



Moments that Matter

Costs, Coping &
Household Vulnerability at
Critical Life Junctures for
Informal Workers



**INDUS
ACTION**
Enabling Social Protection

About Indus Action

Founded in 2013, Indus Action is one of India's leading policy implementation organisations dedicated to enabling sustainable access to social protection for vulnerable citizens. By ensuring that vulnerable citizens are able to access a comprehensive portfolio of social protection entitlements during "moments that matter," we aim to disrupt the intergenerational cycle of poverty.

We use inclusive, tech-enabled, citizen-centric social protection systems in partnership with government departments. Since inception, we have supported more than 2.3 million citizens in accessing welfare entitlements across workstreams of education, labour, food security, access to public services and pandemic relief.

Our Research Areas

- 1 Lifecycle vulnerability and comprehensive protection**
Mapping vulnerabilities across a citizen's lifecycle and designing more effective, responsive and comprehensive social protection mechanisms.
- 2 Pathways to economic mobility and empowerment**
Examining how social protection can transform people's lives, enabling sustained income increases and economic empowerment.
- 3 State capacity**
Understanding and improving the critical interface between citizens and the state, focusing on reducing administrative burden and enhancing trust.

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Preface

The COVID-19 pandemic exposed the deep fragility of informal work, pushing millions back into chronic poverty. It became clear that compounding shocks and entrenched vulnerabilities were not merely temporary setbacks, but forces defining the long-term trajectory of household well-being. At that critical juncture, Indus Action had already been working on implementing the Right to Education (RTE 12.1.c) since 2013 and Maternal Health initiatives (NFSA 2013) since 2019.

A persistent realisation emerged from our work: families cannot escape the poverty trap without a comprehensive social protection net that secures them across pivotal life moments or “moments that matter” (MTM). This learning gave rise to our vision around consolidating a portfolio of welfare schemes around MTMs to support households when they need it the most. By expanding our focus to multi-scheme policies, including labour entitlements (BOCW 1996 & UWSSA 2008) and strengthening digital public service delivery, we have moved closer to making this holistic safety net a reality.

This report is the first in a series of investigations designed to rigorously test this vision. Through these efforts, we aim to delve deeper into our hypotheses regarding household vulnerability and the capacity of the MTM approach to social protection for fostering genuine resilience.

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BACKGROUND

Moments that Matter (MTMs)

Moments that Matter (MTMs) are critical junctures in a household’s lifecycle where vulnerability increases, beyond daily deprivations, and external support may become crucial.

What characterises **Moments that Matter or MTMs**?



Predictable life events, including childbirth, marriage, education transitions and retirement, among others.



Idiosyncratic shocks that affect only individual households, such as illness, job loss or localised crop damage.



Covariant shocks that impact the community or large-scale population, like epidemics, climate or natural disasters, price fluctuations or widespread unemployment.

At these inflexion points, households experience shifts in vulnerability and, depending on their context and capacity, exercise resilience to ensure that stressors and shocks do not have long-lasting adverse impacts (Constas et al., 2014). Ultimately, while vulnerability amplifies the connections between shocks and adverse results, resilience has the potential to disrupt or mitigate those connections.

The MTM framework draws on the lifecycle approach to social protection, which maps the evolution of vulnerability (Garcia Bonilla & Gruat, 2003). Life unfolds in both predictable stages, from birth to old age, and unpredictable disruptions like job loss, migration, or bereavement. Each reshapes a household's needs, roles, and risks.

Understanding these moments is essential precisely because how a household responds to them can define its long-term trajectory. That makes MTMs not just analytically useful, but a critical lens for designing social protection that actually reaches people when it matters most.



Vulnerability

The probability that, at a specific future time, an individual will experience a level of well-being that falls below a certain standard or threshold (Hoddinott & Quisumbing, 2010; Dutta, Foster & Mishra, 2011).



Resilience

A “capacity” that ensures that stressors and shocks do not have long-lasting adverse impacts on households (Constas et al., 2014).

From Resilience Capacities to Coping Strategies

Resilience is an ex-ante capacity with ex-post effects (Constas et al., 2014); households build it before a crisis hits, and it predicts how well they'll weather one. The stronger a household's resilience, the better equipped it is to cope with a significant life event.

This plays out through coping strategies (Folkman & Lazarus, 1980). When faced with a shock or transition, households make active choices about how to respond. Effective and more positive coping strategies reduce the stress/severity of an unpleasant event and enable the resolution of the problem (Jamadhar & Sridhar, 2024). Conversely, negative coping strategies, often a sign of depleted capacity and resources, trade short-term relief for long-term harm to wellbeing and development.

The implication is straightforward: resilience capacity shapes the quality of coping. Low resilience pushes households toward adverse strategies, while stronger resilience enables them to navigate MTMs without sacrificing future opportunities.

Types of coping strategies households employ		
First things household do	When things get tougher	Desperate measures
Adults start working or work more hours	Send family members to stay with relatives	Children stop going to school
Ask family / friends for help with food	Try new ways to make money	Children start working
Buy food on credit	Move to find work	Sell animals, land, or farming tools
Eat smaller portions or cheaper food	Sell household items like jewellery or furniture	Send children to live permanently with others
Stop buying nonessential items	Borrow money (with interest)	Arrange early marriage for daughters
Use their savings	Delay medical treatment or use home remedies	Take high risk / illegal jobs

Low / medium possibility of adverse outcomes

High possibility of adverse outcomes

Social Protection & MTM

Social protection is a cornerstone of household resilience. Well-designed programmes serve four functions: **protective** (relieving deprivation), **preventive** (averting it), **promotive** (building capabilities), and transformative (addressing exclusion), making them essential for helping households navigate significant life moments (Devereux & Sabates-Wheeler, 2004).

Yet India's system, with **over 5,000 fragmented schemes**, works against the people it's meant to serve. Claiming a single entitlement requires an average of 10 government interactions, each with its own eligibility rules and paperwork. For the most marginalised, the cost is real: lost wages, missed healthcare, foregone education.

We believe that social protection programmes can be made more impactful by prioritising MTMs. Evidence shows that targeting interventions to key life moments significantly improves outcomes, both in preventing welfare decline and building long-term resilience (Roelen et al., 2022; Sabates-Wheeler & Devereux, 2011). Focusing on these moments also offers a practical path for states with limited delivery capacity to do more with less.

MTMs are optimal intervention points where targeted assistance can:



Prevent adverse outcomes, such as falling into poverty after job loss or health crises.



Enable positive trajectories, including continued education during family crises or economic opportunities during transitions.



Generate lasting impact, focusing on long-term benefits that significantly outweigh immediate support investments.

Welfare Schemes Across Moments

In India’s current social protection landscape, various schemes offer different types of welfare support at key moments, both at the national and state levels. However, they have distinct administrative and delivery mechanisms and varied success, resulting in the lack of an integrated scheme portfolio that provides continuous support to households across their lifecycles.

Some common types of welfare schemes offered across crucial moments are listed below:



Childbirth & Maternity

Cash transfers & nutrition support for safe pregnancy and early childcare.
e.g. PMMVY, JSY



Climate Shocks

Crop insurance & disaster relief to buffer climate-hit communities.
e.g. PMFBY



Health & Disability

Insurance, cash aid, and long-term disability pensions.
e.g. Ayushman Bharat, NSAP



Education

Scholarships, fee support, and incentives to keep girls in school.
e.g. PM Poshan, Samagra Shiksha



Marriage

One-time state grants to prevent distress borrowing at weddings.
e.g. Kanya Vivah Yojana (Bihar)



House Construction

Subsidies to help poor rural families build permanent homes.
e.g. PMAY-Gramin, Biju Pucca Ghar



Life Transitions (Old Age, Retirement)

Old-age pensions, accident insurance, and migrant portability.
e.g. NSAP, Atal Pension Yojana

Our Hypothesis

We hypothesise that social protection, targeted at key life moments, can build household resilience, reducing the need for harmful coping strategies and protecting long-term well-being.

The following enabling factors are key to realise a social protection framework grounded in MTM:

Household Tracking Architecture

To ensure that household-level unique identifiers (such as household IDs) enable targeting of social protection schemes that address MTMs.

MTM Centred Portfolio of Schemes

To align social protection schemes to a household's vulnerability lifecycle.

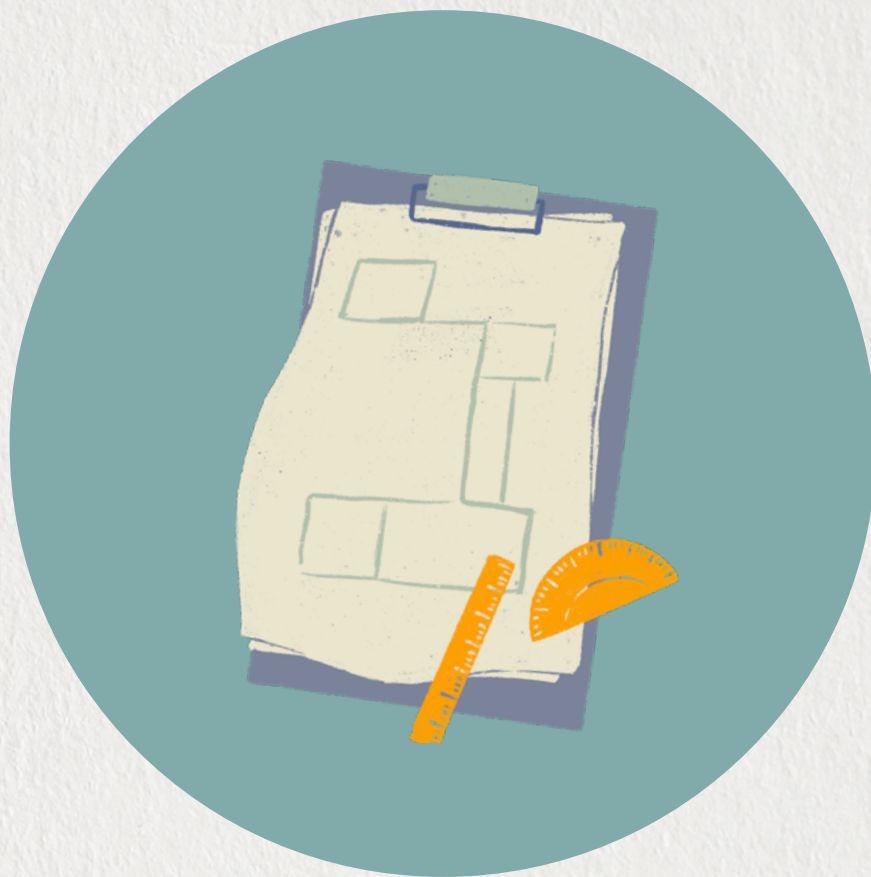
Efficient Scheme Delivery Mechanism

To deliver schemes tailored for each MTM at the appropriate time to ensure that households can effectively mitigate the impact of MTMs.

This study is the first step in testing that hypothesis: examining its core assumptions and sharpening the framework before broader investigation.

Specifically, this study aims to:

- 1 Map key MTMs and their costs**
- 2 Map the common coping strategies that vulnerable households employ**
- 3 Explore, preliminarily, factors influencing resilience capacities**



STUDY DESIGN

We undertook a dipstick study to test our hypothesis and map household MTMs and the coping strategies they employ.

Research Questions

- What are the key moments that matter? This tells us what the common defining moments across our demographic are.
- How do people cope with key moments? This tells about the common strategies our demographic employs.
- What factors enable a household to better cope with moments that matter? This tells us what resilience capacities households employ.

Methodology & Sample

We conducted semi-structured interviews (10-20 mins) with 51 unorganised workers, primarily from the construction and domestic sectors, in the states of Delhi, Chhattisgarh and Haryana.

We approached the respondents through key informants, including contractors, site managers, labour trade unions, and Anganwadi workers.

Sample Composition

Total respondents	51		
Gender	31 Male	20 Female	
Median age	38 years (range: 18 - 65 years)		
Occupation	36 Construction Workers	14 Domestic Workers	1 Unemployed
Median daily wage	Rs 200 (range: Rs 100 - 700)		
Interview Location	32 Delhi	12 Chhattisgarh	7 Haryana

Note: This study was conducted to generate preliminary hypotheses, and we will be conducting larger-scale studies based on our findings.

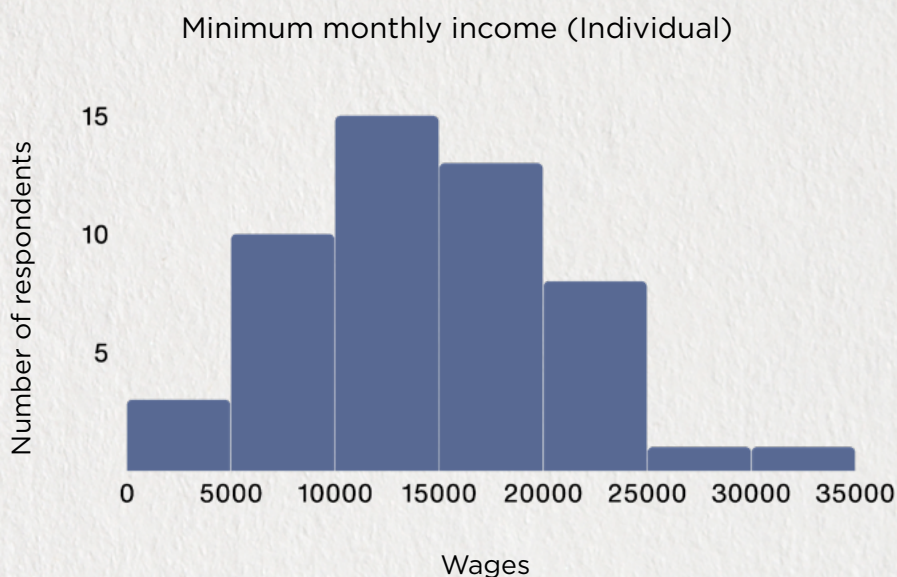


FINDINGS

Income and Household Expenditure

Monthly Median Individual Income	Rs 12,000
Monthly Individual Income Range	Rs 3000 - Rs 30,000
Monthly Household Median Expenditure	Rs 8,750
Monthly Household Expenditure Range	Rs 3500 - Rs 15,000

- Food and groceries are the most significant expenses for all respondents, followed by healthcare and rent. Migrant workers also expend substantial amounts of money on remittances.
- The median monthly income for construction workers (Rs 15,500) was more than that of domestic workers (Rs 8,000).
- We observed that dual-income households were able to save more money, as one person’s income was utilised for expenses while the other’s income was saved.



- Income clusters between Rs 10,000-20,000 (36 respondents): 13 earn below Rs 10,000 and only 2 incomes exceed Rs 20,000.

This precarious income base leaves a minimal buffer for absorbing the cost of moments faced by the respondent group.

Balancing Earnings & Long-Term Health Costs



Note: We secured consent from participants for using their photographs and stories. However, to protect their identity, we have used pseudonyms in all the stories.

Lakshman, 36, a daily wage tile installer, and his wife, a domestic worker, **earn Rs 20,000 monthly as their combined income.** They live in a rented accommodation in an informal settlement along with their two children.

Lakshman's wife, earlier unemployed, sought work as a domestic worker when their son, now **5 years old, was diagnosed with autism.**

The household's major monthly expenses include **rent (Rs 4000), water and electricity (Rs 1500) and food (Rs 5000), totalling more than Rs 10,000.** Whatever money they save, if any, is dedicated towards therapy costs for their son. Often, Lakshman is unable to find enough work to meet the expenses and has to borrow small amounts from his relatives.

Their only respite is the free government schooling that their daughter, currently in 11 grade, is able to access. On his daughter's future, Lakshman resolutely explained, "I don't pressure my daughter about studies or marks as she is free to decide for herself calmly. What matters most is her well-being, not forcing her or worrying about marriage."

The Weight of Low Wages: Living on Construction Sites



Keshav, 32, works as a construction worker, **earning Rs 450 a day** and around **Rs 11,000 a month**. His family, including his wife, daughter, father and sister, live in Hamirpur, Uttar Pradesh.

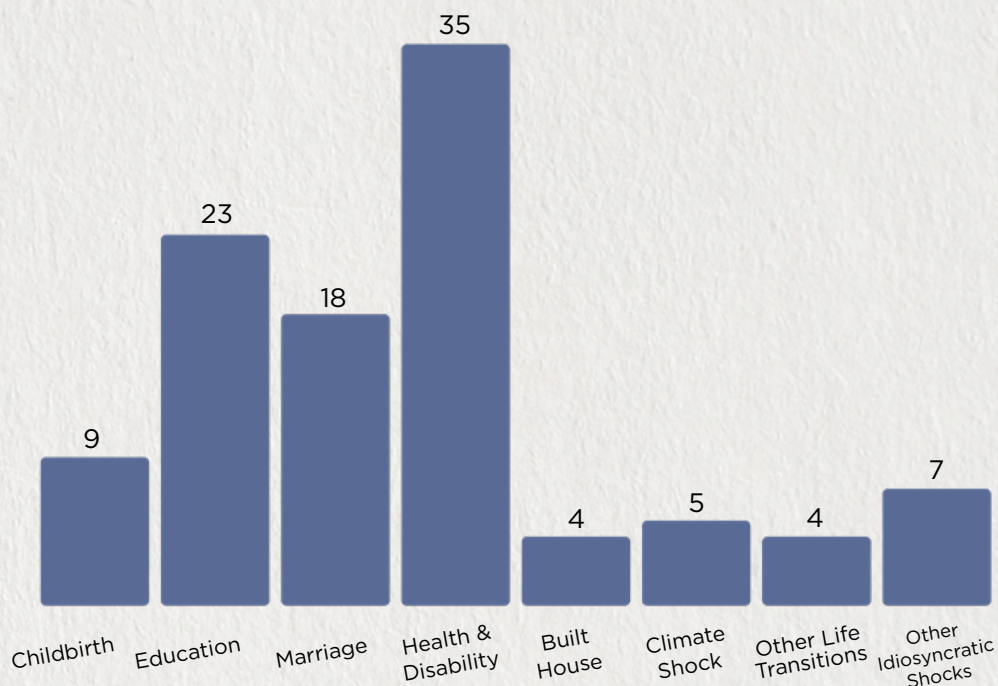
Keshav **spends around Rs 5000 a month on his own food**. Instead of spending money on rent and utilities, he **lives on the construction site to send money home and pay off his debts**.

Keshav got married 4 years ago, bearing the entire **cost of his wedding through debt (Rs 1.5 lakh)**, additional work and savings. His daughter was born 2.5 years ago; due to complications, his wife had to undergo additional **procedures in a private hospital**. To bear this cost, he had to take on a **debt of Rs 15,000**. Out of his total debt, he **still owes Rs 80,000**.

He is one of five brothers, yet he is the only one who **sends remittances**. With his sister's wedding approaching, he plans to support it by selling or mortgaging his share of the family land. In our conversation, Keshav remarked, **"My life has fallen apart from continuous work. No problem really gets solved. Fix one, and another arises or becomes bigger."**

Spread of Moments

Count of moments experienced by respondents in the last 5 years



- We encountered 105 incidents of moments experienced across 49 respondents.
- On average, respondents faced 2.14 moments in the last 5 years, ranging from a minimum of 1 to a maximum of 6.
- A total of 17 unique moments were recorded, classified into 8 categories.
- The highest incidences of moments observed were across the categories of Health and Disability (33%), Education (22%), Marriage (17%), & Childbirth (9%).
- Within Health & Disability, there were 25 cases of major treatment, 8 cases of chronic illness, 1 case of developmental disorder and 1 case of disability.
- The "Other Life Transitions" category includes employment transitions (2), death (1), and old age (1).
- The "Other Idiosyncratic Shocks" category includes accident (4) and fraud (3).

Multiple Moments, Compounding Pressure



Anand, 32, works as a daily-wage plumber, earning an average of **Rs 10,000 per month**. He lives alone in Delhi, expending all of his earnings on rent, food, water and remittances. His wife and three kids reside in Aligarh, UP.

Anand experienced four significant moments in quick succession. First, he **invested Rs 70-80,000 in a B.Ed degree** and took a **Rs 70,000 bike loan** for commuting to college. Then, **he was defrauded: he attempted to sell brass utensils (worth Rs 50,000)** that he had been given as a gift during the wedding to finance his education, but the buyer ran off with the goods without making payment. A **bike accident followed, resulting in a Rs 25-30,000 medical bill** despite receiving care at a government hospital. Finally, his **wife's gallstone treatment at a private hospital required Rs 70-80,000**, forcing him to sell the family buffalo.

Anand dreams to be a teacher or open his own school but seeks some financial stability before transitioning into a new career. Towards this goal, he plans to either migrate internationally to the Gulf for a limited period of time, hoping to save enough money, or secure a position as a teacher by attempting the UPTET or CTET exam.

The Impact of Marriage & Health Shocks



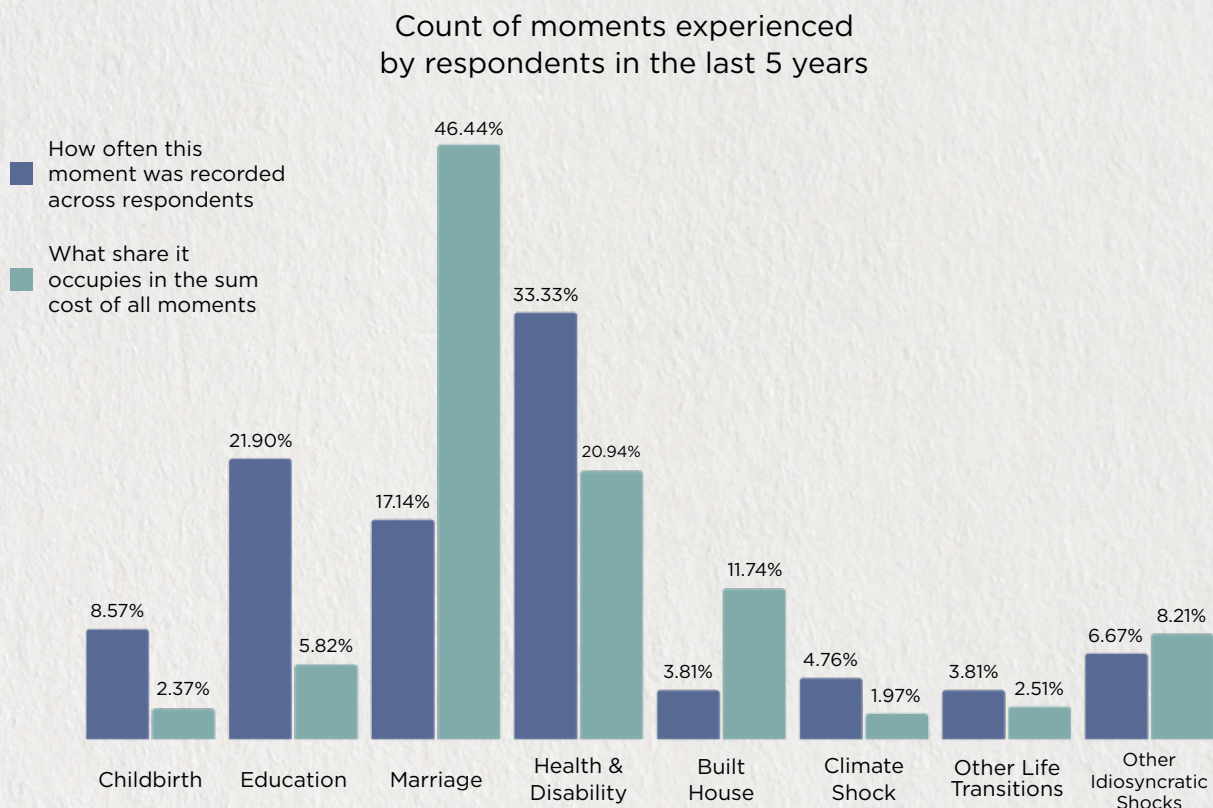
Neelam, 44, works as a daily wage construction worker, earning at least **Rs 12,000 a month**. A widow for the past 18 years, she has two daughters who are now married.

Originally from Katihar, Bihar, she has been living in Delhi for the past 15 years in a rented accommodation in an informal settlement. Neelam married off her two daughters approximately five years ago, incurring a total expenditure of Rs 6.5 lakh. To **finance the weddings, she took on a Rs 3 lakh debt and depleted most of her savings**. While managing this debt, she faced health issues four years ago, likely due to kidney stones, which led to out-of-pocket expenses of **Rs 40,000 for private hospital fees**. This situation wiped out her remaining savings.

Recently, an **eye issue cost her Rs 2,500**, with the rest covered by her Ayushman Card. However, the most significant setback came when her **contractor failed to pay her wages for seven months of work, resulting in a loss of Rs 70,000**.

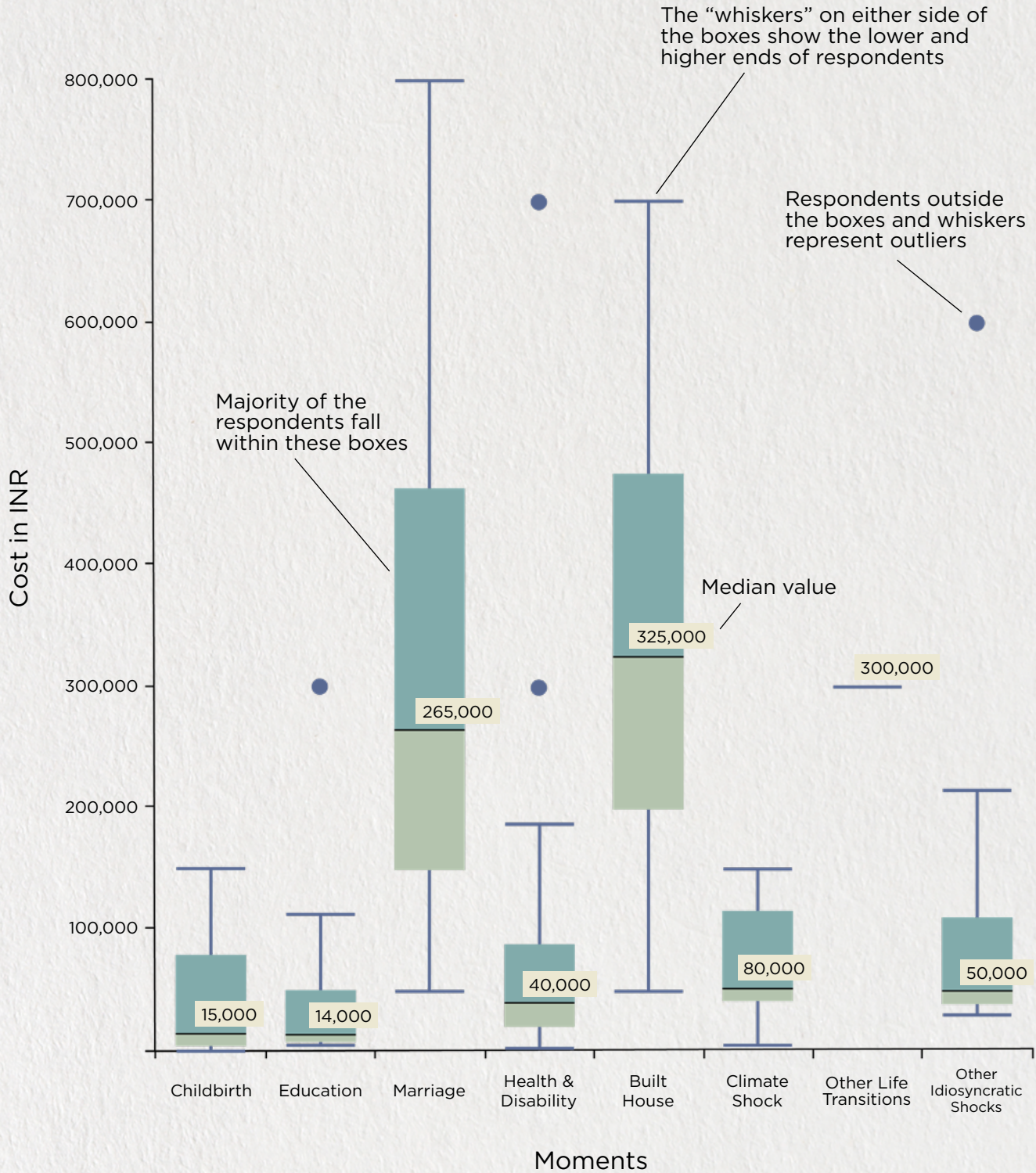
Neelam's low wages, marriage costs, and fraud have led her to not be able to afford her own healthcare or financial security in her 40s.

Moments and their Costs



- We recorded costs for 80% of moments, with the median cost of all moments being Rs 55,000.
- Across 80 instances, total expenditure on moments was ~Rs 1.2 crores. Out of this marriage, which accounts for 17% of the moments recorded, is the most expensive category, representing nearly half of all documented costs (46.4%), with a cumulative cost of Rs 55.4 lakhs across 18 occurrences.
- The top three categories, marriage (46.4%), Health & Disability (20.9%) and Built House (11.7%), account for 79% of total costs while representing 45.7% of all moments, demonstrating significant cost concentration. The remaining five categories represents only 21% of the total cost of moments.
- Within health & disability, major treatment accounts for a majority of the expenses (85%), followed by chronic illness (8%).
- Childbirth and education, which account for 30.5% of all moments, represents 8.2% of all costs, primarily due to mediating resilience factors such as government schools and hospitals. The "Other Life Transitions" category includes employment transitions (2), death (1), and old age (1).

Boxplot with Median cost (Rs) of moments experienced by the respondents



Recurring Flooding and Multiple Moments Driving Migration



Rizwan, 53, is a daily-wage carpenter who also invests his time in seasonal farming. He **earns Rs 10,000 per month** from carpentry and **Rs 10,000 per year** from farm work. He **regularly migrates between Delhi and his village in Katihar, Bihar**, where his family lives.

Every year, Rizwan's farm remains waterlogged due to flooding for at least a week, which destroys crops and delays sowing, reducing the food available for his family's sustenance. Compounding this, in the last five years, he has faced multiple challenging moments: his daughter faced **childbirth complications requiring Rs 1 lakh treatment** in a private hospital, he suffered from a **hernia requiring Rs 30,000** for medical expenses and another **daughter's marriage cost Rs 1.5 lakh**. Recently, he also repaired and **renovated his house, costing Rs 4 lakhs**. For all these moments, he expended his life savings and took on debt.

With four more daughters to support and cognizant of the anticipated wedding costs, Rizwan migrates to Delhi, working to service his overlapping debts, trapped in annual migration cycles. As he ages, he feels there is no relief on the horizon for him.

Health Crisis Consumes Entire Family's Savings



Shamim, 28, is a daily-wage carpenter who **earns Rs 20,000 per month**. He spends half his monthly income on food, rent and utilities, and sends the other **half as remittance to his family** of seven individuals who live in his village. He is the sole earner in his family.

Five years ago, his mother suffered **kidney failure, triggering the single most expensive moment in his household's history: Rs 7-8 lakh in dialysis costs** at private hospitals. This amount represents **33 months (~3 years) of his current Rs 20,000 monthly income**. His joint family had painstakingly saved Rs 4.5-5 lakh specifically to renovate their village home, which was a multi-generational goal. All of it disappeared into medical treatment. To cover other costs, he **borrowed Rs 2.5 lakh** in an interest-free loan from a relative; **Rs 1-1.5 lakh remains unpaid six years later**.

Shamim's family now practices permanent expenditure compression: children receive one set of clothes during Eid instead of three. **His mother's illness didn't just cost money—it restructured family consumption forever.**

Coping Strategies Utilised

Count of coping strategies employed by respondents when faced with moments



- We recorded 133 incidents of 20 unique coping strategies being utilised across moments. A majority of moments (68%) were addressed by employing a single coping strategy, while some (30%) required the use of two coping strategies.
- "Utilised Savings" (31.6%), "Informal Credit" (27.1%), and "Utilising Government Infrastructure" (12.8%) are the top three strategies, accounting for 71.4% of all coping strategies.
- Self-reliance (48.9%) and external support (46.6%) strategies are nearly equal. Among external support strategies, informal credit is used far more often than formal credit (36 instances vs 5), indicating limited access to formal financial systems.
- Government infrastructure is primarily accessed for education (11 instances), health & disability (4 instances) and childbirth (2 instances), accounting for 12.8% of all strategies with 17 instances.
- Severe coping strategies account for 5.3 % of all coping methods (7 instances), including avoiding major treatment (4), reducing food consumption (2), and selling productive assets (1). Most severe instances (6 out of 7) occur during health and disability situations, highlighting how healthcare costs lead households to harmful financial choices.

Spread of coping strategies recorded by severity* across key MTMs

Severity of coping strategy	Types of strategies employed
<p>None Using positive coping strategies that may not affect the overall long term well-being of the household.</p>	<p>Accessing social protection</p> <p>Utilising affordable public infrastructure /services</p> <p>Compressing non-essential expenditure</p>
<p>Stress Using mildly negative coping strategies that may potentially affect long term well-being of the household.</p>	<p>Taking up additional work</p> <p>Utilising savings</p> <p>Accessing community grants and civil society support</p>
<p>Crisis Using negative coping strategies that may indeed affect the long term well-being of the household.</p>	<p>Reducing food consumption</p> <p>Borrowing formal or informal credit on interest</p> <p>Mortgaging house</p>
<p>Emergency Using severe negative coping strategies that will affect the long term well-beng of the household.</p>	<p>Avoiding or delaying treatment</p> <p>Selling productive assets</p>

*Severity categorisation informed by the Livelihood Coping Strategy Index (GPC, 2022)

Severity of coping strategy	Key MTMs						
	Childbirth	Education	Marriage	Health & Disability	Built House	Climate Shock	Overall
None	18%	42%	0%	11%	0%	0%	15%
Stress	55%	50%	45%	44%	50%	71%	48%
Crisis	27%	8%	55%	31%	50%	29%	32%
Emergency	0%	0%	0%	13%	0%	0%	5%

- Most households use “stress-level” coping strategies, accounting for nearly half of all responses to MTMs.
- About one-third of coping strategies fall into the “crisis” category, which can erode long-term household well-being.
- Only a small share of strategies are clearly positive (“none” category), such as accessing social protection or affordable public services, suggesting limited reliance on truly risk-reducing options.
- The most severe “emergency” responses, such as delaying treatment or selling productive assets, are rare overall but highly concentrated in health and disability shocks.
- Marriage stands as an outlier, with the highest dependency on “crisis” while responses from other MTMs concentrate on the “stress” category.

From Compounding Moments to Negative Coping Strategies



Shaurya, 38, is a daily-wage construction worker who earns **Rs 10,000 per month**. He spends half of his salary on personal expenditure and sends the rest in **remittances to his family** in his village. He also **migrates regularly** between Delhi, his place of work, and Bihar to take care of his **ailing wife**, who went through major health treatment three years ago.

Four years ago, Shaurya's **son got married, and it cost him Rs 2.5 lakhs**. The marriage expenditure consumed all of his savings.

Just a year later, Shaurya's wife suffered from **ovarian cysts, costing Rs 50-60,000**, and he found himself unable to pay for it. He thus had to take loans from multiple relatives. She never fully recovered, developing **diabetes that now requires Rs 5,000 monthly in medicines**. When funds run low, the family makes extra effort to secure medicines from government dispensaries.

Shaurya now suffers from an eye problem affecting his work ability. However, he **avoids treatment** after receiving poor medical advice in his first attempt, and wants to avoid further expenses that detract money away from his wife's medical care. **"My body hurts so much I cannot work,"** he admits, yet continues delaying care.

Government Infrastructure as Coping



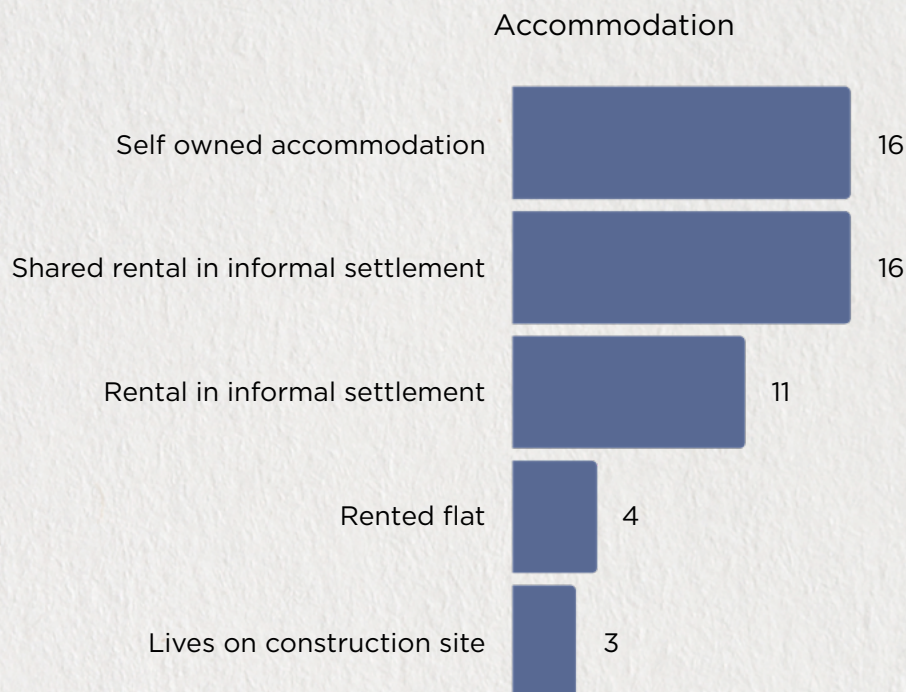
Mitali, 33, works as a daily-wage construction worker and **earns around Rs 8000 per month**. Her husband is also a construction worker and they both, on average, **earn Rs 15,000 per month**. They spend half of their monthly income on personal expenditure and send the rest in **remittances to their family** (mother-in-law and 3 children) in their village in MP.

Mitali's **husband suffered from a heart attack** three years ago, which resulted in expenses worth **Rs 70,000**. She coped with this moment by spending all her savings and taking an informal loan. Her husband's condition has also resulted in him not being able to take as much work as he was able to before.

Against a backdrop of decreased income and outstanding debts, Mitali feels regret for not being able to invest more in her children's development. However, she is grateful for the **presence of government schools, which all three of her children attend**. With **no school free, education costs remained minimal, her modest income continued, and children stayed in school despite the crisis**. This gives her the ability to start saving up some money that she can later invest in her children's future.

Resilience Factors

50 individuals reported their housing status, as depicted in the chart below:



Note: 13 of 16 respondents owning their accommodation had it allotted by the government through a resettlement drive.

Our interviews included an optional module exploring resilience capacity factors. Due to the small sample size and the optional nature of the questions in this module, these findings are exploratory and descriptive.

Land Ownership

- 41% respondents reported owning or having a stake in family or ancestral land.
- When asked whether they would ever sell this land to cope with a moment, most claimed they would only do so as a last resort, as the land is a major asset that safeguards their future.

Active Debt

- 51% of respondents had active and significant debt, driven by easy access to informal credit. This access, in all likelihood, enables households to absorb shocks and prevents them from employing more adverse coping strategies.

Government Schemes

- 9 respondents reported that their families access PDS, with 2 trying to obtain a ration card but facing challenges, including high intermediary costs and long waiting times.
- 7 respondents reported that someone in their family accesses PM Kisan Samman Nidhi while 4 reported that their family member accesses old age pension.
- 4 respondents reported having accessed other cash transfers.

Government Infrastructure

- In 10 out of 23 instances of education, the respondent's child went to a government school, experiencing no cost or minimal cost for coaching. Those who accessed private education expended an average of Rs 52,561 and a median of Rs 8,000 per annum.
- In 4 out of 35 instances of Health & Disability, the respondent accessed a government hospital and experienced no cost. Respondents preferred private hospitals for major treatment, discouraged by long waiting times and lack of adequate infrastructure at government hospitals.

Skilling, Education, and Employer Advance Systems



Avantika, 28, is a domestic worker who **earns Rs 10,000 per month**. She lives in a rented house with her husband, one daughter and a younger sister. Her husband suffered from a slipped disc 2 years ago, and since then, she has been the **sole earner** in her household. She has **studied till the 5th grade**.

When her husband suffered from a **slipped disc requiring Rs 10-15,000** in initial treatment, she **borrowed from employers, repaying through wage deductions**. She also accessed personal loans through a mobile app, discovering loans via electronic purchasing using an EMI mechanism.

Looking to expand her income sources, she undertook a **free skilling course in silai (tailoring) at a civil society organisation**. To secure a position as a designer, possibly through government schemes in Haryana, she now aims to obtain a tailoring certification. To ensure the accreditation, she requires a formal 10th grade qualification. With her **employer's support**, who paid the admission fees and provided an advance for books and other intermediary costs, she has now enrolled in open schooling. Excited about restarting her education, she said, **"I never thought I would study again. I am very happy."**

Labour Card and Government Transfer



Aditya, 59, a daily wage tile installer, earns about **Rs 20,000 per month**. He possesses minimal assets, rents his accommodation, and is still paying a **debt of Rs 4 lakhs that he took on for his son's marriage**. His **wife suffers from arthritis, but they have avoided treatment** till now to save on treatment costs.

Government programs eased his deprivations during recent covariant shocks. He holds a BOCW or labour card, which entitles him to a range of schemes. However, he was unaware of these schemes and never applied for them. Despite this, the **BOWC card provided Rs 8,000 during the pollution lockdown when construction work halted**. Previously, **during the COVID lockdown, he received Rs 15,000 through this same card**.

These transfers, while modest compared to his Rs 20,000 monthly income, eased his family's consumption requirements during covariant shocks and prevented him from taking on additional debt. He owns 2 / 3 acres of land in Unnao, which he might eventually sell (estimated Rs 3-4 lakh) if debt pressure becomes unbearable, although he prefers to retain it.

Land as Intergenerational Anchor



Anand's **deepest resilience lies in the family land** purchased by his grandfather in Aligarh. **This asset exists outside the wage economy as it cannot be quickly sold or mortgaged.** Despite carrying Rs 70,000 debt from his bike loan and Rs 70,000 from his B.Ed education, despite selling his buffalo for his wife's surgery, he refuses to sell.

"I will never sell it," he states firmly. This refusal isn't sentiment but calculation: family land represents his family's **insurance policy against permanent displacement.** If his construction work fails, if debts spiral, his land provides a fallback.

His grandmother still lives in the village; his mother works as an Anganwadi workers there; his wife and children maintain the household there. Land links his present wage labour in Delhi to a subsistence possibility in the village. His brother similarly works as a gig workers in Noida, but all siblings maintain village ties through this land. Anand's goal of becoming a teacher might be resolved through this land inheritance or by returning to the village and opening a school there, as he dreams. Thus, **his land is resilience made material.**



AREAS FOR FURTHER INVESTIGATIONS

Areas for Further Investigation

Sequencing and clustering of MTMs

Several narratives highlight that multiple MTMs occurring in quick succession lead to compounding debt, migration and deferred care. The evidence suggests that it may be the sequence and clustering of moments, rather than any single event, that pushes households into sustained crisis. Future work can test:

- Whether experiencing more than a certain number of highcost MTMs within a 3–5 year window sharply increases the probability of chronic indebtedness, severe negative coping, or long-term downward mobility.
- Whether early, well-timed support at the first high-cost MTM significantly reduces the severity of coping in subsequent moments.

Informal credit as both a buffer and a trap

Informal credit is the second-most utilised coping strategy (27.1%). It plays a protective role by preventing households from utilising severe coping strategies. The next phase can study:

- The factors determining whether easy access to informal credit leads to the reduced incidence of severe-level coping strategies or, conversely, reinforces extended dependency / work cycles.

Social protection access as a moderator of MTM-related costs

The current investigation shows scattered engagement with PDS, labour cards, PM-Kisan, pensions, Ayushman, RTE 12(1)(c) and other schemes. It remains to be seen if these schemes moderate the impact of MTMs. Future investigations can test:

- Whether households accessing a bundle of 2–3 key schemes experience measurably fewer crises and severe coping responses across MTMs than otherwise similar households with limited or no access to social protection.
- Which specific schemes, in which combinations and at which moments (e.g., marriage, health, climate shocks), generate the largest reduction in harmful coping strategies.

Marriage as a structural driver of chronic debt

Marriage accounts for 17% of all recorded moments but nearly half (46%) of all documented costs. Across most incidents (16/18), respondents coped by taking on debt with a long repayment period. In some cases, household members took up additional work or migrated to pay off this debt. Future investigation can test whether:

- Marriage-related borrowing is a significant entry point into long-term, overlapping debt cycles, which in turn shape subsequent MTMs (health, housing, education).
- Marriage-focused social protection, particularly cash transfers, measurably reduces crisis- and emergency-level coping.

Gendered reconfiguration of work and care at key moments

MTMs trigger shifts in who works, who migrates, and who provides care. Men often migrate or increase their work intensity to repay large debts, while women may enter or expand their domestic work when their husbands' ability to earn is affected. Women also shoulder increased care responsibilities during childbirth and health shocks, sometimes constraining their ability to earn. Future research can test:

- Whether specific MTMs increase women's labourforce participation (domestic work, extra houses) without corresponding gains in bargaining power and savings.
- How the incidence of high-cost MTMs and gender norms shape daughters' trajectories (such as early withdrawal from school and early marriage), or concentration in specific low-wage occupations.

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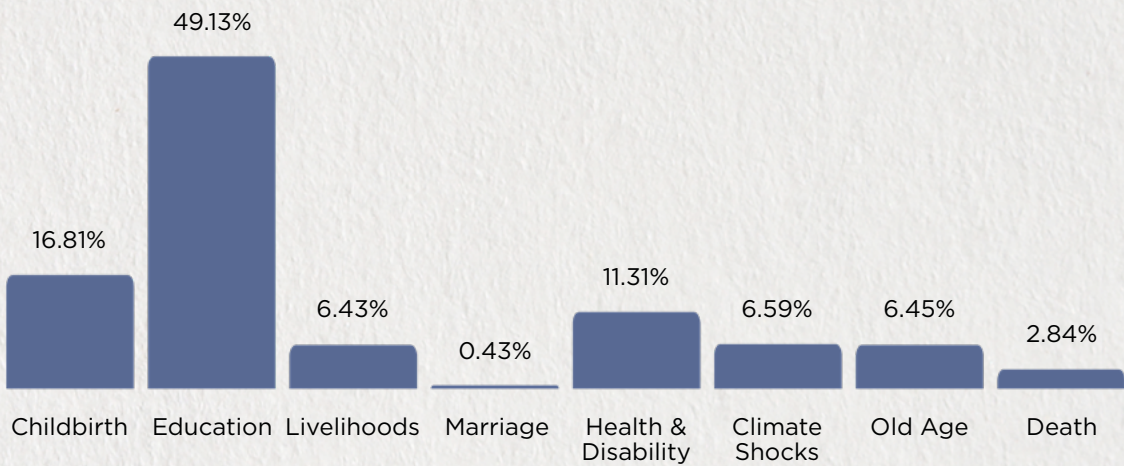
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Providing social protection entitlements to citizens, especially through a bouquet or a portfolio, during “moments that matter” (MTMs) breaks intergenerational cycles of poverty by preventing them from experiencing further deprivation and potentially enabling better outcomes. Indus Action’s work across education, labour, livelihoods and public services has enabled more than **2.3 million vulnerable citizens** to access **112 social protection schemes** across **9 MTMs**, unlocking **over Rs 2200 crores in public funds**.

Our Impact: the breadth of entitlements delivered to vulnerable citizens across moments that matter





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