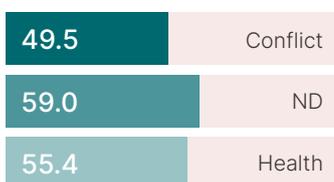 indicated that "excessive demands from organisations ... can cause harm due to additional stress and neglect of much-needed self-care" (Strohmeier and Scholte, 2015), and this also emerged in our research. In Afghanistan, participants emphasised how the combination of numerous meetings, deadlines, and the strain of managing multiple crises negatively impacted their ability to support their families and maintain a healthy work-life balance. Workers in South Sudan and the Philippines also faced similar pressures, leading to high stress levels and difficulties coping.

For some workers, inequity between local and international staff, poor compensation, and uncertain contracts contributed to poor morale and wellbeing. Many respondents said their mental health was negatively or very negatively affected by their contract length (42%), pay (41%) or lack of benefits (38%). In South Sudan, workers experienced dissatisfaction due to pay disparities combined with their heavy workloads and described feelings of burnout and exhaustion. This relationship between effort and reward has also been identified in other research, with one paper reporting that "organisational experiences characterised by a lack of reciprocity or perceptions of inequity at work are significantly associated with emotional exhaustion" (Jachens et al., 2019).

Types of support provided to frontline workers

Humanitarian organisations increasingly recognise the importance of providing wellbeing and mental health support to frontline workers, and there are examples of good practice. The Antares Foundation and CDC partnered with NGOs to develop a consensus approach to mitigate stress in aid workers, resulting in the publication of the Guidelines for Good Practice: Managing Stress in Humanitarian Workers' in 2004, which was later revised in 2012 (Antares Foundation, 2012). In recent years, Thrive Worldwide and Konterra Group have published a range of resources in different languages to help organisations support the mental health of their staff and to provide guidance on responding to traumatic incidences and signs of burnout.

Some larger organisations have established mental health and psychosocial support programmes that include pre-deployment psychological training, counselling services, and debriefing sessions to help workers process traumatic experiences. Peer support networks and hotlines are also offered in some organisations to provide immediate assistance. However, there are large gaps in implementation across the sector, and the availability and quality of support varies widely.

Table 2. Types of support provided to frontline workers.

Wellbeing support	Examples	Gaps and issues
Training	• Resilience and stress management training • Safety and security training	• Inconsistent training offerings • Poor follow-up
Organisational support	• Management support • Peer support from colleagues • Grievance and complaint systems	• Managers are often the first line of support but rarely trained in what to do.
Rest and recuperation (R&R)	• Regular breaks from frontline work	• Normally only available to international staff
Psychological support	• Counselling/stress counselling • Critical incident debriefing	• Offered by larger INGOs • Varying uptake • Often online in major languages • Not tailored to cultural context • Stigma around seeking support • Inconsistent availability of debriefing services

Table 2 illustrates the variability in support services. Even where they do exist, stigma around mental health, insufficient funding, high workloads, and the unpredictable nature of crises can limit the effectiveness and reach of such programmes. For example, one participant told us that their organisation holds a "wellness hour at 3pm every Friday" but said people rarely participate because of work pressures. Another said that staff can take time off for their mental health but only if their workload allows. A third felt that there is on-paper support for wellbeing, but that it is "often just box-ticking."

The stigma of poor mental health for humanitarians is especially insidious. This is often exacerbated by internalised beliefs, such as, "I have no right to feel like this, I am so much better off than others" and people's concerns that they will be demoted or lose their job if they acknowledge their struggles (GISF and Humanitarian Outcomes, 2024). Despite the data illustrating the prevalence of mental health concerns, one survey participant told us "No one ever talks about PTSD and how to treat it."

Previous research, and the shared experiences of current and former aid workers who have experienced trauma and mental health challenges, illustrates that **organisational culture can make a considerable difference** (Strohmeier and Scholte, 2015). Our survey revealed a moderate positive correlation between people's overall wellbeing and their view of organisational culture (Pearson r=0.4038). Imogen Wall, a humanitarian mental health trainer, has said that: "**The primary stressor for most aid workers is not what they witnessed and experienced. It's the way that organisations are run and managed**" (Loy et al., 2023). Research with frontline workers in Bangladesh agreed that "workplace psychosocial stressors had a greater influence on psychological outcomes than adversity exposure, underscoring the importance of addressing workplace stressors as primary sources of occupational stress syndromes in humanitarian staff" (Foo et al., 2023).

As we saw in Chapter 4, there was great variation in the extent to which participants felt supported by their organisations. Though job security tended to be slightly better at INGOs, and small local NGOs struggle to

provide promotion opportunities, only 39% of INGO frontline workers felt their organisation was supportive of frontline workers[6], compared to 57% of NNGO and 70% of SN/LNGO workers[7]. Valuing staff, recruiting managers who care about their staff, and training them to recognise signs of burnout are all important. Without adequate support, burnout, anxiety, and even PTSD can compromise the safety, wellbeing, effectiveness and retention of staff.

Figure 11. Overall, how supportive is your organisation of frontline workers?

INGO

| 21% | 34% | 26% | 14% |

NNGO

| 11% | 28% | 32% | 25% |

SN/LNGO

| 7% | 21% | 33% | 37% |

1 - Very unsupportive   Very supportive - 5

Figure 12. Overall, how valued do you feel by your organisation?

INGO

| 9% | 32% | 36% | 20% |

NNGO

| 8% | 25% | 33% | 30% |

SN/LNGO

| 6% | 20% | 26% | 44% |

1 - Undervalued   Highly valued - 5

6 This equates to individuals scoring this question 4 or 5 on a scale of 1 to 5, where 1 is very unsupportive, and 5 is very supportive.

7 The differences in average score for this question were statistically significant between INGOs (3.2) and NNGOs (3.6) and between INGOs and SN/LGNOs (3.9).

Conclusions

This chapter highlighted the prevalence of poor mental health among frontline workers. **Participants pointed to a wide range of contributors including physical risks, overwork, lack of pay and job security, and feeling undervalued.** Many of these issues have become normalised in the humanitarian sector and some workers feel worried that if they raise concerns they are risking their jobs or future work.

There are many things organisations can do to support wellbeing and this chapter provided examples of some good practices and resources. Overall, the findings revealed diverse and nuanced organisational cultures within the sector. In some smaller organisations interpersonal relationships and a deep commitment to the cause formed a stronger foundation for support and resilience than some more formal mechanisms and resources. However, while some organisations are able to forge close-knit teams that cultivate a culture of care, respect and trust, for others, work can be an unsafe and stressful environment that has a significant negative impact on wellbeing. In the recommendations we build on the conclusion that **fostering a strong culture around team building, appreciation, and the fair distribution of work, can go a long way to improving frontline workers' wellbeing.**

Humanitarianism is personal: The complexities of morale and motivation

Many of the people we consulted had been personally impacted by the very disasters they were responding to, including the loss of loved ones, damage to their homes, or displacement and disruptions to their own lives. It is communities that shoulder the majority of first-line response, whether they're paid and recognised for it or not, and frontline humanitarians must often balance their roles as both disaster survivors and aid workers (Ong and Combinido, 2017).

For many, humanitarian work is inextricably embedded in cultural values that go far beyond the idea of a 'career'. In her book Love and Liberation, Carruth (2021) highlights how humanitarian work is often deeply engrained in a sense of community and mutual responsibility. She shows how the Somalian concept of *samafal*, meaning generosity and care through mutual assistance, long pre-existed the modern humanitarian architecture and is a lens through which local humanitarians perceive their work. In this view, humanitarian work is an extension of societal values, deeply ingrained in acts of caring and kinship. Similarly, in the Philippines, relational norms such as *pakkisama*, meaning group harmony, blur the lines between personal identity and the collective.

This creates complexities when viewing humanitarian work through a professional lens. **Commitment and care for communities affected by crisis, by individuals who often share similar lived experiences, can come at the cost of normalising the extremely demanding nature of aid work**, including long hours, poor working conditions and impacts on mental health, particularly in the context of top-down international structures that govern humanitarian funding and resources. Carruth (2021) argues that by examining communities' unique ways of coping and providing mutual assistance, "we can understand where aid work falls short—namely through unsustainable assistance, cheap labour, glass ceilings, hierarchies, dependency, and much more."

This also explains why respondents told us they find it so difficult to implement projects they view as ineffective or disconnected from local needs (see also Ong and Combinido, 2017). Projects designed with donor-driven priorities can sometimes overlook on-the-ground realities. As the face of the humanitarian sector to these communities, this disconnect can make staffs' roles more difficult, straining relationships and introducing additional risks (Moro et al., 2020). It also affects morale; many staff feel deeply invested in delivering meaningful support, but can feel constrained by rigid programme frameworks.

But despite the many challenges, many humanitarians we spoke to described a profound sense of purpose, as frontline responders who witness firsthand the impact of their efforts on the lives of vulnerable individuals and communities. Frontline workers in Iraq said the positive recognition from colleagues, combined with the tangible results of their efforts, made the difficulties they faced "worth it". In Pakistan, people described a personal purpose that allows them to feel proud of contributing to the wellbeing of their communities, which enhances their sense of fulfilment.

These multi-layered experiences shine a light on the complex realities of frontline work; for many, humanitarianism is a way of life, and inextricable from lived experiences of conflict, disaster, or displacement. And yet, **these insights highlight a need for humanitarian organisations to approach their workers with the same kindness and compassion that frontline humanitarians extend to their communities**. By creating a supportive environment that honours their lived experiences and cultural values, organisations can help sustain the dedication and resilience that defines humanitarian work.

> Being a humanitarian is to enjoy some of the successful stories from the community.

Frontline worker,
Vanuatu

> We do our work with a lot of pride … I work in this sector because my father also worked the same job, and there is a familiarity and affinity to the causes.

Frontline worker,
India

7 Conclusions and recommendations

This study set out to assess the working conditions of frontline workers, by identifying their unique challenges and needs, and offering practical recommendations to enhance their wellbeing and effectiveness. Over the last four chapters it has addressed the following questions:

1. What are the environmental and working conditions of frontline workers?
2. To what extent do frontline workers have access to resources, training and support systems?
3. What contractual terms and conditions, compensation and benefits are available to frontline workers?
4. How do these factors affect the wellbeing, resilience, and effectiveness of frontline workers, and what can be done to improve support?

Working conditions

This research has highlighted how frontline workers provide the backbone of humanitarian response, in environments characterised by insecurity, unpredictability, and resource constraints. **While many expressed a sense of purpose and vocation in their work, they also routinely described feeling undervalued by the humanitarian sector and exposed to a wide range of risks, including violence and hazardous environmental conditions.** These risks are exacerbated by the emotional and psychological pressures of work, combined with hierarchical cultures and poor management. Female frontline workers face distinct additional risks, as well as social and cultural barriers.

Access to resources, training and support

Many frontline workers are employed by sub-national and community-based organisations that are disproportionately exposed to these risks due to precarious funding arrangements. Local organisations often rely on project-based funding that prioritises short-term, output-focused aid delivery, even in protracted crises that demand longer-term engagement. This funding model limits local organisations' ability to provide a 'duty of care' to their staff by investing in comprehensive safety and security protocols, equipment, insurance coverage, mental health support, and other critical elements of staff welfare. As a result, many frontline workers are left more vulnerable than their international counterparts, who are typically better supported, with access to insurance, established evacuation protocols and paid R&R.

This issue is exacerbated by funding practices that transfer undue risk to local organisations while concentrating resources and decision-making power within international agencies. In many countries, international actors

rely heavily on local partners to deliver aid in high-risk areas but do not consistently share the resources necessary to equip their local counterparts with the same level of safety and support. This creates a disparity in risk exposure and protection, **placing local workers at greater risk, and perpetuating the systemic inequalities that pervade the sector**.

Contracts and compensation

This research echoes other work that finds the compensation structures for frontline humanitarian workers are marked by significant disparities, particularly between national and expatriate staff and across organisational types.

While some larger organisations have implemented steps toward more equitable pay structures, project-based funding models place pressure on LNNGOs to minimise costs, resulting in minimal salary increases and inconsistent access to social protection benefits. Many frontline workers have no contracts or short term contracts, and earn many times less than expatriates working for INGOs or UN agencies, despite being more exposed to security risks and the physical toll of frontline work. **The lack of benefits, coupled with low wages and poor job security, leaves many staff in difficult financial situations that necessitate secondary employment, and affects the morale, wellbeing and retention of staff.**

Wellbeing

A large minority of the frontline workers we consulted struggle with poor mental health, and over a third of respondents reported that stress levels negatively affect their ability to work on a daily or weekly basis. For many workers, this is exacerbated by poor management structures and organisational cultures. Workers employed by larger organisations tended to have better access to mental health resources, including counselling, debriefing sessions, and peer support. However, access to these resources is inconsistent, and **stigma around mental health often discourages workers from seeking help**. Workers in local or smaller organisations report fewer mental health resources, but overall felt more supported and valued by their organisations, indicating the importance of organisational culture and care.

What next?

Local NGOs operating in high-pressure environments with urgent humanitarian needs face complex resource allocation decisions. They must balance numerous competing priorities with staff safety, development and mental health support.

The humanitarian sector must recognise that while meeting the needs of affected populations remains its first priority, the welfare of those who deliver aid cannot be an afterthought. As outlined in the Core Humanitarian Standards (CHS), organisations have a duty to ensure those delivering aid are competent, well-supported, and treated with dignity. This includes adopting fair recruitment practices, fair compensation, access to social protection and training, and proper support systems for safety, security, and wellbeing.

The report ends with nine recommendations for humanitarian funders and delivery organisations to foster more equitable partnerships, risk-sharing, and quality funding models that allow local organisations to build better systems, promote staff welfare, and mitigate risks more effectively. Humanitarian aid rests on the dedication of frontline workers; making these changes is essential to ensuring they are valued, recognised and treated with the respect and support they deserve.

Recommendations for funders and intermediaries

Allocate Indirect Costs (ICR)/overhead payments to LNNGOs.

Fair overhead payments are the foundation for stronger local organisations and better treatment of frontline workers. Without overheads, LNNGOs are unable to deliver adequate duty of care to staff and struggle to pay fair salaries consistently. Funders and intermediaries should ensure that LNNGOs receive appropriate indirect cost recovery or overhead payments to sustain their operations and invest in insurance, safety equipment and HR support for their frontline staff.

Reserve a percentage of emergency pooled funds for frontline workers.

Many LNNGOs rely on project-based funding, which rarely includes provisions for social protection. Emergency pooled funds are a vital source of rapid funding for organisations, particularly in the early stages of an emergency. Establishing a policy to reserve a specific percentage of emergency pooled funds for frontline workers, would help ensure that resources are made available to those at risk, for example, to pay for life and accident insurance and personal protective equipment.

Use respectful hiring practices.

LNNGOs are unable to compete with the salaries and benefits provided by larger organisations and often struggle with rapid staff losses when international organisations surge their capacity. International agencies needs to recognise the unique challenges LNNGOs face during these periods and adopt respectful hiring practices that aim not to undermine local civil society. This includes appropriate notice periods to allow staff replacement, staged moves between roles, and payments to LNNGOs to cover hiring and training new staff. International organisations could also provide HR and recruitment support to local partners.

Support pooled security training and wellbeing at the country level.

Many national frontline workers don't have access to security training. Few have access to mental health support and few managers have been trained to provide support to staff experiencing mental health challenges. International organisations could collaborate with frontline organisations to create country-level pooled security training and wellbeing services during emergencies, including services for training, counselling, debriefing, and peer support, as well as training for managers.

Recommendations for organisations employing frontline workers

Develop a 'Bill of Rights' for frontline humanitarian workers.

There are huge discrepancies in the formal support systems and contract terms available for frontline workers employed in different organisations. NGOs could convene to draft a 'Bill of Rights' outlining the minimum standards for treatment, compensation, wellbeing, and safety of frontline workers. This should include fair working conditions and the right to raise grievances without retaliation and could be the basis for communication and advocacy with partners, funders, and other frontline organisations.

Provide life and injury insurance.

Few national humanitarian workers have access to life and accident insurance, which leaves them and their families very vulnerable when things go wrong. Wherever possible, organisations should prioritise comprehensive life and injury insurance for all frontline workers to cover the inherent risks of humanitarian work. This ensures financial security for workers and their families in case of accidents or fatalities. LNNGOs could come together to advocate this is covered in sub-contracts.

Establish a dedicated fund for frontline workers.

Related to the recommendation above, international, national and local organisations could also come together to create a dedicated shared fund to support frontline workers who have faced traumatic incidences or unforeseen emergencies. The fund should be easily accessible and managed transparently to provide timely assistance to workers in distress. Several organisations have already begun work on this concept.

Implement specific practices to protect women and LGBTQIA+ workers.

Women and LGBTQIA+ workers face additional risks in humanitarian work. Organisations should implement policies and protective measures to support and safeguard women and LGBTQIA+ frontline workers from discrimination, harassment, and violence, including targeted training, designated focal points, and accessible reporting mechanisms.

Prioritise staff wellbeing.

There are a number of barriers to frontline workers' access to adequate mental health support. Organisations employing frontline workers should implement regular training for all staff on recognising signs of stress and trauma, de-escalating conflicts, and accessing mental health resources. Equip managers and supervisors with skills to support their teams' mental health effectively. Useful resources on staff care and mental health in humanitarian settings, in a wide range of languages, can be found at Konterra Group and CHS Alliance.

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