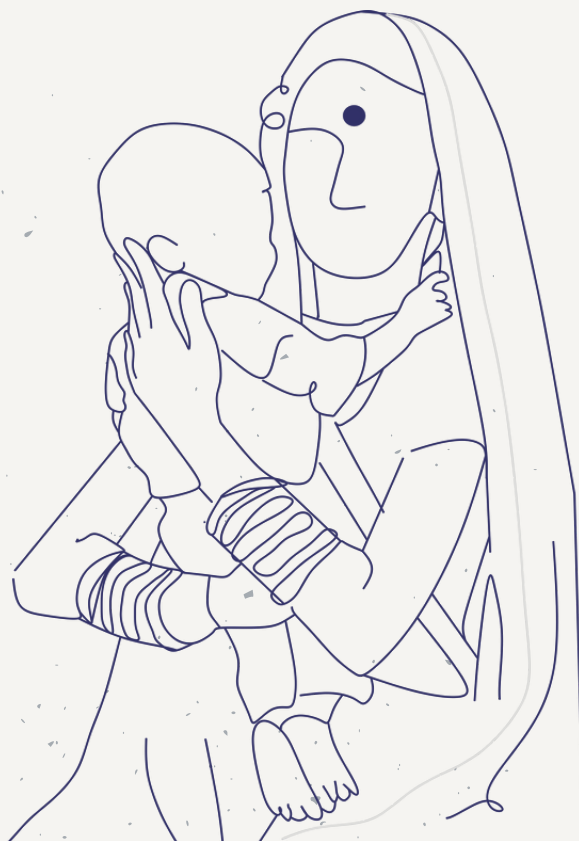




**DISTANT DREAMS AND MYRIAD REALITIES:
LIVED EXPERIENCES OF ADOLESCENT PREGNANT
GIRLS AND MOTHERS IN SHELTER HOMES IN
ANDHRA PRADESH AND RAJASTHAN**

**RENU SINGH, K. ANURADHA, SHOBHITA RAJA GOPAL,
MUKTA GUPTA, RAHUL S.**



YOUNG LIVES INDIA

Distant dreams and Myriad Realities - Lived Experiences of Adolescent Pregnant Girls and Mothers in Shelter Homes in Andhra Pradesh and Rajasthan

Renu singh, K. Anuradha, Shobhita Raja Gopal, Mukta Gupta, Rahul S.

This publication is copyright, but may be reproduced by any method or non-profit purposes, but not for resale. Formal permission is required for all such uses, but normally will be granted immediately. For copying in any other circumstances, or for re-use in other publications, or for translation or adaptation, prior written permission must be obtained from the publisher and should be cited accurately as given below.

Suggested citation

Singh, R., K. Anuradha, Rajagopal, S., Gupta, M., and Rahul, S. (2021) 'Distant dreams and myriad realities - Lived Experiences of Adolescent Pregnant Girls and Mothers in Shelter Homes in Andhra Pradesh and Rajasthan', India: Young Lives.

Design Credits

Design © Young Lives India

Young Lives India, 47, Community Centre, Mezzanine Floor, Friends Colony East, New Delhi 110 065

Tel: +91-11-41827788 • Email: info@younglives.in • Website: www.younglives.in

TABLE OF CONTENTS

Authors

Preface

Abbreviations

Executive Summary.....1

1. Introduction.....8

1.1 Consequences of adolescent pregnancy and motherhood.....10

1.2 Key determinants of adolescent pregnancy.....13

1.3 Indian Context.....18

1.4 Methodology.....23

2. Circumstances leading to adolescent pregnancy and motherhood.....32

2.1 Social vulnerability and deprived circumstances.....34

2.2 Direct causes-romantic relationships and elopements.....40

2.3 Abuse, Violence, Exploitation, Trafficking, Sexual Assault.....51

2.4 Officials views on why adolescent girls end up in shelter homes.....58

2.5 Summary.....60

3. Pathways into shelter homes: Institutional care and protection.....62

3.1 'Rescued' from family's perspective on their complaint.....63

3.2 Rescue by police.....66

3.3 Seeking protection of a shelter home.....67

3.4 Institutional care and support mechanisms.....69

3.5 Process followed once the girls are presented before the CWC.....70

3.6 Shelter Homes- Infrastructure and basic services.....74

3.7 Management of the shelter home -Roles and responsibilities of the superintendent....76

3.8 Counselling services.....77

3.9 Other staff in the shelter homes.....79

4. Life in shelter homes.....80

4.1 Arrival and Initial Days.....80

4.2 Managing pregnancy and childbirth at the shelter home.....82

4.3 Daily Routine/Daily routine in the shelter home.....89

4.4 Tasks within Shelter Homes.....89

4.5 Relationships amongst girls in Shelter Homes.....89

4.6 Education and skill development in the shelter homes.....90

4.7 Awareness raising about laws and rights91

4.8 Health services and nutrition.....92

4.9 Security of shelter homes.....92

4.10 Parents involvement with girls in the Shelter Homes.....93

4.11 Girls likes and suggestions for shelter homes.....94

4.12 Challenges in managing shelter homes.....95

4.13 Suggestions by officials for improving the situation.....96

5.Future hopes and aspirations.....	101
5.1 Reconciliation with the natal home/parents.....	101
5.2 Future hopes and plans regarding marriage and settlement in life.....	103
5.3 Future aspirations related to Economic Independence.....	104
5.4 Motherhood and plans for offsprings.....	106
5.5 Other reflections.....	106
5.6 Life after leaving the shelter home.....	107
6.Conclusions and Recommendation.....	111
6.1 Time to revisit and recontextualise SRH programmes whilst acknowledging adolescent sexuality.....	111
6.2 Need to ensure access to education for all- From rhetoric to practice.....	113
6.3 Need for better poverty alleviation schemes to meet the needs of most vulnerable.....	114
6.4 Critical to provide protective environments.....	115
6.5 Strengthening Shelter homes.....	116
6.6 Shelter homes programme's enhancement.....	118
6.7 Enhancing skills of staff members in shelter homes.....	119
6.8 Stronger Implementation of Law.....	120
7. References.....	121
8. Appendix I: Laws.....	131
9. Appendix II: Approximate ages of girls at different stages of their journeys....	134
10. Annexure I.....	137
11. Annexure II.....	138

Tables:

Table1: Percentage of girls according to marital status and girls who had begun childbearing.....	25
Table 2: Sample of Study Respondents.....	27
Table 3: Social groups of the respondents.....	34
Table 4: Table 4: Educational status of the respondents.....	38
Table 5: Complaints lodged/ Source of Police Complaints.....	63
Table 6: Respondents Pregnancy/fertility status at the time of entry into shelter homes.....	83

Figures:

Figure 1: Circumstances leading to adolescent pregnancy.....	33
Figure 2: Different trajectories of romantic relationships.....	42
Figure 3: Process followed once the girls are presented before the CWC.....	71
Figure 4: A rough sketch of the shelter home drawn by residents of DSH-I	75



Rekha Sharma
Chairperson

Tel. : 011-26944808

Fax : 011-26944771



भारत सरकार
राष्ट्रीय महिला आयोग
प्लॉट नं. 21, जसोला इंस्टीट्यूशनल एरिया
एफ.सी.-33, नई दिल्ली-110 025

GOVERNMENT OF INDIA
NATIONAL COMMISSION FOR WOMEN
PLOT NO.-21, FC-33, JASOLA
INSTITUTIONAL AREA, NEW DELHI-110 025
Website : www.ncw.nic.in
E-mail : chairperson-ncw@nic.in
sharma.rekha@gov.in

13TH August, 2021

FOREWORD

The National Commission for Women ("NCW") is committed towards securing the rights of all young women and we have strived to ensure their rights. In specific, we have always tried to ensure the well-being of the most vulnerable young women who are at risk and in need of protection.

We are very pleased that Young Lives India has published this timely report which is based on primary research undertaken in a total of 8 shelter homes in Andhra Pradesh and Rajasthan to understand the lived experiences of adolescent mothers and records the voices of over 150 participants, including duty bearers.

I am certain this report will be very useful as it offers the reader an opportunity to learn first hand of the experiences of vulnerabl girls who have shared their experiences with the researchers. These voices have been very sensitively captured in this report. Further, the government officials in the shelter homes have also shared their insights and perspectives, which will be highly useful for the Commission as we undertake policy reforms.

I believe reports such as these which capture stories from the field and are based on actual experiences are critical to understand the situation of vulnerable children on ground and should be instrumental when making policy initiatives at improving the lives of India's children.

I would like to thank Dr Renu Singh and her team of researchers for having undertaken this very important qualitative research that highlights the journeys of these young girls in Rajasthan and Andhra Pradesh. We at NCW are committed to using the evidence to promote the wellbeing of India's youth who are the future of this vibrant nation.

(REKHA SHARMA)

THE AUTHORS

Dr. Renu Singh has over 25 years of experience in teaching, teacher education, education policy analysis, and research, both in India and abroad. Her research interests are early childhood development, teacher education, inclusion, and gender. She has held a number of prestigious positions at NGOs, including Save the Children, and in university departments. She has also advised the Indian Government by serving in a variety of working groups, joint review missions, and on committees and boards such as the Central Board of Secondary Education. She is the founder and Executive Director of Young Lives India.

Dr. K. Anuradha is a Professor, Chairperson Board of Studies and Coordinator, UGC SAP DRS II, in the Department of Social work, Sri Padmavati Mahila Visvavidyalayam, (Women's University) Tirupati. A.P. She obtained her Master's Degree in Social Work from Roshni Nilaya, Mangalore, and Clinical Experience in Psychiatric Social Work from NIMHANS, Bangalore. Her Ph. D is in the area of Child mental health. A Social Work educator for the past 31 years, she is specialized in Medical and Psychiatric social work. She is an external member of the Board of Studies, doctoral committees, selection committees of many universities. Apart from being an Assistant qualitative researcher in the Young Lives longitudinal study on 'Childhood Poverty' for over 10 years, she has been associated with many research and consultancy projects and is also involved in the supervision of doctoral students.

Prof. Shobhita Rajagopal is a Professor at the Institute of Development Studies, Jaipur, Rajasthan. She has over three decades of experience in social development and policy research, training and policy advise. Her research interests include Gender and education, reproductive health and rights, gender-based violence and gender, and WASH. She has extensively worked in the area of understanding gender inequalities in educational processes in Rajasthan and India. Her active engagement in the area of women's rights and empowerment in Rajasthan and in India has helped in understanding the processes of subordination and unequal gender relations that influence women and girls access to crucial resources. She has published extensively in National and International publications. She has recently co-authored the book - Open and Distance Learning in Secondary School Education in India, Routledge, 2019.

Ms. Mukta Gupta has been a teacher educator in India as well as in South East Asia for over twenty years. For last six years, she has been working on issues related to gender and education as a freelance researcher. Her focus has been on Life Skills Education with marginalized communities in India, especially in Rajasthan. She has worked closely with UNICEF in developing 'Adhyapika Manch' and 'Meena Manch' modules for the Government of Rajasthan. She has been actively engaged with several organizations like Doosra Dashak, Institute of Development Studies (Jaipur) and Sandhan on projects related to Girls health and education.

Advocate Rahul S is an advocate and social science researcher with 15 years of experience working on issues pertaining to human rights, child protection, and gender. He is a gold medallist from the National University of Juridical Sciences (NUJS), Kolkata, India, and the recipient of a scholarship from Jacob D Fuchsberg Law Center, Touro College, NY, the USA to study International Human Rights Law.

PREFACE

Adolescence marks a transitional stage of physical, emotional, and cognitive human development. Often ignored is literature specifically addressing adolescent sexuality which encompasses multiple factors, such as developing intimate partnerships, expressing agency, and gender identity. Against this backdrop and acknowledging the lack of nuanced literature from the Indian sub-continent, we at Young Lives are pleased to share this Report entitled **“Distant dreams and myriad realities - Lived Experiences of Adolescent Pregnant Girls and Mothers in Shelter Homes in Andhra Pradesh and Rajasthan”**.

This report is based on primary qualitative research undertaken in a total of 8 shelter homes in Andhra Pradesh and Rajasthan to understand the lived experiences of adolescent mothers and records the voices of over 150 participants, including adolescent girls in the shelter homes as well as government functionaries. As this Report captures the first-hand voices of young adolescents, we hope the readers gain a glimpse into trajectories of young adolescents as they enter into intimate relationships. Further, we hope the readers gain a more nuanced understanding of adolescent pregnancy and motherhood in India and gain insight into the complex interplay between poverty, iniquitous structures, patriarchy, adolescent female sexuality, and the exercise of agency by an adolescent mother.

The invaluable insights and understanding on the complex issue of adolescent agency which has been enumerated upon in this Report, would not have been possible in the absence of the young adolescent girls who opened up their worlds to us and shared candidly their life stories, which traversed through onerous terrain and tumultuous life circumstances they were plagued in. Further, the members of the CWC's as well as officials in the shelter homes shared their insights and perspectives, which was valuable to the research team and these have been highlighted in this report as they are vital to inform and guide interventions that will improve quality of lives of adolescent girls both in the community and within shelter homes.

At Young Lives we strongly believe in harnessing research to inform and improve Government based on evidence and insight and in this tradition, we hope this report will be instrumental in influencing policy initiatives aimed at improving the lives of India's young adolescents by providing them the skills, information, and support they need during the challenging phase of adolescence.

Acknowledgments are due to Prof Shobita Rajagopal, Dr. K. Anuradha, and the qualitative research teams who undertook data collection from shelter homes in Rajasthan and Andhra Pradesh. Additionally, I would like to acknowledge the team at Young Lives India who collated the findings, drafted, designed, and edited this Report to ensure it was made available in the current format. I would like to extend my gratitude to Ms. Stuti Kacker, Former Chairperson of the National Commission for Protection of Child Rights, and Prof. Sudesh Mukhopadhyay for their valuable comments and review of the report.


Dr. Renu Singh
Executive Director, Young Lives India

EXECUTIVE SUMMARY

“Neither am I seen as an innocent girl nor am I treated as an adult with a choice in the matter. My pregnancy seems to have gravely upset those around me.... they are trying to understand whether I am a victim of unfortunate circumstances or if I am an anti-social element who has broken the rules and worthy of punishment”

-Radha, an adolescent mother interviewed

In light of the apparent rise in the incidence of unwed motherhood in India, a qualitative study on understanding the lived experiences of adolescent pregnant girls and mothers, residing in Government shelter homes in Rajasthan and Andhra Pradesh (**“Study”**) has been undertaken by Young Lives India (**“Young Lives”**).

This Study aims to give the readers a more nuanced understanding of adolescent pregnancy and motherhood in India and highlight the complex interplay between poverty, iniquitous structures, patriarchy, adolescent female sexuality, and exercise of agency as experienced first-hand by an adolescent mother.



THE SPECIFIC RESEARCH OBJECTIVES OF THE STUDY ARE TO:

UNDERTAKE

in- depth analysis of the circumstances that lead to adolescent pregnancy and motherhood based on the lived experiences shared by adolescent girls interviewed in Rajasthan and Andhra Pradesh,

UNDERSTAND

how adolescent girls cope with childbearing and the associated responsibilities of child-rearing and caring within the realm of institutional care/homes,

EXPLORE

the future aspirations of the girls under institutional care and the associated challenges encountered by them,

MAP

the government support mechanisms in place for adolescent girls who find themselves in vulnerable situations; the quality of care provided and the process of reintegration into family and community,

IDENTIFY AND ARTICULATE

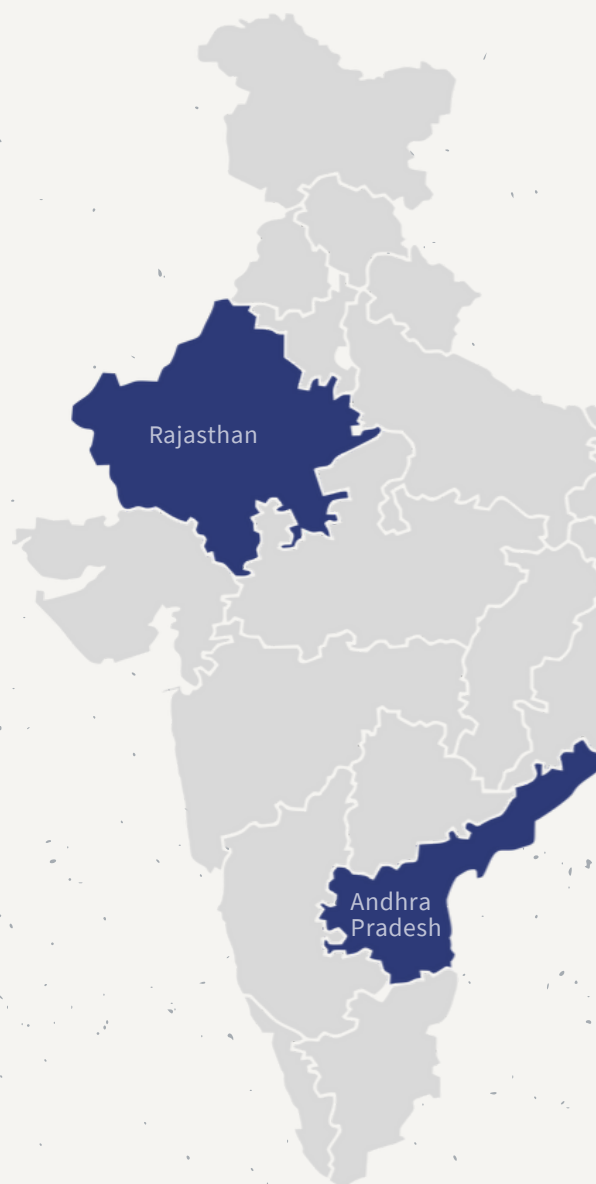
the needs of adolescent girls and young mothers and highlight areas for policy reform.

This study was conducted across three (3) Government shelter homes^[1] in three districts of Rajasthan and five (5) shelter homes in three districts in Andhra Pradesh.

For the purposes of the Study, a total of one hundred and fifty-six (156) respondents were interviewed. This is bifurcated as follows: (a) Thirty (30)^[2] adolescent pregnant girls and adolescent mothers (currently/ previously residing in the Government shelter homes) participated in in-depth one to one interviews, (b) Eighty-nine (89) adolescent girls from the shelter homes participated in the focused group discussions (“**FGDs**”) and (c) Thirty-seven (37) key informant interviews were conducted with various Government officials.

A strict adherence to research ethics and protocols was maintained so as to ensure that the Study does not harm any of the respondents and expressed written consent was sought from all the participants. Given the sensitivity of the Study, the research team spent considerable time in the homes to forge a relationship with the respondents to ensure they felt being in a “safe space” and able to share their experiences without being judged in any manner whatsoever. The experiences as recalled by the respondents have been analysed by the research team and no background check has been undertaken to confirm or validate these stories shared.

While undoubtedly, keeping in mind the sample size and the geographical setting for the Study - the findings highlighted in this report need to be understood in the specific contexts in which they occur and cannot be generalised pan India. Nevertheless, it provides meaningful insight that is capable of informing researchers, civil society organisations, and policy makers on contested terrains of adolescent sexuality, sexual behaviour, and choices especially for girls in the Indian context- a subject which is often ignored and considered taboo.



1] Shelter homes in India are part of the Governments institutional care and support mechanisms, for children in need of care and protection. The establishment and maintenance of child shelter homes has been mandated under the Juvenile Justice care and protection of children) Act 2015, which is the primary law for children in need of care and protection.

[2] State- wise bifurcation across the selected shelter homes covered thirteen (13) girls from Andhra Pradesh and fourteen (14) girls from Rajasthan. In Rajasthan one ex-resident and in Andhra Pradesh two ex-residents of the shelter homes were also interviewed to form a group of thirty (30) respondents.

This report supported by the Child Investment Fund Foundation (“**CIFF**”) highlights the fact that the majority of the adolescent girls interviewed had in common a childhood experience of growing up in economically and socially vulnerable families. The stories narrated by these adolescent girls recounted family and social environments wherein their growth, development, and smooth transition in and during adolescence were scarred by challenges and insurmountable obstacles which resulted in the denial of basic rights like health, education, and safety.

While some of the adolescent girls interviewed were forced into child marriages, for many adolescents’ proposals by men appeared as a chance to exercise their own agency, acknowledge their sexuality, and define their own pathways to secure in their mind, a better and safer future. While some of the narratives shared were of adolescent pregnancy being a result of coercion, for others, pregnancy and motherhood was a ‘choice’ exercised. These girls interviewed were at the cusp of adulthood and recounted vividly of having formed romantic relationship to express their choices. They acknowledged their own agency- control over their mind and bodies resulting in planned or unplanned pregnancies within or outside the confines of a marriage.

The Study highlighted that lack of knowledge of laws relating to the legal age of marriage amongst the adolescent girls - eighteen (18) years being the legal age of marriage for girls in India was unknown to a majority of girls interviewed. Further, traditional norms, mores, and societal conventions were of limited importance to these adolescent girls who were dealing with their “first love”, “first sexual experience” and the onset of womanhood.

As stated above, while some other girls interviewed became pregnant after traditional child marriages arranged by parents, or were victims of abuse and violence, this report voices the stories and trajectories of many adolescent girls for whom pregnancy was a fall-out of a partnership they chose to form with a companion of their choice.

Interestingly, the adolescent girls highlighted that their respective families have relied on the provisions of the Prevention of Child Marriage Act, 2006 (“**PCMA**”) to annul their respective marriages. Note, PCMA states that that a marriage of girls below 18 years and boys under 21 years is illegal and voidable in India. In addition, cases have been filed against the girls’ partners pursuant to the provisions of the Juvenile Justice (Care and Protection of Children) Act 2015 (“**JJ Act**”) and Protection of Children from Sexual Offences Act (POSCO) Act, 2012 (“**POCSO**”) (Refer to Annexure 1 for overview of select provisions of these legislations).



Pursuant to the filing of these cases and police interventions, the adolescent girls interviewed narrated how their respective partners have been mostly sent to jail by the Courts; as Indian law does not recognize consensual sex between a “minor” and a “major”. As seen from the cases which have been filed by the families of the adolescent girls (who are minor) against their partners (men who have attained the age of majority), the Courts have treated such “relationship” as a case of “abuse” and one in the nature of “sexual offence” – which requires the male partners to be punished in the eyes of the law.

These adolescent girls have chosen to remain in shelter homes and an overwhelming majority have categorically refused to go back home. This highlights how the shelter home is viewed as a more feasible option for these adolescents rather than navigating the violence and abuse that would have been subjected to, should they have chosen to return to their families. It is relevant to highlight that the girls interviewed continue to have faith in their relationship and believe that once they turn eighteen, they will re-consummate their relationship with the partner of their choice.

Based on the in-depth interviews, the researchers observed that the shelter home is viewed divergently by the adolescent girls. For the adolescent girls who have been subjected to abuse, the shelter home is a safe haven but for the girls pining to be with their partners, it is a place from where they would like to escape at the earliest. For the latter, the relationships they formed has been out of their own choice and constituted the exercise of their agency while rebelling against family wishes. To these girls, the shelter home represents another form of control over them- one which they are subject to until they attain the age of majority.

Regarding the mother-child bond, most adolescent girls interviewed have accepted their babies and look toward to a future with hope. However, many of the officials interviewed at the shelter homes continue to echo the societal taboo and negative attitudes prevalent in the Indian context with respect to motherhood out of wedlock.

In summation, the lived experiences of the adolescent girls are unique and disparate. These narratives range from adolescents ravaged by violence, abuse, and exploitation, to stories of survival and dreams of a partner offering a better life. It is important to highlight that an overwhelming majority of the adolescent girls interviewed, lacked knowledge of sexual and reproductive health nor did they have the ability to truly comprehend the fall out of their physical relationship, let alone truly grasp and comprehend the challenges of teenage pregnancy and subsequent motherhood.

These narratives highlight a childhood that has been fraught with uncertainty and numerous responsibilities, vulnerability, instability whilst dealing with puberty, agency, and female sexuality.

Each of these adolescent girls' journeys prior to entering the shelter home, are a product of a system that has failed to protect them. We must acknowledge and be cognizant that their basic human rights have been denied. Poverty, violence, gender discrimination, lack of information about sexual reproductive health and guidance during adolescence, forms the backdrop of the girls' trajectories from childhood to teenage pregnancy, and motherhood.

It appears that families, institutional structures such as schools and health institutions, and society at large have not heard these adolescents as they struggled during adolescence. We have either failed to “see” them or “hear” them.

These stories of the “invisible” need to be addressed. The opportunity is right for policy makers to acknowledge the reproductive health needs of adolescence as well as the existence of teenage pregnancy and motherhood outside wedlock. This qualitative research provides an insight into the lives of young teenage mothers and circumstances that led to their journey into shelter homes.

To conclude, the words of Radha, one of the respondents interviewed echo loud and it is vital we hear these voices:

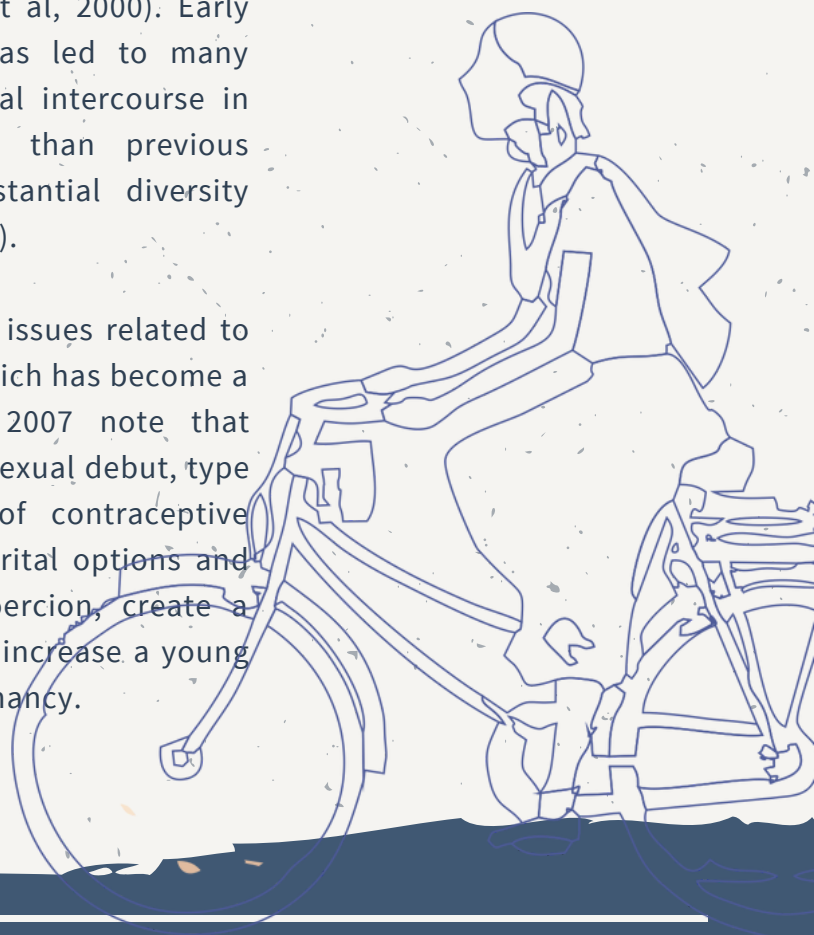
“What has happened is in the past....I don't want to live in regret. What I wish for is a future, where I am given the respect we deserve. I want to be able to go back to my village, not be ridiculed and mocked. I want to make an honest living for myself. I want a happy married life. I want my child to get an education and never have to deal with the horrors, I had while growing up. I have had a difficult life and want happiness now. It is my turn to be happy. Is this too much to ask for?”

1. INTRODUCTION

Adolescents constitute around 16 percent of the world's population and an overwhelming majority of these adolescents (approximately 86 percent) live in developing countries (WHO, 2018a). Adolescence is understood as a stage of moving from childhood towards adulthood, which is marked by a period of rapid physical, cognitive, psychological, behavioural maturation, and social changes. Aspects of development that characterise adolescence can vary by gender, race, ethnicity, geography, socio-cultural norms as well as socioeconomic status.

Many young people experience critical and defining life events—first sexual intercourse, marriage, and parenthood—during adolescence (Pachauri & Santhya, 2002). The initiation of sexual intercourse is a milestone in the physical and psychological development of young people across societies; and both the timing of this event and the context within which it occurs can have immediate and long-term consequences for the individual (Singh et al, 2000). Early onset of puberty for boys and girls has led to many adolescents experiencing their first sexual intercourse in different personal and social context than previous generations, though there remain substantial diversity across contexts (McCauley and Salter, 1995).

Research in recent years has focussed on issues related to adolescent pregnancy and motherhood which has become a global phenomenon. Bearinger et al, 2007 note that variation in biological maturation, age of sexual debut, type and number of sexual partners, use of contraceptive methods, along with educational and marital options and norms, and the possibility of sexual coercion, create a confluence of factors that may protect or increase a young person's risk of experiencing teenage pregnancy.



16

million adolescent girls
in the 15-19 years age
group, become pregnant
every year (UNICEF,2019)



INTRODUCTION

It is estimated that globally, two million girls under the age of fifteen (UNFPA, 2015) and thirteen to sixteen million adolescent girls in the fifteen to nineteen (15-19) years age group, become pregnant every year (WHO, 2011; Woog, Singh, Browne, & Philbinet, 2015; Neal, Mahendra, Bose, Camacho, Mathai, Nove, Santana, & Matthews, 2016; Darroch, Woog, Bankole, & Ashford, 2016; UNICEF, 2019).

Adolescent pregnancy and motherhood affect high, low and middle-income countries, however, the highest numbers of adolescence pregnancies in girls under nineteen (19) years, are reported to be in low and middle-income countries (LMICs). One study estimates that *“In 36 LMICs, up to 25 percent of women aged 15–19 years are either pregnant or have given birth”* (UNESCO, 2017, p.11). Others claim 95 percent of babies born to adolescent mothers are in developing countries (WHO, 2011; Woog et al., 2015). Available data may be an underestimation, as Neal notes *“statistics for adolescent births are only usually calculated for girls aged 15–19, this means that there may be around a million births each year to girls under 15”* which remain unaccounted (Neal et al., 2012).

While the majority of adolescent pregnancy in low- and middle-income countries occur within the ambit of marriage, there is increasing recognition of adolescents getting pregnant and becoming mothers as a consequence of premarital sex. It is reported that cohabitation is on the rise, and in some regions, an increasing number of women are opting out of marriage altogether (UN Women, 2019).

Data from nationally representative surveys of reproductive behaviour in fourteen (14) countries to assess regional variations in young people’s sexual behaviour found that in all of the study countries (except Philippines, Thailand, and Peru) roughly one-third or more of young women between 15–19 have had sexual intercourse (Singh et al, 2000). Research highlights that every sexual engagement occurring outside formal unions carries much higher risks than sexual intercourse within marriage (Ghebremichael & Finkelman, 2013; Salih et al., 2015) including unwanted pregnancy and physical and sexual abuse by older partners (Heywood et al, 2015). This has been largely attributed to lack of knowledge amongst unmarried young people about health and body systems, and their discomfort in discussing reproductive health concerns with parents, health care providers when compared with their married counterparts (Barkat & Majid, 2003).

1.1 Consequences of adolescent pregnancy and motherhood

Adolescent pregnancy and motherhood are seen to be problematic because they are perceived to have a detrimental effect on the adolescent girl's health, education, and economic prospects. Further, it increases their vulnerability to poverty and exclusion; and hinders the full realisation of their capabilities.

Studies highlight teenage pregnancy and motherhood as having negative outcomes not only for the mother but also for the child (Beers and Hollo, 2009; Goossens et al., 2015). Poor health outcomes of adolescent pregnancy for girls and their offspring are reiterated across studies, which include maternal and infant mortality (Neal, 2012; Woog et al., 2015; UNFPA, 2015; Neal et al., 2016; UNICEF, 2018; WHO, 2018). Adolescent pregnancies are associated with lower income and a recent UNIFEM report also states that *“early pregnancies disproportionately affect women from economically disadvantaged groups and can trap families in the inter-generational transmission of poverty and disadvantage”* (UNIFEM, 2019, p. 58).

Adolescent mothers are at a greater risk of being a single parent (Clear, Williams, & Crosby, 2011) and it is suggested that the adverse effects of being a single parent are associated with an increased risk for affective disorder and with increased rates of mental health service utilization (Avison, 1997). The psychological distress and psychiatric morbidity experienced by single mothers are attributed to greater exposure to stress and strain rather than deficits in social competence and personal resilience (Avison, 1997). Other consequences that unmarried pregnant adolescent girls may face are rejection, stigma, and violence by families and peers (UNFPA, 2015).

It is critical to point out that in recent years the dominant perception of adolescent pregnancy and motherhood, as inevitably resulting in harmful consequences, is being challenged by a few research studies. Social scientists in recent years have come to recognise that adolescence is not only a period of significant physical and physiological growth, but it signifies a major interdependency of biology and context (Lerner & Steinberg, 2004). There is a greater appreciation that unlike children, adolescents can consider contextual situations and make their own autonomous decisions, thereby having a hand in influencing their own development (Lerner & Steinberg, 2004), including decisions about engaging in sexual activity.

INTRODUCTION

These studies highlight how adolescents themselves perceive adolescent pregnancy and motherhood, which has not received much attention. A synthesis of qualitative research by Macutkiewicz & Macbeth, 2016 revealed both positive and negative perceptions amongst young adolescent mothers about adolescent pregnancy and motherhood. The study further revealed that in many social contexts and communities, early parenting was acceptable and encouraged (Macutkiewicz & MacBeth, 2017). Similarly, a study by Hermann and Waterhouse, 2011 found more positive perceptions of teenage pregnancy amongst low-income youth, teens with a parent or sibling who was a teen parent, and ethnic or racial groups (African American and Hispanic teens than White and Asian teens).

The researchers however note that there is very limited literature that captures adolescent experiences of pregnancy, both in comparison to adult pregnancies and further how we contextualize adolescent intended pregnancy in relation to adolescence development as a whole. Some of the available research studies highlight that contrary to the dominant perception, adolescent mothers express positive attitudes to motherhood; found the experience as very empowering; provided them with an opportunity to give direction to their lives; helped them to set, pursue and achieve education and economic goals (Lehman, 2001; Duncan, 2005; Dalton 2014; Macutkiewicz & MacBeth, 2017).

A meta-synthesis found that while a few studies found that adolescent motherhood was seen as a hardship and increased responsibilities, it was also seen by adolescents themselves as positively transformational in nine (9) of the eighteen (18) studies reviewed (Clemmens, 2003). However, the positive responses were primarily from girls who had support from their families to manage their pregnancy and motherhood (Clemmens, 2003). These findings are similar to findings from Nordin et al (2012) in Malaysia, which found that eighty-four percent (84%) of unwed women reported moderate to high levels of psychological well-being and this was attributed to the availability of social support and the extension services provided by the KEWAJA shelter home. Another systemic review also noted that adolescents were “prone to define benefits and costs of parenting by the circumstances of their relationship with their partner” (Macutkiewicz & MacBeth, 2017, p. 125). Nevertheless, being young unmarried mothers can be tough on their emotions, finances, health, and psychological well-being. In many cases, families totally reject their daughters who become pregnant before marriage (Nordin, Wahib and Yunus, 2012).

INTRODUCTION

Even though there are differing viewpoints across the literature available, they reinforce the urgency to address adolescent pregnancy and motherhood. Available evidence from countries in Asia suggests that an increasing proportion of unmarried adolescents are sexually active. This behaviour places them at risk of unintended pregnancy. Recognising this, SDG 3 and 5 include targets associated with adolescent pregnancy, maternal mortality, and access to sexual and reproductive rights.

The paths adolescents take from childhood into adulthood are shaped by broad demographic, institutional, and technological forces and how services and programmes for 1.2 billion adolescents (10–19 years) living in diverse contexts are framed by various Governments and development agencies. These will determine how transitions from adolescents to adulthood are defined and experienced by the 1.2 billion adolescents (10-19 years).

1.2 Key determinants of adolescent pregnancy

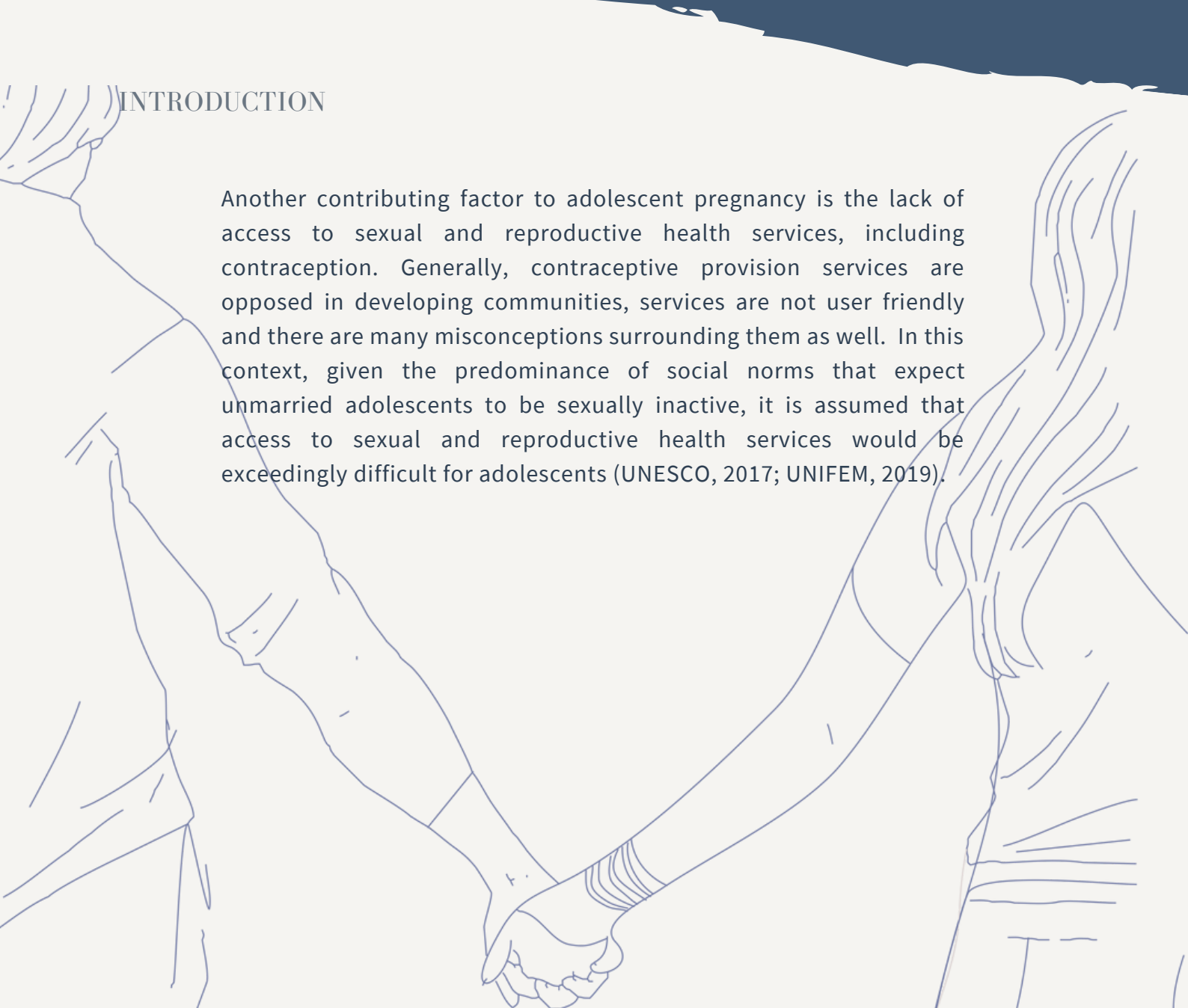
Recent research has segregated adolescent pregnancies along various dimensions of intent, e.g., intended or planned, unintended, and ambiguous (Jaccard et al. 2003; Speizer et al. 2004). A WHO fact sheet (2018b) on adolescent pregnancy states that pregnancies may be planned and desirable when girls are under pressure to marry and after marriage to quickly have children. A systemic review noted that some adolescents who became pregnant intentionally were disappointed with how reality did not meet their expectations and that they may have held an idealised image of motherhood (Macutkiewicz & MacBeth, 2017, p. 124).



INTRODUCTION

A global report (Ganatra, 2006) states that while the majority of young abortion seekers are unmarried in most parts of the Asia-Pacific, in South Asia, most unwanted pregnancies occur within marriage. However, the incidence of pregnancies among unmarried teenagers is on the rise, especially in urban areas (Bela, 2005). The WHO fact sheet also states, that *“for many adolescents, pregnancy and childbirth are neither planned nor wanted. Twenty-three million girls aged 15 to 19 years in developing regions have an unmet need for modern contraception. As a result, half of the pregnancies among girls aged 15 to 19 years in developing regions are estimated to be unintended”*. A study estimated *“21 million pregnancies among adolescent girls aged 15–19 years in developing countries; nearly half (49 percent) were unintended (43 percent in Asia, 45 percent in Africa, and 74 percent in Latin America and the Caribbean)”* (WHO, 2018a).

Increasingly, researchers have begun to lend more credence to the romantic relationships of adolescents leading to adolescent pregnancies. While romantic relationships vary with age and culture, romantic relationships are considered an integral feature of adolescent development, wherein factors such as biological motivations, cognitive maturity, socio-emotional intelligence, and social expectations reportedly influence adolescent's engagement in romantic relationships. Researchers argue that adolescent romantic relationships are significant developmental stepping-stones to adult relationships in general and should not be regarded as trivial and fleeting. (Collins, 2003, Furman & Collins 2008, Collins, Welsh and Furman, 2009). Romantic relationships have been defined as *“mutually acknowledged on-going voluntary interactions; in comparison to the most other peer relationships, romantic ones typically have a distinctive intensity, which is usually marked by expressions of affection and current or anticipated sexual behaviour, of course, some behaviours are simultaneously affectionate and sexual in nature”* (Furman and Collins, 2007, p. 3). Romantic relationships may often lead to cohabitation or early marriage, leading to wanted or unwanted pregnancy.



INTRODUCTION

Another contributing factor to adolescent pregnancy is the lack of access to sexual and reproductive health services, including contraception. Generally, contraceptive provision services are opposed in developing communities, services are not user friendly and there are many misconceptions surrounding them as well. In this context, given the predominance of social norms that expect unmarried adolescents to be sexually inactive, it is assumed that access to sexual and reproductive health services would be exceedingly difficult for adolescents (UNESCO, 2017; UNIFEM, 2019).

Most communities and the respective Governments fail to acknowledge that many adolescents are not following these norms and it is estimated that *“by the time they are 19 years old, half of adolescent girls in developing countries are sexually active”* (WHO, 2018a, p. 1). Thus, *“lack of knowledge and understanding about sexuality, contextual factors (e.g. peer pressure) and cultural reticence to address sexuality in adolescents”* become key determinants of adolescent pregnancy (UNESCO, 2017, p. 38). Low levels of education, poor performance, absence from school, and lack of educational aspiration are also key determinants of early and unintended pregnancies (UNESCO, 2017).

INTRODUCTION

Numerous studies have highlighted the role and importance of social and economic factors that play a crucial role at the individual, interpersonal, community, and societal levels (Woog et al., 2015; WHO, 2018a). Another report emphasises that *“seldom is the pregnancy a result of the adolescent girl’s choices. Much more often, it stems from her lack of choices or opportunities, and from discrimination and abuse of her human rights”* (UNFPA, 2015, p. 3). Research studies also reinforce the significance of family circumstances, for instance - a study in Ethiopia found that besides age, residence, and contraceptive non-use, parental divorce was also found to have a statistically significant association with adolescent pregnancy (Habitu, 2018). Another study found that many young mothers and pregnant adolescent girls had experienced disordered family life while growing up (Dalton, 2014). The common characteristics of adolescents who become pregnant were that they had experienced deprivation, were themselves children of an adolescent mother and had low educational achievement (Macutkiewicz & MacBeth, 2017).

Child marriage is stated to be one of the major determinants of adolescent pregnancy and motherhood, despite existing legal provisions against this practice, across the world (UNFPA 2015; UNESCO, 2017; UNICEF, 2018). A UNFPA report states that *“nine out of ten births to girls aged 15-19 occur within marriage. Just as these girls...have no say about whether, when, and whom they will marry, they also likely have no say about whether and when to begin childbearing”* (UNFPA, 2015, p. 3). Wodon et al., 2017 notes *“the relationships between child marriage and early childbirths are complex. For some girls, having one or more children before the age of 18 may be the consequence of child marriage. For others, marriage may result from an early childbirth or pregnancy. For yet others, early childbirths may not be related to child marriage at all”*.

There is evidence that adolescent girls are likely to feel powerless and be unable to negotiate in sexual situations or may be coerced to have sex (Sowmini, 2013; UNESCO, 2017). In situations of coercion it has been stated that *“associated shame and stigma and lack of effective law enforcement and protection also act as determinants”* of adolescent pregnancies (UNESCO, 2017, p. 38). A study in the USA on effects of childhood sexual abuse experiences on the lives of adolescent mothers found that childhood sexual abuse was likely to increase the vulnerability of adolescent girls to become pregnant and young mothers (Esparz, 1995).

The overall key determinants of adolescent pregnancy and childbirth range from - poverty, traditional social norms, social marginalisation, lack of access to education and health services and lack of knowledge of sexual reproductive health (UNESCO, 2017).

“Seldom is the pregnancy a result of the adolescent girl’s choices. Much more often, it stems from her lack of choices or opportunities, and from discrimination and abuses of her human rights”

(UNFPA, 2015, p. 3).



INTRODUCTION

1.3 Indian Context

Eleven percent (11%) of the world's adolescent pregnancies (15-19 years) are stated to occur in India (WHO, 2011) and Neal (2012) noted that in India the highest number of 12 to 15-year old adolescents giving birth (approximately 6,00,000) and that India recorded the second-highest annual number of adolescent maternal deaths. Data from Census 2011 highlighted that approximately thirty percent (30%) of "ever married girls" between 15-19 years were already mothers and ten percent (10%) of them have had at least two children (Srinivasan et al., 2015). According to the analysis, the seven-point nine percent (7.9%), girls/women aged 15-19 years were already mothers or pregnant at the time of the survey.

“

**11% the world's adolescent pregnancies
(15-19 years) are stated to occur in India**

WHO, 2011

”

In India, premarital sex is stigmatised and adolescent pregnancies amongst unwed mothers is a relatively unresearched area. While research has highlighted that unwed motherhood is a fairly common occurrence in the western countries, they remain a relatively rare entity in India due to the social taboo associated with them (Katke and Pagare, 2014). Concerns regarding sexuality, teenage pregnancy, and early childbearing in India have been studied primarily in the context of child and early marriage and in hospital settings. Amongst the limited studies available, a study on unwed mothers in Maharashtra found that forty-nine percent (49%) of them were adolescent girls (Katke & Saraogi, 2014). Yet another study from Uttar Pradesh (Gupta, Tiwari & Srivastav, 2018) found that out of a total of three hundred and three (303) women who sought termination of pregnancy in the hospital six percent (6%) were unmarried.

INTRODUCTION

1.3.1 Adolescent pregnancies and child marriage

As per UNICEF (2019) one in three of the world's child brides live in India. India contributes to forty percent (40%) of the child brides in the world (UNICEF, 2012) and the prevalence of child marriage can be considered a strong contributor to the phenomena of adolescent pregnancy and motherhood in India.

Marriage of minor girls in majority of cases is arranged by parents and other family members, sometimes with and sometimes without consent of the minor girl (Raj, 2010). According to Census (2011)- 5.1 million girls and 6.9 million boys in India got married before the legal age of eighteen (18) years and 21 (twenty-one) years, respectively (Young Lives, 2017). NHFS-4 estimates that twenty seven percent (27%) of girls in India are married before their eighteenth birthday. A recent report also states that forty-five-point seven percent (45.7%) of the country's child brides, were married before they turned fifteen (UNICEF, 2019).

In the Indian context, adolescent pregnancies are socially accepted, within the framework of marriage. Fertility is strongly tied to marriage; first pregnancy and childbirth often follow quickly after marriage, risking the health of both the young mother and her baby. Child marriage is also seen as a preventive measure for ensuring that pregnancy does not occur out of wedlock. In a study in Bihar, parents reported several incidents where girls conceived outside the wedlock. A mother said *"Yes, a number of times unmarried girls get pregnant. That is why we marry our daughters at the age of 12....we say go to your own home and do whatever you want to do there"* (Nanda et al., 2011, p. 37).



One in three of the world's child brides live in India

UNICEF, 2019

“Yes, a number of times unmarried girls get pregnant. That is why we marry our daughters at the age of 12....we say go to your own home and do whatever you want to do there”

1.3.2 Adolescent pregnancies outside wedlock

While most of the adolescent pregnancies in developing countries occur within marriage, there are also incidences of childbirth outside of wedlock (Crivello et al., 2018). Adolescent pregnancy occurring outside the framework of marriage is an extremely sensitive issue in the social and cultural contexts of India, where marriage is deemed ‘compulsory’ for sexual activity. There is perpetual fear of transgression of sexuality norms especially in relation to girls, leading to tightening of control over them during adolescence. Sowmini (2013) highlights that in Indian culture and belief systems, unwed pregnancy among adolescents is a disturbing experience not only for the individual but also for the entire family.

However, given the various influences and fast-changing social environment, adolescents in India are also entering into romantic relationships and are engaged in pre-marital sex. A study in India showed that 20–30 percent of adolescent males and up to 10 percent of adolescent females were sexually active before marriage (Jeejebhoy, 1996). Sowmini, 2013 highlighted that sexual relationships among adolescents and young adults in India are a reality that needs to be addressed effectively. Findings from her study in Kerala showed that nearly three-fourths of the young women were having a consensual relationship with a known partner for quite a long duration. A Population Council Survey of adolescents undertaken in Bihar found that nineteen percent (19%) boys and thirteen percent (13%) girls had a romantic partner and of these fourteen percent (14%) boys and six-point three percent (6.3%) girls had premarital sex. Of these twenty-eight-point five percent (28.5%) of the girls had engaged in sex before the age of 15 years, while only eight-point two percent (8.2%) used contraceptives (Population Council, 2016).

INTRODUCTION

When romantic relationships are against the wishes of their parents, adolescents often take recourse of leaving their natal homes and seek to marry or live with someone of their choice before the legal age of marriage.

Social and cultural norms vary across various communities in India. Among tribal communities, for instance, marriage by abduction, capture, or mutual consent and elopement is fairly common and acceptable. After the elopement, the two families come together and negotiate through the exchange of visits and gifts and a formal ceremony may take place thereafter or the boy and girl simply start living as a couple. In Rajasthan, at an annual fair known as Gaur, which is held in Garasiya and Bhil tribal villages in the Udaipur district of Rajasthan, it is very common for young boys and girls to elope with self-chosen partners (Mitra & Parasuraman, 2015). Maya Unnithan-Kumar (1999) in her work on Girasia women and men and how they negotiate their identities in Sirohi district notes that marriage by *khichna* (pulling) or capture is a common practice of establishing conjugal relationships. This is usually followed by several elaborate ceremonies and settlement of the bride price.

However predominantly in India, elopement is considered dishonourable for the girl and the family and families usually refuse to approve the relationship and cut off contact with their child or encourage their child to abandon their chosen partner. In other cases, parents of adolescent girls often register a case of forced abduction. Even if the girls marry after their elopements, families register such cases, to make the marriage void. As under the PCMA, a marriage of girls below 18 years and boys under 21 years is illegal and voidable in India. In addition, the families seek punishment against the boys, pursuant to the provisions of the POCSO^[3]. In many cases, the girls are traced and once 'found' sent to government shelter homes (Balika Grihas), as the majority refuse to testify against their partners and go back to their families.

The shelter homes that girls are sent to are part of the Government's institutional care and support mechanisms for children in need of care and protection and are mandated under the JJ Act. The JJ Act stipulates that Child Welfare Committees ("CWC"), be formed for the protection of children for a district or a group of districts and that they should oversee the shelter homes. These shelter homes are thus managed by CWC, superintendents, counsellors, and other staff, as prescribed in the State rules for children's shelter homes. The CWC members, the Superintendents, and Counselors are the primary caretakers of the girls in shelter homes.

[3] POCSO Act has changed the age of consensual sex which was previously 16 years of age as per the Indian Penal Code, 1860 to 18 years of age. As per POCSO any person can be prosecuted for engaging in a sexual act with a child (under 18 years of age) irrespective of whether the latter consented. Additionally, a husband can be prosecuted for engaging in a sexual act with his spouse under 18 years of age.

INTRODUCTION

In many instances, the adolescent girls seeking shelter are pregnant when they reach the shelter homes and give birth to children in these institutions. Many adolescents end up becoming pregnant as they do not have basic information about sexual and reproductive health issues. As per the NFHS-4 2015-16 survey, 5.19% girls in the 15-19 years age group who gave birth by the age of 19 years.

A study of romantic relationships amongst adolescents in shelter homes found that *“nearly 76 percent were not aware of safe sex practices, sexual health, reproductive health, and pregnancy”* (Janardhana & Manjula, 2017, p. 100). Manjula et al (2018) noted that the factors contributing to children moving to the shelter homes included lack of understanding about the consequences of elopement with a romantic partner, inadequate knowledge regarding sexuality and reproductive health, lack of warmth and affection in the family of origin and poor decision making.

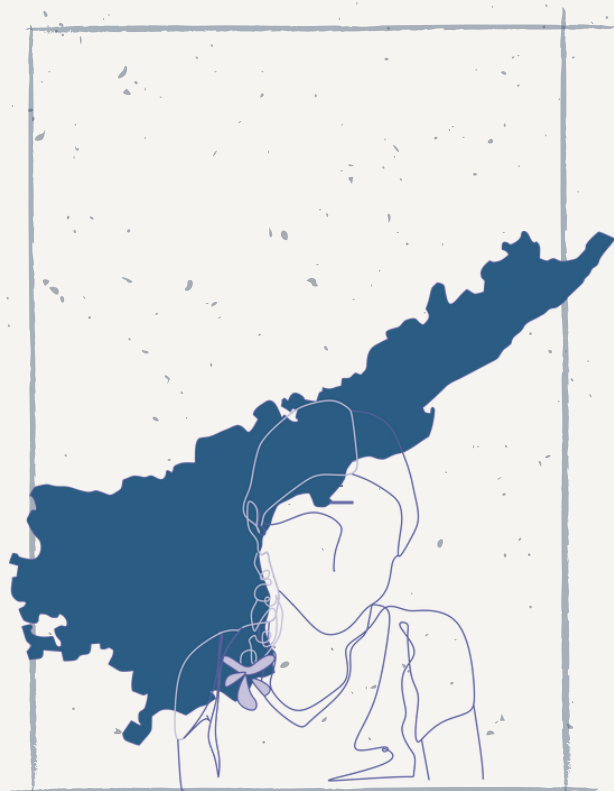
Thus, akin to other countries, adolescent pregnancy and motherhood constitute a challenging and complex issue in India. In patriarchal societies, the dual standards on premarital sex weigh down heavily on girls (Mehra and Nundy, 2019). Given the apparent rising incidence of unwed mothers in India, there is a need to understand the complex interplay between poverty, iniquitous structures, patriarchal discrimination and subordination of girls and women; and the lack of sensitivity to human rights of girls when addressing adolescent issues like adolescent pregnancy and motherhood (Sowmini, 2013; Katke & Saraogi, 2014).

INTRODUCTION

1.4 Methodology

1.4.1 Rationale of the Study

Against this contextual backdrop, this exploratory study attempts to understand the lived experiences of adolescent pregnant girls and mothers, residing in government shelter homes. It includes an analysis of the circumstances that led to adolescent pregnancy and motherhood. The study also attempts to understand the nature of support and care received in the shelter homes (including pre and post-natal care and childcare) and the coping mechanisms adopted by adolescent girls.



It is critical to highlight that the phenomenon of adolescent pregnancy and motherhood is still under-researched since the respondents remain a hard-to-reach group. This is primarily due to the stigma associated with adolescent pregnancy and motherhood especially when it is outside wedlock. Such incidences are usually kept hidden and there is no reliable evidence available related to trends and trajectories of adolescent pregnant girls and teenage mothers.

The researchers undertaking this qualitative study hope that the findings from this report will help to identify the needs of adolescent girls and young mothers who find themselves in vulnerable situations and highlight areas for policy reform.

INTRODUCTION

1.4.2 Objectives of the study

The specific objectives of the study are to:

- Analyse in-depth the circumstances that lead to adolescent pregnancy and motherhood situations,
- Understand how adolescent girls cope with childbearing and the responsibilities of child rearing and caring within institutional care/home(s),
- Explore the future aspirations of the girls under institutional care and challenges therein, and
- Map the government support mechanisms in place for adolescent girls who find themselves in vulnerable situations, the quality of care provided and the process of reintegration into family and community.

1.4.3 Research Design

This exploratory study adopted a qualitative research methodology and used a phenomenological approach in an attempt to capture first-person views through a series of qualitative in-depth interviews. As per the phenomenological tradition it was “*not framed from a predetermined theoretical orientation but sought to engage in a direct and unmediated dialog*” (Dalton, 2014, p. 410). This method was adopted as it allows an in-depth exploration of the respondent’s experiences from their perspective and in the words of Craig (1999) capture “*experience of otherness*”. Qualitative methods like focus group discussion (FGD) and key informant interviews (KII) were used by the researchers.

1.4.4 Selection of research sites - shelter homes

As stated earlier, unwed adolescent pregnant girls and mothers are a hard-to-reach group in the Indian context. It is difficult and virtually impossible to locate them in the community, as they remain hidden due to the associated stigma. The next possibility was to select NGOs or Government-run shelter homes, where young adolescent mothers who have sought court protection are housed. At the time of the study, Non-Government Organisation (NGO) shelter homes were facing a lot of criticism due to reports of sexual abuse in these shelter homes. The criticism began after the release of a report (TISS, 2018) related to shelter homes in Bihar. The report revealed that “*incidents of harassment, sexual abuse, corporal punishment, neglect, humiliation*” were rampant in the shelter homes (TISS, 2018, p. 26).

INTRODUCTION

Therefore, for this exploratory study, the research team contacted authorities of Government shelter homes in two States - Rajasthan and Andhra Pradesh; and eventually gained permission to study a mix of Government and NGO shelter homes in Andhra Pradesh and only government homes in Rajasthan. The shelter homes in Rajasthan are primarily located at the divisional headquarters while in Andhra Pradesh they are located on three district/s.

1.4.4.1 Selection of research sites -States

Andhra Pradesh and Rajasthan States were chosen for the study, as they have a high incidence of child marriage and childbearing in the 15 to19 year age group and are situated in two very different parts of the country.

Rajasthan is a state with one of the highest incidences of child marriage. As per Census 2011, the State has 10 districts with a high prevalence of child and early marriage. The National Family Health Survey (NFHS-4 2015/16) also indicates that more than one-third (35 percent) of women aged 20-24 years got married before the legal minimum age of 18. In United Andhra Pradesh as well, as per Census 2011, the incidence of child marriage of girls was higher than the national average. As per NFHS-4, nearly 33 percent of women (20-24 years) were married before they were 18 years.

TABLE1: PERCENTAGE OF GIRLS ACCORDING TO MARITAL STATUS AND GIRLS WHO HAD BEGUN CHILDBEARING ^[4]

AGE GROUPS/AREAS	INDIA			ANDHRA PRADESH			RAJASTHAN		
	TOTAL	URBAN	RURAL	TOTAL	URBAN	RURAL	TOTAL	URBAN	RURAL
All girls married before 18 years in the 20-24 years age group	26.75	17.52	31.45	33	26.76	35.7	35.4	20.34	40.45
All girls married in 15-19 years age group	11.9	6.89	14.11	16.6	11.93	18.76	16.2	7.62	18.69
All girls who have begun childbearing in the 15-19 years age group	7.9	5	9.2	11.8	8.8	13.2	6.3	4.5	6.9
Ever married girls who have begun childbearing in the 15-19 years age group	48.2	49.7	47.8	50.9	56.7	49.4	30.3	40.8	28.9
Unmarried girls who have begun childbearing in the 15-19 years age group	0.02	0.01	0.02	0.00	0.00	0.00	0.03	0.00	0.04

SOURCE: NFHS-4 (2015-16)

[4] Already had given a live birth or were pregnant with their first child.

INTRODUCTION

According to National Family Health Survey (NFHS-4) in Rajasthan, six-point three percent (6.3%) of young women (married or unmarried) aged 15-19 years, had already begun childbearing, whereas in Andhra Pradesh eleven-point eight percent (11.8%) of women/girls aged 15-19 years were already mothers or pregnant at the time of the survey. Andhra Pradesh is among the top states in India, reporting high adolescent fertility (Crivello et al., 2018).

1.4.5 Selection and permissions to enter the shelter homes

In Rajasthan, 3 (three) government homes situated in 3 (three) districts were selected for the study. These districts (also the divisional headquarter) are also representative of the different geographical regions of the state i.e. plains, desert, and hilly region. As a first step permission was sought from the Department of Child Rights, Government of Rajasthan, to meet the girls residing in these government shelter homes. The research team was informed that formal permissions for entry to shelter homes were under the purview of District Child Welfare Committees (CWC), established under the JJ Act. A formal letter was submitted to the Chairperson, CWC in all selected divisions/ districts, and formal permission was sought from them. The formal permission issued by the CWC enabled the research team to enter the shelter homes. The discussions with the CWC members also helped gather information about the number of adolescent pregnant girls and mothers residing in these shelter homes; as at the outset, the team did not know how many adolescent pregnant girls and mothers were to be found in the selected shelter homes.

In Andhra Pradesh, the team obtained permission from the Department of Juvenile and Correctional Services to enter five (5) homes, in three districts and interview the girls.

1.4.6 Selection of the research participants

At the time of the Study, there were a total of hundred and two (102) girls residing in the three shelter homes chosen for the study in Rajasthan, whereas in Andhra Pradesh, two hundred and twenty-eight (228) girls were living in the five (5) shelter homes selected which spanned across three (3) districts. All these girls had been sent to these homes by district CWC as they were minors. Girls who were abandoned, orphans, and girls who had been rescued by the police or Childline services were also residing in these homes.

INTRODUCTION

From amongst these girls, adolescent pregnant girls, and young mothers currently/ previously residing in the Government shelter homes were selected for this Study. The researchers found thirteen (13) girls residing in Andhra Pradesh and fourteen (14) girls in Rajasthan government home/s who agreed to participate in the Study.

In Rajasthan one (1) ex-resident and in Andhra Pradesh two (2) ex-residents of the shelter homes were also interviewed. The ex-residents were located through NGOs working with girls in the communities. The young woman in Rajasthan was interviewed over the phone while the young women in Andhra Pradesh were contacted at their homes. Details of the final sample for the Study are given below in Table 2.

TABLE 2: SAMPLE OF STUDY RESPONDENTS

STATE	RAJASTHAN			ANDHRA PRADESH		
District Shelter Homes	SH-I	SH-II	SH-III	SH-I	SH-II & III	SH-IV & V
No. Of Pregnant Girls	2	1	2	-	-	1
No. Of Young Mothers	3	-	6	4	3	-
Miscarriage/ Abortion	1	-	1	2	4	1
TOTAL	6	1	8	6	7	2
STATE	RAJASTHAN			ANDHRA PRADESH		
District Shelter Homes	SH-I	SH-II	SH-III	SH-I	SH-II & III	SH-IV & V
FGD with Girls	1	1	1	1	1	1
No. of Girls	30	20	22	5	6	6
Key Informant Interviews	8	6	7	5	6	5
TOTAL	38	26	29	10	12	11

Note: *This includes three ex-resident/s of who were interviewed by the research team.

In Andhra Pradesh, the age of the girls/women interviewed ranged from 14 years to 20 years and in Rajasthan, the self-reported age of the girls/women ranged from 16 years to 21^[5] years at the time of the interview. A tabular summary of the girls' ages when they experienced different events in their lives is given in Appendix 2.

[5] Those living in shelter homes were all under 18 years of age, while ex-residents were older. As all the girls were under 18 years at the time of their pregnancy, from here on they will be referred to as girls.

INTRODUCTION

Amongst the total sample of thirty (30) girls, fifteen (50 percent) were married (even though the under-age marriage remains illegal) and only six (6) of these were arranged marriages. The remaining, fifteen girls were not married (50 percent) including the two (2) girls whose marriages were arranged by their parents, but the wedding was not solemnised.

In Rajasthan, out of the fifteen girls interviewed, five (5) girls were pregnant, nine (9) girls had delivered a child during their stay in the shelter home while one (1) girl reported that she had a miscarriage in the shelter home.

In Andhra Pradesh out of the fifteen (15) girls interviewed, six (6) girls had undergone an abortion, one (1) girl was in the ninth month of pregnancy, and eight (8) of them had given birth. The age of the offspring's ranged from one (1) month to seven (7) years.

1.4.7 In-Depth Interviews

A total of thirty (30) in-depth interviews of adolescent pregnant girls and teen mothers residing/ who resided in the shelter homes in Rajasthan and Andhra Pradesh, were conducted. In-depth, interviews gave researchers an opportunity to understand and explore the adolescent girl's perspective, obtain detailed information about their thoughts and behaviors. This helped in building a complete picture as to what factors and circumstances led to their journey into the shelter homes, by listening to the adolescent girls' voices recount their life trajectories thus far. These interviews also helped to understand the specific experience of each girl.

In Andhra Pradesh, two (2) young mothers in the sample had left the shelter home after turning eighteen years of age. Using the retrospective method, they were facilitated to recall their experiences related to their stay in the shelter home, during their pregnancy period, and as the adolescent mother(s) after childbirth. One (1) girl from Rajasthan who had left the home was also interviewed telephonically. Given the sensitive nature of the research, care was taken to maintain privacy during individual interaction with the respondents.

The main areas probed during the in-depth open-ended interviews included- life at natal home including family composition, childhood experiences, schooling and education, friends, circumstances around leaving home, mapping of their journey from their natal home to shelter home, coping mechanisms, coping with the new environment in the home, experiences of living in shelter homes, managing their pregnancy and motherhood, experiences of motherhood and challenges as well as aspirations for the future.

1.4.8 Focus Group Discussions

Focus group discussions (“FGDs”) were conducted in each of the six (6) shelter homes in Andhra Pradesh and Rajasthan. Discussions were initiated in the shelter homes with all the girls residing in the three homes in each State and from these, a final group of eighty-nine (89) adolescent girls were a part of the FGDS. Of these, a total of 72 adolescent girls in Rajasthan and 17 adolescent girls in Andhra Pradesh were included in the FGDs. This enabled a richer understanding of children’s social settings, the circumstances and reasons that led to girls reaching the shelter homes, their stay in the home, and their hopes and aspirations for the future.

1.4.9 Key informant interviews

In Rajasthan, twenty-one (21) key informant interviews were carried out with CWC members, Superintendents, and Counsellors posted in the Government homes, officials of the Department of Child Rights, and public prosecutors/lawyers; to understand the nature of support provided by government institutions, to adolescent pregnant girls who leave their home of their own volition and are sent to the shelter homes. An effort was also made to discuss the issue with agencies coordinating ChildLine services, to understand their role in the rescue and rehabilitation of children who find themselves in vulnerable situations after leaving home.

In Andhra Pradesh, sixteen (16) interviews were held with the key informants such as the Chairperson, Child Welfare Committee^[6]; District Child Protection Officer (DCPO); District Probationary Officer (DPO); Counsellors; and Superintendents and Wardens of the Shelter homes.

1.4.10 Tool development and field work

Detailed tools and checklists were prepared for focus group discussions and key informant interviews. After the requisite ethical approvals, the tools were piloted in one shelter home, in each of the States, before the commencement of the Study. Post the completion of the fieldwork, this report highlighting the findings of the Study has been completed between March – July 2020 and has been sent for peer review in August-September 2020.

[6]For purposes of this Study, the term CWC members refers to all the CWC members including the CWC Chairperson

INTRODUCTION

1.4.11 Data Analysis

The collected data was examined in detail to identify themes and meaningful patterns as per the Study objectives, using inductive thematic analysis. While each case study had a different trajectory, some commonalities were discerned in the experiences of the adolescent girls interviewed.

Initially, content was analysed to identify categories that were later clubbed into emergent and iterative themes. These were then aggregated into larger themes. Initially, this process was followed for each State after which a comparative analysis was undertaken for both the States to examine similarities and differences in the emerging themes. NVIVO was used for coding and analysis.

1.4.12 Ethics

One of the central concerns of the Study was a strict adherence to research protocols. In Rajasthan, the research proposal as well as tools and protocols were reviewed by an Institutional Review Committee of the Department of Sociology in the University of Rajasthan while in Andhra Pradesh, formal ethical approval was obtained from the Ethics Committee of Sri Padmavati Mahila Visvavidyalayam, Tirupati (Women's University).

This process was followed to ensure confidentiality, anonymity, protection of respondents, and avoidance of re-traumatisation. Fieldwork was initiated only after formal communication of their approval was received from the review committee.

At the outset, the purpose of the research was explained fully to the selected respondents. Voluntariness to participate in the Study was emphasized by the research team while engaging with the study participants. They were informed about their role and rights, the data collection methods, and their voluntary participation. Verbal and written consent was taken from all respondents prior to conducting interviews and FGDs. The respondents were also informed that they could withdraw from the Study at any time. Utmost importance was placed on maintaining the confidentiality of the participants. To protect the identity of the respondents, all the girls interviewed have been given pseudonyms and the location of the districts have not been revealed.

1.4.13 Limitations of the Study

At the outset, it needs to be stated that this Study specifically looked at an aspect of adolescent lives i.e. girls who were pregnant or became mothers, within and outside the institution of marriage. This area of enquiry remains relatively under-researched in the South Asian context, where pregnancy outside marriage remains stigmatised and culturally unacceptable. The findings need to be understood in the specific context in which they occur and thus cannot be generalised due to the sample size and geographical spread of the respondents interviewed.

The case studies documented are based on self-reporting by the selected respondents and there were instances where girls could not recall the specificities of time and date. In both the States a few of the respondents did not want to share certain details about their life experiences and the research team respected their decision. Note, these case studies are based on self-reporting and the research teams did not undertake any independent verification of facts shared by the respondents.

As mentioned earlier, the study was also carried out at a time when there was immense attention to shelter homes in India. The research team faced several issues in obtaining permissions to visit shelter homes as the concerned agencies were extra cautious in granting permissions. In Andhra Pradesh, the government authorities did not give permission for audio recording or videotaping of the interviews.

Furthermore, in Andhra Pradesh with respect to one of the shelter homes selected, the Study was conducted during a time when one of its superintendents was suspended on grounds of misconduct with the inmates of the home. In this shelter home, officials were very guarded in their responses to the queries raised during the interview process. Additionally, the key informants in this shelter had joined their duties recently and hence could not provide detailed information.



2.CIRCUMSTANCES LEADING TO ADOLESCENT PREGNANCY AND MOTHERHOOD

Findings from the Study revealed that each respondent's journey and circumstances propelling them towards adolescent pregnancy and motherhood situations were distinctive and followed different trajectories.

Broadly, the direct causes were attributable to:

- Formation of romantic relationships and elopements,
- Child marriages and its related consequences, and/or
- Becoming victims of sexual abuse/ assault/ exploitation/ trafficking

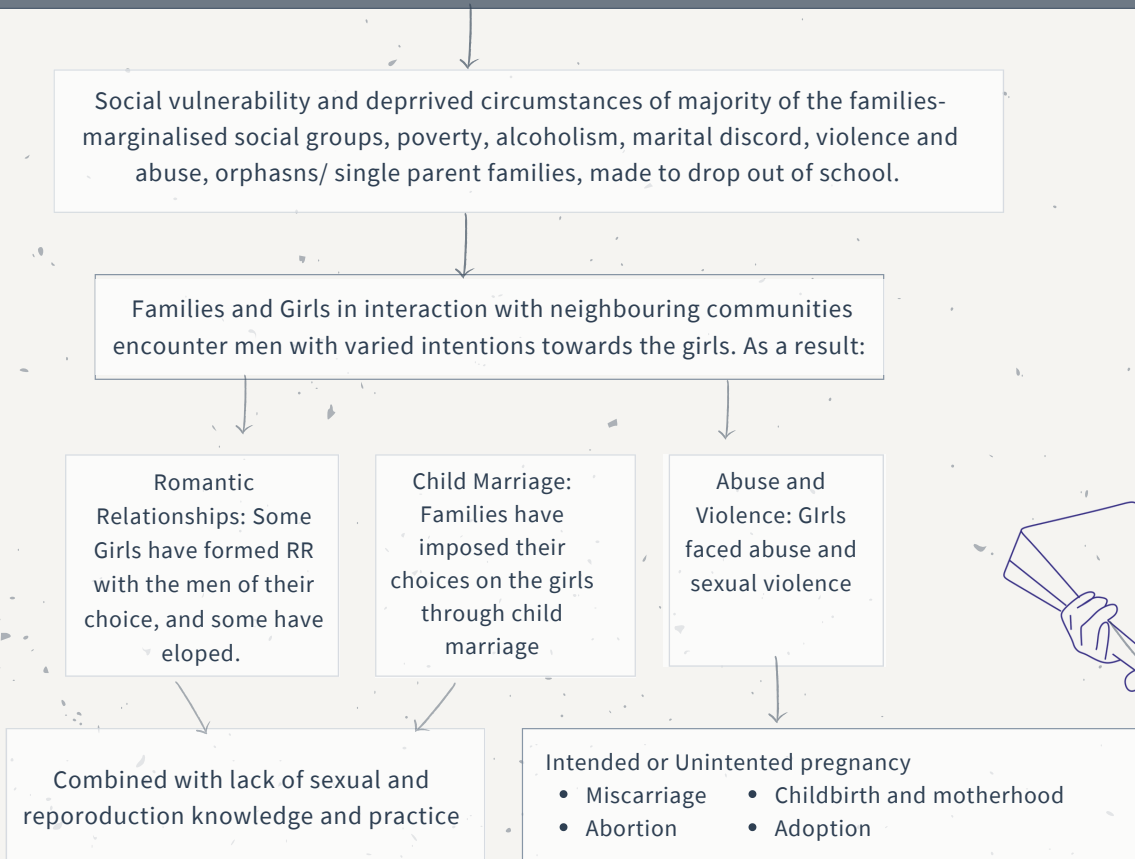
Indirect factors, related to social vulnerabilities faced by the girl's within familial contexts also emerged as a common theme across both State/s. Some of these factors were lack of financial and social stability, marital discord between parents, parental neglect, lack of access to education, traditional inequitable gender norms, etc. Figure 1 provides a pictorial summary of the circumstances leading to adolescent pregnancy and motherhood and these aspects are elaborated upon further in the subsequent sections of the report.



FIGURE 1: CIRCUMSTANCES LEADING TO ADOLESCENT PREGNANCY

Overall Social, Political, Economic Forces at play and influencing the families and the girls' lives

Life Circumstances



Majority of the girls lived experience of marginalisation are marked by:

- economic, social and emotional deprivation
- Struggle for survival
- Lack of safety
- At times of conflict, lead to:

- Powerlessness
- Lack of opportunities and options
- Uncertainty and risks

Through this interaction, some girls hope for better life circumstances than the current one- emotional, social and economic level. For others, it is a matter of survival after facing abuse:

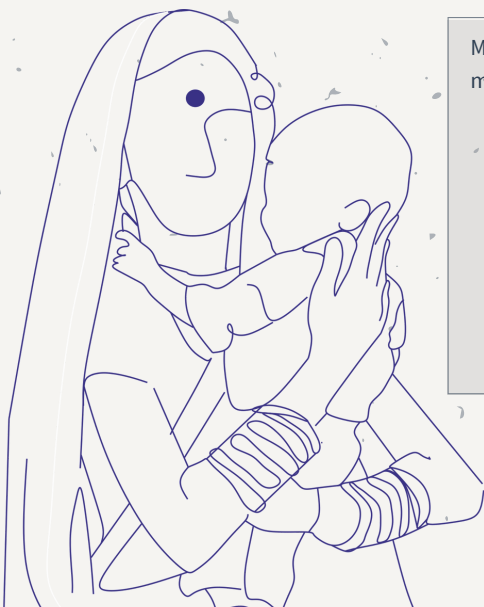
Experiences range from:

- Feelings of love and infatuation
- Fullfillment of romantic aspirations
- Secrecy
- Aspirations for a better life
- Increasing sense of independence
- Rebellion against parental control
- Defying traditional norms
- Taking risks
- Heightened vulnerability

Lived Experience

Majority of the girls lived experience of are marked by:

- Stigma
- Institutionalisation
- Poor health for many including poor mental health
- Limited educationa and economic opportunities
- Many estranged from natal families and partners



CIRCUMSTANCES

2.1 Social vulnerability and deprived circumstances

The unstable economic and social circumstances of the respondent's families played a significant role in determining the respondents' life journeys. The majority of the adolescent girls belonged to household/s which were not very conducive for their growth, development, and a smooth transition into adulthood. Marginalisation on account of socio-economic conditions resulted in a lack of opportunities, aspirations, and basic needs being fulfilled for the adolescent girls. These included the right to safety, health, and education, including information on sexual and reproductive health.

2.1.1 Social groups

Ninety percent (90%) of the adolescent girls belonged to social groups, which have traditionally faced deprivation and marginalisation for many generations. While the majority of the girls belonged to the Other Backward Caste (OBC) group (with a larger proportion in Andhra Pradesh), thirty percent (30%) of the sample girls belonged to Scheduled Caste (SC) household/s in both state/s.

TABLE 3: SOCIAL GROUPS OF THE RESPONDENTS

Social Groups	Rajasthan	Andhra Pradesh	Total
Scheduled Caste	4	5	9
Scheduled Tribe	3	-	3
General Caste	2	1	3
Muslim	1	2	3
Other Backward Class	5	7	12
Grand Total	15	15	30

2.1.2 Economic inequalities

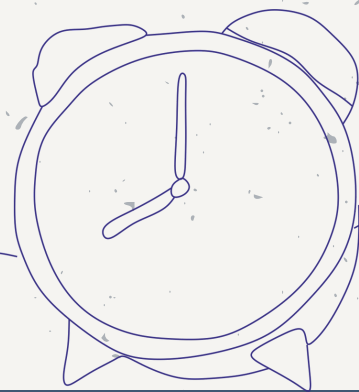
Household Poverty appears to have played a significant role in increasing the girls' vulnerabilities. An overwhelming majority (approximately 86 percent) of the respondents belonged to low-income households and only four (4) girls interviewed (approximately 14 percent) appear to be from middle-class families, as the occupation of their fathers were related to property and jewellery.

In both Rajasthan and Andhra Pradesh, girls' parents were engaged in low-income occupations such as daily wage labour (house painting, car repair, in soap and stone factories, mines, rag picking, masonry work) or were running small provision stores or trades (grocery, bangle, tea kiosk, chicken shop) or were small farmers.

Due to the tough economic situation of their families, four girls were forced to work as child labour and even sold to gangs of pick pocketers by their families (one in Rajasthan and three in Andhra Pradesh). Two girls in Andhra Pradesh started working as wage labourers when they were approximately eleven and thirteen years old respectively. Another girl from Rajasthan had never attended school and started working in her early childhood.

Shravya (currently 18 years) from Andhra Pradesh was looked after by her paternal grandmother after her parents died. During her interview she shared that in order to feed her grandmother and herself she worked on construction sites, laying roads and also worked for a daily wage in agriculture.

Meena (currently 15 years) from Rajasthan was the fourth of seven children in her family. Her three brothers worked in the mines. She was forced to work as a child labour in a cotton factory by her brother-in-law who took her to Rajkot. She shared *"I started working at a young age and never attended school; I used to work from 8 o'clock in the morning to 5 o'clock in the evening.....This was my daily routine and I never had a chance to go to school, make friends and have fun playing. I had to work and earned Rs 200 per day, so that my family and I could survive."*



CIRCUMSTANCES

Poverty was so extreme in one family, that the respondent's mother was forced to become a commercial sex worker to make ends meet and later left the family unit altogether. Further disintegration of the family unit due to poverty was aggravated due to money wasted on buying alcohol. This was seen in the case of Swetha (currently 17 years old) from Andhra Pradesh, who only studied up to Grade 2. Her family consisted of four members (father, mother, the respondent, and her elder sister). She said that:

“

“My father was working in a hotel as a daily wage labourer and my mother adopted prostitution to meet the economic needs of the family. My parents quarrelled a lot over this issue. My father was also an alcoholic and was very disruptive at home. When I was seven years old, my mother eloped and left the house. This incident disturbed me a lot and I felt very sad and cried a lot for my mother”

Swetha, Andhra Pradesh

”

Another adolescent girl, Neeraja from Andhra Pradesh shared that *“My mother sold me to a gang of pick pocketers. I was very small. We were 8 girls and 2 boys in the gang. My mother used to visit us occasionally and collect money from them. They used to beat me if I didn't steal money. I didn't know how to steal. So, I used to beg and give them money”*.

2.1.3 Natal family life

Sixty percent of the adolescent girls reported living in difficult family environments. A third of the girls reported that they were orphans or belonged to single-parent households. In Rajasthan, one of the girls had lost her mother early in life while in Andhra Pradesh, four girls had lost their both their parents in childhood, while five girls had single parents. Parents had either committed suicide or died of ill-health (heart attack, HIV-AIDS, alcoholism, etc).

CIRCUMSTANCES

The normalisation of violence in everyday life was brought forth in many of the narratives shared by the adolescent girls. In Andhra Pradesh, four girls had witnessed physical abuse and violence by their fathers on their mothers. Seven (7) girls reported that their fathers were alcoholics. In Rajasthan, out of fifteen (15) girls participating in the Study, twelve (12) girls talked of witnessing violence in their natal homes.

Many girls interviewed did not share or report about any family issues but their narratives point towards a general lack of communication with family members on adolescent issues and relationships. In Rajasthan, only two (2) girls shared that they confided about their relationships with their sister, mother, or aunt, but did not receive any favourable response from them. Girls also faced restrictions regarding their mobility and choices about their schooling given the constrained social environments and limited resources available in the family.



Difficult family situations

Violence

Physical abuse

Alcoholism

Disrupted Relations

2.1.4 Lack of educational opportunities

Four girls (13 percent) had no formal education amongst the sample adolescent girls. The majority (87percent) of the respondents had attended school but had discontinued education before completing their school education. In Rajasthan, only one girl had completed her secondary schooling and in Andhra Pradesh, only two girls had studied up to intermediate (Grade XII).

TABLE 4: EDUCATIONAL STATUS OF THE RESPONDENTS

Educational Status	No. of girls in Rajasthan	No. of girls in Andhra Pradesh
No schooling	2	2
Grade 2	-	2
Grade 3	-	1
Grade 5	1	1
Grade 6	-	1
Grade 7	3	-
Grade 8	7	2
Grade 9	1	2
Grade 10	1	2
Grade 12	-	2
TOTAL	15	15

In Rajasthan, most girls discontinued their education at the upper primary level. Six (4) out of the fifteen (15) girls had dropped out after completing Class VII, while two (2) had never been to school. The main reasons reported for dropping out of school were the distance of schools, early marriage, burden of domestic work, and forced child labour.

CIRCUMSTANCES

Geeta from Rajasthan said:

"I attended school in my village and completed Class 8th. I could not continue after that since there was no Secondary school in the village. My parents were not keen to send me to a school which was at some distance from home"



In Andhra Pradesh as well, two (2) never attended school, five (5) girls dropped out at the upper primary level and two (2) dropped out after high school. The various reasons cited for leaving school early were forced child labour due to economic difficulties in family, ill health or death of a parent, love affairs, sexual exploitation, early marriage, and lack of interest in studies. Sravya (currently 18 years) from Andhra Pradesh studied only till Grade 6. She discontinued her education when she lost both her parents (mother died of cancer when she was six and her father due to HIV/AIDS when she was 12 years).

Four (4) girls from the two States had never been to school. One of them, Mani from Andhra Pradesh, was a girl with disability and her parents decided not to send her to school because of her disability. She narrated that *"My family saw me as a waste, they did not believe I had to be sent to school as I had no future because of my disability. They felt and constantly told me that I was worth nothing and was only a burden on my family and it was their misfortune that I was born to this home"*

Jeevani from Andhra Pradesh also never attended school as she belonged to a very poor socio-economic family and her parents worked as daily wage laborer's and grazed sheep. She would work at home and also take the sheep for grazing. She narrates *"I wish I too had the chance to go to school and study, make friends, rather than spend my childhood with the sheep. At times, I felt the sheep were more free than I was....they could play with each other, run around free and do as they pleased, while I had no friends and had to do what my parents told me to"*

A majority of the girls lived experience in their natal families/with their guardians were of marginalisation, economic, social, and emotional deprivation, lack of opportunities and options, and were marked by a struggle for survival, constant conflicts, and violence. The family situations heightened the vulnerability of these girls while interacting and negotiating their pathways within their communities and transitioning from childhood to adolescence.

2.2 Direct causes-romantic relationships and elopements

A key determinant of adolescent pregnancy and motherhood were romantic relationships and subsequent elopement. By forming romantic relationships and eloping, the girls took a major step to get respite from familial controls and fulfilled a need for emotional support outside the family.

Other important reasons for elopements mentioned by the adolescent girls interviewed were unpleasant conditions in their natal homes, restrictions on mobility, disapproval of male friendships, lack of autonomy, being forced to get married to somebody against their wishes, and conflict within the family. From the interviews, the researchers noted that parental surveillance on adolescent girls is a strong factor compelling the girls to not only elope and choose their own life partners but also offered them an opportunity to assert their individuality and choose a life of their own.

Besides family situations, poverty also appears to have been a consideration for the adolescent girls interviewed to initiate any relationship that offered hope of escaping their current situation. Eighty percent of the respondents in the Study had formed romantic attachments at some point in their journeys towards becoming adolescent mothers or becoming pregnant. On further enquiry, it was noted that romantic relationships were formed with neighbours, peers, relatives, and in one case with a tutor.

In all the respondents' narratives, the men were older than the girls. In Andhra Pradesh, age disparity was higher and fifty-three percent (53%) of the men were above 25 years of age (four of these were in the 30 -39 age group). Furthermore, many of the men (47 percent from Andhra Pradesh) were already married and had children as well. Thus, besides flouting the provisions of the POCSO, these men were committing bigamy as well.

It is evident that when young girls enter into a relationship with older married men, they are aware that it will not be socially accepted and this constrain their ability to resist sexual coercion. Many of the respondents were willing to continue with these relationships and often left home at the behest of their partners/lovers. For instance, Geeta from Rajasthan shared that *"I attended school in my village and completed Class 7, after which my parents wanted me to get married. I refused so my schooling was stopped, and I stayed at home and did the household chores. I was not allowed to go out alone. During this period, I became friends with an older man (40 years) who lived near my house and he showed me love and concern ...which I had till then never experienced in my home."*

CIRCUMSTANCES

It felt valued for the first time in my entire life and realised I too was worthy of love and affection. My parents were forcing me to marry someone else, who I had never seen or interacted with and therefore, one day, I left my natal home on my own volition. I stayed with my boy-friend for a period of six months in another city before being found by the police”.

In the narratives from Andhra Pradesh, three girls mentioned that they were influenced and encouraged by their peers to form romantic relationships and have secret affairs, which in some cases even resulted in marriage, though this was also illegal since the girls were under 18 years of age and these marriages were illegal as per PCMA.

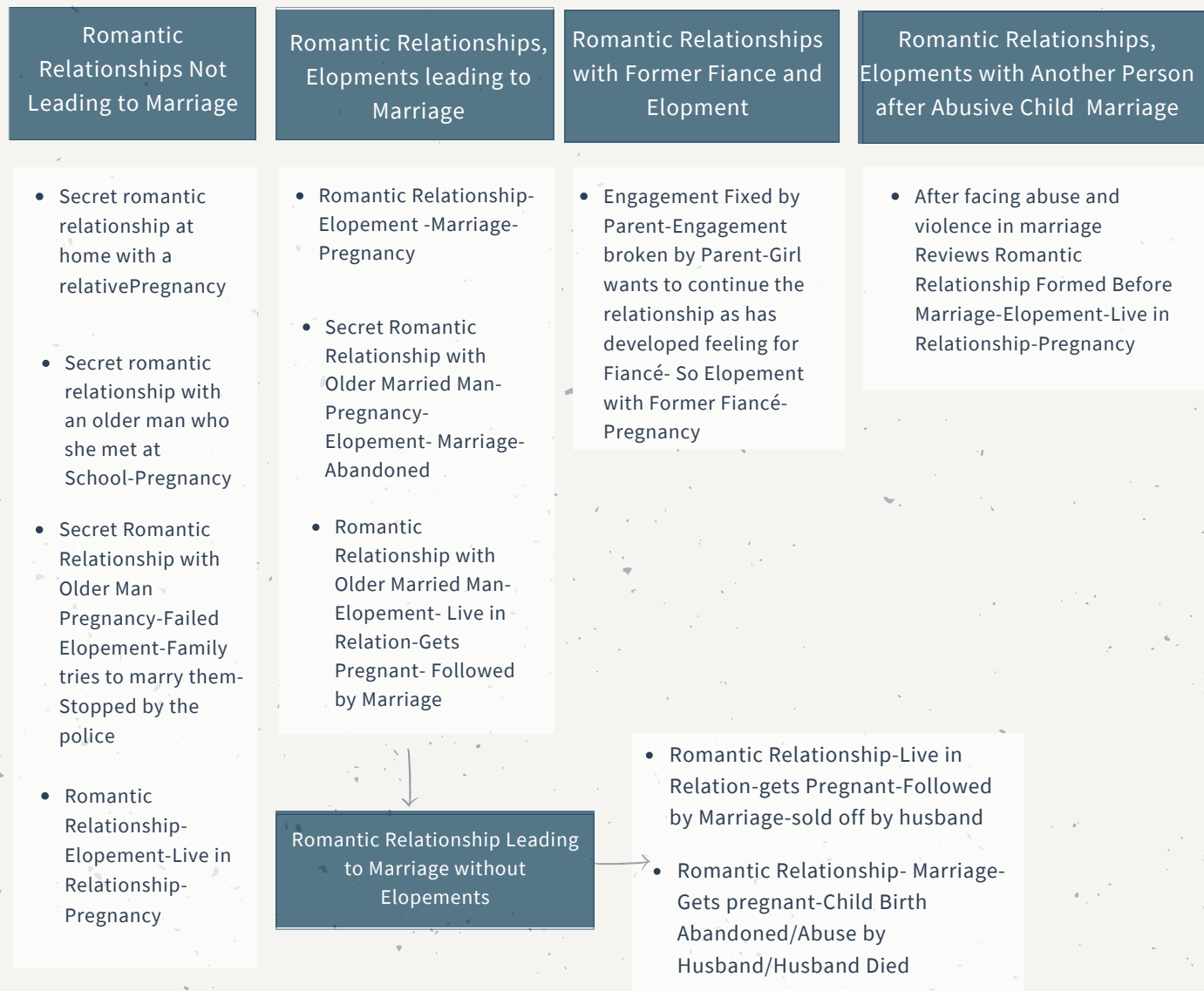
As Hemalatha from Andhra Pradesh shared, *“I developed a romantic relationship with a 24-year-old married man with the encouragement of my friends. He was an acquaintance of my father and visited the family frequently. While we were alone, he expressed his love for me and threatened to commit suicide if I didn’t accept his proposal. I gradually developed a liking for him and encouraged by my friends, who also had lovers, I accepted his proposal. I frequently went out with him and developed an intimate relationship. When I was reprimanded by my parents, I eloped with him to a distant place and married him with the help of his friends”.*

In many of the respondents’ narratives, the men’s families supported them when they eloped or got married. This is reflective of the patriarchal norm in society that does not consider it taboo for men to elope with girls however, the same standards did not apply towards the girls families, for whom elopement was considered a dishonourable act and considered shameful by society.

These romantic relationships followed different trajectories. Some relationships were discovered and nipped in the bud by parents/ guardians, others resulted in elopements and cohabitation and others ended in child marriage without elopement.

From the sample, twelve (12) girls eloped in Rajasthan, and two of the girls got married in a temple after the elopement whilst the remaining entered into cohabitation. In Andhra Pradesh, out of the twelve (12) adolescent girls, five (5) girls eloped, and four (4) of them married partners of their choice, while one (1) was cohabiting. The remaining girls married without eloping. The various trajectories of romantic relationships leading to adolescent pregnancy and motherhood are summarised below pictorially in Figure 2.

FIGURE 2: DIFFERENT TRAJECTORIES OF ROMANTIC RELATIONSHIPS



2.2.1 Romantic relationships not ending in marriage

2.2.1.1 Secret romantic relationship at home/school

Romantic relationships were mostly marked by secrecy and the families/guardians were not aware as per the respondents. In two such instances, the relationships were revealed only when the girls became pregnant, which may point towards neglect on part of their guardians as well as lack of knowledge of sexual reproductive health. One such instance relates to Jeevani from Andhra Pradesh, who never went to school and would help at home and in grazing sheep. She fell in love with her paternal aunt's son, who was 20 years of age. She narrates how he visited them occasionally and that *"It developed into a physical relationship and I never realized I could become pregnant. I started noticing that I was becoming fatter and thought it was because I was sleeping and feeling lazy... I had no idea about missed periods. Then my mother took me to the doctor who confirmed that I was seven months pregnant...This was a huge shock for me and my family. I didn't think I was pregnant and did not know what are the signs of pregnancy. My family were furious after they came to know of the pregnancy and filed a case against the relative."*

The second instance is of Neeraja from Andhra Pradesh. She fell in love with a man (20 years), who was a computer mechanic when she was living in the shelter home. This was during her Class X public examination, where he supplied her answer slips. She managed to meet him frequently in secret, without intimating anyone in the shelter home, except one of her friends, till it was discovered she was pregnant, and then she underwent an abortion. She narrates *"It was only after I became pregnant that I was told by the doctor about contraceptives and how they are used. I have heard ads on radio before that but never understood what they were for. None of my friend had any knowledge. Had I known about these, I would have insisted we use them and I would not have had to go through the abortion, which was a very difficult experience for me."*

These two stories clearly reflect the lack of basic knowledge about sexual and reproductive health, including use of contraceptives amongst the respondents.

2.2.1.2 Difficult romantic relationship

The respondents shared that when their families became aware of the relationships, a significant majority of the families tried their best to end the relationship. This however had a limited impact, as the respondents informed the researchers that they either continued the relationship in secret or made plans to elope.

Kavya from Andhra Pradesh fell in love with Vinod, a 26-year-old van driver. She continued meetings with him though her relationship was not accepted by her family. She recounted to the researchers how she made a plan to run away from home with Vinod in order to get married in a temple, but how her family discovered the plan and stopped her. Nevertheless, she secretly continued the relationship. She narrated how she felt sick and went to the doctor with her family members to discover that she was pregnant. This led to conflicts between the two families, who then finally decided to get the two married but were stopped by the police since the girl was a minor. At this juncture, both Vinod and Kavya attempted suicide. Kavya's family forced her to file a case against Vinod, who was jailed as she was a minor when she got pregnant and Kavya was admitted into the shelter home.

Kavya narrates, *"We both were in love, we wanted to be together no matter what. Our families tried everything to stop us. We tried to run away but there was police involved. The whole love story was difficult for both of us and we both are suffering now...I hope no one makes the same mistakes as me, nor has to face the same situation as me"*

2.2.1.3 Romantic relationship, elopement and cohabitation

In some instances, irrespective of the fact that families are aware or unaware of the relationship; girls eloped since they believed their families would not approve of inter-faith, inter-caste choice of partners as this would lead to family conflicts. Fatima from Rajasthan shared *"My boyfriend is Hindu. He lived close to my parent's house and worked in a marble factory. I left home with him as my parents did not approve of my friendship with a Hindu boy. His family supported me when I left home, but my family filed a case against him. My family does not understand I love him, I don't care about his religion. My parents are ignorant and do not understand what our love means"*

CIRCUMSTANCES

Another common reason, for girls to take a decision to elope was due to their families forcing them into arranged child marriages against their wishes. In Rajasthan, five of the respondents eloped out of their own volition when their families attempted to force them to have an arranged child marriage. All of them were already in secret relationships and the girls eloped and entered into live-in relationship with their partners. For instance, Reena from Rajasthan said:

“

“I studied till Class 9 in my village. Along with my studies, I also helped in the housework at home. My parents wanted me to get married to a boy of their choice. But I liked a boy whom I had met at a relative’s wedding. He was handsome and funny, I wanted to get married to him. I would speak to him regularly over the phone. At times secretly, so that no one would get to know. Finally, when the pressure for getting married to the boy of my parents’ choice was becoming too much, I left home with my boyfriend and lived with him for seven months before the police found us”.

Reena, Rajasthan

”

2.2.2 Romantic relationships ending in child marriage

2.2.2.1 Romantic relationships followed by elopement and marriage

Another trajectory revealed by the interviews was elopement followed by child marriage with their chosen partners (even though the marriage remains illegal as per PCMA). This happened in the instance of four of the respondents (one from Rajasthan and three from Andhra Pradesh). For instance, Sunitha aged 15 years, from Andhra Pradesh had a secret romantic relationship and eloped and married her chosen partner when her family mistreated her. She shared that *“I fell in love with Raju. He used to buy me cold drinks and make me laugh with his funny jokes and impressions of actors. My friends told me that they liked him and he was a perfect match. Unfortunately, someone saw me with Raju and complained to my family. After that, I faced hostility from my relatives as I was the heir to my mother’s property.*

CIRCUMSTANCES

My relatives sprayed pepper into my eyes and set fire to the room in which I was sleeping. I was rescued by one of my classmates. After this incident I ran away with Raju, married him and lived happily with him for some time. I found solace and comfort in the company of Raju. However, I was traced and brought back home, only to be subjected to verbal and physical abuse. I ran away again from home only to be brought back again, then I became pregnant and was forced to abort the baby in the third month of pregnancy. My family also filed a case against Raju”.

2.2.2.2 Romantic relationship, followed by pregnancy, elopement and marriage

Another trajectory noticed was pregnancy being followed by elopement and marriage. Two (2) girls from Andhra Pradesh continued their romantic relationships with older married men secretly until they became pregnant. These instances reflect the vulnerability of the girls to older men's advances as the age differences here are very stark. The girls asked their partners to marry them when they became pregnant and so, they eloped and got married, even though this flouted the PCMA Act and the partner could be booked for rape.

Sravya shared that she started her relationship when she was 12 years and she continued her relationship with a married man (35 years old) despite facing a social boycott from the neighbourhood. She did this as she felt he was a good man and would provide her with a secure future. The man had promised her that he would leave his wife and children for her. One can assume that since Sravya was an orphan and was working as a child labourer, this relationship provided her with an opportunity for social and economic stability. She said “



“I developed a relationship with a married man from a different caste and a father of two children. I faced social boycott in the village because of this relationship so we moved to another city to continue our relationship. On getting to know I was pregnant, I asked him to marry me and we were married with the support of my sister in law who gave us shelter for few months. We lived together till his first wife filed a police case and he was sent to jail”

Sravya, Andhra Pradesh

In another instance Anupama from Andhra Pradesh said she developed a romantic relationship with a married man, at the age of 13 years and her family was unaware of this. She was learning tailoring and fell in love with her tutor who was 35 years old. He was already married but he did not have any children and she felt sad for him and slowly became close with him. She developed an intimate relationship with him and became pregnant. When she became pregnant, she compelled the tutor to marry her and they eloped and got married. They set up a separate family and stayed happy for few months, till her parents filed a case of kidnapping. After the case was filed, the tutor was sent to jail while Anupama was sent to a home where she delivered a baby girl. After her delivery, she met her husband in court and asked him to take her home along with the baby. However, he was very angry and said that the daughter was not his. This made Anupama very angry and she hit him with her shoe in front of everyone. Since then she has never seen him nor does she know about his whereabouts. Anupama stayed in the shelter home till she turned 18 years of age and then moved to live near the shelter home. Her daughter who had turned seven was studying in an English medium school, sponsored by the ex-warden of the home, who continued to support her. Anupama was earning money by tailoring clothes for the shelter home and making jute bags. She hoped no one would make mistakes like her and end up with no family to share her sorrows and happiness.

2.2.4 Romantic relationship leading to child marriage

Reflecting the acceptance of child marriages within communities, many families in Andhra Pradesh were agreeable to the romantic relationships or proposals the girls received and three (3) girls were married to their lovers with their family's consent, while 1 (one) marriage occurred with the help of a sister in law. Ramani from Andhra Pradesh belonged to a single parent family and her father was very violent and an alcoholic. She said that:

"I loved and married an auto driver (approx. 26 years) at the age of 14 years when I was working in a prawns processing unit. Coming to know about my love affair and marriage, my relatives and brothers again performed my marriage with the same boy who bore all the expenses related to the event. Initially my husband looked after me very well and I gave birth to a baby boy. However before long, his behavior changed for the worse and he threw me out of the house on charges of infidelity and kept my child. I was four months pregnant with my second child when this happened. After this incident I fell and had a miscarriage. While on my way to Chennai on a train I met a lady, who pretended to help me and convinced me into commercial sex work".

Ramani, Andhra Pradesh

2.2.3 Romantic relationship with a fiancé through child marriage and elopement

As seen above in many of the respondent's narratives, romantic relationships led to child marriages which are illegal as per law. Many girls were getting married out of their own choice and with the involvement of their families. However, in the remaining narratives, child marriages were arranged or being broken by families, without consulting the adolescent girls.

In two instances in Rajasthan, child marriages were fixed and broken off by parents due to various reasons. Both the decisions were taken without any consultation with the girls. However, (highlighting a new trend), the girls had fallen in love with their fiancées and they did not want to break the relationship. Girls complained about the fact that parents took a unilateral decision to call off their engagement while they did not want to do so. The affected girls often felt that parents are being unjust in asking them to shift their emotions from the 'husband'/'fiancé' to another boy. According to Bela, her parents wanted to break the engagement/ gauna^[7] to get a better match for their son under Atta- Satta^[8].

Bela from Rajasthan shared that, *"I was married when I was barely 12 years old along with my older sister. The marriage was not consummated. I used to visit my marital home whenever there was some function or work. I enjoyed going there and was treated well, given gifts and tasty food. I had met my husband a few times and found him kind. Later, my father decided to get my marriage annulled, as he wanted to fix the marriage of my brother under Atta Satta arrangement; and get a daughter in law in exchange. But I did not want the marriage to be annulled. There was a conflict and I was sent to my maternal uncles' home. I connected with my husband who was working in Surat. He came to take me from my uncle's house, and I went to Surat with him. I spent about 6 months with my husband before being caught by the police".*

[7]A girl's marriage may be fixed before she attains puberty and if this is the case then the girl stays with her natal family. Only after she attains puberty, the bridegroom is invited to take her away. He comes to take her away and the ceremony to mark the occasion is called 'gauna'.

[8]Atta Satta: a practise wherein a pair of siblings- a brother and a sister- are married to another pair of siblings. A daughter and son are married into a family from where a daughter-in- law and son-in-law are obtained.

2.2.5 Arranged child marriage leading to elopement with former romantic partners

In Rajasthan, five of the adolescent girls interviewed shared that child marriages were arranged by parents and that they had little choice in the matter. It was apparent that adolescent girls continue to be treated as commodities with no say in decision making about their marriages. Despite a dowry culture existing in India, the researchers were informed of instances wherein a 'bride price' was paid to the parents of the young adolescents' girls interviewed. This is a form of 'commodification' of girls wherein there is a monetary transaction between families and the girls are married in return for money. In such cases, parents were reluctant to take back the girls, as the money would have to be paid back to the boys' families.

Anamika from Rajasthan shared that, *"My father was an alcoholic and this led to fights between my parents. My marriage was fixed when I was 16 years of age and I was married along with my brother in an Atta satta arrangement. My father took money from my husband's family. I was sent to my in-law's house immediately after marriage where I soon started facing a lot of physical and mental violence. My husband was also an alcoholic and was violent. When I protested against the violence, I was abused and reprimanded. I cried a lot and requested my husband to let me speak to my mother but she did not help. I also did not get any support from my sister-in-law. During this phase I passed through a lot of trauma and stopped eating food; I starved for 5-6 days"*.



In Andhra Pradesh, Chandini received a marriage proposal during one of the family marriages that she attended, when she was 15 years. Her father compelled her to accept the proposal and thus she got married. Later she came to know that her father had taken money from the groom who was a person with a disability and had a criminal record. She was unable to develop a physical relationship with him. She said *"I refused to sleep with him or to live with him. Because of this he scolded and beat me up a lot with his belt and injured me a lot and also kept me under house arrest. He doubted me and quarrelled regularly over each and everything. I escaped with the help of neighbours and reached my home only to face more abuse there"*

CIRCUMSTANCES

Four (4) girls from Rajasthan and one (1) from Andhra Pradesh eloped, with their boyfriends, after they were married, to escape situations of abuse. For instance, Anamika after returning to her marital home was unable to bear the daily mental and physical violence. She recalls:

“

“I decided to leave my husband’s house for the second time. I called a friend of mine for help and asked him to give me shelter. I stayed with his sister for one month. My mother knew that he was my boyfriend and that I was interested in marrying him. She had told me that she would arrange my marriage to him once my first marriage was annulled. Thereafter, it was decided that the marriage would be annulled by community elders and divorce proceedings were initiated by mutual consent of the families.

After the divorce, I was not keen to go back home with my parents, but my mother persuaded me to return home under false promises that she will definitely get me married to my friend. But I soon realised that my parents will not let this happen and so I decided to leave my natal home with Rs 200 and reached my boyfriend’s sisters house and stayed there for two months. I got married in a temple and started living with my husband. When my parents came to know about this, they registered a FIR accusing my husband of abduction and child marriage. They also produced relevant documents to prove that I was underage.

The police came and apprehended both of us and took us to the police station. My parents came to the police station and my mother accused my husband of indulging in black magic, enticing me to leave home. The police arrested him, and I was asked to give a statement against him. I refused to do so and reported to the Police Inspector that I was not abducted but had left home of my own volition. However, my father bribed the police personnel and my husband was put under remand and kept in jail for two days. He was constantly threatened in the police station with dire consequences. I was also threatened by the police that if I did not go back to my parents, they would put me in jail too. When I refused to go back home, I was sent to the shelter home”.

Anamika, Rajasthan

”

CIRCUMSTANCES

Anamika's trajectory from an annulled forced child marriage to elopement with a man she loved and being forced to go to the shelter home is testimony to the immense amount of difficulties and violence adolescents in these dire circumstances face.

2.3 Abuse, Violence, Exploitation, Trafficking, Sexual Assault

During the interviews, adolescent girls spoke of increasing sexual violence against women in society and felt that girls were not safe in their own homes. The girls in both States shared that *"parents hit girl children and do not think this is wrong"*, and that *"being beaten is a common practice for a girl child"*. Violence in one form or another whether physical or verbal or both was experienced by all those interviewed.

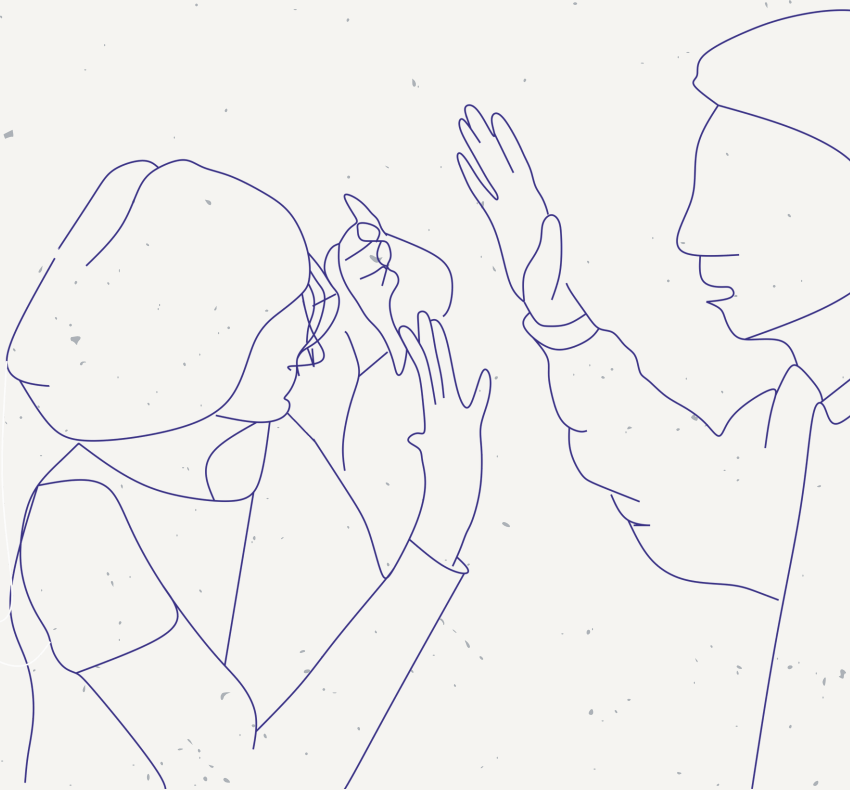
Respondents faced abuse and violence both within their natal and marital homes and a few were victims of trafficking and sexual assault, which in some instances resulted in unintended pregnancy and motherhood (five girls, translating to 16.6 percent of the sample).



2.3.1 Abuse and violence after child marriage

The narratives recorded in the course of this Study clearly show how child marriage has had a negative impact on the adolescent girls and has propelled them to leave their marital as well as their natal homes. After marriage, the respondents shared that it is expected that girls will adjust in their marital homes and not complain in case there are any problems. They shared that parents feel that they have fulfilled their responsibility by getting their girls married off and girls should adjust to their new home situation. These narratives attest to the continued social acceptance of violence against girls and women.

In the fifteen (15) cases of child marriage reported in this study, a significant majority (86.6 percent), faced abuse in their marital homes. In Andhra Pradesh, six (6) of the nine (9) girls married as child brides faced abuse after marriage (including abandonment) while in Rajasthan, every girl married by their parents as child brides, faced abuse and verbal and physical violence in their marital homes. Some were even trafficked or forced into commercial sex work or abandoned by their spouses on charges of infidelity.



Deepa from Rajasthan shared that:

“Soon after marriage, my mother-in-law and sister-in-law started abusing me verbally. My husband was also physically violent with me, if I woke up late, they did not serve food on time or if the food was not tasty. One day when I was bathing, my husband forcefully entered the bathroom and dragged me out naked into the open courtyard of the house. He abused me in front of his father & mother and other family members”

Deepa, Rajasthan

Neela from Andhra Pradesh who is an orphan fell in love at the age of 13 years with a person much older than her and got married to him. She said, *“Till one year the marriage went well and I was treated well. However soon after the birth of my girl child, I was subjected to very cruel treatment by my husband and also by my in-laws. I was compelled by my sister in law to enter into commercial sex work. So, I ran away from that home (after the death of my alcoholic husband) with my 18 months old child, and approached the CWC”*

2.3.1.1 Natal families lack of support when girls face trouble/violence in marital homes

Unable to take the daily violence in their marital homes, five (5) of the respondents, protested and returned to their natal homes. They turned to their parents for support however, they narrated that support was not forthcoming. Instead, girls were pressurized to go back to their husbands. The fear of bringing ‘dishonour’ and indignity’ to the family was a primary concern of the parents. Any form of protest led to further violence, even at the natal home. Deepa from Rajasthan recounted that, *“Soon after the abuse, my father reached my marital home and brought me back to Jaipur. My father was also violent and told me that I had brought dishonour to the family. My parents took me to many Bhopas- local faith healers, for treatment, and to rid me of evil spirits that they felt were influencing my thoughts. They also continuously pressured me to go back to my husband”*



CIRCUMSTANCES

Anamika expressed her angst at not receiving any support from her parents, despite being ill-treated by her husband and in-laws. She shared that, *"One day after being beaten up badly, with the help of a neighbour's daughter, I was able to speak with my father. I was disappointed when he told me that I am no longer his responsibility and he was not concerned with how I was being treated. However, my mother visited me; but the family locked me up and did not allow me to meet her. My mother wanted to take me back but was helpless, as my father had taken one lakh fifty thousand rupees from my father-in-law. I stayed at my in-law's house for a period of three months after this incident, after which I decided to leave and run away. I left the house one early morning on pretext of going to the toilet. When I reached my parents' home, I was forced to go back to my in-laws; even my mother insisted that since I was married, I should go and stay with my husband. I returned to my husband's house where I faced the same brutality again every day. Unfortunately, none of my family members called me up or visited me after this and I was left to deal with all the violence alone- there was no one to protect me and I was at my husband's mercy"*

In another instance, after Chandini returned to her natal home, she faced physical violence and an attempted rape by her father. Chandini shared that her father took good care of her initially but after few days, beat her a lot and under the influence of alcohol attempted to rape her. She said:

“

"I pleaded with him 'please father doesn't spoil me. I am your blood. I am your own daughter. So, then he left me alone. He knows he has an HIV infection. Following this incident, I left home not knowing what to do".

Chandini, Andhra Pradesh

”

Chandni subsequently approached the police who then sent her to the shelter home.

2.3.2 Trafficking by Family Members

Sarla's story provides evidence that often girls are trafficked by their own parents. Sarla was sold off to an older man in exchange for money. She shared:

"One day when my mother verbally abused me, I left home and went away with my boyfriend. I was away for 18 days and then returned home as I felt that my parents will harm the boy. When I came back, my parents sold me off to an older man (my brother-in-law's cousin) and took money in exchange. They forced me to go with him to his village. The man was already married; I was forced into having sexual relations with him. When I resisted, there was violence. I pleaded with the man and his family to let me go, but was told that they had paid money for me and that I was their property"

Sarla, Rajasthan

2.3.3 Abusive secret relationship

Two of the respondent's narratives from Andhra Pradesh reflect the vulnerability of young adolescents as they enter into relationships hoping for security and safety. They both stated that they entered into relationships with older married men because they were convinced by the men that they wanted to have children with them.

Mani, a girl with an intellectual and speech impairment who had never attended school shared her experience. She fell in love with an older married man (approx. 39 years) with no children. His wife was suffering from a health issue and he expressed his love towards her. He was residing next to her house, so she went to his house and performed all the household work in his house. He promised Mani that he would marry her and was keen to have children from her. Their relationship becomes very strong and she regularly met him without telling her parents. They frequently met outside his house as well. His wife also knew about their relationship. She too compelled Mani to cohabit with him and asked Mani to help her in household activities. Mani said:

CIRCUMSTANCES

“If I refused, they would beat me a lot for not helping and cooperating, even though I was helping him and his wife. During this period, I began vomiting so my parents took me to the doctor where I realized that I was pregnant (4th month). My parents came to know about the relationship between us. My father shouted and beat me a lot and tried to kill me, but my grandparents saved me”

After this incident Mani's parents filed a case against the man, who was arrested, but he denied their relationship and at 12 years of age, Mani entered the Shelter home.

2.3.4 Girl trafficked for commercial sex work

Girls in vulnerable situations are in danger of being exploited by criminal elements and this is reflected in Swetha's narrative who found herself alone and got trafficked in the process. Her parents were separated and Swetha shared that due to disputes with her father she tried to seek shelter with her mother and stepfather, but when they encouraged her to become a commercial sex worker, she escaped and tried to go back to her father's house. However, her father had left the rented house he lived in and she was unable to find him. She decided to take a train to Tirupathi and during her journey met Chinna a 20-year-old man who approached her and convinced her to accompany him. Later she came to know that he was married and had two children and was a petty thief stealing from passengers in trains and railway stations. She started living with this man in his sister's house (a brothel owner). When she became pregnant, she asked him to marry her and they got married in a temple. He convinced her to abort the baby, which was very painful for her, but she was happy with him and said *“my marriage life was quite happy and the days which I spent with him are the most memorable in my life and I love him a lot”*. However, one day he left home and never came back. She came to know that he had sold her to the brothel owner, who compelled her to become a child sex worker. She escaped from the brothel and began searching for her husband but couldn't find him. She said, *“I realized that he had cheated me- I will never believe any male in the future”*.

2.3.5 Sexual assault by family member

The lack of safety of girls within their natal homes is reflected in the narratives of two girls who suffered sexual abuse and assault at the hands of family members. In Rajasthan, Radha was sexually assaulted by her biological father and in Andhra Pradesh, Jahnvi was sexually assaulted by her stepfather on numerous occasions. Radha from Rajasthan shared:



My mother died when I was very young. I lived with my father whereas my sister went to live with my paternal grandmother. I studied till Class 8. I used to do all the housework. When I was about 14 years of age, I was raped by my father. I became pregnant and delivered my son at home. One day my father took the new-born child away from me with the intention of killing him. He was seen by the neighbours who reported the matter to the police. My father was arrested and sent to jail. I was brought to the shelter home where I have been residing for the last 2-1/2 years and now my son is three years old. My grandmother has come to visit me here once"

Radha , Rajasthan



Jahnvi from Andhra Pradesh said her mother married a young man when her father passed away. She was placed in a hostel where she was often dropped and picked up by her parents. When she was studying in Grade VI, her stepfather often came to pick her up, to take her home during the holidays. On one such day, he stopped her on the way, took her into the fields, held her hair, beat her, and sexually assaulted her. This happened many more times. He threatened to kill her if she told anyone. She shared, "Over a period of time, my dresses became tight, I did not get my regular menstrual periods, had fever, used to vomit frequently. I used to take the tablets supplied in the hostel. However, my mother became suspicious and took me to the hospital. I was tested and was declared six months pregnant. My mother asked me who was responsible. I said, 'Daddy did this to me'. She immediately called him and filed a police complaint. I was sent to the shelter home. After this incident my mother left him".

2.3.6 Sexual assault by neighbour

The lack of safety and vulnerability of girls in their communities and the risk they face within romantic relationships is reflected in Poornima's narrative. Second of three siblings, she studied up to Grade VI and left her studies because her father died due to excessive alcohol intake. Poornima helped her mother in the household chores and worked as a daily wage.

CIRCUMSTANCES

She shared that when she was approximately 16 years old, she developed a friendship with an auto driver in her village. One day he suddenly raped her. Another day, a person named Venakta who was 25 years of age seized her and closed her mouth with a cloth (chunni) and raped her twice in the fields. She said, *“He threatened me that if I revealed the incident to anyone ...he would kill me and because of fear I did not share this with anyone...One day I had severe stomach pain and when I consulted the doctor, I was told I was 6 months pregnant. I filed a case on both the auto driver and on the other person”*.



After her complaint, the village elders apparently held a discussion and decided to make sure that the culprits gave her some money as compensation. The auto driver gave some money, but the other person didn't. So, she went to the police and lodged a complaint. She doesn't know who the father of her child is. In the end, she took recourse to the law, but her story also highlights how young girls are unaware of their rights and have no protection in situations of abuse and violence.

2.4 Officials views on why adolescent girls end up in shelter homes

Besides interviewing the girls and recording their insights first hand, the Study captured officials' perceptions of why adolescent girls ended up in shelter homes. According to CWC members and superintendents of the Shelter homes, only about five percent (5%) of the cases that are brought to the CWC relate to child-marriage. As per the officials interviewed, in a majority of these cases, the girl does not want to marry the groom her parents have found for her and they run away with a third person. One member said *“they do not want to get their marriages annulled. If they want to annul their marriage, CWC is ready to help”*^[9]. For some girls, the shelter home was a safe space, as a CWC member shared, *“There was a girl from Pali, whose father had got her engaged when she was a child. Then, when she was about 13 years old, her brother wanted to her to get married to another boy from where he was getting money. She refused and ran away. She came to shelter home and lived here for about 5-6 years, till she turned 18. She then went to the boy to whom she had been engaged to and is currently living with him in Pali”*

[9] PCMA provides that a child marriage can be annulled by the girl within two years of her reaching the age of 18 years.

CIRCUMSTANCES

The most common reason for girls leaving their natal homes was 'elopement'^[10]. A district official estimated that elopement cases constitute about 40-50 percent of the total cases while another CWC member estimated that *"90 percent of the cases are of girls who have eloped with boys"*. A Counselor in Rajasthan also corroborated the above view and said that, *"The majority of the cases in the shelter home are 'love cases'. They do not understand what is good or bad for them. They do not understand whether the boy is worthy of them or not. Most of the girls get fooled into having sexual relations with the boys. They do not understand what they are getting into and get fooled"*.

Officials also shared that young people were getting involved in inter-caste and even inter-religious alliances which were not accepted by parents. In the case of inter-caste relationships, a Superintendent shared that *"girls demand that they be provided with guards when they leave the shelter home as they fear violence"*. The use of mobile phones helped youngsters to maintain their relationships. According to officials, girls are likely to elope because of sexual attraction; or for emotional support or affection; or by getting influenced by television programmes.

The officials also mentioned home environment as being a major factor for these relationships being formed. One official mentioned that there *"is a communication gap between the girls and their parents today. The girls feel that the parents do not understand them. They don't get love from their parents and families"*. Another Superintendent was of the view that lack of literacy among parents was a big factor. S/he opined that *"because parents are uneducated, and belong to the lower economic strata of society, they are unable to provide a conducive environment to their children"*. According to the officials the majority of the girls belong to lower socio-economic backgrounds but they highlighted that *"we also come across some cases where girls belong to the upper caste and are from the well-to-do families"*.

According to the interviewed officials' girls from both rural as well as urban backgrounds elope with young boys and older men. They stated that girls from rural areas were more open about their relationships than girls from urban areas. Girls from urban areas were more likely to blame their parents for ill-treatment.

[10] The researchers were informed by CWC members in Rajasthan that girls are nowadays called 'palayanis' instead of the term 'bhagvaiya' / 'bhagori' to describe the girl who runs away with a boy.

CIRCUMSTANCES

CWC members, superintendents, DCPO^[11] and Counsellors views in Andhra Pradesh on why girls elope were mostly very similar to their counterparts in Rajasthan. There is only a slight difference as the officials from Andhra Pradesh, have given greater importance to family background and socio-economic conditions as compared to their counterparts in Rajasthan. A comparison is shared in Annexure III.

Researchers noted that most of the officials were sympathetic to the girls situations and were of the view that the restrictive home environments were not conducive for girls growth and development. They opined that whilst looking for emotional support- the girls were “duped” by the boys/men who had encountered in their lives. However, a few of the officials seemed to reflect the prevalent societal views about the girls in the shelter home and as per the interviews conducted, and blamed the girls for their predicament.

2.5 Summary

In summation, it is noted that in both the States, due to a fast-changing social context, there is a divergence in the way adolescents and their families perceive friendships with the opposite sex and love marriages. There is clearly a crisis and an inter-generational conflict, as well as oppositions and inherent contradictions between what is perceived as ‘modern’ and ‘traditional’ values. This conflict is also apparent in the views expressed by the officials.

In Andhra Pradesh, the researchers note that most of the girl’s situations reflect acute deprivation due to poverty, with their basic needs not being unfulfilled, which leaves them in positions of vulnerability. To escape these vulnerable situations girls are taking steps to secure their future. Girls are reporting they are in love; however, one must acknowledge the age differences between the partners and the girls (girls as young as 12-13 years choosing men in their late thirties) and the fact that many of the men are already married, which leaves them in very vulnerable situations.

[11]DCPO are part of the Integrated Child Protection Scheme (ICPS). The scheme is a central government sponsored mechanism that aims to introduce and implement an effective system of child protection that rests on the cardinal principles of “protection of child rights” and “best interest of the child”. It seeks convergence of the governmental and non-governmental/ civil society sectors for creation of a safety net for children through integration of various preventive, curative, rehabilitation, and protection services. There are wide range of services for children to ensure care and protection of children. These include institutional and non-institutional care and services, child line, foster care, sponsorship, shelter homes, promotion of family-based care, after care programmes, adoption, Health, education, vocational training, development programmes, legal assistance and rehabilitation etc. These services have been delivered at the district level through District Child Protection unit and statutory bodies such as Child Welfare Committee and Juvenile Justice Boards have been actively involved in ensuring protection of children. Adolescent girls are one of the most vulnerable sections of children who come in contact with the child welfare committee. They are at risk for sexual abuse, trafficking, child labour, child marriage, running away from home and other emotional and behavioural issues and require a range of child protection interventions.

CIRCUMSTANCES

One is unable to ascertain whether these are cases of a “love story” gone awry as construed by the adolescent girls or one where false dreams of a better more secure future are offered by men which have set a “romance” in motion. Nevertheless, what is clear is that these romantic entanglements and physical relationships therein are against the law, given the girl in question is invariably a minor who is in a physical relationship with a male member who is a major and above 21 years of age.

Further, the instances of abuse and violence highlighted in both Rajasthan and Andhra Pradesh during the course of the Study also point to the widespread prevalence and the normalisation of violence against girls and women in everyday life of Indian communities. These observations are consistent with findings from numerous researchers (Kalokhe et al., 2016; Verma et al., 2016; Dwivedi & Sachdeva, 2019) and as per National Family Health Survey 2015-16, an alarming twenty-two-point two percent (22.2%) married girls (15-19 years) in India reported that they had experienced spousal violence.

Thus, the circumstances leading to adolescent pregnancy and motherhood are a result of a complex interplay of many factors between the adolescent girls, their natal families, and the boys/men they choose as partners in an environment which is socially restrictive and marked by socio-economic deprivation.



3. PATHWAYS INTO SHELTER HOMES: INSTITUTIONAL CARE AND PROTECTION

Families and girls have taken recourse of the law to file complaints against their partners/ husbands/ assaulters under POCSO, as this Act makes sexual contact in any form with anyone below 18 years of age illegal and punishable under the law.

Sixty-three percent (63%) of the respondents interviewed entered shelter homes based on the first information reports (“FIRs”) lodged by their families. More families (80 percent) from Rajasthan lodged complaints as compared to families (46 percent) in Andhra Pradesh.

A legal official from Rajasthan corroborated that *“it is common for parents to file a (false) case against the boy/man in question, when a girl runs away from home. In 90 percent of cases, it is reported that the girl was abducted by the boy/man early in the morning when she went out of the house to go to the toilet -in rural cases, this is a common complaint”*.



TABLE 5: COMPLAINTS LODGED/ SOURCE OF POLICE COMPLAINTS

Source of Police Complaint	Andhra Pradesh	Rajasthan
Parents/Natal family members	7	12
Family forces the girl to file a complaint	1	-
Marital family members	1	1
Girls files complaint/approaches SH/Police on her own	3	1
First wife of the man the girl has run away	1	-
Rescued by the railway police/police	2	1

3.1 'Rescued' from family's perspective on their complaint

When an adolescent girl chooses to elope (as recounted by many of the adolescent girls interviewed), it is an attestation to the breakdown of relations between the girls and their families. These girls have acknowledged the exercise of their own will in many of the cases noted, however, in the eyes of the law, as the girls are still minors, their families continue to have legal control over them. Families, with the intention of "rescuing the girl" in a vast majority of cases, lodged an FIR subsequent to which, the girls are brought back by the police to their hometowns, once located.

However, it is vital to note and highlight that a majority of the respondents participating in this Study have refused to go back to their parents' home or complain against the men with whom they have formed a relationship when they were brought to the police station. They are thus referred to the CWCs, who then place them in the shelter homes (SH) for care and protection as prescribed under the JJ Act.

As narrated by Reena, "My parents filed a case when they came to know about my relationship. I went to the police station and stated that I had left home on my own choice. The police brought me to the shelter home because I did not want to go back to my parents. I knew I was pregnant before I arrived at the shelter home".

Similar views were echoed by Hemlata who shared "After I escaped with my boyfriend the second time, my parents filed a police complaint. The police caught him, and I went to police station and surrendered of my own accord, in order to reduce punishment for him. I told them I went with him of my own accord. As I was a minor, I was presented in front of the CWC and I told them I wanted to stay with him only. So, the CWC sent me to the shelter home".

“

My parents filed a case when they came to know about my relationship. I went to the police station and stated that I had left home on my own choice. The police brought me to the shelter home because I did not want to go back to my parents. I knew I was pregnant before I arrived at the shelter home. I had bought a pregnancy kit and tested for pregnancy.

-Reena, Rajasthan

”

“

One day, my friend telephoned me to say that my mother was not keeping well and that I should speak with her. I called home, my father got the phone call tracked and came to know my whereabouts. He filed a case against my husband. I was brought to the shelter home by the police as per court orders. I was two months pregnant at that time and giving birth to my child was my choice.

-Arti, Rajasthan

“

“

I eloped and got married to him in a temple. We set up separate family and stayed happy for few months.

My parents filed a complaint following which the man was put in the jail and I was brought to the shelter home through police as my parents refused to take me back home saying that I had ruined the family's reputation

-Anupama, Andhra Pradesh

”

“

After I escaped with him the second time, my parents filed a police complaint. The police caught him, and I went to police station and surrendered of my own accord, in order to reduce punishment for him. I told them I went with him of my own accord. As I was a minor, I was presented in front of the CWC and I told them I wanted to stay with him only. So, the CWC sent me to the shelter home

-Hemlatha, Andhra Pradesh

”

Most girls interviewed in the shelter homes believe that their statement in court, in favour of their partner helped their partner from being jailed; however, under POCSO, the men will be served punishment, even if the minor girl says that entered into a sexual relationship on her own accord. A lawyer interviewed in Rajasthan stated that in such cases the decision is dependent on the inclination of the Magistrate. As per law, the statement of a minor or her consent is not treated as valid and is not admissible in court even if she gives a statement in favour or against the boy^[12].

In the case of Geeta, where a marriage was solemnised under Atta Satta arrangement, a relative complained to the police that a child marriage had taken place. Geeta said *“After marriage I stayed in my marital home for four months. My Jijaji (sisters’ husband) was against this marriage as he wanted me to marry his brother. He informed the police and filed a case of child marriage. Soon after that, the police came to my marital home and I was brought to the shelter home. I was pregnant when I left my husband’s house”*

3.2 Rescue by police

Three (3) of the respondents from Andhra Pradesh who were in extremely abusive situations shared being rescued by the police. One of them was Neeraja from Andhra Pradesh, who was forced to be part of gang of pick pocketers, after being sold off by her parents at the age of five. She tried to escape during a temple fair in Kadapa. She shared that *“I took one of the ‘Uncle’s help and sought his support to reach the police. The whole gang was caught, and I am now in the shelter home and able to join school and continue my studies till Class X”*

Neela who was an orphan ran away from her grand - parents’ house and got married to a 21-year-old boy at 13 years of age. Her sister-in-law encouraged the relationship and she was happy during the first year of marriage. She gave birth to a daughter after which her husband and in-laws starting abusing her and forced her into prostitution by threatening to kill her daughter.



[12]Section 363 of IPC notes- Punishment for kidnapping.—Whoever kidnaps any person from 1[India] or from lawful guardianship, shall be punished with imprisonment of either description for a term which may extend to seven years, and shall also be liable to fine.

Her husband died, after which she managed to escape with her daughter and approached the police pursuant to which she was sent to the shelter home along with her daughter.

Swetha from Andhra Pradesh who had been trafficked and sold off by her husband to a brothel, said that after she escaped from the brothel *“I began searching for my husband but couldn’t find him. While I was searching for him, I was caught by railway police and brought before the CWC. I was checked for HIV which came out negative. I was then sent to Shelter Home. I never shared anything with police about Chinna as they may take action against him. He has children and a wife, and they will suffer a lot if I share anything negative about him”*

The last statement by Swetha reflects the difficult and complex circumstances she was embroiled in, particularly exacerbated by the absence of family support. While, it is difficult to comprehend and fathom, Swetha continued to feel a strong sense of loyalty towards her abuser and tried to protect him despite the fact that he had exploited her.

3.3 Seeking protection of a shelter home

To escape the difficult situations they were in, a few adolescent girls interviewed approached the police or the shelter homes on their own accord. While only one (1) girl in Rajasthan approached the police on her own, in Andhra Pradesh three (3) girls entered the shelter home of their own volition, seeking care and protection. For instance, Sarla, who was sold off by her parents said *“Unable to bear the daily humiliation, I contacted my male friend and came back to my village. I went to the local district court and recounted what had happened to me. I was taken to the police station. My parents were called, and they reported that I was a minor and should be sent home. However, I told the police that I did not want to go back to my parents’ house because I was scared that I will be sent back. The police brought me to the shelter home”*

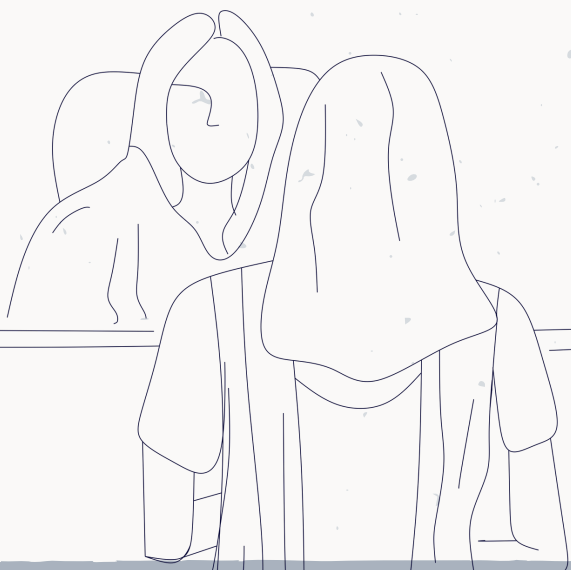
Deepa, during the interview, shared that she tried to approach the police on several occasions to stop the abuse she was facing from her husband and in-laws. However, no effective protection was provided, and the girl’s situation did not improve nor did the police intervene to take action against her case of child marriage. Deepa narrated *“Unable to take this extreme humiliation, I went to the police station and registered a complaint. Only my husband’s elder brother supported me in the matter. When the police came to the house, my husband and parents-in-law were infuriated. After the police visit, I was continually abused both physically and mentally”*.

She sought shelter in her natal home but experienced further violence. She then decided to report her family's ill-treatment to the police but did not receive any support from the police and stated that *"I decided to report the matter to the police and went to the police station to lodge a complaint against the ill-treatment meted out by my parents. The policeman refused to file any complaint. I then went to Mahila Thana, but they too did not support me. One day when my father beat me brutally, I decided to leave home and went to a friend's place in Mansarovar area in Jaipur"*.

Deepa then fell in love with a Muslim boy after which her parents lodged a case against her boyfriend for abduction. Deepa finally sought help from the court and was sent to the shelter home. She recounts:

"I found a job in a showroom and started earning Rs12,500 a month. I stayed there for two months in a PG accommodation. During this time my father sent some men to threaten me. I had a boyfriend who was a Muslim. I had met him through a friend and over time we had become good friends. He used to visit me, and we also shared a physical relationship. When I did not return home, my father reported a case of kidnapping/abduction against my boyfriend. He mobilized the local police to arrest him. He also threatened to get him killed."

When I learnt that my friend had been taken into custody, I went to the police station. I stated that I had left home of my own volition and that my friend had not instigated me to do so. I also told the police that I did not want to go back home to my parents'. My parents came to the police station and my father abused me and called me a 'prostitute' in front of everyone. I was terribly hurt."



During the court hearing, the Judge advised me to go back to my parents, but I refused. I was sent to Shakti Stambh^[13], a short stay home for women by the police where I stayed for 12 days. During this phase, I had a chance to converse once with my friend. I assured him that I will get back to him. Its six months since I have been here and hope to leave this place when I am 18 years old"

Deepa, Rajasthan

[13] Shakti Stambh is a short stay home run by Rajasthan University Women's Association in Jaipur. Women and girls who face any atrocity, including sexual assault, and do not have any other place to live, stay here. They are provided with various facilities and rehabilitation.

The above cases reflect the lack of child protection services for children in need of counselling and care, when caught in situations such as the one narrated above. Minors often have no recourse to the law in cases of abuse by parents or when they have an opposing viewpoint from their families.

Though in some instances the girls were sent to the shelter homes against their wishes, in many cases of abuse and violence- girls found refuge and the institutional mechanism played an integral part in assisting girls in escaping abusive situations and in finding a safe sanctuary.

3.4 Institutional care and support mechanisms

As stated in the preceding section, the establishment and maintenance of shelter homes have been mandated under the JJ Act. In Rajasthan, Government shelter homes for girls are maintained by Child Rights and the Department of Social Justice and Empowerment.

Currently, the CWC^[14] has been constituted in all the 33 districts in Rajasthan, while in Andhra Pradesh CWCs are present in all districts. The CWC has the responsibility of monitoring the quality of all the homes. Children who are in need of protection, are presented to CWC, who then follow the necessary procedure to provide necessary care and protection to children. The CWC members reported that their work is time-consuming and there is a paucity of time due to an overload of cases. One member of the CWC in Rajasthan stated that *“CWC handles at least 10-15 cases per day, the number of cases can even go up to 40 cases a day.” Generally, the cases come through Child Line, but sometimes the children are brought in by the police, or by ordinary citizens. Sometimes we also have cases where the children have approached the CWC on their own”*.

14] *Composition and Selection of CWC:* The CWC were in place in both the States and were headed by Chairperson and had the stipulated four members. The term of the CWC is for a period of 3 years. In Rajasthan the present committee members were appointed in 2016, while in Andhra Pradesh they were elected in 2018. The members are selected by a committee (Rajasthan)/ selection board (Andhra Pradesh) which is generally headed by a Retired High Court Judge. To be appointed in the CWC member a person should be more than 33 years of age, should have a master's degree in either Sociology, Psychology, Social Work or have a degree of LLB. They need to have at least six/seven years of experience of working with children and for the welfare and protection from law background and NGO or Voluntary Organizations.

In Andhra Pradesh after its constitution, CWC team attended a training programme at Bangalore for four days. After this only the CWC chairpersons continue to attend meetings and trainings held at state level as and when necessary especially when there are any new guidelines and amendments in the act. In Andhra Pradesh all the CWC chairpersons and members expressed that that they are observing/ monitoring the services provided to the children staying in the shelter homes and are playing a key role in implementing the procedures laid down as per JJ act and other Acts to a large extent; in addition they are also active in repatriation of children with their parents and family.

Roles and Responsibilities of CWC: In Rajasthan members of CWC are present in the office for 15 days a month, (for which they are paid an honorarium). But generally, they are present on all days except for Saturdays and Sundays. The CWC members in all the divisions attend office three times a week and use the other days, for visiting shelter homes for surprise checks and inspection.

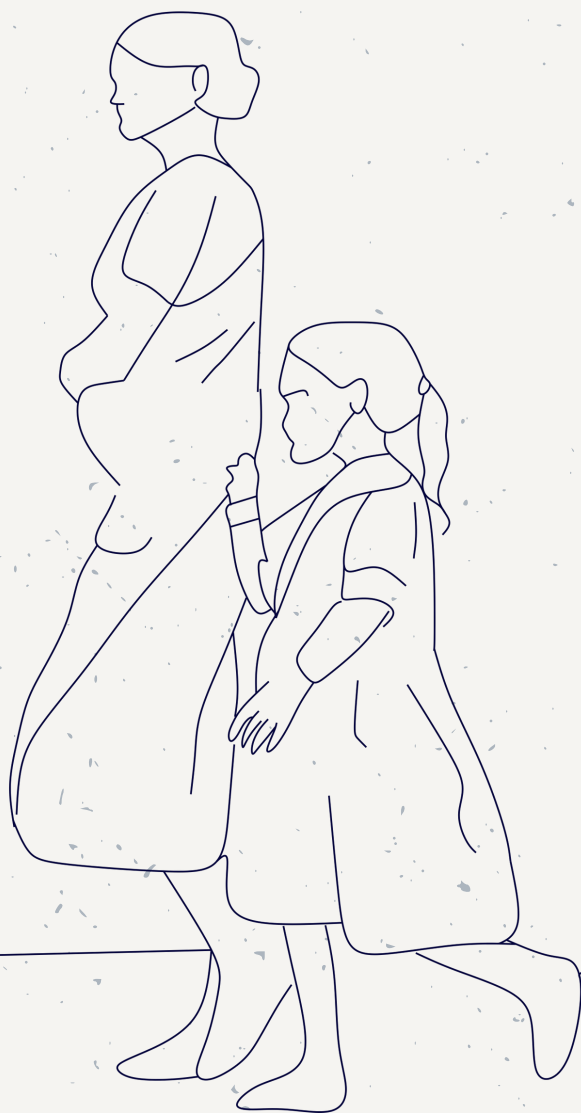
3.5 Process followed once the girls are presented before the CWC

The children who are presented before the CWC include children who have run away due to violence at home or school, children found begging on the street, rescued child labourers or abandoned children. At times the CWC files cases suo moto (on their own accord).

A CWC member from Andhra Pradesh shared *“Sometimes when the CWC comes to know about the exploitation of children taking place anywhere in the district, we will take Suo motu cognizance and file a case against the responsible persons”*.

The CWC collects information and keeps a detailed record of the cases and the children are sent to various shelter homes, after counselling.

[15]



[15] Admission of the child will follow a particular process. Firstly form 17 deals with admission procedure, placement of the child will be dealt about in the form 18 and form 44 deals with restoration of the child. The follow up of the cases is done by the Project Officer Institutional Care (POIC).

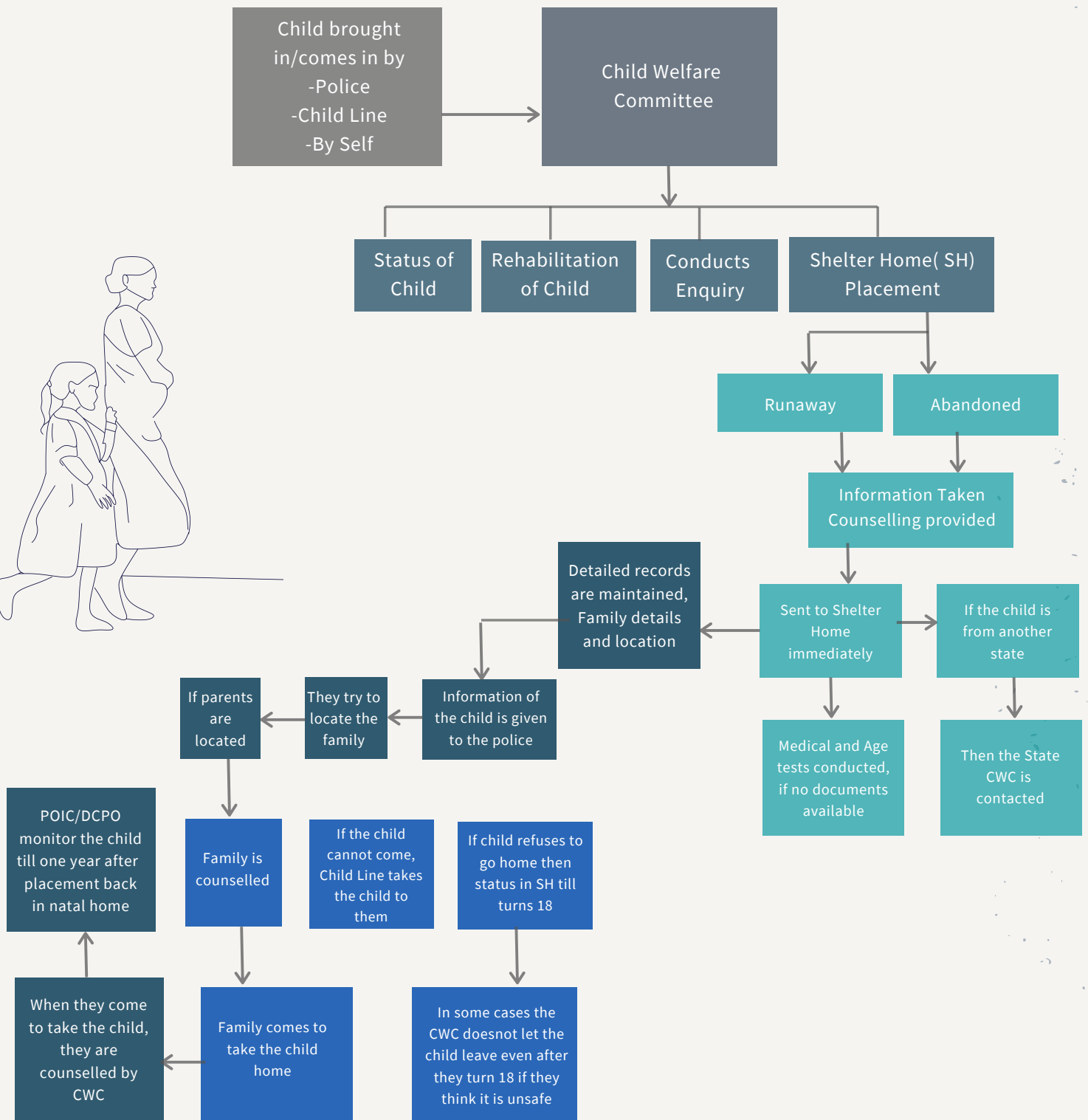


FIGURE 3: PROCESS FOLLOWED ONCE THE GIRLS ARE PRESENTED BEFORE THE CWC

Figure 5 highlights the process followed once the girls are presented before the CWC. After admission, the CWC conducts a detailed enquiry on all issues related to the well-being of the child in question.

In Andhra Pradesh, the CWC then instructs the District Probationary Officer (DPO) to collect the Social Investigation Report (SIR) report (except in the cases of sexual abuse so as to maintain confidentiality and avoid social stigma). The DPO or the social worker locates and interacts with the girl's parents for counseling and at times even the CWC members get also involved in this process. If the girl and parents are willing, the CWC will hand over the girl to her parents as a top priority.

In Rajasthan, this process is managed by the local police or ChildLine NGO.

3.5.1 Determining age of the girls entering shelter home

The age of the adolescent girl entering a shelter home is determined according to section 94 of the JJ Act. Certain documents are required to prove age: birth certificate, school documents, secondary school certificate, or else a medical test is undertaken to determine the age. During the interview with officials we were informed that in practice if the adolescent girl is anywhere in the range of 17-19 years, she is considered to be 17 years of age.

In Andhra Pradesh, with regard to the age of the child, parents or the District Protection Officer (DPO) is expected to submit the age proof (birth or study certificate or Aadhaar ID, ration card, etc.) through the Social Investigation Report (these age proof documents were observed in the case sheets of children during data collection). The case reports of all the girls were observed to be available with the counsellor.

In Rajasthan, it was observed by the researchers that in almost all the cases there was a difference in the self-reported age by the girls and the age recorded in the Shelter home^[16]. Out of fourteen (14) girls, seven (7) reported that they were above 18 years though the documents submitted to the police and the CWC by their parents showed them to be underage/minors. Deepa in Rajasthan shared that, *"I am 21 years old; but the documents produced by my parents at the police station and court, indicated that I am 17 years old. Since I did not want to go back home with my parents, I was first sent to a short stay home and then shifted to the Balika Griha. That is why I have to stay here till I am 18 years as per the documents"*

[16]The research team could not access the case records of the girls from the CWC to verify these statements. The CWC members informed the researchers that they cannot share the case files.

In Rajasthan, interviews with the CWC members revealed that according to law, the documents submitted by the parents take precedence over other documents. It was also reported that the CWC does not usually verify the age of the girls sent to rescue homes, except in cases where no documentary proof is available. In such a case the girls' age is determined through a medical examination. During the interactions with the girls, the research team did not come across any instance where the girls had challenged the proof of age documents submitted to the police. A lawyer in the Sessions Court in Jaipur, where POCSO cases are heard, informed the research team that the statement of a minor is not taken into cognisance in the court. Instead, the documentary proof presented in the court by the parents has greater value and is taken into consideration by the court. S/he was of the opinion that *"99 percent of the time, the date of birth in villages is not recorded properly; however, the court does not verify the age. In such cases, it is important to get the age verified medically"*.

3.5.2 Counselling of parents by CWC

CWC members shared that they counsel parents and, in many cases, the parents agree to take back the girl who has eloped. However, if the girl does not want to go back to her natal home, or if she is unable to give her address, and if the CWC feels that she is in need of 'care and protection' then she is sent to the Shelter home. Once the girl attains 18 years of age, the girls are free to leave the shelter home as per law. But in exceptional cases, CWC steps in and a member said, *"CWC has the authority to let girls continue their stay in the shelter home in special cases. i.e. girls can continue to stay until they attain the age of 21. In one district a girl who is completing her B Tech Course is residing in the shelter home....If the child is not interested to go with her parents or if she found to be under any threat the CWC admits the child in the shelter home up to 18 years. If the girl is returned to her parents, there will be monitoring from the POIC/DPO up to one year or sometimes the period may exceed"*

The CWC members from Andhra Pradesh also said that if required they also provide referral services for the children and they are moved to the Women's Shelter home after 18 years of age.

3.5.3 Disposal period of cases

As per the CWC members in Andhra Pradesh to a large extent, cases are likely to be disposed of between three months to three years depending on the nature of the problem. A CWC member from Andhra Pradesh said, *“Most of the pregnant girls and young mothers will be in the shelter home from one day to three years or sometimes they may stay up to 6 to 7 years or until they reach 18 yrs of age. It all depends on the children’s interest and support from their parents.”*

Girls in Andhra Pradesh also reported being shifted between numerous shelter homes, unlike Rajasthan, where they were not shifted. Poornima from Andhra Pradesh shared she was initially kept in *Balasadan*, a children’s home (6-11 years) but later on shifted to *Swadhaar* home. Though initially she found it difficult, but she adjusted to the new shelter home.

3.6 Shelter Homes- Infrastructure and basic services

In Rajasthan and Andhra Pradesh government shelter homes for girls have been established at the district level.

In Rajasthan, each shelter home has the capacity of housing about 50 girls. Some common features in all three shelter homes that were under the purview of the study were:

- Each was spotlessly clean, open, spacious, and well ventilated.
- There was a central courtyard around which there were rooms. The courtyard provided the open space and was a source of fresh air and light for the girls.
- The dormitories were big and each housed 8-10 girls. There were cupboards in the room for the girls to keep their clothes. Single beds with mattresses were provided. In DSH-III the research team was not able to see the dormitories; but observed that beyond a locked gate there was an open area and rooms along a corridor. Each dormitory had fans and coolers were provided in summers.
- Facilities like water coolers, geysers for hot water were also provided in the shelter homes. In DSH-II there was also a washing machine provided in the shelter home.
- There was a separate kitchen in all three shelter homes; they were large and spacious.
- There were separate halls in two of the shelter homes for holding group activities. In DSH-I, there was a smaller activity room where the tailoring classes took place.
- The shelter homes also had television sets which was a source of entertainment for girls. A small Library with books was also available in the shelter homes.

PATHWAYS

- In DSH-III, there is a common sanitary pad vending machine used jointly by the girls in the shelter home and Nari Niketan^[17]. An incinerator for disposal of pads has also been installed in the home by Nagar Nigam/ local municipality.

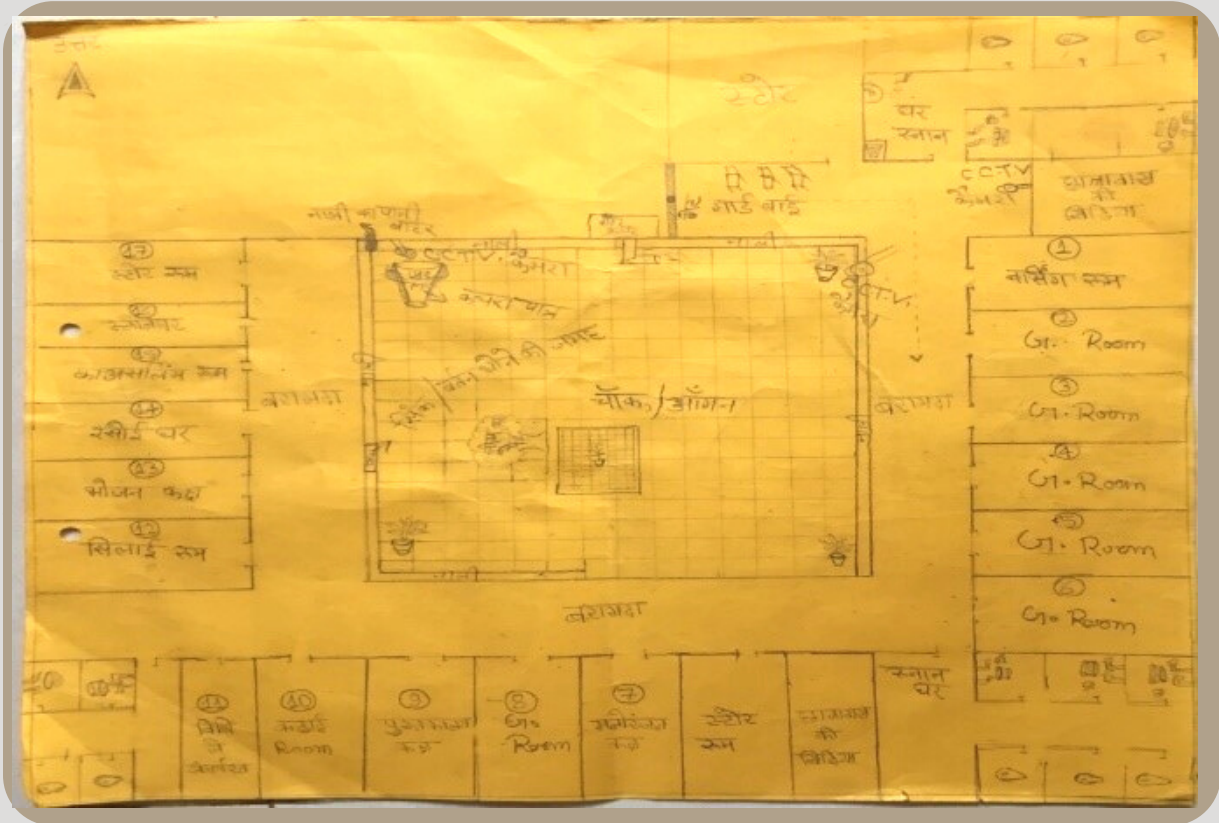


FIGURE 4: A ROUGH SKETCH OF THE SHELTER HOME DRAWN BY RESIDENTS OF DSH-I

In the three homes visited in Andhra Pradesh, the strength of the children varied from 75 to 77 girls, and the number of rooms varied from 6 to 7.

Drinking water (RO) and toilet facilities, televisions, telephones, fans were available in all shelter homes. Beds were available for all children in two shelter homes, but in the third home visited, only pregnant girls/young mothers were provided beds for a period of three months. Computers and fridges were available in two of the shelter homes and stitching machines were available in only one of the shelter homes.

[17]Nari Niketan is a government shelter home for adult women.

3.7 Management of the shelter home -Roles and responsibilities of the superintendent

The Superintendent is in charge of the overall management of the shelter home in both the States. This includes the safety of girls, food, daily routine, training and counselling of girls. It is her duty to ensure that the girl goes to the court with proper police protection whenever the case comes for hearing and they are counselled on court procedures.

In Rajasthan the overall responsibility of the homes and the girls lies with the Superintendent who is a Rajasthan Administrative Service (RAS) officer. S/he is in charge of the rehabilitation, day-to-day care, and counselling of the girls. S/he works closely with the CWC and consults with them on regular basis on matters related to each case. All three Superintendents from Rajasthan expressed that it is a challenging job and they have to work closely with the CWC. Each case is discussed together, and decisions are taken by the CWC in concurrence with the Superintendent.

They reported that there are regular training programs organized by the Department for the staff who work in the shelter homes to sensitize them on legal aspects as well as different situations that may come up. Interactions with the Superintendents in all the districts revealed that they had attended several workshops in Jaipur. The workshops provided a platform for sharing challenges and getting ideas on solving problems. The Superintendents of various shelter homes have also formed a 'Whatsapp' group, to share their problems and to help each other.

In Andhra Pradesh, all the homes visited had superintendent/wardens. In Andhra, the superintendent is responsible for the overall welfare of the children. S/he works in collaboration with the CWC, supervises and coordinates with the staff in the home. S/he is responsible for the overall education, care, protection, hygiene, and health, look after the maintenance of files – individual case files, individual care plans, Juvenile Justice formality files, menstruation registration cards, period and health register, food register. S/he also has to obtain and maintain the budget for running the home regularly.

In Rajasthan, the budgetary allocation for girls residing in the shelter homes is Rs.2000/- per month, per girl. This money ensures that each girl is provided with sets of clothes, sanitary pads and toiletries.

In Andhra Pradesh an average of Rs 45-50 is spent on food per child every day. Budget is allocated under different heads such as diet, clothing, bedding, medicines, materials and supplies, other office expenditure, cosmetics etc. The Superintendent has the power to purchase the items with the permission of the Director. The approximate budget is around 15 lakhs for each home.

3.8 Counseling services

Counsellors play a key role in shelter homes and work closely with Superintendents and the CWC. Minimum qualification criteria^[18] are prescribed for the counsellor's posts and they can be regular or contractual staff. While each of the shelter homes visited in Rajasthan and Andhra Pradesh had a counselor enlisted, not all met the qualification that was required for the post. For example, none of the counsellors working in the government shelter homes in Rajasthan were trained counselors and had only received limited training in counselling. In Andhra Pradesh, two out of the three counselors interviewed had a master's degree in social work with total work experience ranging from a minimum of 6 years to 16 years. Though the two counselors with MSW degree have studied counseling as a part of their course they too have not undergone any formal training programme in professional counseling skills and techniques.

The counselors are required to interact with the girls on a regular basis and document the interactions. In Andhra Pradesh, the researchers noted that the counselors were maintaining essential records/reports^[19], were undertaking follow up field visits to the girls' homes, contacting parents/relatives and following up on 'restored children'. According to one of the Counselor's interviewed:

“

"The role of the counselor is to support the girls to overcome their problems and to help in their rehabilitation. Every case is recorded. The girls have to be handled sensitively as many of them are depressed when they reach the shelter homes."

Counselor, Andhra Pradesh

”

[18] In Rajasthan, the minimum qualification is a master's degree in Social Work or Sociology

[19] Filing of case sheets; Child counseling report; Health sheet; Counseling format register; Child Counseling report register; Parents Counseling report register; Admission form; CWC order form; Follow up Register; Support in preparation of SIR; Referral services

“

Working as a counselor in a Shelter home: Case of Rita

The counselor in one of the shelter homes, Ms. Rita has a Master's degree in Sociology. She was appointed as a counselor in 2016 on a contract basis by the CWC against a vacancy which was advertised. She has not received any formal training in counselling. After taking over the role as a counsellor, she attended one training in Jaipur organised by the Department of Child Rights. She feels the training was very useful as she was able to connect with other counsellors and discuss the common issues arising in shelter home. She wants such trainings to be conducted at regular intervals.

She interacts with the girls regularly. Some open up to her easily while others take time. Her main work is to counsel the girls, try and bridge the gap between them and their parents, and help them reintegrate in society. She makes it a point to talk to the girls every day, guide them and helps them. She even attends parent/teacher meetings in school. A written record of the first interaction with the girls is maintained. Subsequently, any change in their behaviour is noted. The pregnant girls have also opened up to her and have taken her into confidence. Her main challenge has been to understand the different situations that have led the girls to leave their homes.

She feels that the girls need to be supported and cared for while they stay in the shelter home.

(Interview with Counsellor, Rajasthan, August 2018)

”



3.9 Other staff in the shelter homes

In Andhra Pradesh, all the homes visited had DPOs, security guards, cooks, case workers from ICPS), and teachers. Instructors, matrons, sweepers, care takers and home managers were not available in all three homes. In one of the homes, teachers and matrons were outsourced. In Rajasthan apart from the superintendent, all the other staff i.e. the caretakers, cook, guards, and counsellors were contractual.



4. LIFE IN SHELTER HOMES

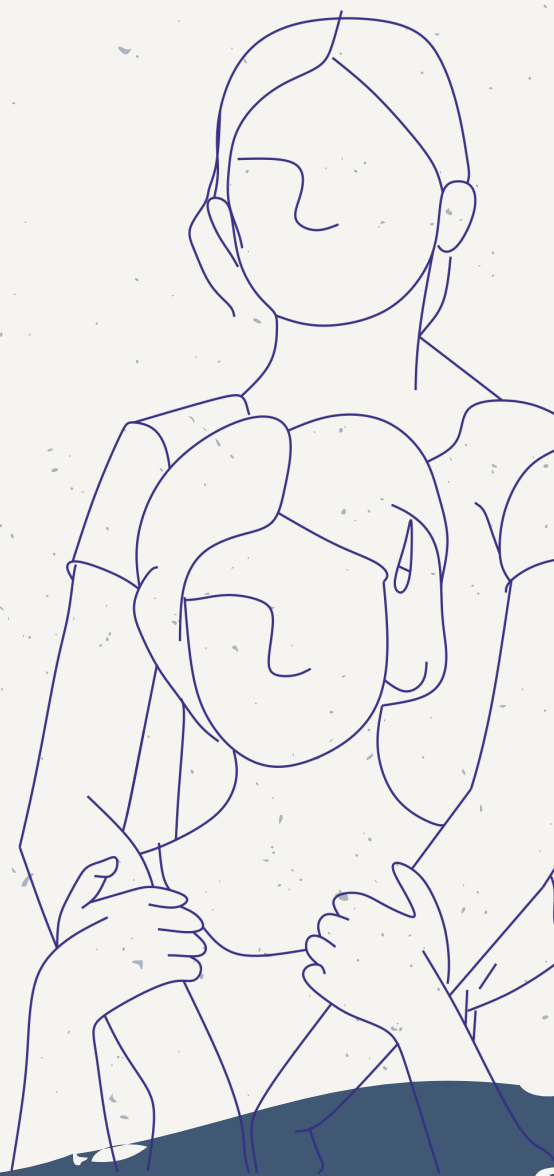
4.1 Arrival and Initial Days

In Rajasthan the research team was informed by the girls that whenever a girl arrives at the shelter home, all accessories and items like jewellery, money and documents are taken away from them. Their bags are checked, and a mandatory medical check-up is carried out. This includes a blood test, urine test and a pregnancy test.

If there is no documentary proof of age, then a medical test is carried out to determine the age (based on a radiologist's report after examination of dental records, bones and hair from private parts). A medical jurist and a panel of doctors decide the age based on the radiologist's report. A rough estimate is arrived at e.g. between 15-17 years and the lower age limit i.e. 15 years is taken for the records. A photo is taken of the girls who come to stay for the first time. After all the necessary steps are taken, the girl is enrolled in the rescue home.

4.1.2 Issues in Initial Adjustment

In Andhra Pradesh, most of the adolescent girls interviewed found it very difficult to adjust to the surroundings of the shelter home on arrival. They were reminded of their family, their partners and the circumstances that brought them into the home. They shared with the research team that they felt worried, angry and didn't feel like mingling with others. The adolescent girls shared that they often felt bad when others talked about their elopement, being pregnant, or becoming young mothers.



LIFE IN SHELTER HOMES

Superintendent and Counsellors from Andhra Pradesh also noted that girls at the time of entry were usually confused, worried, anxious, angry, and disturbed. A Superintendent from Andhra Pradesh said that usually the girls remain aloof when they enter the home but after a few days they formed relations with the staff. They also noted to the researchers that *“there were some girls who continue to cry, get angry, irritated, and do not mingle. They create problems but gradually they also settle down over time, as they get used to the routine and conditions prevailing in the home”*.

A counselor from Andhra Pradesh shared *“when girls escape from their home and are captured by police...these girls cry a lot on being separated from their partners and for the punishment given to their lovers”*. Another counselor also shared that, *“We advise children that they should be very careful until the completion of their case otherwise their life may be more challenging in the future. They may not listen to us at first. As counselors we have to be friendly and promise confidentiality, otherwise, no one will share their personal issues. Some girls never share their life matters, even in front of the CWC..... but most of the girls share all their love affairs and entire information with the counselors based on the relationship of trust that we develop with the girls. This helps us to plan appropriate interventions for the girls who are in the shelter homes”*.

It appears that girls generally confided in the counselor as they perceived them as a ‘peer’, given that most of the counselors were young women themselves.

According to the CWC members in Rajasthan, after the medical tests counselling is provided to the girls. Sometimes the girls are depressed and require further attention. They are given the necessary support and even taken to the psychiatrist if required. As per a Superintendent in Rajasthan, the girls adjust to the shelter home quickly as *“They feel very secure here. They meet with other girls who have similar experiences. However, the girls have blind faith in the boys they have eloped with. Even after coming to shelter home, the girls keep counting days till they turn 18 years so that they can go and join them again. The girls always try and save the boy so that he will not go to jail under POCSO. They are unaware of the challenges they will have to face once they leave the shelter home”*.

Additionally, the counselors in Rajasthan reported that when the girls first arrive, they are quite aggressive. They do not interact with other girls and get involved in fights. They do not want to attend any classes and do not want to talk to the counselors as well.

4.2 Managing pregnancy and childbirth at the shelter home

In both Andhra Pradesh and Rajasthan shelter homes, pregnant girls appear to be well looked after during different phases of pregnancy and post-delivery. In both the States, CWC members and Superintendents claimed that special care was provided to pregnant girls and young mothers. It was noted by one CWC member that *“Extra care is taken of their medical, diet and nutrition requirements and a medical check-up is conducted every month. They are given extra fruits and milk and after delivery they are given ‘ghee’ and ‘dalia’. If the doctor has recommended anything special for them, it is also provided to the girls”*.

The Superintendent and staff provide guidance to the girls during pregnancy. Whenever the girl goes to the hospital for a check-up, the doctor also guides them on the changes taking place in her body. The researchers were informed that delivery takes place in Government Hospitals and all cultural norms and traditions are followed after childbirth (when to take a head bath, when to do puja etc.). A CWC member from Andhra Pradesh shared that, *“The pregnant girls and young mothers are given a special diet (extra fruits, milk and non-vegetarian food like eggs, meat /chicken) as prescribed by the doctor. Based on their need and facilities available they are provided a cot to sleep, hot water for bath, for washing clothes they are using washing machines etc. For bathing of young babies, the home Superintendents are appointing an old lady from outside, by paying an advance amount up to 2 to 3 months. After 3 months the mother can bathe the baby herself. The young mothers and pregnant girls are not given any work at the shelter homes”*.

The girls in the shelter homes corroborated the aforesaid statements made by the officials.



4.2.1 Knowledge about pregnancy

Knowledge about pregnancy at the time of entering the shelter home varied amongst the study participants and details are provided in Table 6 below.

TABLE 6: RESPONDENTS PREGNANCY/FERTILITY STATUS AT THE TIME OF ENTRY INTO SHELTER HOMES

Pregnancy/Fertility Status	Andhra Pradesh	Rajasthan
Was pregnant	9	10
Had already given birth	2	5
Already undergone abortion	4	
Grand Total	15	15

In Andhra Pradesh, four (4) of the respondents had already undergone an abortion before entering the shelter home. These were at the behest of their husbands or parents. Girls shared that they suffered a lot during these abortions and Swetha from Andhra Pradesh said *“I used two tablets after which I lost the baby. It was very painful, and I suffered severe stomach pain. I suffered a lot after the abortion and had continuous bleeding up to one month during that time”*.

In another instance after Veena (aged 15) who was pregnant was refused entry into her marital house by her husband on charges of infidelity, her maternal family and neighbors convinced her to go for an abortion since she was likely to face many problems in the future. She ultimately decided to abort the baby but remained guilt ridden and unhappy about the decision. She said *“I felt very bad about killing my baby. I am a big sinner, I killed my baby, God will never forgive me”*.

Some of the adolescent girls interviewed shared that they had not been aware that they were pregnant. They only came to know about the pregnancy when they entered the shelter home and went through the mandatory medical test - which includes a pregnancy test in both the States. One participant from Andhra Pradesh stated that *“I never used condom during sexual intercourse, and I didn’t know that if we have sex once, I will get pregnant”*.

LIFE IN SHELTER HOMES

A Superintendent in Andhra Pradesh also confirmed that some of the girls did not know that if they have an intimate relationship with the opposite sex, they will become pregnant. A counsellor shared that girls get very upset when they are informed about their pregnancy. One girl in Andhra Pradesh is reported to have told the counsellor *“how can I go to my village with this stomach (pregnancy), how can I bring up this baby, what will others think and talk about me in the village. I am most confused about my future”*.

The researchers were informed by the officials, that if a girl is found to be pregnant and is in the early stages of pregnancy, she is given a choice as to whether she wants to continue with her pregnancy or wants to opt for an abortion. In the case of Sarla from Rajasthan, the pregnancy test in the shelter home revealed that she was one and half months pregnant. Since the pregnancy was unplanned, she was not sure whether she wanted the child, or whether she should go for an abortion. Deepa also from Rajasthan shared that she chose to abort her pregnancy, but she was dissuaded by the staff to do so. However, one day she slipped in the bathroom and had a miscarriage. She was taken to the hospital by the staff and had to undergo an abortion.

In Andhra Pradesh, the CWC members said that if a girl is found to be pregnant depending on the nature of the case (rape /sexual abuse /incest), the CWC gives choice to the girl to retain her pregnancy or abort. If the pregnancy of the girl is more than five months, opinion of two doctors and the willingness of parents is also taken. Abortion is not suggested if it is harmful to the girl's life. A Superintendent from Rajasthan pointed out that *“most of the cases come when it is too late for any step to be taken. The girls are also very attached to the babies after they are born and are not ready to give them up for adoption”*.

A few girls interviewed shared they were aware about their pregnancy, and some had already given birth prior to entering the shelter homes. One of the counsellors shared that the girls who were aware that they were pregnant, did not reveal the information immediately and stated that *“Some children directly approach the doctors and get some pills for abortions without telling anyone. Even parents adopt a similar approach for abortion. Therefore, we do not allow outside food during parents' visit also and only fruits are allowed”*. For the girls who are pregnant and those who have delivered a child, the researchers were informed that routine medical check-ups and immunization is carried out by the shelter home staff.

4.2.2 Pre Natal-Care/Care provided during pregnancy

During the course of the Study, the researchers were informed that care is provided in the form of medical care (including immunizations) special food items and separate rooms for pregnant girls and teenage mothers in the shelter home. Further, pregnant girls enjoyed the special attention and privileges given to them. Anupama from Andhra Pradesh said she received *“clothes both for herself and her baby (before and after delivery) and special food (chicken, eggs, fruits, bread etc.) and medical care because she was pregnant. The Superintendent allotted a separate place (staff room) to sleep during nights. I was quite happy during my pregnancy period at the shelter home.”*

In Rajasthan too dietary requirements of pregnant girls is given requisite attention. The pregnant girls are given special diet of extra milk and fruits. If they desire to eat something special, care is taken to fulfil those desires too. Anamika from Rajasthan shared, *“In the Balika Griha, I am receiving full support from my room mates, counsellor and other staff members, specially the Nurse who conducts regular medical check-up. I have also been taken to the government hospital for regular check-ups and tests”*

In Andhra Pradesh they are helped to avail the NTR Vaidyaseva health card.

Counseling and guiding the young mothers and pregnant girls are one of the important activities undertaken by the counselors. Pregnant girls are helped to adjust to their physical state as most of them do not know how to deal with the physical changes associated with pregnancy and childbearing. Counselor from Andhra Pradesh told the researchers:

“Pregnancy care food and child care will be explained/guided by the counselor and other elderly ladies and these girls will visit Anganwadi centre for supplementary nutrition or for vaccination and regular medical checkups. RMP doctor also visits the home regularly and sometimes these girls also approach their mothers, if they have any specific problem”.



LIFE IN SHELTER HOMES

Counselors provide continuous support and reassurance and plays a key role in facilitating services and promoting healthy relationships with the inmates. Another counselor from Andhra Pradesh informed the team that *“if any pregnant girl/young mother is admitted to the shelter home we will provide a kit for her, arrange a meeting and introduce all the other inmates to her and explain about the activities of the shelter home etc. This process helps the child to interact or to adjust with the other girls in the home”*.

The Superintendent from Andhra Pradesh also said that in case of pregnant girls, the other inmates take good care of them as well as the baby after the delivery.

However, in Rajasthan when asked that if there was any special training or discussions held for the girls related to changes in their bodies due to pregnancy and child-birth, the adolescent girls interviewed stated that no special discussions had taken place, though the girls were free to ask questions. In one shelter home it was pointed out that the girls were given training of how to breast feed and take care of the babies.

In Rajasthan the counselors stated that *“pregnant girls are accepted by the other girls and there is no stigma attached to them. The other girls even give up their own food so that the pregnant girls are well fed. They also remind the caretakers to give them milk and extra diet. When the child is born, s/he is loved and taken care of by all the girls.”*

In one of the shelter homes in Andhra Pradesh, pregnant girls in advanced stage are shifted to a home that is closer to the Government hospital. A CWC member said *“we send the pregnant girls and young mothers to the Swadhar homes (Aruna Home and Asha Sadan) run by the NGOs based on the need, because they will get quick medical facility in case of emergency”*.

4.2.3 Care during childbirth

In both States childbirth takes place in Government Hospitals. In case the childbirth is through normal delivery, the girl stays in the hospital for about two to three days. Geeta shared, *“My delivery took place in a Government hospital. I was not afraid at the time of my delivery and was in the hospital for 2-3 days. I went through normal delivery procedure and gave birth to a baby girl”*.

In Rajasthan, it was shared that a guard from the shelter home stays in the hospital and takes care of the mother and child.

LIFE IN SHELTER HOMES

Some participants face complications during birth. For example, Jahnavi, from Andhra Pradesh was taken to the hospital for a checkup, tests including scanning was done and she gave birth to a baby girl. Her mother visited her along with the police. She was given nighties and saris to wear. It was the first time that she wore a sari. She was in the bed for about a month following the delivery and the child was kept in the incubator for a brief period. She breast-fed her child for six months.

4.2.4 Post-natal care and child rearing

Post-childbirth girls appear to be well taken care of in the shelter home. As Fatima, from Rajasthan said *“special food is regularly provided to me post-delivery, like ‘daliya, milk, fruits, ghee etc. My child has been given vaccinations and immunization”*.

Counselors and other staff also help by guiding the young mothers in taking care of the newborn and the babies. Girls also reported that they learnt how to bathe their babies and manage them with help from the shelter home staff. Mani shared that *“The helper of this home (Durga aunty) and the other women guided me in all the aspects and they are taking care of me like my mother. I am provided with all the facilities (nutritious and special diet like eggs, fruits, dhal, milk, idli and dosa etc) whatever I required clothes for my baby and for me, soaps, towels, cot, hot water, vaccination for mother and the child ... etc. everything has been provided for a pregnant and young mother”*.

Hot water, special food, clothes as well as separate rooms were provided for the teenage mothers and the babies. Jeevani from Andhra Pradesh narrated that, *“I bathe with hot water and am using washing machine for washing her clothes and her baby. I have no work in the home up to 6 months after my delivery... .the staff of the home provides vaccination to my child regularly.”*



Other girls residing at the shelter home were also reportedly very helpful and supportive of the young mothers in Andhra Pradesh and Rajasthan. As Jeevani pointed out *“Now my baby is nearly 18 months of age. All the other girls in the home are taking care of him and they love him a lot. He needs only milk from me, he is always with the other girls in the home and they bathe, dress and feed my child”*

4.2.5 Babies in Shelter Homes

In Rajasthan, the CWC officials informed the research team that the babies born in institutional care are usually known as a ‘government baby’. The officials pointed out that while a majority of the adolescent mothers were happy to have given birth and loved their child, a few of the girls reacted adversely to the babies. Discussions with the girls revealed similar findings. Jeevani from Andhra Pradesh said *“I don’t like him (the baby), I don’t know why it is so?”* Kavya also initially refused to feed the baby and felt angry toward her.

Some of the girls decided to give their babies up for adoption- one (1) in Rajasthan and four (4) in Andhra Pradesh. The researchers noted that these girls are the ones who have been victims of sexual assault/abuse or have been abandoned by their partners.

These teenage mothers were assisted in giving the baby up for adoption in due consultation with the parents. For instance, Jahanvi was advised by her mother, counsellors and other inmates to give up the baby for adoption after the DNA test proved that her stepfather was the father. She said that *“If I want to be in a good position I have to give-up/surrender my baby for adoption. The staff asked me to name my child, so I gave my name Jahnvi, to my child. I felt very sad and cried a lot at the time of giving up my baby for adoption, but there is no other way for me. I hope that wherever she is, my child will be in a good position”*

In one of the shelter homes, it was reported that at times other girls had reservations about taking care of babies born to a Muslim mother. In such cases girls were counselled and made to understand that there is no difference between a child born to Hindu parent or to Muslim parent, after which the baby and the mother were accepted by everyone. In another shelter home in Rajasthan, two young babies of teenage mothers aged 3 years, were attending private kindergarten school near the shelter home.

4.3 Daily Routine/Daily routine in the shelter home

In both the States, a similar daily routine was followed but the routine appears to be more structured in Andhra Pradesh. See Annexure 1 for daily routine in the shelter homes.

In Andhra Pradesh, common daily activities are undertaken in the shelter home and are more or less common to all inmates who are staying without attending school/college. Pregnant and young mother are not expected to follow the daily routine and are not allotted any tasks.

4.4 Tasks within Shelter Homes

In Andhra Pradesh, girls are divided into committees (cooking, cleaning, watering, vegetable cutting, and welcome committee) for the upkeep of the shelter home. In Rajasthan it is noted that in two shelter homes, the girls take turns and help in the kitchen to make rotis, but in one home, the girls do not help in preparation of food. After breakfast and morning chores, in one shelter home girls attended vocational classes for the whole day with a lunch break. In another, it is not compulsory for every girl to attend the tailoring classes, whereas in the third, the girls who are not pregnant or mothers or do not have cases pending on them attend regular school.

The girls reported that they enjoy their time learning different skills, which are mainly restricted to beautician and the tailoring courses. The girls are allowed to play games in the courtyard in two shelter homes or in the small playground in the third shelter home for some time in the evening. The rest of the time is spent indoors. Dinner is served by 7 p.m. in the evening, after which the girls enjoy watching TV till 10 p.m.

4.5 Relationship amongst girls in Shelter Homes

The FDG's conducted in the shelter home revealed that the girls learn to live together in harmony during their stay in the homes. Any new entrant is welcomed, and becomes a part of the group. Gayatri, from one of the shelter homes pointed out that *'the other girls welcomed me and have helped to look after the baby.'* In Andhra Pradesh also girls expressed that they enjoyed friendships that they developed with other girls in the course of their stay in the home(s). They shared their secrets and mutually understood each other's situation(s). In some situations, these friends also helped in facilitating a phone call with their partners or in planning an escape from the home. The elder girls

LIFE IN SHELTER HOMES

particularly helped the younger ones to adjust to the home. Girls also enjoyed the follow up visits of the girls who have left the home.

In Rajasthan while girls accepted that there are conflicts, arguments and fights among the girls, they said these are usually sorted out with the help of older girls or with the intervention of the caretaker. The girls celebrated all the festivals together. In Andhra Pradesh as well, girls often got into conflicts and fights with other inmates in the shelter home. This ranged from quarrels over use of bathroom and other facilities', reasons related to their entry in the home and relationship issues with the home staff.

4.6 Education and skill development in the shelter homes

In Rajasthan on the issue of education and skill development the CWC member in one of the districts noted *"that in the absence of proper documents, it is difficult for the girls to appear for exams through open school. Often there is a discrepancy in the documentation which is submitted by the parents in the court, and what the girl says"*.

In another district one category of girls (girls who are not pregnant or mothers or who have no cases pending against them) were attending school. However, the CWC members pointed out that :



"Sometimes these girls also face problems in school. The school that they are attending is a co-educational. Some boys think that because they are coming from a shelter home, they are 'easily available' and hence make passes at them. Sometimes the girls also get attracted to boys and therefore, the CWC then gets calls from the Principal. Then counselling is required, and the authorities try to make the girls understand the difference between good and bad intentions".

The superintendents from Rajasthan stated that there is no NGO providing services in the Balika Grihas. Vocational education and skill training is being provided through Rajasthan Skill and Livelihoods Development Corporation (RSLDC). Courses on Beauty culture and tailoring have been organised in all the three shelter homes.

LIFE IN SHELTER HOMES

One of the challenges faced by the Superintendents in organizing the courses is that RSLDC has certain norms which are difficult to fulfil. For e.g. a course can be started only if there are 30 girls and they cannot repeat the students who have already undertaken the course previously (in this case the beauty course). It was stated that this requirement was often difficult to meet, as some of the girls stay for short duration and the girls who had been living in the shelter home since longer periods, were likely to have already completed the previous course. In one shelter home where the girls were attending school, students from NLU (National Law University) came on weekends to support the girls with their homework and provide tuition from them.

In Rajasthan, interaction with a former counselor, revealed that from time to time, the shelter home had organized trainings on life skills and issues concerning gender as well as organized self-defense trainings with support of a local NGO. The MOU with this NGO was discontinued by the department due to paucity of funds. During the study, no outside agency or NGO was working in the shelter homes. Till the previous year, an NGO had been working in one of the shelter homes and had organising different trainings for girls. However recently Rajasthan State Livelihood Development Cooperation (RSLDC) has been given the task of organising skill training in the shelter homes.

One of the Superintendent's has also taken the initiative to organise Art of Living class and was trying to start a course in Naturopathy as well as organic farming. She had also opened bank accounts for the girls. With the help of the Collector and permission of the CWC, the girls had participated in Government exhibitions and had put up an exhibit of items made by them. The money earned through the sale of these items was deposited in the accounts of girls. It was felt that this way girls would have some money with them when they left the shelter homes.

In Andhra Pradesh, awareness programmes on aspects related to education, vocational training and health were organized periodically. Aspects such as child marriages, child rights, reproductive health, hygiene, cleanliness etc. were covered during the training. Vocational training in the form of computer training, beautician course, music, tailoring and embroidery was also provided in the home(s).

4.7 Awareness raising about laws and rights

In Rajasthan, the CWC members tried to ensure that the girls gained basic knowledge about various laws. In DSH-I, a lawyer had come to talk about the laws concerning girls and their rights. The girls were reported to be quick on the uptake about laws.

LIFE IN SHELTER HOMES

In one of the shelter homes, the District Legal State Authority, was also involved in the monthly inspection of the shelter homes and helped conduct workshops on issues of safety and provided awareness of laws including JJ Act, POCSO, PCMA etc.

In Andhra Pradesh, awareness programmes on various aspects relating to education, vocational training and health were organised periodically. Issues such child marriage, reproductive health was covered during these training sessions and vocational education was also offered to the girls in the shelter homes.

4.8 Health services and nutrition

The researchers noted that medical status register was maintained, and sick children were given a special diet as per the prescription of the doctor. In general, breakfast (in Andhra Pradesh) usually consisted of *kichidi*, *pongali*, lemon Rice, upma etc. Milk and eggs were given every day. Lunch and dinner included dal, sambar, *rasam*, curry, and curd and on Sunday chicken was provided. No specific snacks were given in one of the shelter homes because many donors frequently gave eatables as donation including fruits, cakes, *samosa*, savouries and rice items like *biryani* etc.

4.9 Security of shelter homes

In Rajasthan, CCTVs were installed in all the shelter homes and movement within the premises was monitored. In Rajasthan, permission to visitors to access the shelter homes was granted by the District Child Welfare Committee, on case to case basis. There is strict vigilance on visitors entering the shelter homes. All visitors have to log their entry at the outer gate where the purpose of visit and the details of the CWC members visiting are recorded. Stepping inside the premises of shelter home is like stepping into another world- a world of confinement. E.g. in all the shelter homes there are women guards who sit at the gates which was kept locked. They informed the research team that their mobile phones should be deposited outside before entry into the area where girls were residing. There were strict rules about recording and taking photographs was prohibited.

A big challenge for the Superintendents is ensuring safety of girls. They were of the view that since most of the staff was contractual (including the guards), there was no loyalty from them. One of them shared “*there are CCTV cameras installed and we are vigilant, but what can we do if the guards do what some girls say. Often, they help them, hence the safety of the girls is compromised*”.

In Andhra Pradesh with regards to security, it was reported that some of the adolescents attempt to escape but are brought back. This usually occurred during initial days of entry into the home. Authorities therefore ask other children help to watch over them. The CWC members also shared that *“we feel that the Government shelter homes (where the superintendent should be woman and CCTV cameras are fixed) are safer places for girl children, than those run by NGO”*.

4.10 Parents involvement with girls in the Shelter Homes

Counseling sessions with the children also involved discussions related to family issues especially role of parents. Most of the girls remained unhappy that their parents had lodged a complaint against them and their lover, which has landed them in the home and their partner in jail, respectively. A large number of the girls were preoccupied with thoughts of their partners and were unable to get over them. Two counselors from Andhra Pradesh shared that, *“ Girls show lot of anger on their parents for filing a case against their relationship, even when the girl is pregnant...they still they have a lot of confidence on the boys than their parents. These girls are not aware of the reality of what has happened to them.. These girls are always thinking and trying to find ways to protect the boys instead of their future. Very few girls have agreed to file a case against their male friend. In case of young mothers, after their release from the shelter home, they would like to marry the same person with whom they fell in love and got pregnant with”*.

Another counsellor from Andhra Pradesh shared, *“ If the child is unwilling to meet her parents/relatives, we send them back. For meeting their children, parents and relatives should bring a permission letter from CWC since this is mandatory “*

Counseling of parents and other family members is also taken up to promote smooth integration of the children into the community. There are parents who do not want to take back their children. They felt that their children were safe and happy in the shelter home. In both the States, parents of the girls were duly informed about the pregnancy as well as birth of the babies.

In Andhra Pradesh officials mentioned that the father of the baby is also informed about the delivery (where appropriate). A CWC member from Andhra Pradesh said :



“Most of the young mother’s family members (mostly the mother) visits once in a month or more frequently if the parents are concerned about their child. Some children however don’t show interest to meet their parents because of embarrassment and fear”

CWC member, Andhra Pradesh



4.11 Girls likes and suggestions for shelter homes

Focus group discussions were carried out with all the girls residing in the six shelter homes. The girls shared their views regarding what they liked about their stay at the shelter home and what they would want to change. The girls were vocal and forthcoming. For most of the girls interviewed during the Study, the shelter home provided a safe environment where they were well looked after and were secure. Their daily needs and requirements were taken care of. They shared how their children were also looked after.

The researchers note that a sense of companionship and camaraderie also developed among the girls, as many of them had similar experiences. From the interactions during the FGDs, the researchers noted that the adolescent girls recalled that they *“learnt to help each other as well as empathise with the situations that each one was going through”*. The researchers noted that when the girls arrived at shelter home, they shared being emotionally distraught, but as time passes, they recover and start to forget the difficult time they have experienced. Some of the girls do not want to leave the shelter home as Meena from Rajasthan shared *‘I am very comfortable here; I feel like I have found a home for the first time. I feel valued and respected. I now understand what a ‘home’ means and I do not want to leave this shelter home.’*

While the girls in Rajasthan homes were satisfied with the infrastructure and food within the institutions, they were dissatisfied with the educational and vocational provisioning in these homes.

While the girls in Rajasthan homes were satisfied with the infrastructure and food within the institutions, they were dissatisfied with the educational and vocational provisioning in these homes. On the other hand, girls in certain shelter homes complained about lack of toilets and storage facilities. More importantly, there was a complaint of differential treatment meted out to girls based on the amount of help they offered the staff.

While infrastructure facilities and relations with staff appear to be better in Rajasthan homes, education, training and celebrations appear to be better organised in shelter homes in Andhra Pradesh.

4.12 Challenges in managing shelter homes

The officials interviewed also provided information related to the challenges they faced in running shelter homes and also suggested recommendations based on their own insights. As mentioned earlier, all the Superintendents felt that managing the shelter home was extremely challenging and that they had to be alert whilst dealing with a multiplicity of different situations every day.

In Rajasthan, the Superintendents said that as most of the staff i.e. counsellor, cook, guards are contractual and hence neither accountable nor dependable. They felt they do not have control over them. One of the Superintendent said, *“the staff should not be contractual; it is difficult as they are not accountable and cannot be held responsible if there is an issue.”*

Similar views were also expressed about the women guards. The Superintendents felt that sometimes the safety of the girls is compromised; as the contractual staff is not sensitive and sometimes help girls to communicate with outsiders.

There was a lack of health service/medical personnel in Rajasthan. In one of the districts the Superintendent was of the view that *“There is no doctor/ANM present in shelter homes. There is no provision for a vehicle and therefore, it becomes very difficult for me to take the girls to the hospital in case of emergency. I have to use my private vehicle”.*

Another Superintendent pointed out that *“if any medical problem arises, then the girls have to be taken to the government hospital. I have to use my own vehicle sometimes to take the girls.”* She shared that currently there were six (6) young mothers and two (2) pregnant girls residing in the home and hence she feels the need for a full-time nurse. Currently the superintendent has made an informal arrangement wherein an ANM visits the shelter home from a nearby PHC, once a week.

LIFE IN SHELTER HOMES

Another issue raised was lack of support extended by the CWC, once they referred the girls to the shelter homes. The CWC members from Andhra Pradesh also stated that there was a lack of cooperation and coordination between the different departments and officials. One of the members from Andhra Pradesh said *“children of seven districts are sent to this Girls home. As such, because of rise in number of cases we have to attend to more meetings, and we need more support staff from the ICPS and Juvenile welfare department to provide sufficient services for the children who are in need of care and protection”*

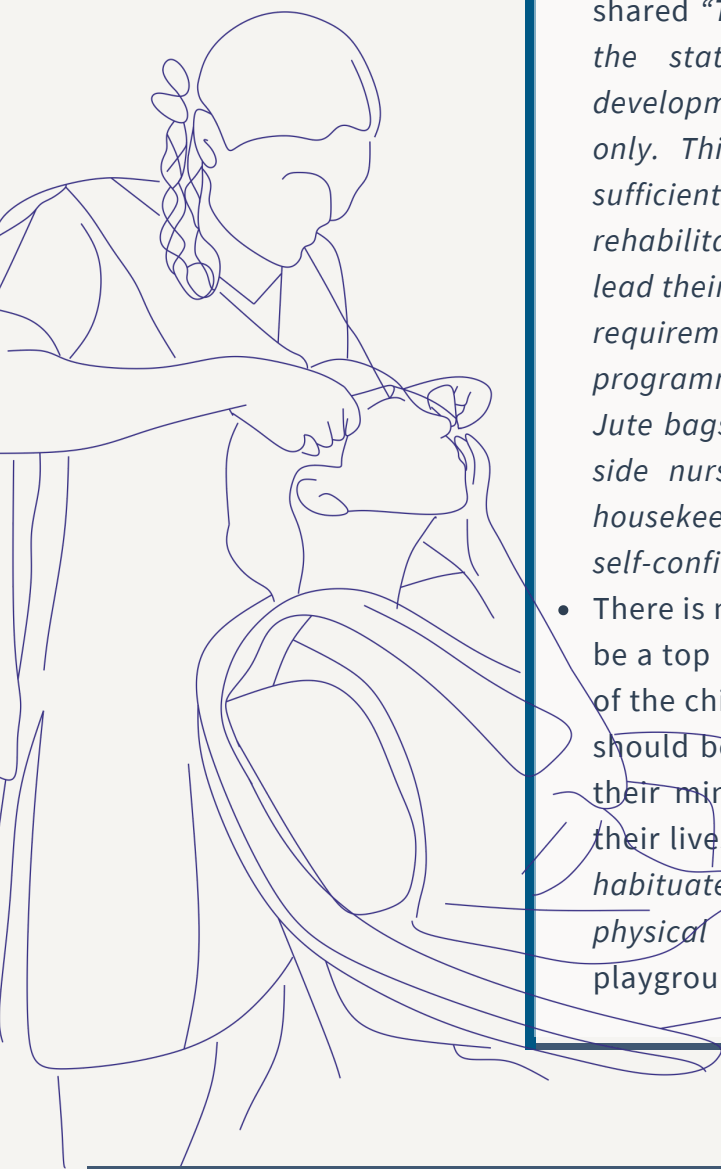
In the same vein, a CWC member from another district reported that *“There is no coöperation and coordination between the DCPU and CWC. Every month District Judge conducts a meeting of the various departments. Though the meetings are conducted well, we don’t get to know anything new..so I don’t feel like attending them”*

Overall, the functioning of the government shelter homes indicate that infrastructure facilities are adequate, and the needs of pregnant girls and young mothers are on face apparent taken care of. The role and responsibilities of the Superintendent and CWC is “challenging”, in their own words. Their responses reveal that it is necessary for the girls who are admitted to the shelter homes to be guided and counselled so that they have the requisite skills to face the various challenges once they move out of the shelter homes. They have highlighted the *“need to give them appropriate life skills so that they can negotiate from a position of strength”*

4.13 Suggestions by officials for improving the situation

Several suggestions were made by the CWC members, Superintendents, District Protection Officers for addressing the needs and aspirations of adolescents so that they will not leave their homes and elope. These have been grouped to facilitate understanding of related suggestions:





CHILD RELATED

- Workshops on life skill education should be organised to enable girls to cope with various issues in their lives.
- The vocational training and skill development courses should enable girls to be economically independent.
- Moral Education should be introduced to help girls to discern between what is right and what is wrong. They need to be 'brainwashed' as 'they have blind faith in boys'.
- More focus and attention are required to promote multiple need-based demand driven vocational skill programmes and training for children to stand on their own feet and become independent. A CWC member shared *"The two government shelter homes which are in the state of Andhra Pradesh are providing skill development programmes like tailoring and embroidery only. This is a traditional type of skill, which is not sufficient to compete with the present competent world to rehabilitate the girls after leaving the shelter home to lead their life on their own. So that there is lot of need and requirement to introduce the multi skill based programmes to meet the present societal demands like Jute bags, pot painting, interior decoration, bakery , bed side nursing, cooking classes and beautician courses, housekeeping etc, through which these girls can gain their self-confidence"*
- There is need to include physical education and it should be a top priority as it will help to improve the conditions of the children. Physical Education Training programmes should be implemented for the children so as to refresh their minds and to relax from the stress and strain of their lives. A DPO said *"Children in the shelter homes are habituated to homosexual behaviour due to lack of physical activities /sports and games"*. There should be playgrounds in the shelter homes.

SHELTER HOME RELATED

- Space is a constraint in some shelter home, and bigger building with a playground are required
- CC cameras should be fixed even in the NGO shelter homes
- Linkage of services for the pregnant and young mothers who are residing at NGO shelter homes or Swadhar Gruhas with the Anganwadi centres for supplementary nutrition and vaccination for both pregnant girls and young mother with her child is giving good results for promoting the health of both child and young mother.
- Proper full-time permanent staff should be appointed to enable smooth running
- Proper trained Counsellors should be appointed in the shelter homes
- Regular visits by ANM need to be organised to ensure girls stay healthy

SYSTEM RELATED

- Given the large number of cases that come at the divisional level, the CWC sitting days should be increased.
- Regular Training programmes should be organised for all CWC members and not only for the Chairperson
- Village Child Protection Committees (VCPC) should be constituted so that safety of the girl is ensured at the grassroot level
- NGO should be involved to help with post shelter home follow up.
- Funding are not released on time and homes face problems even for small things like stationary also.
- Cooperation and coordination among NGOs and other line departments is not up to the mark because they have their own targets. If the different departments work effectively, we can reduce adolescent pregnancy and young mothers as well as eloped cases.
- Cooperation, commitment and collaborative teamwork is essential between all the line department staff who are directly or indirectly connected with child development and protection.

PARENT RELATED

- There should be a sustained campaign for parents to enable them to be sensitive to adolescent issues
- Public awareness is very essential particularly for all parents living in urban slums, rural and tribal areas to curb the instances of child rights violation. Further such awareness programmes should be conducted on repeated intervals in a sustained manner.
- There is a need to create awareness among all families and with special reference to broken families and parents who have extra marital relationships about its impact on children's wellbeing.



SCHOOL LEVEL

- Adolescent education programs should be implemented at the school level
- Counselling for school going and out of school adolescents is essential so that adolescents do not take rash decisions
- Compulsory inclusion of training on reproductive health and life skills in the school curriculum for both boys and girls in order to educate them about their body and build awareness of reproductive health.
- Every school should appoint a counsellor to nurture the children as well as to tackle the issues of children at young age to avoid the serious repercussions will takes place in their future.
- Each school should have a trained teacher to discuss and to deal with the problems of children on regular fixed days which can reduce the incidence of problems of children
- Schools should be the right places to educate the children (boys and girls) about their issues and problems like child rights , legislations related to children, child labour, child marriages ,health and nutrition ,menstrual hygiene ,child trafficking , child abuse (good touch and bad touch)and its consequences.
- NGOs and all child care institutions and schools should pay attention to provide Life skill education right from childhood
- Reduce the educational stress among children to reduce the incidence of children running away from home

CHILD MARRIAGE RELATED

- Registration of marriage should be made mandatory through policy and legislation and this should be taken to the community level, as only then can the incidence of child marriages can be controlled to the maximum extent.

POLICY RELATED

- Some of the rules and sections of the JJ Act regarding the age wise segregation of children in to CCIs should be revisited by policy makers.

5. FUTURE HOPES AND ASPIRATIONS

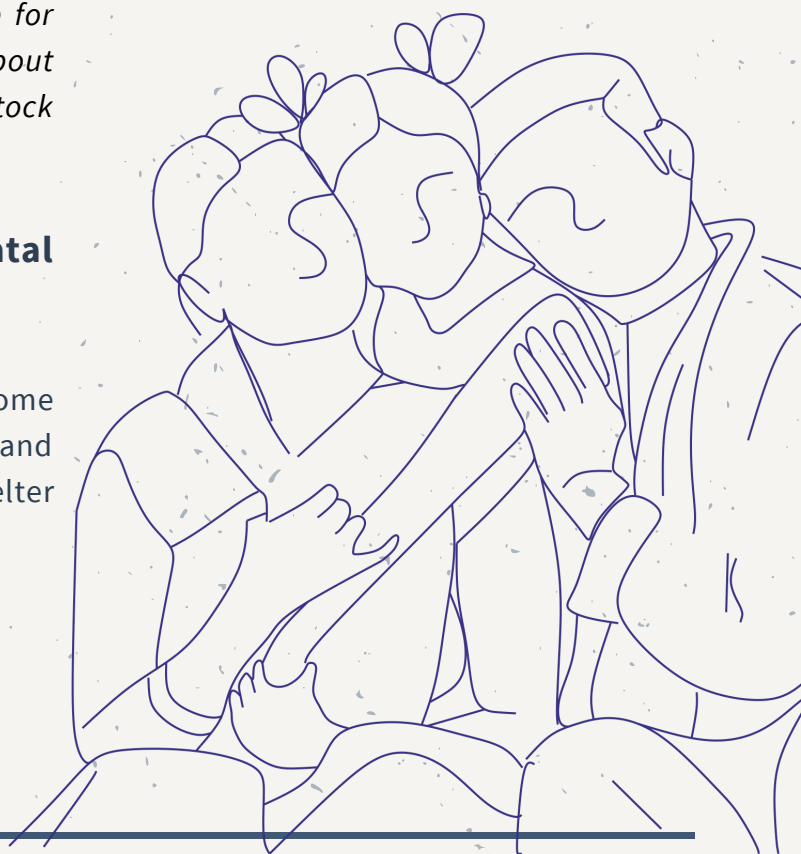
As part of the Study, the researchers undertook an exploration of the aspirations and notions of future young mothers in the shelter homes. Across both the States, adolescent girls hope and aspirations for the future were primarily related to:

- Reconnecting with their natal or marital home,
- Settling down, marrying their lovers, and/or
- Aspiration for economic independence and a better life

The girls stay at the shelter home had given them space for introspection as well and as highlighted by one of the respondents during the FGDs, *“this time at the shelter home has given me the chance to think about my life for the first time. I have been able to think about what I want my future to look like and take stock of my actions thus far”*

5.1 Reconciliation with the natal home/parents

In Rajasthan, the connection with natal home was maintained by only five (5) of the girls and their parents who visited them in the shelter home.



FUTURE HOPES

While these girls longed to go back to their natal homes, they pointed out that to the researchers that while their parents are willing to take them back, they have imposed some conditions on them. A common condition noted was that parents wanted the girls to give a statement against the boys in court.

For instance, Arti reported that her parents come to visit her in the shelter home and wanted her to come back home. However, she was hesitant to go back home, as her parents were not willing to take back the case filed against Arti's male friend. In another instance from Rajasthan, Fatima's parents continued to disapprove and were opposed to her choice of partner. However, they had told her that they would continue to visit her till she was residing in the shelter home. Gayatri's shared with the research team that *"My parents used to come to visit me earlier in the shelter home, but when they heard about my pregnancy, they stopped coming. I saw my parents last in 2015"*.

A few girls expressed that they regretted the choice and decisions they had made and would like to apologise to their parents. Fatima from Rajasthan pointed out *"I wish I had not taken such a drastic step. I had lot of freedom but I duped my parents"*

In Rajasthan, adolescent girls expressed that they wanted to go back once to their parent's home and seek their forgiveness. A few girls in Andhra Pradesh (Neeraja, Swetha, Veena, Chandini and Neela) also expressed that they would like to go back to their parents/ family. They would listen to whatever their parents suggest and were keen to settle down in life.

Neela regretted her decision to run away and said *"I married without listening the words of my grandmother, now I have learnt a good lesson in the form of (this) punishment....If I had cared for my granny's words, I would be in a good condition like the other girls of my age group"*.

Swetha on reflection shared *"I reached the shelter home due to lack of maturity ...I advise all teenage girls of my age to please listen to your parents and never believe anyone.... If I had listened to my father it would have been better"*

"My parents used to come to visit me earlier in the shelter home, but when they heard about my pregnancy, they stopped coming. I saw my parents last in 2015"

Gayatri, Rajasthan

5.2 Future hopes and plans regarding marriage and settlement in life

The researchers noted that most of the adolescent girls lived in the hope of going back to the persons they eloped with. They were confident that the boys/men would be waiting for them to return, after they leave the shelter homes. The young mothers were also confident that they would be accepted by the boys/men and their families.

Reena shared that while her parents had not come to meet her in the shelter home, she was confident that her in-laws had no objections to her alliance and she would go back to the boy once she turns 18. She clearly mentioned to the research team that she did not want to go her parents' house. Fatima similarly shared that she wants to go back her marital home after she turns 18. She aspired to study further and work in a beauty parlour. She said that her husband's parents were ready to let her work and study. Nanda wanted to go with her child's father once she was out of the shelter home. She was confident that she could manage her life, though she had not thought much about the future.

A few of the girls from Andhra Pradesh (five girls) were also quite optimistic about getting married and having a family once they were released from the shelter home. Sravya, 18 years old, from Andhra Pradesh in her ninth month of pregnancy, sharing her future plans said:

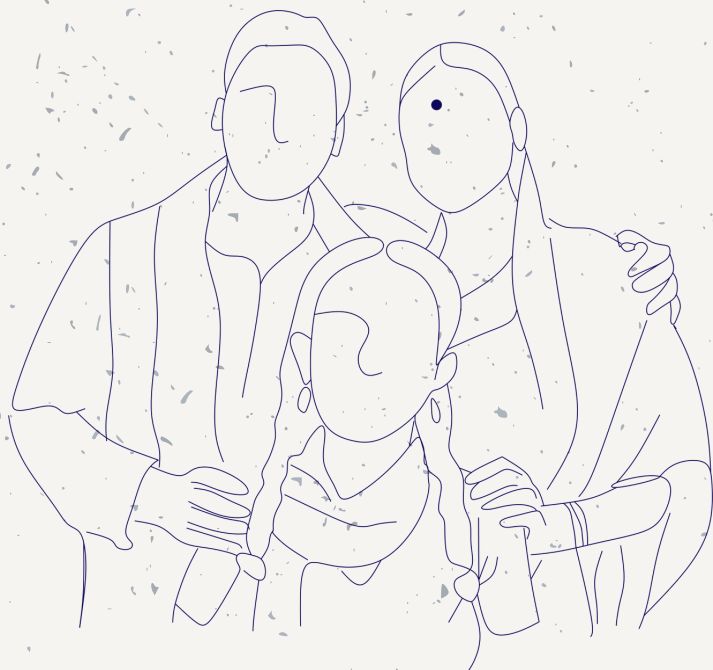
“

"No one knows that I am here. But I will phone my husband after my delivery. He will come and take me. He likes me having a baby.

We got married after my pregnancy was confirmed. I will not give my baby for adoption. I will learn tailoring. Or any other work. The three of us will live happily"

Sravya, Andhra Pradesh

”



FUTURE HOPES

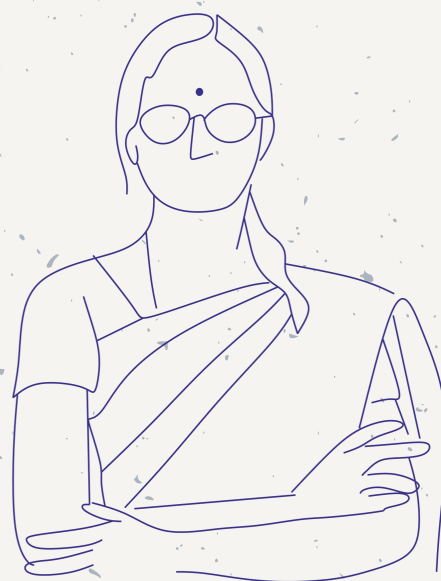
Anupama an ex-resident of a shelter home now aged 20 living with her seven-year-old daughter had lost all contact with the father of her child many years ago, since he disowned the child. Living independently, she is earning a living stitching clothes and is still getting support from the ex-warden of the shelter home. She said *"I will get married if I come across a person who will take good care of me and accept my daughter."* Some of the girls were very preoccupied with the thoughts of their partner/ husband and they were desperate to get back to them as Jeevani from Andhra Pradesh said *"I will marry the person whom I have loved. I will die if his family members don't agree"*. Hemalatha too revealed that she wants to only marry her boyfriend with the consent of her parents because *"Though I am trying to forget him, it is not possible for me, otherwise she don't want to marry anyone."*



5.3 Future aspirations related to Economic Independence

Relationship between education and pregnancy including young motherhood is indeed a complex issue. Education is seen as a key factor to overcome inter-generational transmission of poverty. Most of the girls in the Study had discontinued their studies long before they entered the shelter homes. For the few who were still studying, stay in the shelter home gave them a much-needed opportunity to introspect and plan their future. These girls were keen on attaining economic reliance.

In Rajasthan only a few of the girls wanted to be economically independent once they were out of the shelter home. Deepa was clear that once she leaves the shelter home, she would look for a job and work for a couple of years. She shared her dreams and noted *"I am going to join the police force and do something good in my life and show my parents that I am worthy of them"*. She also shared her hopes to marry her boyfriend in the near future. Deepa stated that she was not afraid anymore and was determined to pick up her life and pursue her dreams. Similarly, Arti wants to get married with a proper ceremony. She also wanted to complete her studies through open school and then open her own beauty parlour.



FUTURE HOPES

In Andhra Pradesh as well, according to the girls interviewed, completion of their studies will land them in a good job which will make them economically independent. Sujana from Andhra Pradesh said , *“My goal in life before coming here was to become a teacher. But it has changed after coming to this home. After seeing the inmates here, I have decided that I should become a police constable. I have to study well. Of course, I will study well. I have to complete my subject ‘civics’ and Telugu”*



It is interesting to note that many girls wanted to study further and enter into jobs in the police department. Jahnavi who had left the shelter home and was now residing in a Kasturba Gandhi Balika Vidyalaya (residential school) and studying in Grade 8 said, *“I want to become a police officer. I will study well and get a job. For achieving my goal, I will need the help of my mother who is my strength. I have a lot of confidence in her after this incident.”*

Neeraja, also wants to become a police officer. She said *“I want to study well and become a police constable I am like a tree. I will grow once again though I am cut down”*.

Many girls aspired to join the police is interesting since for many the police intervention was responsible for them having reached the shelter homes.

5.4 Motherhood and plans for offsprings

The young mothers had differing view regarding the future of their children. Amongst the young mothers, in Rajasthan only one (1) wanted to surrender her child and three (out of seven mothers) in Andhra Pradesh wanted to give up their babies for adoption. In Rajasthan, the teenage mother with the child born as a result of sexual abuse wanted to begin all over again. She was keen to study and aspired to be a police constable. At present, she was awaiting order/s from the court for her release from the shelter home. The other mothers (Jahnavi, Mani and Poornima from Andhra Pradesh) also wanted to give up their babies for adoption to the *Balasadan* and start a new life.

Except for the above four adolescent mothers, the remaining girls (84.6 percent) wanted to take care of their children and educate them. They were confident that they would be able to work and look after them. They aspired to keep their babies with them and get married to a person who would take good care of them. Anupama from Andhra Pradesh said *“I don’t want to give my baby in adoption. My child should not become an orphan. I will learn tailoring, earn a proper living and fulfill all my child’s dreams”*.

Neela also from Andhra Pradesh said *“I don’t want to give up my baby in adoption. I will marry someone who will take good care of me and my child”*.

5.5 Other reflections

Stay in the home(s) had led to the girls to introspect and delve into their aspirations for the future.

Some of the girls interviewed had a strong feeling of remorse regarding their stay in the home and regretted the choice and decisions that led to their current situations. They shared with the researchers that they were now aware of health risks with underage pregnancies, acknowledged their own immaturity in trusting their partners. They noted that they were saddened by the experience of stigma of becoming unwed teenage mothers. However other girls shared with the researchers that their stay in the shelter home has given them more confidence and they were motivated to do well once they got out of the shelter home. Life in the shelter home had allayed many of their fears and some of the girls were ready to take up any occupation for their livelihood including dancing, singing, working in a shop or starting a small enterprise if given a loan.

FUTURE HOPES

Overall, the researchers noted that girls in the home demonstrated diverse and varied aspirations and expectations. However, a common theme that emerged was that each of them wanted to change their life trajectory and they aspired for a stable life and livelihood.

5.6 Life after leaving the shelter home

In addition to providing care and protection to children in need, the CWC also oversees social re-integration of children into families. CWC members stated that reintegration and rehabilitation is not easy in the shelter homes as the duration of stay is varied. Some girls stayed for a few days while some stayed for a couple of years. Therefore, CWC have not been able to provide any sort of sustained rehabilitation programme. One of the Superintendent's from Rajasthan shared that when a girl turns 18, she is free to decide whether she wants to go back to her natal home or with her partner. If the girl does not want to go back to either, she is sent to *Nari Niketan*. CWC members shared that in the *Nari Niketan*, (where older girls/women reside) marriages are often arranged by the government. A big function is organised, and 700-800 people are invited. Girls who have moved out of the shelter home and have got married are also invited with their families. After the marriage, the authority's follow-up on the girls to check whether they are settled and happy. Counselors also shared that many girls from the shelter homes who were transferred to the *Nari Niketan* have been married and the marriage function has been organized by the government department.

In all the three shelter homes in Rajasthan, the superintendents reported that when the girls are asked about their future plans after leaving the shelter homes, a majority of the girls were very confident that they would go back to their partner since they continued to have blind faith in the boys. A few were desirous of going back to their natal homes and as stated by the Superintendent *"Family rehabilitation is the best solution. No one can look after the girls better than parents and whatever mistakes one makes; parents will always forgive. So, the effort should be to ensure that the girl goes back to her parent's house"*

Given that the girls are hopeful of their future, an effort was also made to follow up on some of the girls who had left the shelter homes, to understand their trajectories post their stay in the shelter homes. However, the research team was informed that the CWC or the shelter home functionaries do not follow up once the girls leave the shelter home.

The research team contacted a girl aged 22 years, Sudha, who had left the shelter home with the help of an NGO and conducted a telephonic interview. A snapshot based on the telephonic conversation is provided below.

“

Life after leaving the Shelter Home

Sudha a resident of Agra was married at the age of 15 years and her marital home was located in Haryana. Soon after marriage she stayed with her husband for a period of six months and then returned back to her parents. Her married life was marked by violence and abuse.

On account of the violence, Sudha left home with her boyfriend as she did not want to go back to her marital home. She realized that she was pregnant and during this period, her parents lodged a complaint against the boyfriend, and she was traced in Jaipur. The police brought her to the Balika Griha.

Sudha was 16 years old when she came to the shelter home (she stated that her parents had shown her age as 14 years in their complaint). She stayed in the shelter home for a period of 3 years. Sudha's daughter was born in the shelter home and she shared that good care was taken of her child.

Initially, Sudha's parents were reluctant to take her back as they feared ostracisation by the community. The boyfriend who Sudha had eloped with, also ditched her and was not interested in taking her back with him. There was another girl called Preeti who was also residing in the shelter home. Sudha made friends with her and Preeti was very supportive.



“

According to Sudha “Preeti helped me a lot and supported me when I left the shelter home. She also helped me reconcile with my parents and I could get out of the Balika Griha before my time "I stayed with her in Gurgaon with my daughter. Later my parents decided to shift to Gurgaon and looked after my daughter.

Sudha shared with the research team that she is working in a call centre and earns Rs.8000/- per month. She said she has studied only till Class VIII, so it is difficult to get a better job. Recently, Sudha decided to leave her child (who was born in the shelter home) in a Shishu griha (childrens home) in Jaipur. She says she decided to do this as the environment in the locality where she stays is not good. Sudha's main concern is that her daughter should be safe and have a good future. She has visited her daughter twice in the shelter home since then.

Sudha says “I took the decision that I felt is in the best interest of my child. This was a very difficult step for me to take, but as a mother I need to do what is best for my child and hope she has a secure and safe future”

-Sudha 22 years, ex-resident from shelter home



FUTURE HOPES

Another girl who had stayed previously in the shelter home from Andhra Pradesh was interviewed by the research team. After turning 18 years Kavya left the shelter home and got married to the same person she had fallen in love with earlier. At the time of the interview, she was pregnant with her second child (4th month) and appeared to be happy. She shared, *"My time in the shelter home has taught me a lot about life, growing up and being responsible. I am at a happy place in my life and look forward to what the future has in store for me. All will be well"*



6. CONCLUSIONS AND RECOMMENDATION

This Study specifically focussed on understanding the lived experiences of adolescent pregnant girls and young mothers and the nature of institutional support provided to them in the shelter homes.

The researchers note that a variety of socio-economic factors are pushing adolescent girls into early sexual activity/romantic relationships. These complex factors at various levels of the self, families, communities and institutional systems, were at play and contributed to the experiences of these adolescent girls. While the pathways of each of these adolescent girls were unique and distinct, the stories have helped the researchers identify areas which require policy reform and course correction. Based on the report findings, specific recommendations for policy and programmes are given below.

6.1 Time to revisit and recontextualise SRH programmes whilst acknowledging adolescent sexuality

The Study highlights the challenges around the contested terrains of adolescent sexuality, sexual behaviour, and exercise of agency/ choice for adolescent girls. The interviews recorded attest to traditional social norms expecting adolescents (especially girls) to be sexually inactive as being anachronistic.

As reflected in NFHS-4 data, sexual activity of girls below 18 years of age manifests itself in the form of incidences of teenage pregnancy which need to be recognised and acknowledged by policy makers as well as civil society organisation working specifically with adolescent girls.



CONCLUSIONS

These outdated social norms appear prescriptive and inconsistent with the reality of adolescent girls who are engaging in sexual activity out of their “choice”. Sexually active adolescent girls are faced with the prospect of being shamed and stigmatised on account of living in a society where adolescent’s girls sexuality is closely associated with notions of “family honour”. Transgression of these prescriptive norms/boundaries viewed as a “breakdown” of traditional values and requiring “control” over the adolescent girl.

As seen in the Study, adolescent girls are caught in this conflict between what is “expected” and what they “desire”. It is relevant to highlight that Harden (2014) proposed that consensual sexual activities in adolescence should be considered as ‘*developmentally normative and potentially healthy*’ in contrast to the predominant “risk” perspective that presumes that abstinence from sexual activity is the ideal behaviour for teenagers. He states that adolescent sexuality can be fostered “*by considering sexual well-being, a multidimensional construct that incorporates an adolescent’s sexual self-efficacy, sexual self-esteem, feelings of sexual pleasure and satisfaction, and freedom from pain and negative affect regarding sexuality*” (Harden, 2014, p.1).

Focusing on this issue is critical, as only once policy makers understand and acknowledge the needs of adolescents can effectively programmes around sexual and reproductive health (SRH) be formulated and implemented.

Anupama who became a mother at 13 years of age laments ‘*We need to support teenage girls to control their emotionsthey should learn what is good touch and bad touch and reproductive health... this should be taught at schools by teachers and parents should also educate their children*’.

It is vital to highlight that on one hand the Study highlights sexual activity amongst adolescents and on the other their limited access to information, practice and accessibility to sexual reproductive health services. These patterns translate into the inevitable, cases of adolescent pregnancy.

As narrated in the previous chapters, there was a severe lack of basic information on sexual health in majority of the girl’s narratives. Many of the adolescent girls did not realise they were pregnant until the sixth or seventh month of pregnancy nor were, they aware of the need to use contraceptives. Based on these narratives it would appear that issues around sexuality and SRH continue to be shunned for open discussion in the Indian context.

CONCLUSIONS

Many girls adopted unsafe abortion practices due to which they face health issues. Thus, lack of sexual reproductive knowledge placed these girls at risk of elevated exposure to sexually transmitted infections including HIV, unwanted pregnancy, physical and sexual abuse by older partners (Amo-Adjei & Tuoyire, 2017).

The researchers feel it is vital to contextualise SRH programmes and ensure young adolescents (both boys and girls) are informed about their physical well-being, health and body, and are made comfortable to discuss reproductive health concerns with parents, health care providers and educators. Further, it is vital for SRH programmes to be offered for both-in-school and out of school children.

6.2 Need to ensure access to education for all- From rhetoric to practice

The Study highlights that a significant majority of adolescent girls interviewed have been denied access to opportunities to complete their school education. As per the existing literature denial of access to education is a key determinant of adolescent pregnancy and motherhood (UNFPA, 2015; UNESCO, 2017). A disengagement with the education system (marked by parents stopping girls from attending school) is often a precursor to child marriage as their lives revolve around household chores or a struggle to earn a living with not much to aspire to except the next stage of life -which in India is inevitably, marriage and childbirth-which are all status symbols leading to improved social situations.

It is vital to point out that in addition to the Constitution (Eighty Sixth Amendment) Act, 2002 which inserted Article 21-A and with Right of Children to Free and Compulsory Education Act, 2009 which provides for free and compulsory education for all below 14 years of age, it is vital for policy makers to acknowledge the Sustainable Development targets for 2030.



CONCLUSIONS

These targets go beyond the ambit of primary and education and call for ensuring the *completion of primary and secondary education by all boys and girls, and guaranteeing equal access to opportunities for access to quality technical and vocational education for everyone*. The targets specifically call for policy interventions to improve both access and quality, as well addressing relevant obstacles including gender inequalities.

The Study highlights how the adolescent girls interviewed were denied these opportunities to education inspite of these legislations and conventions. Access to education remains a distant reality for vulnerable girls, especially those born in poverty.

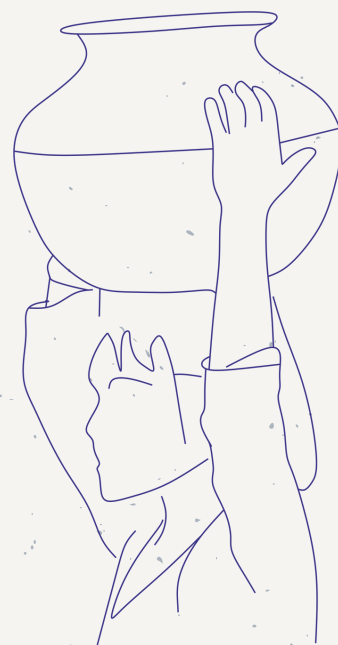
Accordingly, it is vital for policy makers to take corrective action as the stories narrated in this Study represent adolescent girls whose human rights have been violated -by their being denied an opportunity to pursue an education. It is upon the State to ensure these stories are not perpetuated by inability of India's education policies to address the needs of the most marginalised and excluded.

In summation, one cannot help but wonder had these girls been equipped with a relevant quality education- including life skills education, technical and vocation learning would their trajectories have been different. Would they have relied on their education to forge an identity of their own and not rely upon marriage, as a way out of their dire life circumstances.

6.3 Need for better poverty alleviation schemes to meet the needs of most vulnerable

Interviews recorded from the adolescent girls as well as the FGDs highlight specifically how household poverty has been the starting point (which forced many of the respondents to drop out of school and look after themselves and their families instead) and resulted in the adolescent girls finding themselves behind the four walls of the shelter home.

When families face acute financial distress, the adolescent girls noted that there was an absence of safety nets that could provide these young adolescents and their families with access to poverty alleviation schemes.



CONCLUSIONS

In order to escape extreme poverty, the Study has highlighted how adolescent girls were seen taking risks and eloping with older and even married men. While the researchers note that the adolescent girls are reporting “being in love”- given the stark age differences between the men and the girls in some instances, as well as the existence of a first wife and family in some other cases, coupled with acute poverty faced by the adolescent girls and lack of opportunities- including educational opportunities available to them- “options” available to the adolescent girls appear limited.

It could be argued that in such extreme circumstances, the young girls are being induced by older men into these relationships, by selling them visions of a better future. As highlighted by Sowmini (2013) *“many of these young women were highly vulnerable to exploitation; their experiences suggest an alarming rate of exploitation of adolescent girls”* (Sowmini, 2013, p. 245). Thus, poverty clearly manifests itself in girls being extremely vulnerable and finding themselves at the crossroad of survival and are forced to make life choices which are harsh and unpleasant.

Given this reality, it is vital for policy makers to ensure poverty alleviation schemes, specifically address issues related to guaranteeing educational opportunities to children born in these vulnerable situations. Further, the Integrated Child Protection Scheme and the village panchayats should be informed about families which are rendered vulnerable on account of poverty- as from poverty arises the cycle of abuse, exploitation and severe violation of rights- especially for the young girls and women who face even greater vulnerabilities.

6.4 Critical to provide protective environments

The lack of care, safety, protection of girls in natal and marital families was evident in many of the respondent’s narratives, with girls even ending up becoming victims of criminal offences such as sexual assault and incest. The Study notes that the adolescent girls were mostly unaware of their rights – including in case of abuses (both inside and outside the natal home). Some instances which were shared by the adolescent girls included their seeking help from the police, but their voices were often not heard.

All these narratives highlight the need for a stronger child protection system which focuses on building a preventive environment for vulnerable adolescents.

CONCLUSIONS

Stronger systems need to be developed with the support of local non-governmental organisations, village panchayats, district officials to create a network wherein vulnerable girls are adequately protected and their rights secured.

Active steps like the formation of Village child protection committees mobilized under ICPS may also serve to be useful towards ensuring a stronger decentralised child protection system.

6.5 Strengthening Shelter homes

While the researchers note that there are significant areas of reform required, the Study found that the shelter homes were seen by the majority of girls as a 'safe space' by the girls and they seemed to have adjusted well to the shelter home settings^[20]. Whilst acknowledging the strengths within majority of the shelter homes visited, it is also essential to highlight areas of improvement.

Only in one of the NGO run shelter home in Andhra Pradesh did two girls complain about the management.

Ramani complained that *"I am unable to bear the torture and cruelty of the shelter home manager, I want to die I don't want to stay here, I also attempted suicide by swallowing the pieces of glass bangles, bottle pieces and earrings to end my life, but still I am alive."*

Chandini living in the same shelter home also shared that most of the girls are not happy in the shelter home. She felt that the counselor of the home showed a lot of favoritism. She said that *"Few girls are always scolded and blamed and the counselor of home never shows any love towards me, many times I felt that I rather die and end my life"*.

There is no 'stigma' attached to being pregnant and being a young mother within the shelter home. Their time in the shelter home provided the respondents with the much-needed support to manage their pregnancies and deal with motherhood, a space to introspect, understand their situation(s), and also plan for their future. The girls were accepted by the shelter home officials, as well as the other residents of the home. The shelter homes provide an opportunity for the girls to live together beyond the class/caste/religious divisions. They also developed companionship and a sense of camaraderie.

[20]Note, this observation is based on the findings from the exploratory Study and cover findings from the eight (8) shelter homes visited. The researchers acknowledge that the findings cannot be generalised across all shelter homes and a more detailed study with a significant sample of shelter homes needs to be undertaken to comment on the nature of these shelter homes, the experience of adolescent girls residing therein and the service rendered to those in need of 'care and protection'.

CONCLUSIONS

Jahnavi expressed that *“I found that there were a number of girls of my age in the shelter home like me some of them are very younger than of me and had already given birth to children . this has helped me adjust and I never felt bad about my condition. No one blamed me here”*.

Various interviews with the girls in the shelter home provide some evidence that the health and nutritional needs of the pregnant girls and young mothers were taken care of however, many wardens complained about lack of sufficient visits by the ANM. They felt this area required more attention to ensure regular health check-ups are provided to all the girls residing in the shelter homes.

It is also noted that while the shelter homes are seen as 'safe-havens' by the girls who wait to be 18 years of age to be able to pursue their dreams, there is little information on what happens to these girls once they leave the homes. Follow up of these cases is a weak area and needs to be addressed.



CONCLUSIONS

6.6 Shelter homes programme's enhancement

The researchers are of the view that 'Life skills' education should be provided in the shelter homes along with vocation skills. Awareness programme on adolescent development and possible risks during this developmental period should be conducted in the homes. Group activities that promote interpersonal relationships and strengthen social skills should also be promoted in the institution on regular basis.

- Another lacuna highlighted was the lack of any formal education opportunities being provided to young girls in the shelter homes in Rajasthan. While the shelter home staff help these girls informally, there is no policy to ensure they are given access to formal educational opportunities. Further, vocational training is limited to tailoring and beautician courses which offer limited opportunities for the girls to ensure their financial independence, once they move out of the shelter homes upon reaching 18 years of age (majority).



From the interviews with the Government officials in Rajasthan it is noted by the researchers that as many of the girls residing in the shelter homes are school drop outs. Accordingly, regular programs for their educational upgradation should be organised. This can be done in convergence with the Department of Education and NIOS centres can be started in the shelter homes. Furthermore, the current skill development courses may need to be reviewed from a livelihood perspective and in terms of usability and sustainability. The current programmes are gendered and limited to beauty courses and tailoring. Courses that are more contextual may be explored based on market demand to ensure the girls once 'released' from the shelter homes are equipped to earn a livelihood.

CONCLUSIONS

Similarly, it is noted that in Andhra Pradesh there are educational programmes in place but the teaching/ education component in the homes needs a thorough review and re-evaluation. On account of lack of adequate staff, the study hours are not organised and school dropouts in the shelter homes visited are not being mainstreamed to pursue their future education. Further, there is a need to converge with the government programmes related to adolescent girls like '*Kishore baalika*' which can be conducted in the shelter homes.

6.7 Enhancing skills of staff members in shelter homes

As demonstrated in the interviews with officials in Rajasthan and Andhra Pradesh, to ensure safety of the adolescent girls and avoid any untoward incidences within the confines of the shelter homes, it is vital that all the shelter homes should be provided with adequate staff who are permanent and not contractual.

Another area which requires attention and which emerged from the interview was the need for training programme for the support staff of the homes. The content of the programme can comprise of the need for developing essential skills such as empathy, providing support and reassurance, problem solving and decision making and above all a proactive attitude towards young mothers and pregnant girls can go a long way in helping the adolescent girls in dealing with their traumatic circumstances. Thus, the staff needs to be trained continuously to enhance skills and be gender sensitive.

Based on the reflective session undertaken in Rajasthan, staff at shelter homes pointed out that it is essential to appoint trained counsellors. Akin to Rajasthan, in Andhra Pradesh, the researchers were of the view that counseling services were grossly inadequate and there was a dire need for trained counselors in the homes to help children deal with their varied psychosocial experiences. Pregnant girls and young mothers needed preparation for motherhood and childcare. Further, the need for family counseling also needs to be emphasized and given due importance. Parents of the girls admitted in the home need to be counselled about the aftercare that must be provided to the adolescent girls once they are discharged from the shelter home.

In the view of the researchers, it may be wise to ensure that all CWC and shelter staff are given basic training on psychosocial needs of adolescent girls as it will greatly benefit them whilst working with them. Given the instance of self-harm and attempted suicides that came to light from the interviews, it would also be important for staff employed in the shelter homes to recognize and make timely referrals for children 'at risk' of mental health problems.

CONCLUSIONS

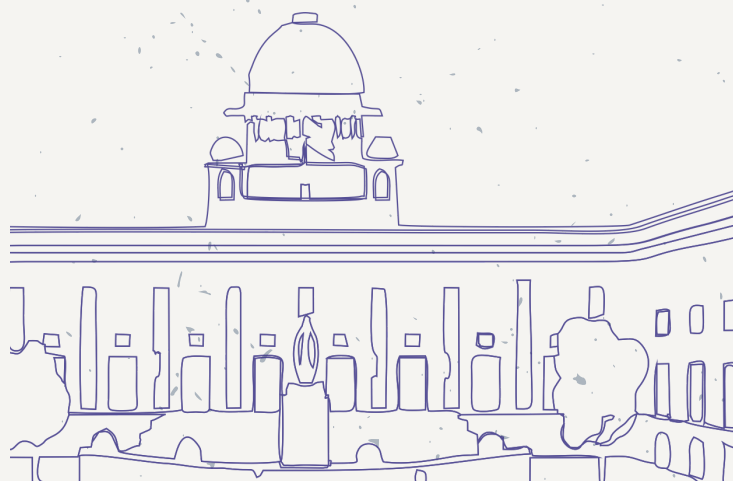
Furthermore, staff at the shelter home should undertake activities with the adolescent girls wherein they work with them and counsel them on future plans- in order for them to actively think about their trajectories once they leave the home. Follow ups by NGOs or the shelter home staff over a targeted period must be undertaken to ensure girls leaving the shelter homes continue to remain protected and ensure they do not find themselves in vulnerable situations, yet again.

6.8 Stronger Implementation of Law

The Supreme Court of India in its judgment in *Independent Thought*^[21] which discussed the harms and consequences of child marriage, ruled that child marriage is “*reprehensible practice... an abhorrent practice; that... violates the human rights of a child*” and expressly criminalised sex with a minor wife, however the reality beyond the confines of the Supreme Court is vastly different.

Regardless of the Supreme Court Judgement in *Independent Thought*, the Study highlights that in Andhra Pradesh and Rajasthan, the prevailing social norms accept child marriage and this remains a social reality. Further, adolescent pregnancy and motherhood provided it occurs within the child marriages arranged by families - is widely accepted and has no associated stigma. Unfortunately, the far-reaching judgment of the Supreme Court has made precious little impact on the lives of the adolescent girls and their lived realities remain marred by dogma, patriarchy and scant regard for women’s agency.

The researchers are of the view that until such that child marriage is made void and not voidable, as is the current law i.e. the PCMA, the issue of child marriage will remain pervasive and the judgments of the Supreme Court will remain a scholarly prose confined to the book of law and worthy of scholarly review for its jurisprudential value but distant from the subject whose life it aims to improve.



[21] *Independent Thought v. Union of India & Anr.*, W.P. (C) 382 of 2013, S.C.C, 11 Oct. 2017 [hereinafter *Independent Thought*]. The Court in *Independent Thought* reviewed a wide range of material detailing the harmful effects of child marriage, and summarized their understanding as follows: “*an early marriage and sexual intercourse at an early age could have detrimental effects on the girl child not only in terms of her physical and mental health but also in terms of her nutrition, her education, her employability and her general well-being.*”

REFERENCES

- Allendorf, K. (2013). Schemas of Marital Change: From Arranged Marriages to Eloping for Love. *Journal of Marriage and Family*, 75(2), 453–469. doi: 10.1111/jomf.12003
- Amo-Adjei, J., & Tuoyire, D. A. (2017). Timing of Sexual Debut among unmarried youth aged 15-24 years in Sub-Saharan Africa, *Journal of Biosocial Science*, 50(02), 161–177
- Ayison W. R. (1997). Single motherhood and mental health: implications for primary prevention. *Canadian Medical Association Journal* 156(5), 661–663.
- Barkat, A., Khan, S.H., Majid, M. and Sabina, N (2000). *Adolescent Sexual and Reproductive Health in Bangladesh: A Needs Assessment*, Dhaka, Bangladesh, International Planned Parenthood Federation (IPPF) and Family Planning Association of Bangladesh (FPAB).
- Beers, L. A. S., & Hollo, R. E. (2009). Approaching the Adolescent-Headed Family: A Review of Teen Parenting. *Current Problems in Pediatric and Adolescent Health Care*, 39(9), 216–233. doi: 10.1016/j.cppeds.2009.09.001
- Carver, K., Joyner, K., & Udry, J. R. (2003). National estimates of adolescent romantic relationships. In *Adolescent romantic relations and sexual behavior* (pp. 37-70). New York, N.Y. London: Psychology Press.
- Choudhry, V., Östergren, P-O., Ambresin, A-E., Kyagaba, E. & Agardh, A. (2014) Giving or receiving something for sex: a cross-sectional study of transactional sex among Ugandan university students. *PLoS One* 9(11), e112431. Accessed from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4227706/>
- Christiansen, C. S., Gibbs, S., & Chandra-Mouli, V. (2013). Preventing Early Pregnancy and Pregnancy-Related Mortality and Morbidity in Adolescents in Developing Countries: The Place of Interventions in the Pre-pregnancy Period. *Journal of Pregnancy*, 2013, 1–5. doi: 10.1155/2013/257546

REFERENCES

- Clear, E., Williams, C. and Crosby, R. (2011). Female Perceptions of Male Versus Female Intendedness at the Time of Teenage Pregnancy. *Maternal and Child Health Journal*, 16(9), pp.1862-1869.
- Clemmens, D. (2003). Adolescent Motherhood. MCN, *The American Journal of Maternal/Child Nursing*, 28(2), 93–99. doi: 10.1097/00005721-200303000-00010
- Collins, W. A., Welsh, D. P., & Furman, W. (2009). *Adolescent romantic relationships*. Annual review of psychology, 60, 631-652.
- Collins, W. A. (2003). More than Myth: The Developmental Significance of Romantic Relationships During Adolescence. *Journal of Research on Adolescence*, 13(1), 1–24. doi: 10.1111/1532-7795.1301001
- Connolly, J., Furman, W., & Konarski, R. (2000). The role of peers in the emergence of heterosexual romantic relationships in adolescence. *Child development*, 71(5), 1395-1408.
- Crivello, G., Roest, J., Vennam, U., Singh, R., & Winter, F. (2018). Marital and fertility decision-making: The lived experiences of adolescents and young married couples in Andhra Pradesh and Telangana, India. India: Young Lives
- Dalton, E. D. (2014). The Protective Effects of Adolescent Motherhood in South Central Appalachia. *Journal of Transcultural Nursing*, 26(4), 409–417. doi:10.1177/1043659614524249
- Dangal, G. (2006). An Update on Teenage Pregnancy. *The Internet Journal of Gynecology and Obstetrics*, 5(1). doi: 10.5580/9ff.
- Darroch, J. E., Woog, V., Bankole, A., Ashford, L. S., & Points, K. (2016). Costs and benefits of meeting the contraceptive needs of adolescents. Retrieved from https://www.guttmacher.org/sites/default/files/report_pdf/adding-it-up-adolescents-report.pdf
- Domenico, D.M. and Jones, K.H. (2007) Adolescent pregnancy in America: Causes and responses. *Journal for Vocational Special Needs Education*, 30, 4-12.

REFERENCES

Duncan, S. (2005). *What's the Problem? Teenage Parents: A Critical Review*. Families & Social Capital ESRC Research Group Working Paper No. 15. Retrieved from <https://pdfs.semanticscholar.org/2a7c/6440a85446410cc944265aa30149e4155734.pdf>

Dwivedi, N., & Sachdeva, S. (2019). Gender-based violence in New Delhi, India: forecast based on secondary data analysis. *Eastern Mediterranean Health Journal*, 25(4), 262-268.

Esparza, D. V., & Esperat, M. C. R. (1996). The Effects of Childhood Sexual Abuse on Minority Adolescent Mothers. *Journal of Obstetric, Gynecologic & Neonatal Nursing*, 25(4), 321-328. doi: 10.1111/j.1552-6909.1996.tb02578.x

Furman, W., & Collins, W. A. (2009). Adolescent romantic relationships and experiences. *Handbook of peer interactions, relationships, and groups*, 341-360. Retrieved from <https://books.google.co.in/books?id=PdJAWztnJAIC&pg=PA341&ots=09M1MxpwKM&dq=Adolescent%20Romantic%20Relationships%20and%20Experiences&lr&pg=PP1#v=onepage&q=Adolescent%20Romantic%20Relationships%20and%20Experiences&f=false>

Ganatra, B. (2006). *Young and Vulnerable: The Reality of Unsafe Abortion among Adolescent and Young Women*. Arrows for change.

Ganatra, Bela. 2006. "Unsafe abortion in South and South-East Asia: A review of evidence," in Warriner, I.K. & Shah, I.H. (eds.). *Preventing Unsafe Abortion and Its Consequences: Priorities for Research and Action*. New York & Washington: Guttmacher Institute. pp. 151-186.

Ghebremichael, M. S., & Finkelman, M. D. (2013). The Effect of Premarital Sex on Sexually Transmitted Infections (STIs) and High Risk Behaviors in Women. *Journal of AIDS and HIV Research*, 5(2), 59-64.

Global Partnership to End Child Marriage (2018). Talking points: *Child Marriage and Maternal Health*. Retrieved from https://www.girlsnotbrides.org/wpcontent/uploads/2018/12/GirlsNotBrides_MaternalHealth_Web.pdf

Goossens, G., Kadji, C. & Delvenne, V. (2015). Teenage Pregnancy: A Psychopathological Risk for Mothers and Babies? *Psychiatria Danubina*, Vol: 27, Suppl. 1, pp 499-503

REFERENCES

Government of India. Juvenile Justice Act, 2015

Gupta, S. K., Tiwari, H. C., & Srivastav, R. (2019). Health seeking behaviour of women with unwanted pregnancies: a tertiary care centre based study of eastern Uttar Pradesh, India. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology*, 8(9), 3654. doi: 10.18203/2320-1770.ijrcog20193792

Habitu, Y. A., Yalew, A., & Bisetegn, T. A. (2018). Prevalence and Factors Associated with Teenage Pregnancy, Northeast Ethiopia, 2017: A Cross-Sectional Study. *Journal of Pregnancy*, 2018, 1–7. doi: 10.1155/2018/1714527

Harden, K. P. (2014). A Sex-Positive Framework for Research on Adolescent Sexuality. *Perspectives on Psychological Science*, 9(5), 455–469. doi: 10.1177/1745691614535934

Head, S. K., Zweimueller, S., Marchena, C. and Hoel, E. (2014). Women's lives and challenges: Equality and empowerment since 2000. Rockville, MD, ICF International. <https://www.usaid.gov/sites/default/files/documents/1864/WomensLivesandChallengesEqualityandEmpowerment.pdf>

Hazan, C., & Shaver, P. R. (1994). Attachment as an organizational framework for research on close relationships. *Psychological inquiry*, 5(1), 1-22.

Herrman, J. W., & Waterhouse, J. K. (2010). What Do Adolescents Think About Teen Parenting? *Western Journal of Nursing Research*, 33(4), 577–592. doi: 10.1177/0193945910381761

Heywood, W., Patrick, K., Smith, A. M. A. & Pitts, M. K. (2015) Associations between early first sexual intercourse and later sexual and reproductive outcomes: a systematic review of population-based data. *Archives of Sexual Behavior*, 44(3), 531–569

International Institute for Population Sciences (IIPS) and ICF. (2017). *National Family Health Survey (NFHS-4), 2015-16: India*. Mumbai: IIPS. Retrieved from <http://rchiips.org/nfhs/pdf/NFHS4/India.pdf>

Jaccard, J., Blanton, H., & Dodge, T. (2005). Peer Influences on Risk Behavior: An Analysis of the Effects of a Close Friend. *Developmental Psychology*, 41(1), 135–147. doi: 10.1037/0012-1649.41.1.135

REFERENCES

Janardhana, N., Manjula, B. (2018) Infatuation and love of an adolescent girl: Dynamics of parent child relationship. *Indian Journal of Child Health*. 5(2):99-103. Retrieved from <https://atharvapub.net/IJCH/article/view/746/630>

Jeejebhoy, M. (1996). *Adolescent Girls in Slums*. Delhi: Center for Women Development Studies

Kalokhe, A., Rio, C. D., Dunkle, K., Stephenson, R., Metheny, N., Paranjape, A., & Sahay, S. (2016). Domestic violence against women in India: A systematic review of a decade of quantitative studies. *Global Public Health*, 12(4), 498–513. doi: 10.1080/17441692.2015.1119293

Katke, R., Saraogi, M., & Pagare, P. (2014). Rising incidence of unwed mothers in India; associated social parameters and institutional guidelines for managing them. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology*, 3(4), 942. doi: 10.5455/2320-1770.ijrcog20141213

Lehman, R. S. (2001). The effects that adolescent pregnancy has on family life.

Lerner, R. M., & Steinberg, L. (2004). The scientific study of adolescent development: Past, present, and future. In R. M. Lerner & L. Steinberg (Eds.), *Handbook of adolescent psychology* (pp. 1-12). Hoboken, NJ, US: John Wiley & Sons Inc.

Macutkiewicz, J., & Macbeth, A. (2016). Intended Adolescent Pregnancy: A Systematic Review of Qualitative Studies. *Adolescent Research Review*, 2(2), 113–129. doi: 10.1007/s40894-016-0031-2.

Macnicol, J. (1987) In pursuit of the underclass, *Journal of Social Policy*, 16, 3, 293–318

Manjula, B., Janardhana, N., & Nirmala, B. P. (2018). Adolescent girls in romantic relationship under child protection system—Issues and concerns: A study from India. *Journal of Mental Health and Human Behaviour*, 23(1), 38.

Marcus, R., & Harper, C. (2015). *Social Norms, Gender Norms, and Adolescent Girls: A Brief Guide. From the Knowledge to Action Resources Series*. London: Overseas Development Institute. Retrieved from <https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9818.pdf>

REFERENCES

McCauley, A.P. and Salter, C.(1995). *Meeting the Needs of Young Adults*. Population Reports, Series J-41.

Mehra, M and Nandy, A (2019) *Why Girls Run Away to Marry : Adolescent Realities and Socio-Legal Responses in India*, Partners for Law in Development, New Delhi.

Mitra, N. & Parasuraman, S. (2015). *Child Marriage & Early Motherhood: Understandings from Lived Experiences Of Young People*. India: Tata Institute of Social Sciences and UNFPA India

Moore, A. M., Biddlecom, A. E. & Zulu, E. M. (2007) Prevalence and meanings of exchange of money or gifts for sex in unmarried adolescent sexual relationships in sub-Saharan Africa. *African Journal of Reproductive Health* 11(3), 44–61

Nanda, P., Kapoor, S., Mukherjee, S., Hersh, M., Basu, S., Bhargava, R., & Anju Malhotra, (2011). *Delaying Marriage for Girls in India*. India: ICRW and UNICEF

Neal, S., Mahendra, S., Bose, K., Camacho, A. V., Mathai, M., Nove, A., & Matthews, Z. (2016). The causes of maternal mortality in adolescents in low- and middle-income countries: a systematic review of the literature. *BMC pregnancy and childbirth*, 16(1), 352. Retrieved from <https://bmcpregnancychildbirth.biomedcentral.com/track/pdf/10.1186/s12884-016-1120-8>

Neal, S., Matthews, Z., Frost, M., Fogstad, H., Camacho, A. V., & Laski, L. (2012). Childbearing in adolescents aged 12–15 years in low resource countries: a neglected issue. New estimates from demographic and household surveys in 42 countries. *Acta obstetricia et gynecologica Scandinavica*, 91(9), 1114–1118. Retrieved from <https://obgyn.onlinelibrary.wiley.com/doi/full/10.1111/j.1600-0412.2012.01467.x>

Nordin, N., Wahab, R. A., & Yunus, F. W. (2012). Psychological Well-Being of Young Unwed Pregnant Women: Implications for Extension Education and Programs. *Procedia - Social and Behavioral Sciences*, 68, 700–709. doi: 10.1016/j.sbspro.2012.12.260

Nove, A., Matthews, Z., Neal, S., & Camacho, A. V. (2014). Maternal mortality in adolescents compared with women of other ages: evidence from 144 countries. *The Lancet Global Health*, 2(3), e155–e164.

Pachauri, S., & Santhya, K. (2002). Reproductive Choices for Asian Adolescents: A Focus on Contraceptive Behavior. *International Family Planning Perspectives*, 28(4), 186. doi: 10.2307/3088221

REFERENCES

Plan Asia Regional Office & ICRW. (2013). *Asia Child Marriage Initiative: Summary of Research in Bangladesh, India and Nepal*. Bangkok: International Center for Research on Women

Population Council. (2016). Understanding the lives of adolescents and young adults (UDAYA) - Bihar Fact Sheet. Retrieved from https://www.popcouncil.org/uploads/pdfs/2017PGY_UDAYA-BiharFactsheet.pdf

Raj, A. (2010). When the mother is a child: the impact of child marriage on the health and human rights of girls. *Archives of Disease in Childhood*, 95(11), 931–935. doi:10.1136/adc.2009.178707.

Salih, N. A., Metaferia, H., Reda, A. A. & Biadgilign, S. (2015) Premarital sexual activity among unmarried adolescents in northern Ethiopia: a cross-sectional study. *Sexual & Reproductive Healthcare* 6(1), 9–13

Save the Children. (2014): WINGS 2014. *The World of India's Girls*. New Delhi. Save the Children. Retrieved from <http://resourcecentre.savethechildren.se/sites/default/files/documents/wingsreportpdf.pdf>.

Sharma, J., Dwivedi, A., Gupta, P., Borah, R., Arora, S., Mittra, A., & Vora, A. (2015). *Early and child marriage in India*. A landscape analysis. Delhi, India. Nirantar-Trust.

Shealy, E. G. (2013). *And baby makes three: a content analysis of adolescent romantic relationships as portrayed on reality television*. (Unpublished doctoral dissertation). Clemson University, South Carolina.

Singh, R., Kesarwani R., & Mukherjee P. (2019). *Exploring Well-being Among 22-Year-Old Youth in India*. Delhi, India. Young Lives.

Singh, S., Remez, L., Sedgh, G., Kwok, L., & Onda, T. (2018). Abortion worldwide 2017: Uneven Progress and unequal Access. Retrieved from <http://clacaidigital.info/handle/123456789/1114>

Singh, S., Wulf, D., Samara, R. & Cuca, Y. P. (2000) Gender differences in the timing of first intercourse: data from 14 countries. *International Family Planning Perspectives* 26(1), 21–43

REFERENCES

Sowmini, C. (2013). Delay in termination of pregnancy among unmarried adolescents and young women attending a tertiary hospital abortion clinic in Trivandrum, Kerala, India. *Reproductive Health Matters*, 21(41), 243–250. doi: 10.1016/s0968-8080(13)41700-7.

Speizer, I. S., Kouwonou, K., Mullen, S., & Vignikin, E. (2004). Evaluation of the ATBEF Youth Centre in Lome, Togo. *African Journal of Reproductive Health*, 8(3), 38. doi: 10.2307/3583392

Srinivasan, Padmavathi; Khan, Nizamuddin; Verma, Ravi; Giusti, Dora; Theis, Joachim & Chakraborty, Supriti. (2015). *District-level study on child marriage in India: What do we know about the prevalence, trends and patterns?* New Delhi, India: International Centre for Research on Women. Retrieved from <https://www.icrw.org/wp-content/uploads/2016/10/District-level-study-on-Child-Marriage-in-India.pdf>

Tebeu, P. M., Fomulu, J. N., Khaddaj, S., de Bernis, L., Delvaux, T., & Rochat, C. H. (2012). Risk factors for obstetric fistula: a clinical review. *International Urogynecology Journal*, 23(4), 387-394. Retrieved from <https://link.springer.com/article/10.1007/s00192-011-1622-x>

UNESCO (2017): *Early and unintended pregnancy & the education sector*. Evidence Review and Recommendations. Paris, France. United Nations Educational, Scientific and Cultural Organization. <https://unesdoc.unesco.org/ark:/48223/pf0000251509.locale=en>

UNFPA (2015): *Girlhood, Not Motherhood – Preventing Adolescent Pregnancy*. New York. United Nations Population Fund. Retrieved from https://www.unfpa.org/sites/default/files/pubpdf/Girlhood_not_motherhood_final_web.pdf

United Nations Children's Emergency Fund : (2001). *Early Marriage: Child Spouses. Innocenti Digest (7)*. Retrieved from <https://www.unicef-irc.org/publications/291-early-marriage-child-spouses.html>

United Nations Children's Emergency Fund. (2019). *Ending Child Marriage: A profile of child marriage in India*, New York: UNICEF Retrieved from <https://data.unicef.org/resources/ending-child-marriage-a-profile-of-progress-in-india/>

United Nations Children's Emergency Fund. (2012). *Marriage in India: An analysis of available data*. New Delhi: UNICEF Retrieved from https://www.ecoi.net/en/file/local/1016041/1930_1386771388_childmarriage.pdf

REFERENCES

Unnithan, Kumar.M (1997). *Identity, Gender and Poverty: New Perspectives on Caste and Tribe in Rajasthan*. Oxford: Berghahn Books.

UN Women. (2019). *Families in a changing world*. UN Women https://www.unwomen.org/en/digital-library/progress-of-the-worlds-women#_Fact_sheets

Verma, Arvind & Qureshi, Hanif & Kim, Jee. (2016). Exploring the trend of violence against women in India. *International Journal of Comparative and Applied Criminal Justice*. 1-16. 10.1080/01924036.2016.1211021.

Wentworth, D. (2012, November). E-learning at a glance. Paper presented at the Distance Education Conference. Retrieved from http://www.umuc.au/conference/distance_education.html

Wiemann, C. M., Rickert, V. I., Berenson, A. B., & Volk, R. J. (2005). *Are pregnant adolescents stigmatized by pregnancy?* *Journal of Adolescent Health*, 36(4). doi: 10.1016/j.jadohealth.2004.06.006

Woog, V., Singh, S., Browne, A., & Philbin, J. (2015). *Adolescent women's need for and use of sexual and reproductive health services in developing countries*. New York: Guttmacher Institute, 1-63. Retrieved from www.guttmacher.org/pubs/AdolescentSRHS-Need-Developing-Countries.pdf.

Woog, V., & Kågesten, A. (2017). *The sexual and reproductive health needs of very young adolescents aged 10–14 in developing countries: what does the evidence show*. New York: Guttmacher Institute.

WHO. (2011). *WHO guidelines on preventing early pregnancy and poor reproductive health outcomes among adolescents in developing countries*. Geneva, World Health Organisation Retrieved from https://apps.who.int/iris/bitstream/handle/10665/44691/9789241502214_eng.pdf

WHO. (2012). *Preventing early pregnancy and poor reproductive outcomes among adolescents in developing countries: What the evidence says* (No. WHO/FWC/MCA/12/02). Geneva: World Health Organization. Retrieved from https://apps.who.int/iris/bitstream/handle/10665/70813/WHO_FWC_MCA_12_02_eng.pdf

REFERENCES

WHO. (2018a). *Family planning evidence brief: reducing early and unintended pregnancies among adolescents* (No. WHO/RHR/17.10). World Health Organization. Retrieved from <https://apps.who.int/iris/bitstream/handle/10665/255862/WHO-RHR-17.10-eng.pdf>

WHO. (2018b). Adolescent Pregnancy Retrieved from <https://www.who.int/news-room/fact-sheets/detail/adolescent-pregnancy>

Wodon, Q., C. Male, A. Nayihouba, A. Onagoruwa, A. Savadogo, A. Yedan, J. Edmeades, A. Kes, N. John, L. Murithi, M. Steinhaus and S. Petroni (2017). *Economic Impacts of Child Marriage: Global Synthesis Report*, Washington, DC: The World Bank and International Center for Research on Women.

Young Lives. (2017). *A Statistical Analysis of Child Marriage in India Based on Census 2011*. New Delhi, India: Young Lives. Retrieved from https://younglives-india.org/sites/www.younglivesindia.org/files/201805/Child%20Marriage%20Report%20Final_1.pdf

APPENDIX I: LAWS

1. Juvenile Justice Act, 2015

48. (1) The State Government may establish and maintain either by itself or through voluntary or non-governmental organisations, special homes, which shall be registered as such, in the manner as may be prescribed, in every district or a group of districts, as may be required for rehabilitation of those children in conflict with law who are found to have committed an offence and who are placed there by an order of the Juvenile Justice Board made under section 18.

(2) The State Government may, by rules, provide for the management and monitoring of special homes, including the standards and various types of services to be provided by them which are necessary for social re-integration of a child, and the circumstances under which, and the manner in which, the registration of a special home may be granted or withdrawn.

53. (1) The services that shall be provided by the institutions registered under this Act in the process of rehabilitation and re-integration of children, shall be in such manner as may be prescribed, which may include—

(i) basic requirements such as food, shelter, clothing and medical attention as per the prescribed standards;

(ii) equipment such as wheel-chairs, prosthetic devices, hearing aids, braille kits, or any other suitable aids and appliances as required, for children with special needs;

(iii) appropriate education, including supplementary education, special education, and appropriate education for children with special needs: Provided that for children between the age of six to fourteen years, the provisions of the Right of Children to Free and Compulsory Education Act, 2009 shall apply;

iv) skill development;

(v) occupational therapy and life skill education;

(vi) mental health interventions, including counselling specific to the need of the child;

(vii) recreational activities including sports and cultural activities;

(viii) legal aid where required; (ix) referral services for education, vocational training, de-addiction, treatment of diseases where required;

(x) case management including preparation and follow up of individual care plan;

(xi) birth registration;

(xii) assistance for obtaining the proof of identity, where required; and

APPENDIX I: LAWS

(xiii) any other service that may reasonably be provided in order to ensure the well-being of the child, either directly by the State Government, registered or fit individuals or institutions or through referral services.

(2) Every institution shall have a Management Committee, to be set up in a manner as may be prescribed, to manage the institution and monitor the progress of every child.

(3) The officer in-charge of every institution, housing children above six years of age, shall facilitate setting up of children's committees for participating in such activities as may be prescribed, for the safety and well-being of children in the institution.

Child Welfare Committees

As per the JJ Act:

32 (1) The State Government shall by notification in the Official Gazette constitute for every district, one or more Child Welfare Committees for exercising the powers and to discharge the duties conferred on such Committees in relation to children in need of care and protection under this Act and ensure that induction training and sensitisation of all members of the committee is provided within two months from the date of notification.

(2) The Committee shall consist of a Chairperson, and four other members as the State Government may think fit to appoint, of whom at least one shall be a woman and another, an expert on the matters concerning children

2. The Protection of Children from Sexual Offences Act, 2012

The POCSO Act of 2012 defines a child as any person below the age of 18 years and provides protection to all children under the age of 18 years from sexual abuse. It also intends to protect the child through all stages of the judicial process and gives paramount importance to the principle of "best interest of the child". Penetrative and aggravated penetrative sexual assault, sexual and aggravated sexual assault, sexual harassment, and using a child for pornographic purposes are the five offences against children that are covered by this act.

This act suggests that any person, who has an apprehension that an offence is likely to be committed or has knowledge that an offence has been committed, has a mandatory obligation to report the matter i.e. media personnel, the staff of hotel/ lodges, hospitals, clubs, studios, or photographic facilities. Failure to report attracts punishment with imprisonment of up to six months or fine or both. It is now mandatory for police to register an FIR in all cases of child abuse.

APPENDIX I: LAWS

A child's statement can be recorded even at the child's residence or a place of her choice and should be preferably done by a female police officer, not below the rank of sub-inspector.

Child Welfare Committees (CWC) play a vital role under the POCSO Act, cases registered under this act need to be reported to the CWC within 24 hours of recording the complaint. The CWC should take into account the opinion of the child to decide on the case within three days and conclude whether the child should remain in an institution or be with the family. The CWC should nominate with the consent of the child-parent / guardian / other people whom the child trusts, a support person to assist the child during the investigation and trial of the case. Child-friendly procedures have given importance in the act and Special Courts have been opened for the same. The Act casts a duty on the state to spread awareness among the general public, of the provisions of this act through media i.e. television, radio and print at regular intervals(GOI, 2012).

There have been several challenges in the implementation of the act. Sensitization programmes, training of stakeholders involved in implementation of the act have been carried out throughout the country. Many research activities initiated to understand implementation status, identifying gaps and hurdles in effective implementation of the act. One of the major challenges faced in the implementation of the act which was highlighted was challenges posed by Romantic relationships. The act doesn't talk about the consensual sex among adolescents and sexual behaviours in the context of the romantic relationship. Hence, when adolescent girls (below the age of 18 years) engage in sexual activity with romantic partners who are elder to them are at risk for legal problems

APPENDIX II: : APPROXIMATE AGES OF GIRLS AT DIFFERENT STAGES OF THEIR JOURNEYS

Sno.	Pseudonym	State	Approximate age of entry into Shelter Home	Fertility status at entry in Shelter Home	Duration of stay in Shelter Home	Age During Interview	Fertility status during interview
1	Anupama	Andhra Pradesh	14	8 months pregnant	7 years	20	Young mother
2	Jeevani	Andhra Pradesh	15	7 months pregnant	2 years	17	Young mother
3	Jahnavi	Andhra Pradesh	13	6 months pregnant	4 years	16	Young mother
4	Kavya	Andhra Pradesh	14	7 months pregnant	5 years	18	Young mother
5	Neeraja**	Andhra Pradesh	16	Pregnant*	1 year	17	Aborted
6	Hemalatha	Andhra Pradesh	17	Aborted	1 year	17	Aborted
7	Neela	Andhra Pradesh	16	Young Mother	2 years	18	Young mother
8	Veena	Andhra Pradesh	15	Young mother and aborted second child	2 years	17	Young mother and aborted second child
9	Shwetha	Andhra Pradesh	15	Pregnant and aborted	2 years	17	Pregnant and aborted
10	Mani	Andhra Pradesh	12	4 months pregnant	2 years	14	Young mother

APPENDIX II: : APPROXIMATE AGES OF GIRLS
AT DIFFERENT STAGES OF THEIR JOURNEYS

Sno.	Pseudonym	State	Approximate age of entry into Shelter Home	Fertility status at entry in Shelter Home	Duration of stay in Shelter Home	Age During Interview	Fertility status during interview
11	Ramani	Andhra Pradesh	18	Young monther and lost second child	2 years	20	Young mother and lost second child
12	Chandini	Andhra Pradesh	16	Pregnant and aborted	1 year	16	Pregnant and aborted
13	Poornima	Andhra Pradesh	17	6 months pregnant	1 year	18	Young mother
14	Shravya	Andhra Pradesh	17	Pregnant*	1 year	18	Pregnant
15	Sunitha	Andhra Pradesh	16	Abortion at behest of parents	2 years	18	Pregnant and aborted
16	Ananmika	Rajasthan	17	6 months pregnant	6 months	17	Pregnant
17	Deepa	Rajasthan	17	2 and half months pregnant	6 months	17	Aborted by accident
18	Kamani	Rajasthan	17	Young mother	3 months	17	Young mother
19	Geeta	Rajasthan	16	2 and half months pregnant	10 months	17	Young mother
20	Sarla	Rajasthan	16	1 and half months pregnant	6 days	16	Pregnant
21	Bela	Rajasthan	16	2 months pregnant	3 months	16	Pregnant

APPENDIX II: : APPROXIMATE AGES OF GIRLS
AT DIFFERENT STAGES OF THEIR JOURNEYS

Sno.	Pseudonym	State	Approximate age of entry into Shelter Home	Fertility status at entry in Shelter Home	Duration of stay in Shelter Home	Age During Interview	Fertility status during interview
22	Fatima	Rajasthan	15	6 months pregnant	4 months	15	Young mother
23	Gunjan	Rajasthan	14	2 months Pregnant	4 years	17	Young mother
24	Radha	Rajasthan	16	Young mother	2 and half years	18	Young mother
25	Aanchal	Rajasthan	16	5 months pregnant	9 months	17	Young mother
26	Arti	Rajasthan	16	2 months Pregnant	1 and half years	17	Young mother
27	Meena	Rajasthan	15	4 months pregnant	9 months	15	Young mother
28	Reena	Rajasthan	16	6 months pregnant	1 and half months	16	Pregnant
29	Suman	Rajasthan	18	6 months pregnant	15 days	18	Pregnant
30	Sudha	Rajasthan	16	Pregnant*	3 years	23	Young mother

*Number of months not clear

**Neeraja was already in a shelter home but was shifted to another shelter home after she became

ANNEXURE 1

ANDHRA PRADESH	RAJASTHAN
• 5 am Wake up / Prayer • 5-8.00am Yoga, Meditation, washing, bathing • 8.30- 9.00am Break fast • 9.00-12.30 pm Studies /classes • 12.30-1.30 pm Lunch • 1.30 -3.30 pm Free time • 3.30- 5.30 pm Play (indoor and outdoor) and Snacks • 7.00 pm Dinner • 7.00-10.00 pm Study hours/homework • 10.00 pm Go to bed • Sundays Watching TV	• The day begins early for girls in the shelter home. • The girls wake up, clean their rooms, do their morning chores and are served breakfast by 7a.m in the morning. • There is a morning assembly where daily prayers are offered. The girls love singing together. • Vocational classes for the whole day with a lunch break • Evening-Games • Dinner at 7 pm • Till 10 pm watch TV • 10 pm Go to Bed

ANNEXURE 2

RAJASTHAN	ANDHRA PRADESH
Related to intimate/sexual relationships	
• Romantic relationships and Elopements • Early marriage • Broken engagement and fixing of marriage to another person by parents, while the girl wants to go with the person she was engaged to earlier. • Intercaste marriages continue to be unacceptable for parents • Violence after child marriage	• Romantic Relationships • Lack of parental approval of the romantic relationship • Early marriage
Cultural Practices	
• In tribal communities' elopement is a practice that has community sanction	• Slum culture • Peer group influence
Family Related	
• Negligence of the girl child by parents • Lack of education of girls • Ill health of the mother wherein safety of the girl is compromised • Increase in cases of Incest • Parents disapproval of male friendships • Lack of education of parents • Lack of conducive environment at home Lack of communication between parents and children	• Poverty • Faulty family dynamics • Marital discord • Single parent family • Lack of love and affection • Alcoholism of father/addiction in parents • Dropping out of school • Lack of affection and parental care • Broken families • Parental ill-treatment /negligence mostly from the higher classes • Parental behaviours /conduct • High expectations of parents • Poor family background and attending to work

ANNEXTURE 2

RAJASTHAN	ANDHRA PRADESH
Girls Behaviour	
• Girls are maturing at an early age • Girls are very smart • They are seeking love and affection	• Hormonal changes during adolescence resulting in premarital sex
Technology Related	
• Girls are influenced by TV	• Impact of the use of cell phones • Impact of movies/media impact

Supported by:



CIFF CHILDREN'S
INVESTMENT FUND
FOUNDATION

Report Prepared by:



YOUNG LIVES INDIA

Mezzanine Floor 47, Community Centre,
Friends Colony, New Delhi-110065
+91 - 11 - 41827788, info@younglives.in;
www.younglives.in