COMBAT CHILD TRAFFICKING FOR SEXUAL EXPLOITATION IN WEST BENGAL

Final Baseline Report World Vision India.

It takes every Indian
TO END CHILD SEXUAL ABUSE

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EVERY LAST ONE

**Campaign-
Child protection**

Baseline study conducted by World Vision and the Columbia Group for Children in Adversity.

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II. AFFIRMATION

Except as acknowledged by the references in this paper to other authors and publications, the evaluation described herein consists of our own work, undertaken to secure funding, implement the activities, describe and advance learning, as part of the requirements of World Vision's Design, Monitoring and Evaluation Learning System.

Primary quantitative and qualitative data collected throughout the evaluation process remain the property of the communities and families described in this document. Information and data must be used only with their consent.All products are the property of World Vision.

Mathilde Guntzberger, M.A. Research Associate

Kathleen Kostelny, Ph.D. Senior Research Associate

Columbia Group for Children in Adversity

GLOSSARY/ACRONYMS AND ABBREVIATIONS

AP	AREA PROGRAMME
ADP	AREA DEVELOPMENT PROGRAMME
CGCA	COLUMBIA GROUP FOR CHILDREN IN ADVERSITY
CLS	CHILD LABOUR SURVEY
CPC	CHILD PROTECTION COMMITTEE
CP	CHILD PROTECTION
CFLRC	CHILD FRIENDLY LEARNING AND RECREATIONAL CENTRE
CNCP	CHILDREN IN NEED OF CARE AND PROTECTION
CPI	CHILD PROTECTION INITIATIVE
CSE	COMMERCIAL SEXUAL EXPLOITATION
CSEC	COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN
DME	DESIGN, MONITORING, AND EVALUATION
DMSC	DURBAR MAHILA SAMANWAYA COMMITTEE
ECDI	EARLY CHILD DEVELOPMENT INDEX
ELO	EVERY LAST ONE (WORLD VISION CAMPAIGN)
FGD	FOCUS GROUP DISCUSSION
GBV	GENDER BASED VIOLENCE
GP	GRAM PANCHAYAT
IPC	INDIAN PENAL CODE
ITPA	IMMORAL TRAFFICKING (PREVENTION) ACT
KII	KEY INFORMANT INTERVIEW
M&E	MONITORING & EVALUATION
MVC	MOST VULNERABLE CHILDREN
NGO	NON-GOVERNMENT ORGANISATION
NO	NATIONAL OFFICE
OBC	OTHER BACKWARD CASTE
PSU	PRIMARY SAMPLING UNIT
SC	SCHEDULED CASTE
SPSS	STATISTICAL PACKAGE FOR THE SOCIAL SCIENCES
ST	SCHEDULED TRIBE
UNICEF	UNITED NATIONS CHILDREN'S FUND
VAC	VIOLENCE AGAINST CHILDREN
VLCPC	VILLAGE LEVEL CHILD PROTECTION COMMITTEE
WFCL	WORST FORMS OF CHILD LABOUR
WVI	WORLD VISION INDIA

WORKING DEFINITIONS

Caregiver: The caregiver is the one who spends the most time looking after the children physically. In most cases, this will be the biological mother but could also be an aunt, grandmother, or father depending on the family structure (World Vision).

Child: Internationally, the UNCRC apply to all those below the age of 18. In the Indian domestic legal framework, the ITPA (originally enacted as the Suppression of Immoral Traffic in Women and Girls Act, 1956 and amended in 1986) also defines a child as a person below 18 years.

In this report, the term 'child' is taken to mean all children below the age of 18 years. **The working definition of "adolescents" in this survey is anyone who is 12-17 years old.**

Child labour: Not all work is child labour. Child labour is work that is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling by:

☼ Depriving them of the opportunity to attend school;

☼ Obliging them to leave school prematurely; or Requiring them to attempt to combine school attendance with excessively long and heavy work.

In this survey, child labourers include those:

☼ 12-14 years old: engaged in household chores for 28 hours or more in the reference week and /or in economic activity (EA) for 14 hours or more in the reference week.

☼ 15-17 years old: engaged in household chores for 43 hours or more in the reference week and /or in EA for 43 hours or more in the reference week (UNICEF, MICS).

CHILDREN WORKING UNDER HAZARDOUS CONDITIONS ARE NOT INCLUDED IN THIS SURVEY.

Child protection: All measures taken to prevent and respond to abuse, neglect, exploitation and all other forms of violence against children (World Vision).

Child trafficking: The legal definition of 'trafficking' can be found in Article 3(a) of the Palermo Protocol, which defines trafficking as " … recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation." The Protocol points out in Article 3(c), as regards to children: "Recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered 'trafficking in persons' even if this does not involve any of the means set forth in subparagraph (a) of this article."

This means that any child under the age of 18 who is recruited or moved from one place to another to be exploited is considered to have been trafficked, even if no deception or coercion is used. Movement of children with an intention to exploit is central to this notion of exploitation, even where the action is thwarted and the exploitation unfulfilled (UNICEF) .

Child work: Work that does not affect children's health and personal development or their educational attendance and performance. **In fact, child work, which includes activities in the home or after school hours and during school holidays, may stimulate chil¬dren's development, skills and expertise and encourage them to participate actively and assume responsibilities in their homes and communities (see ILO) .**

Commercial Sexual Exploitation of Children (CSEC): There is no definition under international law for the term "commercial sexual exploitation of children" (CSEC), and the term has increasingly been used interchangeably with the abovementioned term "child sexual exploitation". At the third World Congress in Rio de Janeiro in 2008, the term "commercial" was dropped from the title of the congress, to make the title: The World Congress against the Sexual Exploitation of Children and Adolescents. However, there is still debate about the inclusion of "commercial" as it emphasises the fact that criminals and criminal networks profit from the sexual commoditisation and objectification of children. For the purpose of this baseline, we use the term Commercial Sexual Exploitation of Children.

Disability: The outcome of the interaction between a person with a functional limitation (difficulties doing basic functional activities) and an unaccommodating environment resulting in the inability to fully participate in society (Washington Group on Disability)[4] .

Most Vulnerable Children(MVC): Most vulnerable children are children whose quality of life and ability to fulfil their potential is most affected by extreme deprivation and violations of their rights. These children often live in catastrophic situations and relationships characterized by violence, abuse, neglect, exploitation, exclusion and discrimination (World Vision).

Sex work: The provision of sexual services for money or goods. Sex workers are women, men and transgendered people who receive money or goods in exchange for sexualservices, and who consciously define those activities as income generating even if they do not consider sex work as their occupation. (WHO, 2002)

Sexual abuse: The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions. Sexual exploitation and abuse also includes sexual relations with a child, in any context, defined as: Child - a "human being below theage of eighteen years". (WHO, Sexual Exploitation and Abuse Prevention and Response, March 2017)

Sexual exploitation: Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, threatening or profiting monetarily, socially or politically from the sexual exploitation of another. (WHO Sexual Exploitation and Abuse Prevention and Response, March 2017)

[1]UNICEF Regional Office for CEE/CIS, 2010, Risks and Realities of Child Trafficking and Exploitation in Central Asia Unite for Children 2009.

Sex Workers/prostitutes: The UNAIDS Terminology Guidelines on preferred terminology set forth that the term "prostitution" or "prostitute" should not be used at all, whether with regard to adults or children, because it denotes value judgement. When referring to adults, the UNAIDS Terminology Guidelines suggest using terms such as "sex work" and "sex worker"; in reference to children, they suggest the term "sexual exploitation of children ".

Violent discipline: Defined as actions taken by a parent or caregiver that are intended to cause a child physical pain or emotional distress as a way to correct behaviour and act as a deterrent. Violent discipline can take two forms: psychological aggression and physical, or corporal, punishment. The former includes shouting, yelling and screaming at the child, and addressing her or him with offensive names. Physical or corporal punishment comprises actions intended to cause the child physical pain or discomfort but not injuries. Minor physical punishment includes shaking the child and slapping or hitting him or her on the hand, arm, leg or bottom. Severe physical punishment includes hitting the child on the face, head or ears, or hitting the child hard or repeatedly (UNICEF).

http://www.ilo.org/ipec/facts/lang--en/index.htm ECPAT June 2016. Terminology guidelines For the protection of children From sexual exploitation and Sexual abuse, Interagency Working Group on Sexual Exploitation of Children

https://www.unicef.org/protection/files/Terminology_guidelines_396922-E.pdf http://www.washingtongroup-disability.com/wp-content/uploads/2016/12/WG-Document-1-Data-Collection-Tools-Developed-by-the-Washington-Group.pdf

UNAIDS, Terminology Guidelines, 2015, p. 10http:// www. unaids. org/ sites/ default/ files/ media_ asset/ 2015_ terminology_ guidelines_ en. Pdf

EXECUTIVE SUMMARY

This baseline study aims to examine key issues related to child trafficking for commercial sexual exploitation (cse) in west bengal, india in three areas: kolkata (known to be one of the main transit and destination areas for human trafficking in india), darjeeling and 24 south parganas districts (known as source districts for human and child trafficking).

These three areas will be intervention sites for the every last one (elo) project: combat child trafficking for sexual exploitation in west bengal,led by world vision india. The project will focus on ensuring that vulnerable children are cared for and protected from child trafficking, abuse, neglect, exploitation, and all other forms of violence, within supportive families and communities. It also includes aftercare for and reintegration of child survivors of cse. The project is expected to last fiveyears from october 2017 to september 2022.

Data collection for the baseline was conducted in february 2018 and was carried out by a team of two international consultants from the columbia group for children in adversity, 57 national enumerators (quantitative component), and 8 national researchers (qualitative component), with support from the world vision india team.

The study uses a mixed methods (both quantitative and qualitative) design. The quantitative component includes a household survey in source areas and a smaller survey in kolkata (which hosts one of asia'slargest red-light areas, sonagachi). The final sample size for the survey was 1180 caregivers and 885 adolescents (aged 12-17 years) in source areas, as well as 136 women in commercial sexual exploitation in the destination area who will receive wv support through this project. For the qualitative component, a total of 12focus group discussions (FGDs) with 211 participants, 13 key informant interviews (KIIs)and 10 in-depth interviews with women in CSE were also conducted, with a total of 234 people participating in the qualitative component across the three areas. The topics included work and migration, adolescents' relationship with their caregiver, child discipline practices, adolescents' experiences with violence,attitudes about gender, and knowledge about trafficking and related services.

Main findings (24 South Parganas and Darjeeling):
Main characteristics of sample:

- ☼ The majority of participants in the survey (62% of caregivers and 68% of adolescents) belong to the most disadvantaged socio-economic groups in India – scheduled castes (SC), scheduled tribes (ST) and other backward castes (OBC).

- ☼ The majority of survey participants were Hindu (75% of caregivers and 79% of adolescents) while 19% of caregivers and 23% of adolescents were Muslim. Christians, Buddhists, and other religions were less than 2%.

- ☼ Median monthly income for households is 4,500 INR (Indian Rupees) or $69 (USD) – just over $2 per day.

- ☼ Nearly one in four (23%) caregivers reported having no education at all, while 5% of adolescents had never gone to school.

- ☼ 48% of adolescents had at least one type of vulnerability (i.e., MVC – most vulnerable children)

Child protection issues raised in both qualitative and quantitative components:

Child marriage was cited as a major issue despite increasing public attention to the problem. Child marriage was linked to high gender disparity in education since most girls were reported to leave school before entering secondary education. Parents and communities highlighted that girls engaging in early sexual activity was against the existing social norm for chastity. This led parents to arrange marriages for their daughters as a preventative measure and to avoid social stigma attached to unmarried sexual relationships. In other occurrences, child marriage was the result of girls asserting their freedom and willingness to choose their partner and when they would marry. The rapidly evolving environment and new technologies were also said to contribute to more youth being able to "connect" through social media and develop relationships outside the supervision of caregivers/ adults.

Child labour was also a concern for many participants in the study. Survey results found that 19% of adolescents reported they are working at least part time either in or outside the family, irrespective of gender. Only 3% of adolescents worked excessive hours according to UNICEF thresholds. Qualitative data revealed that in Darjeeling, girls regularly worked in tea plantations.

Lack of supervision/ Child care:Another prominent issue raised was the absence of caregivers and the lack of supervision for young children below 5 years(i.e.,school mandatory age). It was especially an issue of high concern among economically vulnerable families in rural areas, where both parents often have to travel far to work in the fields.

Violent discipline: 47% of adolescents reported experiencing violent physical discipline at least once in the preceding 12 months.

Knowledge about child trafficking and services:

- ☼ 52% of caregivers and 45% of adolescents reported that they knew about trafficking. Furthermore, while survey results found that trafficking was perceived to be an issue mainly for girls, FGD participants highlighted that trafficking was an issue for boys as well. Younger adolescents and participants from disadvantaged group showed less awareness about trafficking.
- ☼ 14% of caregivers reported having heard of trafficking incidents in their area in the last 12 months.
- ☼ Trafficking for CSE was reported to happen in the context of girls eloping with boyfriends who then sold them into trafficking, or girls falling prey to fake marriage proposals and fake job offers.Trafficking was also reported to occur in a context of poverty, where parents felt no choice but to accept disguised job offers for their daughters. Kidnapping of girls was also reported to occur in the context of trafficking.
- ☼ 59% of adolescents did not know of any way to protect themselves from trafficking, and 72% did not know about services that could help them.
- ☼ Police were the main entity adolescents would go to in case of trafficking, yet the police were not considered reliable or accountable--especially for poor people.

Main findings (Kolkata – Sonagachi red light area):
Main characteristics of sample:

- ☼ Median age of mothers was 30 years.
- ☼ Most mothers had been married at some point in their lives.
- ☼ 75% of them reported experiencing difficulties/disabilities (physical and intellectual); women also experienced routine health problems (physical and psychological).
- ☼ 43% had never gone to school (compared to 23% of caregivers in source areas).
- ☼ Most mothers in CSE (71%) come from West Bengal (especially the districts of North 24 Parganas, South24 Parganas, and Murshidabad).
- ☼ For 68% of mothers, the first destination point directly after leaving home was Sonagachi.

Existing estimates on trafficking and CSE:

- ☼ Existing prevalence data (from secondary sources) for human trafficking for CSE do not exist as victims of trafficking are a "hidden population" and there is no valid survey method that can get at trafficking.
- ☼ Estimates of women and girls in CSE vary considerably: from 70,000 to 3,000,000 women and girls in India. In West Bengal, existing studies based on the experience of women subjected to CSE also vary depending on sampling size and methodology used: Sarkar et al (2008) estimated that 10% of women in the study had started under 15 years and 46% between 16 and 20 years.
- ☼ In the survey of women in CSE, 26% had started as minors, 44% between 18 and 25 years, and over.However, the median age for first sexual experience was 15 years, and 43% of women reported it was forced, suggesting that nearly half of the women who fall into CSE have experienced sexual violence prior to getting into CSE.

Main issues of concern for women and their children in Sonagachi

- ☼ Vulnerability factors that led women to fall into trafficking included: large families (from 4 to 10 children); high number of daughters in the household (from 3 to 7); economically deprived families; family's low value on education; and low value placed on girls. Often trafficking for CSE was the result of intertwined factors, vulnerability areas, and a triggering event (e.g., either the death or illness of a relative or breadwinner; early and forced marriage, elopement of the girl with a boyfriend, or family acceptance of a sham marriage offer, or job offer).
- ☼ 78% of women reported that they left their place of origin "to get work" whether or not they were aware of the exploitation they would end up in.
- ☼ When women's engagement in CSE was presented as beingvoluntary (i.e.,not the result of kidnapping or forced recruitment), it was nonetheless said to be a decision "of last resort", following a series of events (life-changing situation such as a death of a parent or husband, or partner abandonment) in which the girl/ women felt she had no other alternative but to accept what was proposed to her.
- ☼ Sham job or marriage offers were often provided to the girl or her family through an intermediary that was close to them; either someone already working in Sonagachi or a trafficker who is a recruiter.
- ☼ Current vulnerability and level of exploitation very much depends on the contract women have (although these do not have any legal base per se): Chukris are virtually slaves and working under bonded labour, while women working as independent or adhiya contract benefit from higher freedom of choice, bargaining power and less exploitation.

☼ Most women feared that the environment they live in has harmful and longlasting repercussions on their children's lives. They mostly want to find alternative sources of work and income. (note: the sample of women interviewed are future WV beneficiaries and therefore are already keen to "opt out" of Sonagachi – whereas that may not be the case for other groups).

Summary recommendations

Include at-risk groups in programming: A number of vulnerability factors are correlatedwithnegative outcomes for adolescents and caregivers. It is important to ensure the inclusion of at- risk groups in programme activities in a measurable and tangible way.

Develop community-based outreach: As trafficking happens at the very heart of the community, it is necessary to build anti-trafficking efforts inside the community

Intervention focus: existing literature on trafficking in India and current specialists have highlighted that new trends for trafficking include new places (i.e., outside red-light areas). Future interventions should take this into account as trafficking flows are redirected to other informal areas (e.g., beauty parlors, massage parlors). Evidence suggests that traffickers are able to adapt very quickly to NGO pressure by finding other covert strategies to avoid raids.

Continue developing knowledge about risk factors and the nature of trafficking:
As child traffickers are able to adapt their ways of working, anti-trafficking efforts need to collect "live data" on current trafficking patterns including at risk population, new ways of recruiting (e.g., social media) and new destinations (e.g., outside Sonagachi).

Increasing communities' knowledge about trafficking: This will be an important strategy component as most trafficking first occurs within communities. It is recommended for WV to think about building from existing local strengths to leverage interest locally (from local groups and resource persons)

Map existing services in districts of intervention: As many NGOs are taking an interest in child trafficking for CSE, there is a need to map NGOs and their area of expertise. Some have developed strong rescue and legal aid experience (for instance Justice & Care andInternational Justice Mission) while others have prior experience in protection and rehabilitation. Support district level Child Protection Committees to carry out this task in coordination with all mandated actors taking an interest in child trafficking.

Improve coordination mechanisms: As many state and NGO run initiatives to combat child trafficking for CSE exist, there are gaps in the area of coordination and harmonisation of approaches, tools, as well as learning from monitoring and evaluation (as well as advocacy as cited above). WV could be well placed to facilitate this process.

Increase availability of services: As government mandated services have not yet extended their coverage/ are not operational in more remote areas, WV to consider supporting the district and state level authorities to roll out Village Level Child Protection Committees (VLCPCs), facilitate their training and see that they are properly staffed and resourced.

Increase accountability of local services: Work in partnership with other NGOs to improve accountability mechanisms within services.

Help improve quality of services: Support state and district level prevention and response services, with an emphasis on coordination, quality, and compliance with ethical standards.

Improve access to existing support schemes: Women and girls in CSE have a right to government support, but because of corruption, these funds are not released. During the course of the project, it is advised that advocacy be carried out with district and state bodies mandated to oversee support schemes for adolescent girls to improve access to these funds (e.g., Ujjawala and Swadhar). This could be done in a concerted way with other actors in the same sector.

PART I. INTRODUCTION

This report was prepared for World Vision's Every Last One – Combat Child Trafficking for Sexual Exploitation Project in West Bengal following the baseline study conducted in February 2018 in three areas: Darjeeling and 24 South Parganas districts (known as source areas) and Kolkata red lights area (known as destination area for trafficking).

Following a description of the situation of child trafficking for sexual purposes in India, the background of the project and the project's objectives, the report presents details of the methodology used, followed by key findings and recommendations.

Human trafficking – a global phenomenon

There is no one single global estimate for human trafficking that can be agreed on and shared by experts since this is such a complex phenomenon: different agencies use different data collection methods, different frameworks and different mandates (e.g., slavery, forced labour, trafficking for sexual or labour purposes). The population at stake (victims and traffickers) is very much "hidden" as trafficking happens underground and therefore there is simply no sample frame to start with . Some estimates focus on transnational human trafficking (e.g., US Government), while others provide statistics based on the number of victims detected (e.g., UNODC, ILO).

The International LabourOrganisation (ILO) estimates that globally at least 2.45 million people were trafficked both internationally and internally in the 1995- 2004 period . The estimate by the ILO looking at forced labour and sexual exploitation (which includes victims of trafficking) sets the number of victims for the period ranging from 2002 to 2011 at 20.9 million. Recently, the ILO and Walk Free Foundation have released a report estimating the number of victims of slavery worldwide at 40.3 million who were forced to work against their will or living

under forced marriage, including 5,7 million children (21% if whom were considered to be in Commercial Sexual Exploitation (CSE). Women and girls accounted for more than 99 per cent of all victims of forced sexual exploitation. More than 70 per cent of victims of forced sexual exploitation were in the Asia and Pacific regions. These estimates are based on extrapolation of existing case records and overall trends on country vulnerability to modern slavery at international level . They are necessarily conservative as they only reveal the tip of the iceberg.

Similarly, data based on reported crime/ detected victims provides some level of understanding on how trafficking happens, but does not fully reflect the scale of the phenomenon.UNODC monitors national and regional patterns of human trafficking but does not provide a global estimate of the number of victims. The International Organisation for Migration (IOM) only records the number of trafficking victims whom they have actually assisted.

Legal framework and definition

Internationally, **a child is said to have been trafficked when he or she has been moved within a country, or across borders, whether by force or not, with the purpose of exploiting the child** (UNICEF 2007) . It implies that someone has organised the movement of the child (under 18 years old) with the ultimate goal of exploiting the child. In the case of children there is no need to show that force or deception has been used as trafficking is considered to have happened whether or not the child has moved voluntarily to their place of exploitation.

Internationally, the key instruments related to trafficking of children for CSE are

- ☼ The **UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children** of 2000, 1known as the Trafficking Protocol (2000) which sets the definition of child trafficking (ratified by India in May 2011). It supplements the UN Convention against Trans-national Organized Crime.
- ☼ The **Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography** (2002) ratified by India in 2005.
- ☼ The South Asian Association for Regional Cooperation (SAARC) **Convention on Preventing and Combating Trafficking in Women and Children for Prostitution** (signed by member states including India in 2002).

Under Indian legislation, both the **Indian Penal Code** (IPC), 1860, and the **Immoral Traffic (Prevention) Act** (ITPA), 1956, the **Constitution of India** and **the Juvenile Justice Act**, 2015 and the **Prohibition of Child Marriage Act,** 2006have provisions for the prevention and combating of trafficking, but there are critical gaps in their implementation.

International Justice Mission. Expert paper. How to measure the prevalence of Child sexual trafficking. http://www.globalstudysectt.org/wp-content/uploads/2016/05/Expert-Paper-IJM.pdfAccessed 24th May 2018.

International Labour Organisation, ' ILO 2012 Global estimates of forced labour', June 2012, http://www.ilo.org/global/topics/forced-labour/publications/WCMS_182004/lang--en/index.htm Accessed 24th May 2018.

International Labour Organisation 2009. The cost of coercion. http://www.ilo.org/wcmsp5/groups/public/@ed_norm/@relconf/documents/meetingdocument/wcms_106230.pdf Accessed 24th May 2018.

https://www.unicef.org/southafrica/SAF_pressrelease_notetrafficking.pdfAccessed 24th May 2018.

Global Estimates of Modern Slavery: Forced Labour and Forced Marriage, 2017.https://www.walkfreefoundation.org/news/resource/global-estimates-modern-slavery-forced-labour-forced-marriage/ Accessed 24th May 2018.

Child trafficking for sexual purposes in India

In 2014, Population Council (Santhya, et. al) published a report on the state of evidence about the trafficking of girls for Sexual and Commercial exploitation in India. Most of the available data were drawn mainly from studies of women and girls experiencing commercial sexual exploitation (CSE) at the time of the study, or survivors of CSE or from the National Crime Record Bureau (by the National Crime Record Bureau, NCRB) .

It showed that existing 'guestimates' vary from 70,000 to 3 million women and girls being in CSE in India , most of the trafficking happening internally (intra states).

Data based on reported crime collected by government and police agencies are another indication of crime but also has its limitations due to the rate of unreported crime. In India, an annual report is published (NCRB) based on data collected by police and other law enforcement agencies. **In 2016, it showed that West Bengal features among the highest in terms of reported cases of trafficking under the Indian Penal Code** (IPC). High caution should be taken with this data as it does not necessarily reflect prevalence patterns. However, they do provide some useful information on how criminal traffickers operate, i.e., main routes and methods employed for luring adults and children into this lucrative and illegal business.

West Bengal

Due to its international borders with Nepal, Bangladesh and Bhutan, West Bengal is of particular interest for traffickers. It also has borders with other Indian states such as Sikkim, Bihar, Orissa, Jharkhand and Assam.

Though West Bengal is one of the smaller states in the country, it is quite densely populated (90.4 persons per sq. km). Darjeeling, the most important urban centre of North Bengal, acts as the gateway to Nepal, Sikkim, Bhutan and also the North-East, due to its strategic location. Migration flows from Bangladesh to India, especially to West Bengal, have been in existence for decades.

Of the top ten most populous districts of the country, five districts belong to West Bengal and out of the five, three districts --North 24 Parganas, South 24 Parganas, and Murshidabad, which share the international border with Bangladesh-- are reported to be trafficking-prone areas.Kolkata, the capital city of West Bengal, is not only the trade and cultural hub of eastern India but also one of the main internal destination points for trafficked victims.

Background to the project

In response to the high prevalence of child trafficking in West Bengal, World Vision India has initiated the **Combat Child Trafficking for Sexual Exploitation in West Bengal Project**, which is part of World Vision's global Every Last One (ELO) initiative. The overall goal of the project is:All children are cared for and protected from Child Sex trafficking, abuse, neglect, exploitation, and all other forms of violence, within supportive families and communities. It will work in urban areas that are known as destination points for trafficked girls (red light areas in Darjeeling and Kolkata city)where it will seek to enhance protection and response mechanisms for children living in red light areas and mothers in Commercial Sexual Exploitation (CSE), in an effort to prevent second generation trafficking. The intervention will also bring prevention services to rural areas in Darjeelingand 24 South Parganasdistricts. The expected outcomes of the project are the following:

☼ Outcome 1: Children especially the most vulnerable are active participants in efforts to reduce child sex trafficking and all forms of violence in their families and communities

☼ Outcome 2: Families have strong healthy relationships and access to adequate and appropriate services in order to care for and protect their children

☼ Outcome 3: Communities including faith communities are working together to establish and sustain a safe and protective environment for all children.

The intervention will work with communities to promote the protection of vulnerable girls and boys.The focus is especially on children who are vulnerable to or victims of child sexual exploitation in West Bengal, including childrenof mothers in commercial sexual exploitation (CSE) living in red light areas.

The project aims to address the issues affecting children in a holistic way, engaging the children themselves, their families and the formal and informal child protection system.

☼ ProvidingLifeskills education to adolescent girls including safe migration awareness

☼ Establishing community-managed Child Friendly Learning and Recreation Centres (CFLRC) in urban red-light districts

☼ Supporting child survivors rescued from trafficking and sexual exploitation in Government homes with education and health services

☼ Providing psychosocial care, formal education, and vocational training for reintegrated girl victims of trafficking

☼ Establishing groups of fathers (Men Care model) to engage men with dialoguing on gender issues including trafficking

☼ Supporting vulnerable families (families of children engaged in or at risk of child trafficking) with family Development Plans and income generating activities

☼ Providing parenting support (Celebrating families model) to single mothers working in red light areas

☼ Strengthening government child protection bodies and improve coordination with non- government actors to combat child trafficking.

The project approach includes an emphasis on Prevention, Rescue, Aftercare and Repatriation for women and girls at risk or victims of trafficking and CSE.

PREVENTION

ELO- COMBAT CHILD TRAFFICKING FOR SEXUAL EXPLOITATION PROGRAM

REPATRIATION/ REINTEGRATION

RESCUE (FACILITATE)

AFTERCARE (STREGNTHEN)
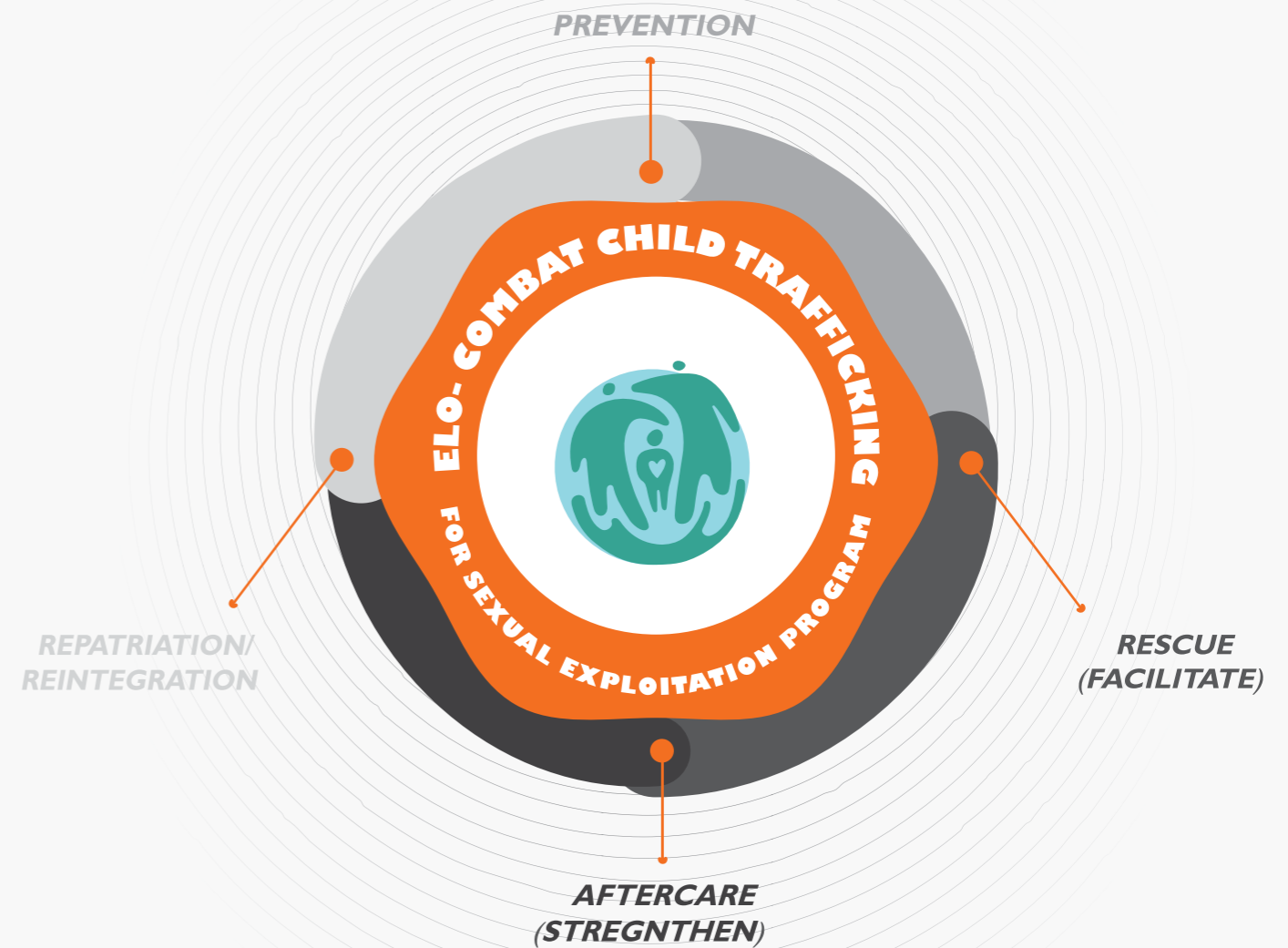
Intervention areas are as follows:

Table 1. Project intervention areas

NAME OF AREA	DISTRICT& SUBDIVISION	BLOCK
KOLKATA CITY	Kolkata Metropolitan Region	Kolkata Municipality
DARJEELING	Darjeeling District (Siliguri sub-division)	Kharibari, Phansidewa Blocks
24 SOUTH PARGANAS	South 24 Parganas District (Canning sub-division)	Basanti Block

Purpose and Objectives of the present baseline

Purpose: To collect baseline data for the Combat Child Trafficking for Sexual Exploitation Project goal and outcome indicators against which to monitor and assess the project's implementation progress and its effectiveness during the implementation and after the project's completion.

Objectives:

☼ Collect data from project locations at the outset of the project; establish the conditions against which future changes will be measured, per qualitative and/or quantitative baseline indicators.

☼ Get information (qualitative and quantitative) for project goal indicators, project outcome indicators, and selected project output indicators.

☼ Confirm or challenge the degree to which the initial set of indicators (as approved during project design) are the most appropriate to measure achieved project results.

☼ Produce quantitative data needed to set Goal, Outcome, and Output quantitative baseline indicators.

PART II. METHODOLOGY

The study employed a cross-sectional research design to collect information from caregivers and children in two districts–South 24 Parganas and Darjeeling-- as well as from caregivers in a red-light area (Sonagachi) in Kolkata. The study followed a multi-method design and included qualitative and quantitative components, and document review.

For the quantitative component, three separate survey instruments were developed in order to take into account the different interventions, the different age groups, and the different populations:

1. A questionnaire-based survey for caregivers (Darjeeling and 24 South Parganas).
2. A questionnaire-based survey for adolescents (Darjeeling and 24 South Parganas).
3. A questionnaire-based survey for single mothers working in red light areas (Kolkata)

For the qualitative component, focus group discussions, key informant interviews, and case studies were conducted:

1. A focus group component for girls and boys aged 12-14 years and 15-17 years as well as caregivers (Darjeeling and 24 South Parganas) (in different groups according to age and sex).
2. Key informant interview (KIIs) with selected stakeholders including police officers; NGOs and representatives of government departments with a child protection mandate.
3. Case studies of mothers in commercial sexual exploitation (Kolkata).

Data collection tools

The tools included both quantitative and qualitative tools as described in Table 1 below:

In Darjeeling and 24 South Parganas, the survey questions focused on:

☼ Background and vulnerability of family/child
☼ Child relationship with caregiver (adolescent questionnaire)
☼ Gender attitudes
☼ Decision making and empowerment
☼ Migration history and knowledge about trafficking and safe migration
☼ Child discipline practices
☼ Child work
☼ Children and youth perceptions of safety
☼ Violence
☼ Knowledge about self-protection
☼ Knowledge about support services

In Kolkata (single mothers in CSE), the survey questions focused on:

☼ Background and vulnerability of mother and children
☼ Migration history
☼ Work history
☼ Situation of children (including care arrangement, disability)
☼ Early child development
☼ Child discipline practices
☼ Knowledge about support services

Table 2. Data Collection Tools

METHOD	DESCRIPTION
SURVEYS	Three different surveys were administered:survey with adolescents aged 12-17; survey with parents/ caregivers in Darjeeling and 24 South Parganas and one third survey with single mothers living and working in red light areas in Kolkata – the interviews approximately lastedapproximately 20-30 minutes.
FOCUS GROUP DISCUSSIONS	Group discussions were facilitated with participants each over a period of approximately 60-90 minutes. The discussion participants came from a pre-defined sub-group such as adolescent girls, adolescent boys, women, and men.
CASE STUDIES	Case studies were developed from in-depth interviews with single mothers working in a Kolkata red light area. The interviews lasted approximately 45-60 minutes.
KEY INFORMANT INTERVIEWS	In depth interviews that were approximately 60-90 minutes in length, were conducted with key local stakeholders such as police, NGO workers and government officers working in the field of child trafficking.

Quantitative component

Sample size (Darjeeling and 24 South Parganas Districts)

In 24 South Parganas and Darjeeling, the survey was designed tobe representative of the population in the project areas living in the 7 Gram Panchayats (GP) in 3 blocks (Phansidewa, Kharibari, Basanti Blocks) in two rural districts in West Bengal (an estimated total population of about 650,000).

According to the population data for the two districts, the total population is 173,549 people and was used in designing the sample plan.

The sample size for the issued number of people per districthas been determined by using the formula below:

$$n=z^2 \times \frac{p \times (100\text{-}p)}{MoE^2} \times deff \times \frac{1}{RR}$$

Where:

Z,is the level of confidence (z=1.96 for 95% confidence level)

p,is the expected prevalence for a baseline indicator (p=50 percentage points, resulting in maximum sample size)

MoE,is the margin of error (MoE=6.4 percentage points)

deff,is the assumed overall design effect due to clustering and differential selection and response probabilities (deff=3.2)

RR,is the assumed (overall) response rate (RR=0.70)

$$n=1.96^2 \times \frac{50 \times (100\text{-}50)}{6.4^2} \times 3.2 \times \frac{1}{0.7} = 1072$$

Therefore, the planned total issuedsample size was2144 for both districts (1072 each).

The actual issued sample size was 2129 with the expectation to achieve 1513 interviews with caregivers and adolescents. The actual achieved sample size was 2065.

Sample description

Across both Darjeeling and 24 South Parganas, 1180 caregivers and 885adolescentswere successfully interviewed, for a household response rate of 86.9% in Darjeeling and 78.4% in 24 South Parganas.

Table 3. Sample size per district and sex

	SILIGURI	BASANTI	TOTAL
CAREGIVERS			
MALE	49%	49%	49%
FEMALE	51%	51%	51%
Base (unweighted)	658	522	1180
Base (weighted)	492	688	1180
ADOLESCENTS			
MALE	47%	47%	47%
FEMALE	53%	53%	53%
Base (unweighted)	479	406	885

Where:

Z,is the level of confidence (z=1.96 for 95% confidence level)

Table 4. Sample size achieved in each Gram Panchayat (GP) - unweighted

DISTRICT	GP	CAREGIVERS	ADOLESCENTS
DARJEELING	Binnabari	178	121
	Raniganj-Panishali	340	241
	Pansidewa-Bansgoan	140	117
24 SOUTH PARGANAS	Amjhara	146	100
	Jharkhali	117	98
	Nafarganj	91	82
	Ramchandrakhali	168	126
	Total	**1180**	**885**
	Total both districts	**2065**	

Sampling methodology:

The sampling frame listed all habitations (the administrative unit that was considered as the cluster or Primary Sample Unit [PSU] within each village in the blocks selected to be part of the project).

The survey used a multi-stage cluster design, selecting a random sample of 25 PSUs in Darjeeling and 32 PSUs in 24 South Parganas with probability proportionate to the number of households in each. In each sampled PSU, enumerators were instructed to select a random sample of 26 households in Darjeeling and 20 households in 24 South Parganas (i.e. a total of 1290 households). Sampling in this way ensured that all households (within each district) had an equal chance of selection.

Enumerators started data collection from the centre of each PSU, selecting each house after a random starting point and following the same direction until they had exhausted the number of houses to be visited. If they met with an obstacle on their way, they were instructed to turn on their right until another house was found.

In each household, one caregiver and one adolescent (from 12 to 17 years old) were selected. This was done by listing all eligible household members and if 2 or more caregivers or adolescents were eligible, one was selected at random. If the selected individual was not present at the time of the interview (or there were no eligible individuals), a re-visit was organised.

Data collection

Data collection took place in February 2018 and was conducted by a team of 57 enumerators across the two districts. Two field supervisors (World Vision staff) provided on-site support as well as two international consultants based in Darjeeling and 24 South Parganas. Enumerators were provided with a three-day training, which included orientation on ethics, questionnaire administration, working with children, and how to use mobile phones for data collection. The questionnaire was pre-tested in asimilar assigned community, and feedback from the field test was used to further contextualise the questionnaire and improve quality. Data entry was performed by each enumerator using Open Data Kit (ODK), an android app designed for administrating surveys.

Quantitative measurement and data analysis

Data was uploaded to the server daily, which allowed supervisors to check progress against sample targets and correct errors when necessary.The data was then exported to excel for data cleaning, and then to SPSS for weighting and analysis.

The majority of variables are categorical and were analysed using descriptive statistics. Some new composite variables were generated (e.g., child violent discipline, connection to caregiver, and caring community) so as to increase conceptual sense of the results and obtain data for key logframe indicators. Cross tabulations analyses were performed on selected key variables and chi square tests were carried out on categorical outcomes to assess the strength of associations (acorresponding p-value of 0.05 or less indicates a significantassociation at the 95% significance level). 95% confidence intervals are reported for key indicators.

Weighting

After fieldwork, the achieved sample of caregiverswas weighted to compensate for unequal probabilities of selection of households within primary sampling units, differential response probabilities of households,unequal probabilities of selection of caregivers within households, and differential response rates of caregivers.Because of difficulties matching adolescents to the household caregiver data, it was not possible to weight the adolescent sample. As a result, analysis of adolescents is reported unweighted. (D).

Qualitative component

Data collection

Another aspect of this study,and an important contributor to data triangulation, was the qualitative work that was undertaken by 10 researchers/facilitators (2 in Kolkata, 4 in Darjeeling and 4 in 24 South Parganas).Six of the facilitators were female, while four were male so that the gender of the facilitators could be matched to the gender of the participants for the focus group discussions and case studies.

The tasks to be carried out by the qualitative data collectors were:

☼ Carry out focus group discussions with caregivers and adolescents (Darjeeling and 24 South Parganas teams)

☼ Carry out case studies with single mothers (Kolkata team)

☼ Take accurate and comprehensive notes of discussions

☼ Create accurate and comprehensive transcripts of focus group discussions, key informant interviews, and case study interviews

In total 12 focus groups with 211participants were conducted:

Table 5: Number of FGD and participants by District

	DARJEELING		24 SOUTH PARGANAS		COMBINED TOTAL	
	Groups	Participants	Groups	Participants	Groups	Participants
Adolescent Girls	2	52	2	20	4	72
Adolescent Boys	1	21	2	20	3	41
Women	2	47	1	15	3	62
Men	1	16	1	10	2	31
Total	**6**	**136**	**6**	**75**	**12**	**211**

Most Focus Group Discussions had an average of 10-15 participants,though some had more.The FGDs lasted approximately90 minutes.

☼ Whether the community is perceived as a safe place, and the reasons for this

☼ Opinions about child trafficking for sexual exploitation, early marriage, and violence against children in that community

☼ The nature and effectiveness of child protection mechanisms in that community

Key informant interviews (KIIs) were conducted by the international consultants, accompanied with translators when necessary, and by a Bengali speaking researcher. A total of 13 interviews were conducted with people who had specialised knowledge of issues affecting children in West Bengal, especially issues of trafficking. Key informants included police officers; representatives of NGOs and representatives of government departments.

The KIIs lasted 45 - 90 minutes on average and focused on the informant's particular areas of expertise.

Data recording and management

During FGDs and case studies, the facilitators worked in pairs, with one facilitating the discussion, while the other took notes. Each FGD and case study was also audio recorded (if consent was obtained), as were some of the KIIs when consent was given. Some key informants only wished to be quoted anonymously, due to the sensitivity of the topic of child trafficking and risks to their safety.After each FGD, the researchers then constructed a hand-written transcript in Bangla based on their notes and the recordings.

Two translators (Bangla/English) were recruited and tasked to support the baseline during training but they also undertook additional tasks such as reviewing/editing and sometimes translating Bangla transcripts to English.

Data analysis

Qualitative data analysis was conducted by researchers from the Columbia Group for Children in Adversity(CGCA). Key categories, themes, and patterns were identified inductively, through holistic reading and examined through processes of triangulation with different subgroups (e.g., parents; adolescent girls; adolescent boys; child protection actors).

Since qualitative data frequently provides insight into processes of social change and the mechanisms through which changes occur, the qualitative data were triangulated with the quantitative data, boosting analytic power through convergent findings whenever possible. Discrepancy between qualitative and quantitative data was discussed and resolved during post data collection debriefs with the national and international researchers.

Research team

The research team was comprised of 2 international researchers from CGCA who were responsible for designing research methodology including sample design, tool development, data collection supervision, data analysis and report writing. They also led the training for both qualitative and quantitative researchersand oversaw the data collection. The national team was comprised of 67quantitative enumerators, 8 of whom also undertook the qualitative data collection(FDGs and KIIs), 2 translators, 2members of the World Vision DME team who served as field supervisors, plus senior World Vision staff for overall planning, coordination, logistics, and developing and supporting the mobile phone programming. WV staff assisted with the logistics for data collection ineach area.

Most Vulnerable Children

World Vision is committed to include the Most Vulnerable Children (MVC) in all its streams of work. The definition of MVC can vary from country to country according to the nationally agreed set of criteria. In India, there are 12 categories of children "in need of care and protection" (CNCP) which are identified by the Juvenile Justice Act (2015), (see annex …. for reference) .

Because it was not possible identify all these categories in the baseline survey, MVC status for purposes of this baseline was determined to be children who fell into one or more of the following categories which included categories from the CNCP list as well as categories developed by WVI:

☼ Children involved in child labour(excessive hours for economic work and housechores)

☼ Orphans (single or double) or children not living with biological family

☼ Children living with partner or spouse

☼ Child parent/ breadwinner (or grandparent as breadwinner)

☼ Children with disabilities

☼ Children living in families with three or more girl children

☼ Children in familieswhere primary bread winner is chronically sick, incapacitated

☼ Children living in families where both the parents with no regular daily/weekly/monthly income

☼ Children living in child-headed households

☼ Never attended school (all age categories); not at school now (under 14 years) or highest level of education is primary (for 15-17 years only)

☼ Children experiencing multiple incidents of violent physical discipline in the preceding 12 months

Ethics

The baseline evaluation recognised and sought to address the ethical complexities and dilemmas associated with research on children. The baseline was conducted in a manner designed to ensure that the benefits to participants outweighed any costs or unintended harm. Also, the process embodied the ethical principles of humanity, impartiality, neutrality, beneficence, non-malfeasance, and the best interests of the child. All the data collectors were bound by World Vision's Child Protection Policy, which defined key principles, harmful actions that must be avoided, and processes for reporting violations and responding to them in an appropriate manner. Ethical considerations also included how to talk in a respectful and empathic manner when querying people about violence against children.

Parental and adolescents' informed consent and assent was obtained through careful procedures that involved explaining well the purpose of the baseline. The participants were free to end their involvement in an activity at any time. To protect confidentiality, the records contain no names or personal identifiers. Throughout, care was taken not to raise expectations on the potential benefits that participants would gain from the project. However, single mothers in the brothel area were provided with a small amount of money (200 rupees) after the survey to compensatefor their time.

Limitations

The single mother sampling procedure was not designed to be representative of "all adult mother single mothers" in Sonagachi. Such a design is highly complex and would require a separate survey. However, analysis of key variables in the study population (sample) are providing good insights and measures of the issues at stake. Some of the indicators of this surveyrelate to sensitive attitudes and practices. Response bias are well known to researchers and must be taken into account when asking personal questions about practices of violent discipline at home or personal experiences of violence for instance, with under-reporting likely. Self-reported behaviours may not always be aligned with the individual's actual practices. One possible cause is social desirability biaswhich leads toinaccuracy in survey results due to respondents providing the answer they think data collectors want to hear, rather than the most accurate response. To diminish this bias, different levels of triangulation occurred: 1. within quantitative results from different groups of respondents and 2. between quantitative and qualitative results. Last but not least, this survey aimed at understanding a complex phenomenon (the exploitation and trafficking of girls for sexual purposes) that is very well hidden and difficult to "measure". This baseline did not seek to provide prevalence data or patterns of trafficking as it would constitute a separate research study in itself and would require a complex methodology. However, this baseline sought to get insight on the community attitudes, knowledge and practices that can potentially lead to exploitation, abuse and trafficking. It also sought to explore the life trajectory (the "how" and "why") of women's involvement in sex work.

PART III. DEMOGRAPHICS OF STUDY POPULATION

Children and their Caregivers (Darjeeling and 24 South Parganas)

Age and sex

The characteristics (weighted and unweighted) of the sample are presented in Table 6.

Table 6. Characteristics of study population by sex and district

	DARJEELING	24 SOUTH PPARGANAS	TOTAL
CAREGIVERS			
MALE	49%	49%	49%
FEMALE	51%	51%	51%
Base (unweighted)	658	522	1180
Base (weighted)	492	688	1180
ADOLESCENTS			
MALE	47%	47%	47%
FEMALE	53%	53%	53%
Base (unweighted)	479	406	885

Looking at the age distribution of children interviewed in the survey, 52% were between 12-14 years of age, while 48% were between 15 and 17 years of age.

Table 7. Age distribution of the adolescent sample

AGE CATEGORIES	II	%
12-14 YEARS	461	52%
15-17 YEARS	424	48%
Total	885	100%

The mean age for caregivers was 38 years with women being younger than male caregivers (34 years for women and 41 years for men). 89% of heads of households were men, while 11% were female. Almost all (98%) caregivers were married and only 1% reported being widowed.

The mean number of children (any age) living as reported by caregivers was 1.76 and mean number of girls alive was 0.76.

Caste and religion

The majority of participants (62% of caregivers and 68% of adolescents) belong to the most disadvantaged socio-economic groups in India – Scheduled castes (SC), Scheduled tribes (ST) and other backward castes (OBC).

Of these disadvantaged groups, 50% of caregivers and 54% adolescents reported they belong to the scheduled caste (also known as Dalits or Harijans),previously known as the 'untouchables', who were only allowed to do so called dirty and polluted jobs. 6% of both caregivers and adolescents belong to the scheduled tribes which lives in, or has come from, tribal areas. Also known as Adivasis,they have been marginalised by mainstream society.6% of caregivers and 8% of adolescents belong to the Other Backward Castes that have occupied the lower rungs of caste hierarchy and had been confined to jobs in the service and artisanal sector. Historically they have faced wide discrimination in terms of education, employment, and social interactions with higher castes. Approximately 38% of caregivers and 32% of adolescents belong to the general class, which historically has been part of the upper castes and higher socio-economic groups.

With regard to religion, approximately three out of four participants were Hindu (75% of caregivers and 79% of adolescents) while one out of five were Muslim (19% of caregivers and 23% of adolescents) . Analysis disaggregated by group showed that within Hindus the majority of respondents (77%) were from disadvantaged groups (scheduled caste, scheduled tribe and other backward caste) whereas most Muslims belonged to the "general" category (78%).

Socio-economic background

Across both areas,the median monthly income for households was 4,500 INR (Indian Rupees) or $69 (USD) – just over $2 per day. The median income for 24 South Parganas was significantly lower than in Darjeeling (3,500 INR in 24 South Parganas vs. 6,000 INR in Darjeeling). About half of total participants (48% and 52% in Darjeeling and 24 South Parganas) reported being a beneficiary of the Public Distribution System (Ration card) . These numbers are in keeping with the official government figures. Poverty rates published by the planning Commission of India shows a higher poverty rate in 24 South Parganas(21.4%) compared to Darjeeling(14.7%).

Another factor examined for poverty status was type of housing: mud, semi-concrete (katcha), and concrete (pukka) as observed by the data collectors. Across areas, the majority of houses were of the poorest, mud type (53%). However, significant differences existed between 24 South Parganas (where 76% lived in mud houses) and Darjeeling (where only 24% lived in mud houses). In addition, 17% of the participants lived in semi-concrete houses, while 30% lived in concrete houses.

Disability

In order to determine the percentage of individuals living with disabilities, participants were asked to score their ability in 6 domains (seeing even if wearing glasses, hearing, walking or climbing steps, remembering or concentrating, self-care, and communicating). Each question has four response categories: (1) No, no difficulty, (2) Yes, some difficulty, (3) Yes, a lot of difficulty and (4) Cannot do it at all. Disability was determined if the respondent reported that they either had 'a lot of difficulty' or 'cannot do at all' in any domain. Having a difficulty, on the other hand, was determined if the respondent reported that they had at least 'some difficulty' in one or more domains, but not did not report 'a lot of difficulty' or 'cannot do at all' in any domain.

This is fairly representative of population figures:West Bengal census data (2011) shows that 71% of West Bengal population is Hindu and 27% Muslim.

Mean income is 5,500 but income distribution is skewed by outliers so in our case median is a more representative measure of household income. Dollars conversion is based on exchange rate 19/03/2018 www.xe.com.

PDS beneficiaries have reported a lower median income (4,000 INR) than non beneficiaries (5,000 INR) which suggests that in our sample, PDS reached the poorest. Source : Planning Commission

DIFFICULTIES AND DISABILITIES

EDUCATION LEVEL (OF CAREGIVERS) N= 1180

Non response/Don't know	3%
Diploma/ITli/vocational training	1%
Higher secondary(completed)	4%
High school (completed)	10%
Junior high school (completed)	17%
Primary school (completed)	33%
Primary school (non completed)	7%
No schooling (never attended....	23%

Figure 2: Percentageof caregivers by level of education (completed/not completed)
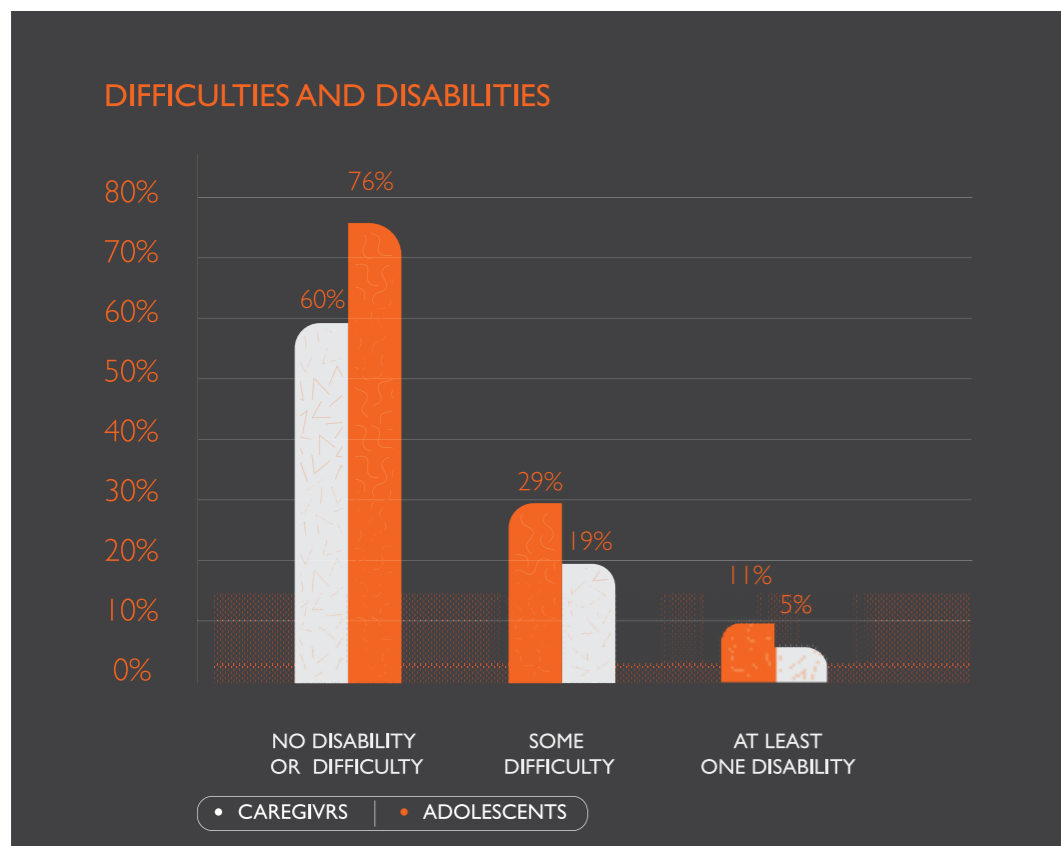
Education

Nearly one in four (23%) of caregivers reported having no education at all and a third (33%) have only completed primary school. Only 4% have completed higher secondary school. See Figure 2 below.

Among adolescents, almost all (95%) had gone to school at some point in their lives and 5% were both going to school and working.(See Figure 3 below).

However, when looking at attendance, 52%of school-going adolescents have missed at least 1 day of schoolin the month preceding the survey: 22% missed between 1 and 4 days, 16% missed 5 to 8 days and 14% missed 9 days or more.

Children from Darjeeling missedmore school than their peers from 24 South Parganas (23% adolescents from Darjeeling missed more than 9 days as opposed to only 7% from 24 South Parganas)., This finding is corroborated by children participants in FDGs:

The children in our village are not taken care of nor do they attend their school regularly. In our village, mostly all the adults and parents are out for work and the children are on their own playing.Therefore, there is no one to supervise the child (FGD, female adolescent, Darjeeling).

ADOLESCENTS
SCHOOLING STATUS N= 885

At School	73%
Vocationanal training	13%
Working outside the home	4%
Working at home	4%
Going to school and working	5%
None of these	1%

Figure 4. Percentage of adolescents missing school by number of days missed

ADOLESCENTS WHO REPORT ON SCHOOL ATTENDANCE N= 885

(42%).

- 1 TO 4 DAYS MISSED: 22%
- 5 TO 8 DAYS MISSED: 16%
- 9 DAYS AND MORE MISSED: 14%
- TOTAL: 52%
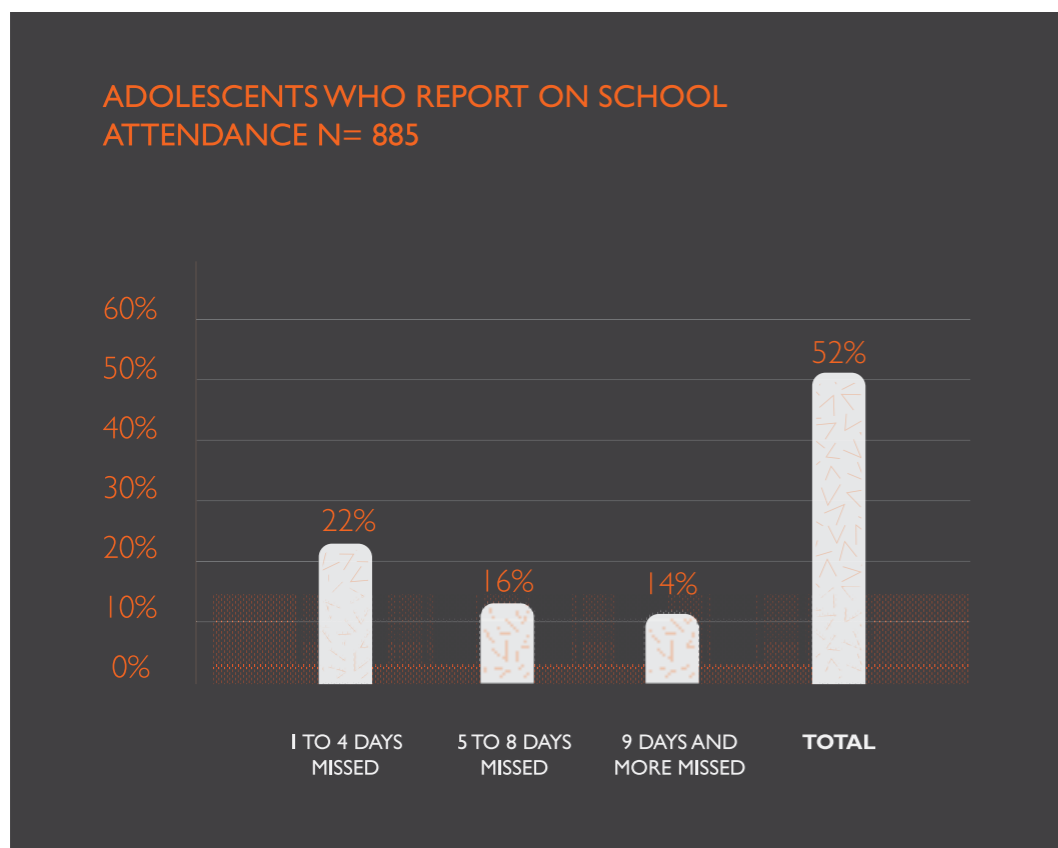
Most Vulnerable Children (MVC)

As stated above, MVC status for purposes of this baseline was determined to be children who fell into one or more of the following categories:

- ☼ Children involved in child labour (excessive hours for economic work and housechores)
- ☼ Orphans (single or double) or children not living with biological family
- ☼ Children living with partner or spouse
- ☼ Child breadwinner
- ☼ Children with disabilities
- ☼ Children living in families with three or more girl children
- ☼ Children in families where primary bread winner chronically sick, incapacitated
- ☼ Children living in families where both the parents have no regular daily/weekly/monthly income
- ☼ Children living in child-headed households
- ☼ Never attended school (all age categories); not at school now or missing more than 9 days under 14 years) or highest level of education is primary (for 15-17 years only)
- ☼ Children experiencing violent physical discipline in the home

Across both areas, 48% of adolescents have at least one type of vulnerability.

Disaggregated by number of vulnerabilities:

- 32% have (only) one type of vulnerability
- 12% have (only) two types of vulnerability
- 4% have (only) three or more types of vulnerability

A higher proportion of MVC was found in Darjeeling(53%) compared to 24 South Parganas (42%).No statistically significant difference was found by age or sex.

The most prominent vulnerabilities were; children whose caregiver was too sick to work (16%); children missing school for more than 9 days/month (11%); children who reported experiencing violent physical discipline at home (8%); and single or double orphans (8%)as shown in table 10. below.

Figure 5.Percentage of MVC children

Most Vulnerable Children (n=885)

MVC 48%

NON-MVC 52%
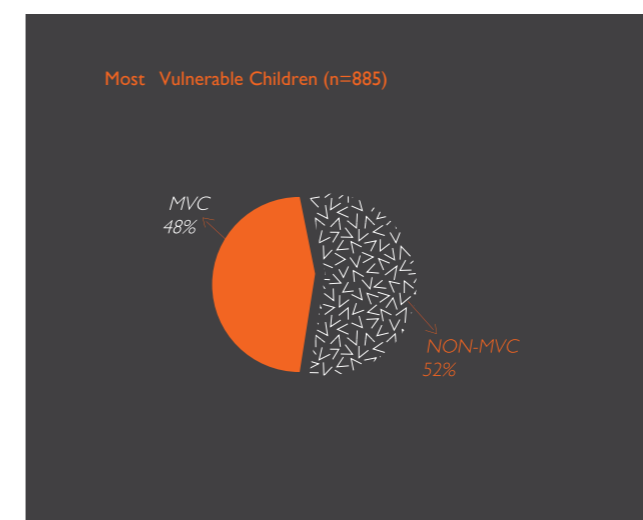
Figure 6. Percentage of MVC children by number of vulnerabilities

VULNERABLE CHILDREN (TYPES OF VULNERABILITIES) N=885

0% 1% 3% 12% 32% 52%

- 0 Type
- 1 Type
- 2 Type
- 3 Type
- 4 Type
- 5 Type
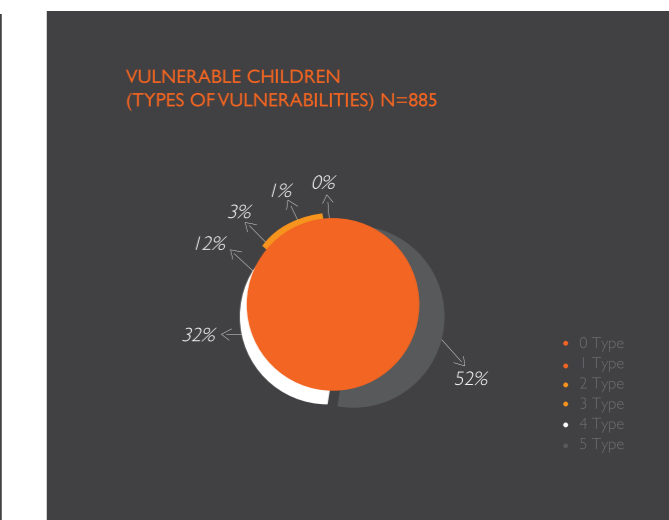
	MALE		FEMALE		TOTAL	
	N	%	N	%	N	%
Children working excessive hours	14	3%	11	2%	25	3%
Orphans (single and double orphans)	36	9%	31	7%	67	8%
Children whose breadwinner is too sick to work	71	17%	74	16%	145	16%
Children not living with parents	4	1%	12	3%	16	2%
Children breadwinner	16	4%	19	4%	35	4%
Out of school children (under 14 years)	10	2%	6	1%	16	2%
Children who never attended school	25	6%	17	4%	42	5%
Children missing school (>9 days/month)	45	11%	52	11%	97	11%
Children experiencing violent physical discipline at home	39	9%	33	7%	72	8%
Children living in families with 3 or more daughters	4	3%	29	6%	43	5%
Children with a disability	23	6%	24	5%	47	5%

During Focus Group Discussions and discussions with key informants, a number of issues negatively affecting the wellbeing and protection of children were identified by both adults and adolescents in Darjeeling and 24 South Parganas. These included child marriage, child labour, trafficking, substance abuse, and neglect of children while parents worked.

Child marriage of girls was mentioned by many of the informants in the study. (West Bengal has the fifth highest prevalence of child marriage amongst all the Indian states with 43.6% of women (age 18-29) were first married before 18as opposed to 27.9% nationally (NFHS).

Discussions with key informants and other participants in this study revealed that public awareness on the issue of child marriage has grown as a result of media hype, the legal ban, and human rights campaigns in India. However, the practice, although declining, is still very much in use in West Bengal and the other states in India.

As awareness is growing, it is likely that practices will also follow the same path towards delaying child marriage. However,one of the important pitfalls in the growing awareness about the child marriage ban is that the practicemay go underground as some reports already indicate.In 24 South Parganas, some adolescent boys in FGDs mentioned that sometimes parents were putting a signoutside the wedding ceremony indicating "birthday parties" to avoid raising suspicions about marriages.

"IN ONE HOUSE A 15-YEAR-OLD GIRL WAS GETTING MARRIED. SO THAT NO ONE COMES AND STOPS THE MARRIAGE THEY HAD PUT UP A "HAPPY BIRTHDAY" BANNER. (FGD, ADOLESCENT BOYS, 24 SOUTH PARGANAS)"

Groups of women and girls also identified child marriage as common in their communities with women acknowledging that girls get married around 14-15 years of age, and girls reporting a lower threshold (as early as 12 years) for marriage:

MOST GIRLS DROP OUT OF SCHOOL AT 15 YEARS; SOME GET MARRIED EVENT AT 14 YEARS (…) SOME ARE EVEN PREGNANT NOW (FGD, WOMEN, DARJEELING)

Adult participants in FDGs feared that by delaying marriage for their daughters, girls would fall into disrepute, since out of wedlock relationships and loosing virginity for girls brings dishonour to the families (West Bengal is the 2nd highest state for teenage pregnancy with 18% of girls between 15-19years who have begun childbearing (NFHS):

The thing is when a boy spoils a girl (sexually exploits) than the family is under pressure from the society because of the stigma to marry off the young girl. Also because of poverty and fear of the girl getting exploited the parents finds a young boy and marries off their daughter. The family somehow arranges for some money and married off their daughter at a young age(FGD, women, Darjeeling)

One key informant explained that parents didn't resist the social pressure to marry of their daughter early for fear that their marriage prospect would decline over time and this vicious circle led increasingly younger girls to get married off early.

In some occurrences, parents were said to be forcing the decision upon their daughters:

R. I want to continue my studies and someday work on my own. But my family is asking me to get married soon. So how should I convince my family?
I: Is this a recurring issue in your village?
All: Yes (FGD, Adolescent Girls, Darjeeling)

Other cases of girls forced to get married by boys or men have also been discussed:
Sometimes a boy likes a girl from the village and even though the girl doesn't reciprocate his feelings or like him, the boy continues to pursue the girl. And later he goes around and spreads rumours in the village that the boy and girl has got physically involved. As a result, the family is pressured to marry the girl off to that particular boy because of the stigma and shame such incidents causes the family in the community. The community believes the boy and forces the girl to get married off at a young age.

In Darjeeling, one girl reported a case where a girl managed to resist family pressure to get married:
R. This was an incident where a young girl's marriage was fixed and she herself advocated for her rights and called off her wedding. She went to her to be in-laws' house and informed them that she doesn't want to get married at an early age. She threatened the family that if anyone forces her to marry she will go and lodge a complaint in the Police Station.(FGD, Adolescent Girls, Darjeeling)

In other instances, the decision to marry was taken by girls themselves:

Some elope before they reach 12 years of age. Their brothers beat them and get them back. But they again run away. So, in order to maintain the prestige of the family before a girl gets involved with any boy they are married off by the family.(FGD, adolescent girl, 24 South Parganas)

Also, many young girls think about their marriage fairly soon as a way of getting their own independence (of their family, from poverty, to escape boredom, etc.):

We have to demystify this idea of marriage. Young girls all think about their marriage and the idea that everything will go all "rosy" after that. (KII, Kolkata)

Stories also emerged among male groups about adolescent girls threatening their parents to commit suicide if they don't approve of their boyfriend/ partner whom they want to marry:

If parents don't agree to marry them, then they either try or they commit suicide(FGD, men, 24 South Parganas)

Women's groups also mentioned the attraction of children, including girls towards highly valued commodities such as smart phones as being a problem, sometimes girls drop out of school to get work in order to afford a phone or get involved in harmful relationships:

Many children want to get good phones, bikes so they leave school and go elsewhere to work.

Sometimes girls create trouble to get a cell phone.

They take out money from home and speak to boys from public telephone booths

They speak over the phone and then the boys reach the girls' houses.(FGD, women,24 South Parganas)

The imbalanced child sex ratio is viewed as a contributing factor to child marriage. While West Bengal fares among the well performing states (with a child sex ratio of over 900), recent data show that it is declining (from 976 to 960 girls born per 1000 boys from 2005 to 2015) according to NFHS . A number of factors can contribute to skewed sex ratios including gender discrimination, lower value attributed to girls, as well as access to diagnostic techniques for sex determination leading to female feticide. Some of the most economically deprived states have a sexratio well above the national average: stories highlighted in the media show the sale of girls from poor states -- such as West Bengal -- to affluent but female deficient states, such as Punjab and Haryana .

Child labour and child migration for work were also reported as issues by many participants. In Darjeeling girls were known to go and work as wagelabourersin the tea plantations leading to dropping out of school or missing class. Boys too were said to be out working from the age of 14-15 years to support their families. Sometimes we send our sons and daughters to school thinking they are safe and doing their studies, but after going out from home they might be roaming around (…) or work in tea gardens(FGD, women, Darjeeling)

Due to poverty children as young at 13 – 17 years go to different cities or towns in search of work. But it is better if work can be arranged in the villages itself. (FGD, men, 24 South Parganas)

Child trafficking was also raised as a concern in most groups.Girls and families would willingly accept sham job offers, such as domestic workers:

Girls have gone from our village to work as domestic help. The parents benefit from the money that they send home. Sometimes we get news that girls are kept under lock and key.(FGD, adolescent boys, 24 South Parganas)

According to one informant, the recruiters are often living nearby, and the community knows them -- they are powerful.

The trafficker is the job giver, he does not consider himself as a trafficker. Traffickers can do anything he wants in the village, he has lots of young people at his hand who do as he says(KII)

Recruitment into domestic work is not seen as harmful by communities, according to a NGO worker:

The community makes a difference between good and bad. Working in a brothel is bad.However, getting a job as a dance trooper or domestic worker is not seen as bad. However, they're still illegal. (KII)

Poverty, debt, family conflict and sickness have been cited among key informants as push factors leading families and girls to resort to negative coping strategies (such as marriage) or labour, without necessarily fully understanding how the situation will evolve or the level of exploitation that the girl will find herself trapped into:

As long as the family receives money; they are happy, but when money stops then they declare a "missing child". (KII)

You know most families share the same pond and therefore get lots of diseases from eating and drinking out of the same pond… if the breadwinner is in bad health, it makes sense to the mother to sell one of her daughters to become domestic help. (KII)

You know poverty is not the only factor, domestic violence is also very high here. The wife is then desperate to move out and so are the children. Today we received a girl whom we know well, her step father was cruel to her and she wanted to flee and was trafficked to Mumbai. We rescued her when she was 13 years, she was HIV positive and pregnant.(KII)

In other instances, trafficking would occur through made up love stories:

These traffickers are emotionally strong, they know how to make girls fall in love with them, and ask them not to disclose their love affair to the family. It is usually a boy from the next village or GP.(KII)

Key informants also described how traffickers use new ways to recruit:

They are more clever than we think – they know how to adapt and have powerful people in their hands. They are using new ways and technologies to get at girls. (KII, Kolkata)

Girls are targeted from the best renowned schools in Kolkata. Traffickers offer them nice dress to entertain clients for big parties and private events. After some time, they blackmail them with some videos, that they threaten to show to your friends and family. After that you have to start sleeping with big men in these parties. And then you become a recruiter for them.

Other current trends include recruiting poor girls to go work in massage parlors. Other destinations include private hotels and lodges in which tenants do not keep records for clients of sex workers. The hotel may have 5 or 6 agents (intermediaries) working for them. If a customer comes in with one of these agents and the woman then its fine. Outside of these agents, you wouldn't be able to bring in a woman (sex worker).

Another informant added that it was important to clarify the difference between migration and trafficking:

It is very important to differentiate between migration and trafficking because everyone has the right to a better life. You think that you are going somewhere but you are ending up somewhere else. This is trafficking!(KII)

Gaps in child care

All groups also identified children lacking supervision as many parents living in rural areas are out working in the fields and have no choice but to leave their children with little supervision. This is a growing concernemerging from current literature .

Because the women go to the fields to work that is why they cannot look after their children well (FGD, women, Darjeeling)

### Single Mothers in commercial sexual exploitation (CSE) living in Sonagachi

The baseline study included a survey with 136 single mothers (Single mothers in Commercial Sexual Exploitation in Sonagachi) and 10 in-depth interviews (life stories) in order to better understand the life trajectories of these women.

General characteristics

The median age for single mothers in Sonagachi was 30 years.

Most women have been married or living with a man prior to arriving in Sonagachi: 18% consider themselves still married (although this would not mean they currently live with their husband); 46% of women reported being separated or divorced, 16% have either a live-in partner or a babu (in Sonagachi a babu often was a man who lived with a woman (though not always) but often did not contribute income; they sometimes had a wife in a different location). Only 17% reported being single.

Figure7. Percentage of women in CSE by marital status

MARITAL STATUS
OF WOMEN IN CSE
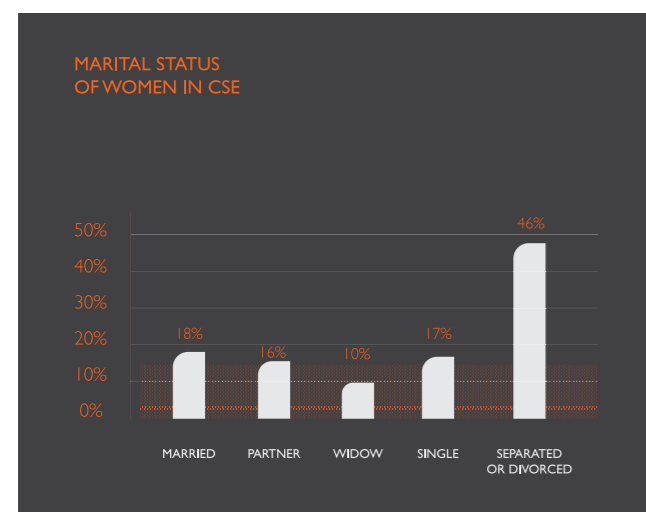
* Categories are not mutually exclusive (e.g. a woman could be separated and living with/having a babu)

Most of the mothers identify as Hindu (85%), while 14% identify as Muslim and 1% identify as Christian. In terms of distribution of the sample by group, 40% report they belong to the "general" group, and thirty percent were from the most disadvantaged groups: 25% scheduled caste, 4% other backward caste and 1% scheduled tribes. An additional 30% indicated they did not know which caste they were).

The majority of women interviewed had either one (57%) or two children (35%) , most of whom belong to the school mandatory age (60% are between 6 and 14 years) as shown in Figure 8 below. 97% of mothers report their school age children are going to school.

A reflection of the dire exploitative living conditions of women in Sonagachi is the striking proportion who report living with a difficulty or a disability.58% of women experience a difficulty in at least one of the six domains, mostly physical such as sight (44%), and walking or climbing steps (35%,) but also intellectual such as memory or concentration issues (33%). (Figure 9). 17% of women experience a disability. This is more than 3 times the disability reported by caregivers in   Darjeeling and 24 South Parganas (17% vs. 5%).

Educational attainment is strikingly low: 43% of mothers have never gone to school, 26% have only attended primary school, 24% have attended junior high school, and only 7% have attended high school (see Figure 10 below). These figures are much lower than in the general population: NFHS 2015 data shows that nationally, 12.3% women aged 30-34 years have never attended school.

* Percentages do not add up to 100% because of rounding up.

Figure8. Percentage of children (of mothers in CSE) by age category

CHILDREN OF MOTHERS IN CSE
(BY AGE CATEGORY) N=213
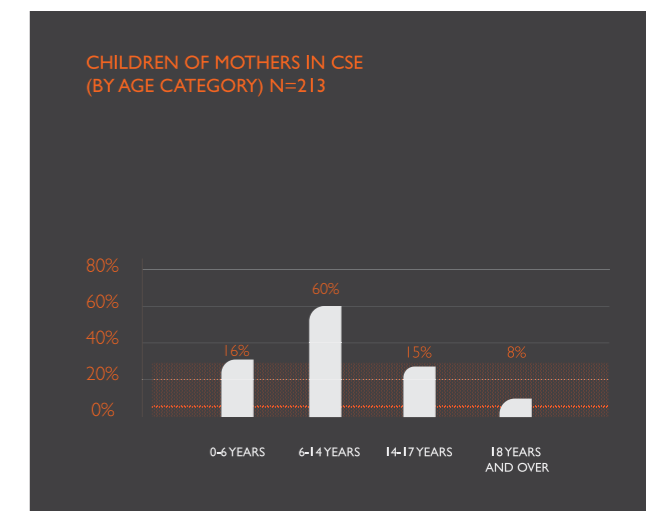
Figure9. Percentage of mothers in CSE with difficulties or disabilities

DISABILITY OR DIFFICULTY
(SINGLE MOTHERS) N=136
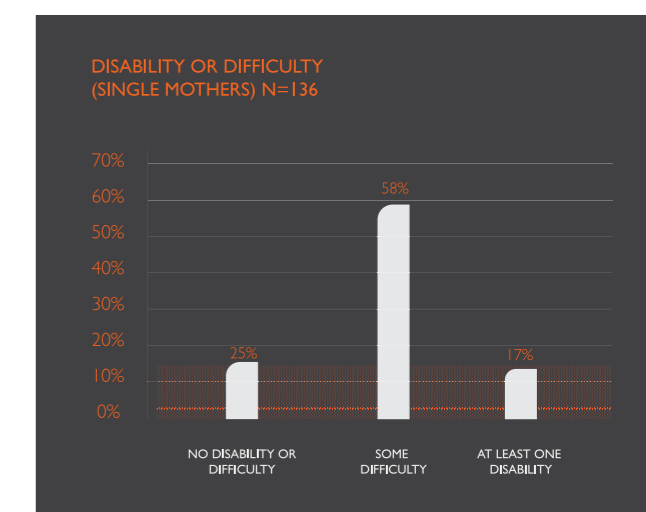
Figure10. Percentage of mothers who have attended school (by level)

EDUCATION LEVEL
OF MOTHERS IN CSE N=136*
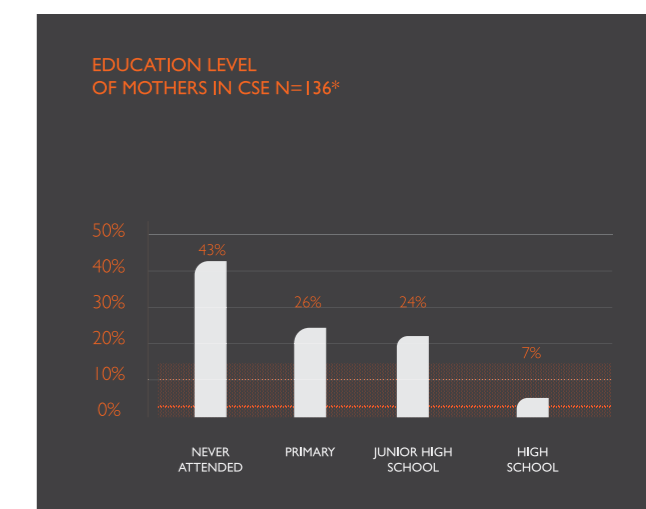
Figure11.Percentage of mothers in CSE who have completed school (by level)

EDUCATION LEVEL -
MOTHERS IN CSE (SONAGACHI) N=136
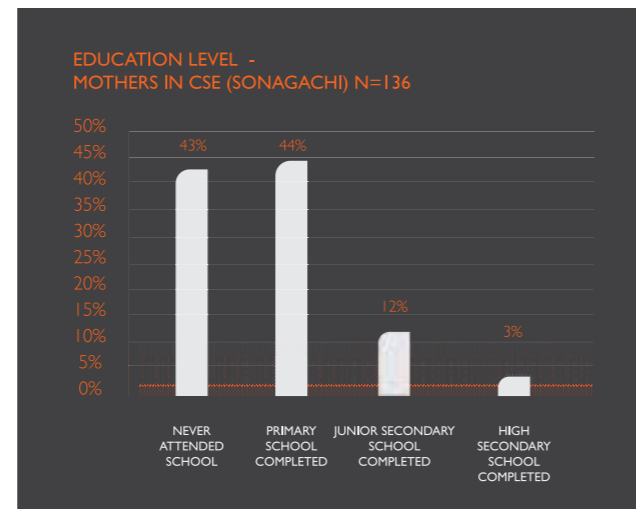
When looking at education level completed, 44% have completed primary school, 12% have completed junior high school and only 3% have completed secondary school.

PART IV. COMMERCIAL SEXUAL EXPLOITATION AND TRAFFICKING IN WEST BENGAL

Current estimates of human trafficking in West Bengal

Although much has been written on the phenomenon of trafficking, there is still a lack of consensus on the definition to use and the ways to measure and report on its magnitude. Because of the hidden nature of trafficking, its scope is extremely complex to define, and estimates can vary hugely within the current literature. A review of evidence synthesised by the Population Council (2014) showed that existing guestimates vary from 70.000 to 3 million women and girls being in CSE in India .

Because there is simply no sample frame to start with, prevalence studies aiming at providing data on child trafficking have to rely on other methods which can only provide estimates or "guesstimates" and not be generalised to the whole population of trafficked children without much caution. Studies looking at trafficking have resorted to alternative sampling methods for hidden population such as Respondent Driven Sampling (RDS), Time Space Sampling (TSS), facility-based sampling or other types of convenience and non-probability sampling.
In 2014, the Population Council (Santhya, et al.) published a report on the state of evidence about the trafficking of girls for Sexual and Commercial exploitation in India. Most of the available data was drawn mainly from studies of women and girls experiencing CSE at the time of the study, or survivors of CSE or from the National Crime Record Bureau (NCRB).

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In some studies, the measure of child trafficking was defined according to the age of entry into CS (based on retrospective data) and in some others it was based on the proportion of adolescents (minors) within the sample of the survey (see table below adapted from Santhya, et al.).

Looking at the table below there is considerable variation in the pattern of trafficking revealed by these studies (all of which have different scope and sampling methodologies – which makes them difficult to compare). Studies based on the experience of women in CSE reported that about 10% had started under 15 years and 46% between 16 and 20 years (Sarkar et all.). A study by Jana et al. reported 10% entered as minors or had unwilling entry (based on Self Regulatory Boards – organisations which support single mothers' rights), while a study by Falb et al. reported that 37% entered between 15 and 17 years (based on survivors of CSE).

Data based on reported crime collected by government and police agencies are another indication of crime but also has its limitations due to the rate of unreported crime. In India, an annual report is published (by the National Crime Records Bureau) based on data collected by police and other law enforcement agencies. In 2016, it showed that West Bengal features among the highest in terms of reported cases of trafficking under the Indian Penal Code (IPC). However, a very low number of cases is recorded under the ITPA (low conviction rate).

Reported crime doesn't necessarily reflect a trend in number of actual cases due to the number of reasons: Victims may fear or be hesitant to report crime, they may not fully associate incidents experienced with crime; and law enforcement agents may fail to recordanything or properly record crimebecause of collusion with the perpetrator or lack of knowledge on how to treat children (children may be treated as offenders instead of victims) .
A high rate of crime may also reflect a higher trust by the population in local government authorities who are mandated to record crime, or a higher efficiency of these services. Therefore, this data should not be associated with other estimates of the magnitude of trafficking as there may be a gap between the ratio of crime committed and crime reported.

Victimisation surveys attempt to close this gap and capture crime that is not well reported by official records, it provides another useful measure of crime. There are also limitations in the sense that they are often not comparable with national crime statistics as coverage is not similar (they focus on specific areas) and, similarly to other surveys, it should not be considered as representative of all the total number of illegal acts that occur in society.

In 2017, Justice and Care, a local NGO specialized in services to victims of trafficking in West Bengal/Indiaand the Border Security Forces (BSF) published an interesting victimisation study based on the accounts of 639 adolescent girls in 8 villages near the Indo-Bangladesh border. It focused on perceptions of crime and safety (among border population) and provided accounts of victims (rescued by Justice & Care) on the process of trafficking at the border and the modus operandi of traffickers. It didn't provide an estimate for child trafficking as such.

Trafficking of minor girls for commercial sexual exploitation in India: A synthesis of available evidence, New Delhi: Population Council, 2014 (with Shireen Jejeebhoy, Sharmistha Basu).

85% of all prosecutions under the Immoral Traffic Prevention Act (ITPA) were against female prostitutes rather than the traffickers United States Department of State, 2013, Trafficking in Persons Report - India, (19 June 2013).

Table 9. Current estimates for child trafficking in West Bengal

AUTHOR	STUDY PARTICIPANTS	SAMPLE DESIGN	GEOGRAPHICAL AREA	AGE WHEN STARTING CS % WHO WERE TRAFFICKED	% OF STUDY PARTICIPANTS IN AGES UP TO 20 YEARS AT TIME OF THE STUDY
Women and girls currently into CSE					
Sarkar et al. 2008	580 females in CSE at the time of the study	Convenience sampling, brothel based	4 DISTRICTS WEST BENGAL	- 10% CSE STARTED UNDER 15 YEARS - 46% CSE started aged 16-20 - 32% of all women were forced or deceived into CSE	9% under 20 years
Jana et al. 2013	2,195 female new entrants in CSE over a 3-year period (seen by SRBs)	Case records for 2009-11 maintained by Self regulatory boards of Durbar Mahila Samanwaya Committee	WEST BENGAL	- 10% ENTERED AS MINORS OR HAD UNWILLING ENTRY (I.E. 215 OR 9,8% WERE MINORS AND 45 UNWILLING WOMEN OR 2,5%)	8% UNDER 18 YEARS
Survivors of CS					
Falb et al. 2011	188 female survivors of trafficking for CSE	Review of case records from among those rescued and who had received support services from an NGO	1 CITY IN WEST BENGAL	- 13% CSE BEGAN UNDER 15 YEARS - 37% CSE STARTED AGED 15-17 YEARS	N/A
Sen & Nair 2004)	561 female survivors of CSE	Purposive and convenience sampling	13 STATES	- 62% CSE STARTED UNDER 18 YEARS (ALL 13 STATES) SAMPLING FOR WEST BENGAL 54 AND 59 SURVIVORS OF CSE (SMALL)	21% UNDER 18 YEARS 29% AGED 18–20
REPORTED CRIME					
NCRB 2016	8,132 CASES OF HUMAN TRAFFICKING REPORTED IN INDIA UNDER THE IPC WITH WEST BENGAL FEATURING THE HIGHEST (3,579) BY POLICE AND COURT. 15,379 PERSONS TRAFFICKED DURING THE YEAR WITH WEST BENGAL FEATURING THE HIGHEST (4,164) INCLUDING 3,113 CHILDREN (58.7%), DISAGGREGATED BY GENDER 426 BOYS AND 2687 GIRLS.				

Adapted from: Santhya, K G, S J Jejeebhoy and S Basu. 2014. Trafficking of Minor Girls for Commercial Sexual Exploitation in India: A Synthesis of Available Evidence. New Delhi: Population Council.

International debate about sex trafficking and sex work

Internationally, there is much debate about how prostitution should be approached even among feminists with the following different stances: `

Pro-legalisation contenders, who demand the rights for women be recognised in what they consider a profession (single mothers' union such as DMSC) regulated by the government.

Anti-criminalisation proponents(such as Amnesty International, GAATW) whoadvocate for the rights of women to work as sex workers and the decriminalisation of prostitution as a mean of protecting women. They seek to highlight some of the detrimental effects of legislation and initiatives that seek to treat trafficking and prostitution as one and the same. They consider that women are suffering more because of these laws and programmes as it can lead to the arbitrary arrest, prosecution and abuse for engaging in sex work. These aim to fight the idea that sex work is generally associated with trafficking.

Life trajectories of women in CSE in Sonagachi

Although there is no recent data related to prostitution in Sonagachi, existing reports estimatethere are approximately 26,095 women in CSE (DMSC; All IndiaInstitute of Hygiene and Public Health, 1994)scattered over 21red-light areas in Kolkata and its twin city of Howrah.Sonagachi is Kolkata's largest red-light area and is thought to haveexisted as such since at least the early nineteenth century, and possibly for the past threehundred years (Banerjee 2000). In Sonagachiitself there are an estimated 7,091 brothel-based or residential women in CSEand 3,262 women coming from outside Sonagachi, also referred to as "flyingor floating sex workers". The latter are women, the majority being wives, who are living outside Sonagachi but rent a room whenever they work in Sonagachi. According to Kotiswaran, the majority of women in CSE(in Sonagachi) are actually self-employedi.e.they maybe renting a room in a brothel but do not have a "labour contract" with the brothel keeper .

The current study involves a convenience sample of 136 "single mothers", all currently working in Sonagachi in CSE, not all of whom have been trafficked.However, as seen above in other studies, data about age at entry into CSE gives us some idea about the magnitude of trafficking of girls into commercial and sexual exploitation (CSE).

Using this measure to estimate child sex trafficking (percentage of women who entered CSE as minors – by asking retrospectively data about age at entry), this study found that 26% have started when minors (under 18 years). The mean age for entry into CSE was 21 years, with most women entering before 25 years.

Figure12. Percentages of single mothers who entered into CSEby age group

AGE WHEN ENTERED CSE (N=136)

UNDER 18 YEARS: 26%
18-25 YEARS: 44%
25 YEARS AND OVER: 29%
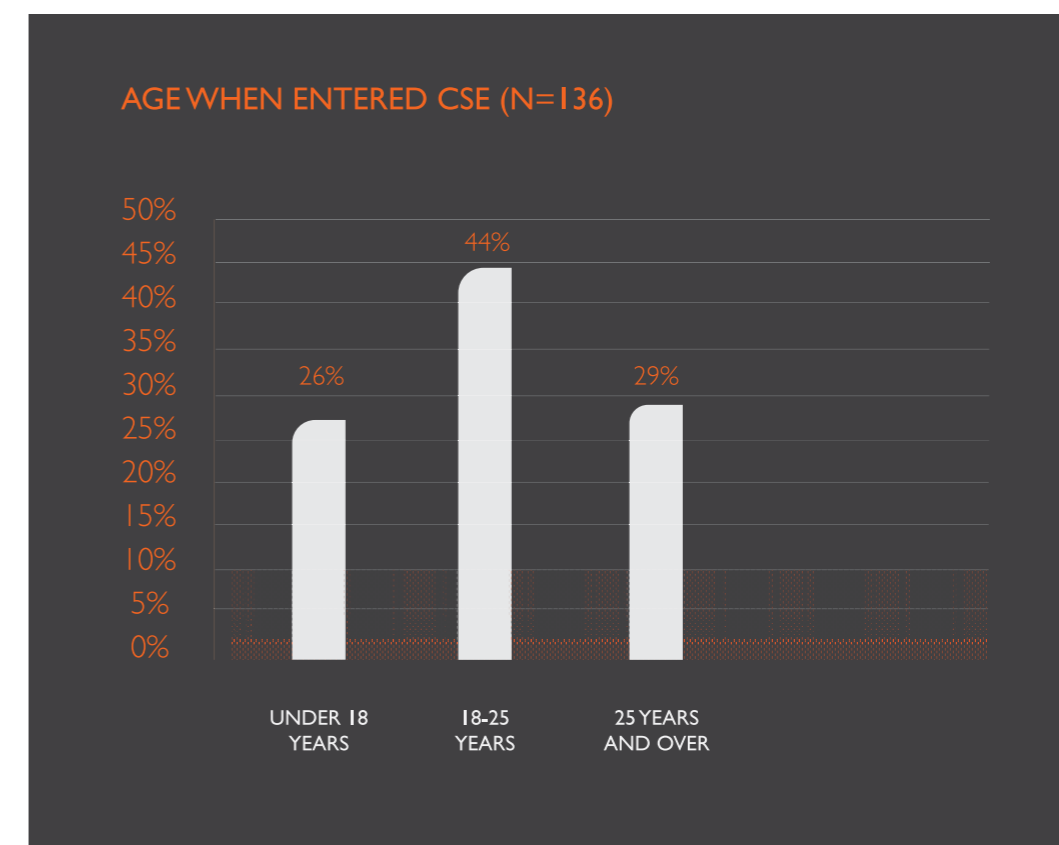
GAATW, Collateral damage: The impact of anti-trafficking measures on human rights around the world, 2007.
O'Connor M; Healy G. 2006. CATW.The Links between Prostitution and Sex Trafficking: A Briefing Handbook (Manifesto, Joint CATW-EWL Press Conference, 2005). Kotiswaran 2008, p. 585.

http://www.ilo.org/ipec/facts/lang--en/index.htm
ECPAT June 2016. Terminology guidelines For the protection of children From sexual exploitation and Sexual abuse, Interagency Working Group on Sexual Exploitation of Children

Another interesting finding was that the median age of first sexual experience was found to be very young (15 years) and that was irrespective of whether they had started to experience CSE or not. In India, the median age at first sexual intercourse is 19.1 years for women age 25-49(National Family Health Survey 2015-16).This suggests that the first sexual experience of these women was earlier than when they first lived/ were brought to Sonagachi. It also suggests that a significant proportion of adolescents are sexually active, whether by choice, due to child marriage, or because of sexual abuse.

Another striking finding was that for many women (43%) this first sexual experience was not a free choice on their part but was forced. More research into the nature of the sexual experience of adolescentboys and girls in India is needed as current lack of data is sparse .

Figure13. Percentage of women whose first sexual experience was forced
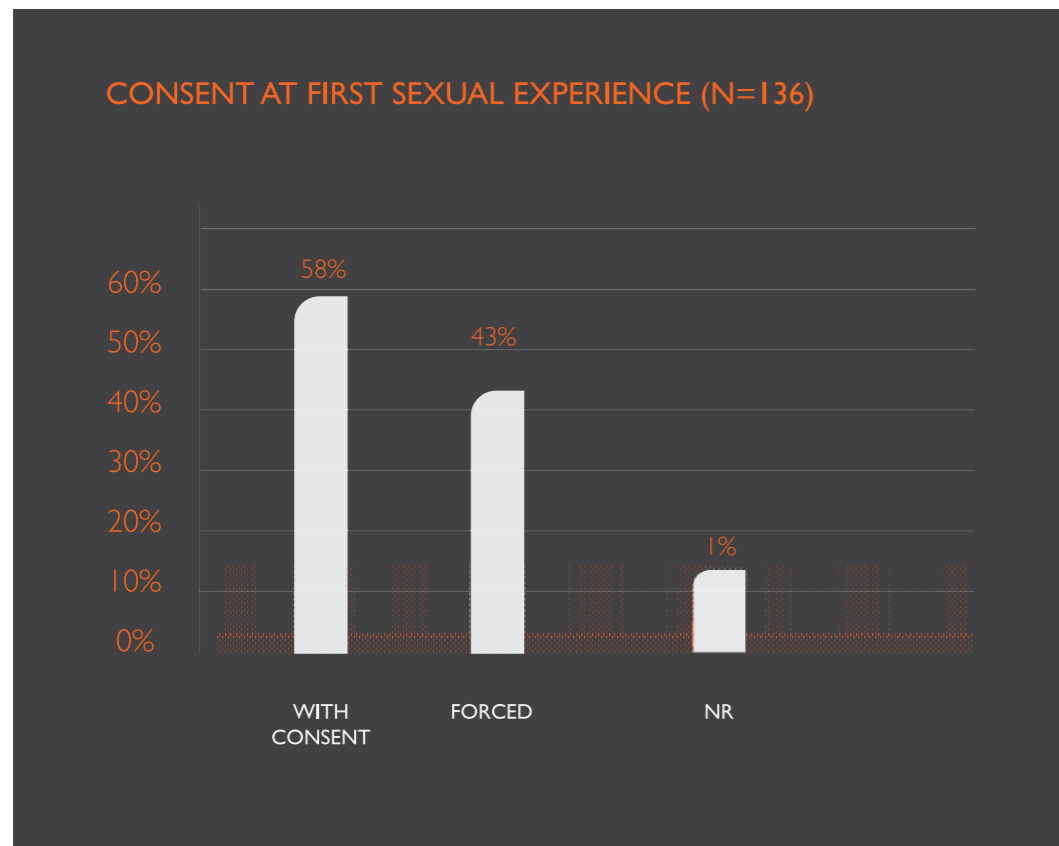
The following sections consider the life trajectories of women who are commercially sexually exploited in Sonagachi. These results are drawn from a mix of quantitative (a survey of 136 single mothers) and qualitative data (10 life stories, i.e.,individual in-depth interviews of single mothers). Percentages are based on quantitative data and individual stories are based on qualitative data.

Work and migration history

Most single mothers (71%) interviewed in Sonagachi come from West Bengal (another district) while 18% come from other parts of the city (Kolkata). To a smaller extent, 4% came from another state and the same proportion (4%) from another country (Bangladesh and Nepal). Although not all women and girls in this sample have been subjected to trafficking, this suggest that intra-state trafficking would be quite common. This phenomenon was highlighted in the 2003 national study on human trafficking (Nair 2003 p. 50& 91).

The first destination point directly after leaving home was Sonagachi for the majority of womeninterviewed (68%).

Most women stated that the reason why they left their place of origin (where they grew up) was to get work for their own subsistence or to support their families (see section below on the process to get intoCSE about means of recruitment).

Figure14. Percentage of single mothersin CSE (by origin)
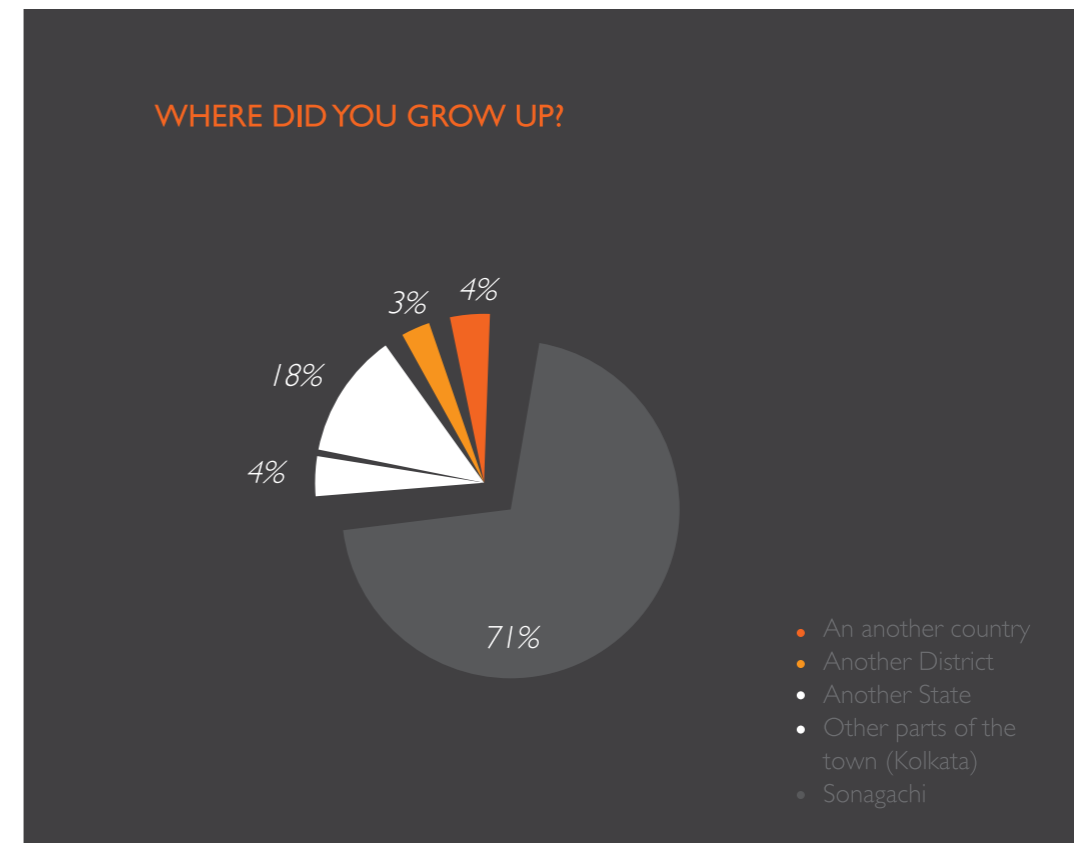
Figure15. Percentage of single mothers who grew up in India in CSE (by district of origin)
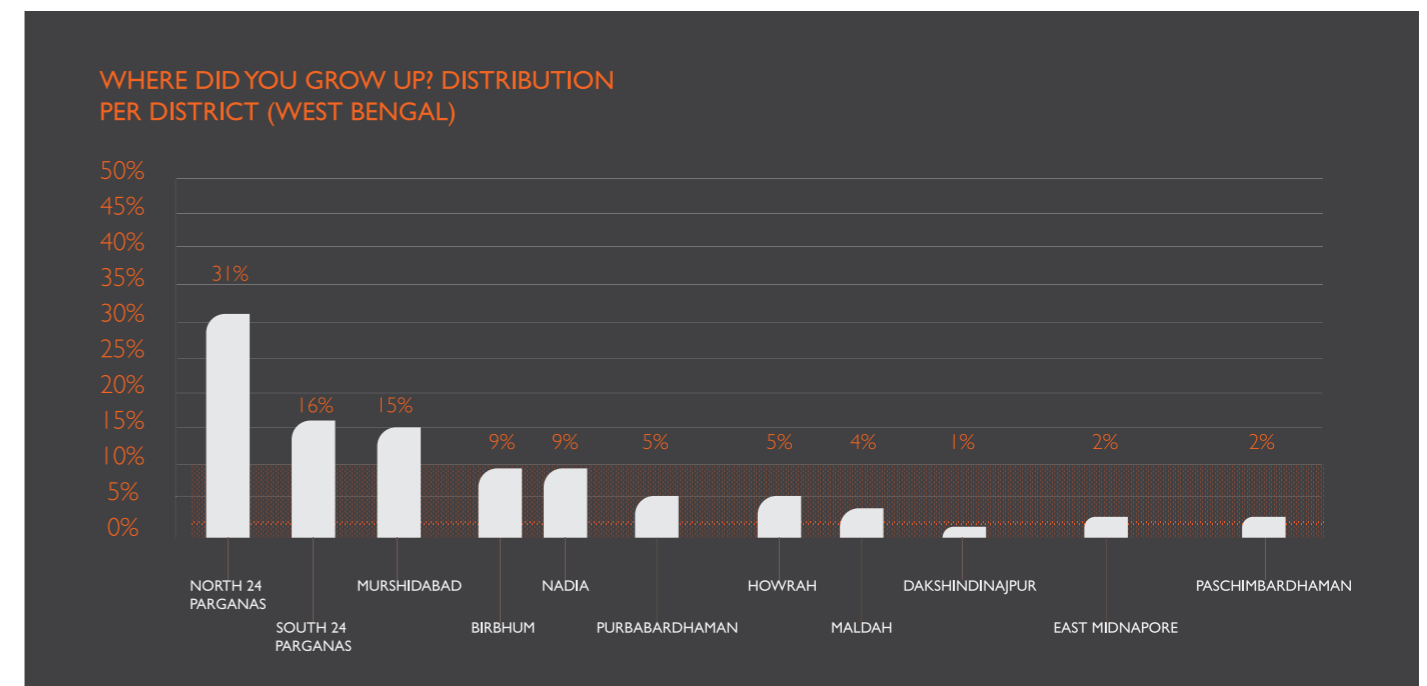
Figure 16. Percentage of single mothers – by reasons for leaving place of origin*

REASONS FOR LEAVING
PLACE OF ORIGIN

To escape domestic violenve	13%	
Husband left for another woman	15%	
To get married	18%	
To get work	78%	

0%   20%   40%   60%   80%   100%

* Note that % do not add up to 100% as this is a multiple-choice question

Vulnerability factors and reasons for getting into CSE

Attempts to get at the root causes for engagement into commercial and sexual exploitation isdifficult. Individual stories of women revealed that the factors leading into prostitution are the result of a complex set of life events and vulnerabilities combined. These factors include lack of educational opportunities, poverty, abusive home environment, early marriage, elopement to men who later abandoned them or sold them,and being lured and sold by people known to the girls, including by relatives, acquaintances and even friends.

The results from in-depth interviews provide us with some hints on common vulnerabilities experienced by women who work in Sonagachi. As mentioned above, one of the common background characteristics was the high proportion of uneducated women: 43% of women never attended school. Both gender discrimination and poverty led parents to make a decision to enrol boys at the expense of girls.

All names of single mothers have been changed to protect their identity.

Adya spent her childhood in a village surrounded by hills and mountains near the city of Kathmandu in Nepal. She and two other sisters were never admitted to school, like many other village girls. Her father thought that girls were not born to work outside the home and therefore didn't need education. However, her brothers were admitted to school and all of them received good education.

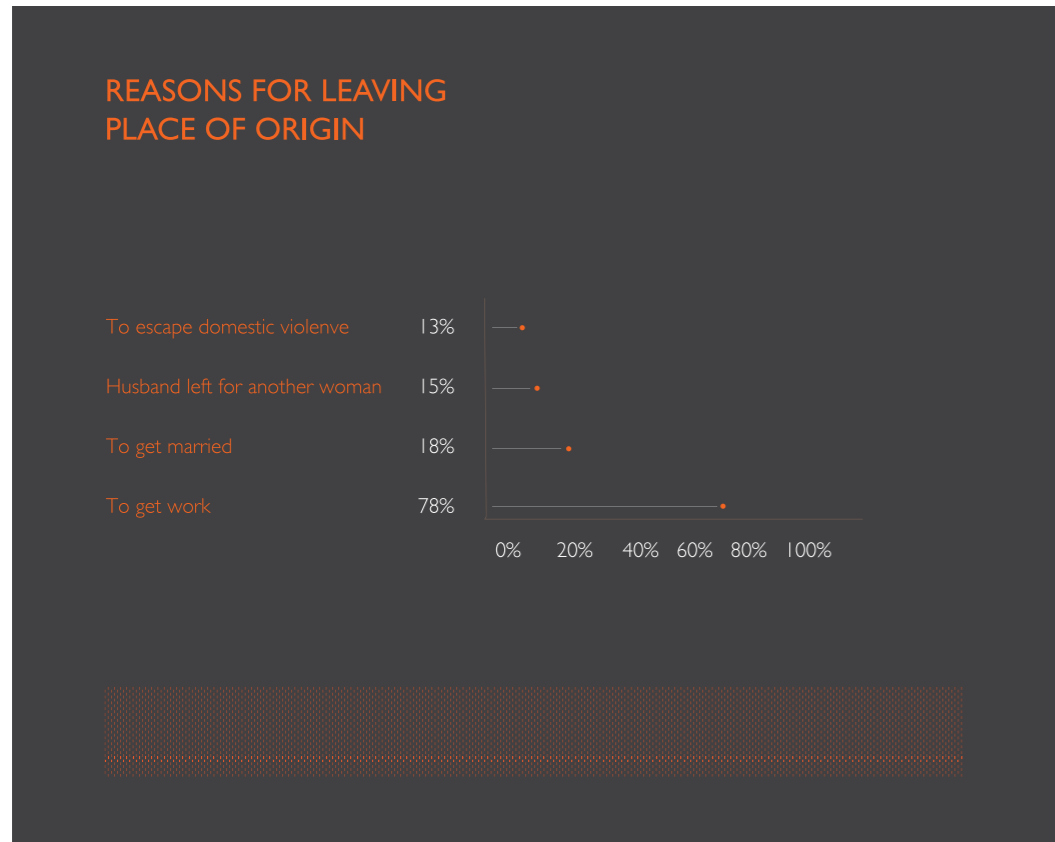Dharuna had three brothers and three sisters living with their parents. Her parents were working in a brick field. The income earned by them was not sufficient for a family of eight. As a result, none of them were admitted in school. Sisters were engaged in household work;she and her elder sister sometimes assisted their parents in working in the brick- field.

Looking at women's family background, havingnumerous siblings/living in large households (above national or regional average) could be one risk factor increasing economic fragility and contributing to girls taking risky decisions / or being more vulnerable to trafficking in general. The number of sisters is also one risk factor in India where having girls is not considered an advantage but a burden on ones' family. Many women interviewed (in depth interviews) had at least 3 sisters in their families, and one had 7 sisters.

In some other cases, women mentioned dropping out of school earlier than expected as a result of their mother's illness or accident, and eldest siblings are more at risk of getting into child labour and dropping out of school as a result of one parent's bad health:

Churni's family was not an affluent family but they did not face acute poverty either. Churni was the oldest among the siblings. All of them were admitted to school but Churni could not continue her education as her mother suddenly got ill. She had to drop out from the school and had to start assisting her mother in her household work and looking after her younger brothers and sister in the house.

Out of five siblings, Khadidja was the second daughter of her parents. They were three sisters and two brothers. His father was a renowned mason in that area; in addition, he had enough landed property. As a whole his earning was more than sufficient. Her mother was a housewife and used to perform the household work. Khadidjastudied up to class 5 in the local school. However, one day her mother got a head injury when a coconut fell on her head from a coconut tree. After this accident,Khadidjaand her elder sister had to terminate their schooling untimely. They had to take care of the household work of their family and they were also looking after their younger brothers and sister.

Early marriage was also found to be one of the experiences among women interviewed, and some women were married as early as 12 years. In some occurrences, women were victims of arranged marriage, and in some cases they ran away with a boyfriend and got married afterwards, with or without their family's consent.

From qualitative findings, it was found that one of the key turning points highlighted in girls' life trajectories was that of an early marriage that turns out wrong, either because of intimate partner violence or addiction, the husband having an affair or leaving the home (found among arranged marriages) or violent in-laws. In one instance, a husband even trafficked his own wife.

Daritree was the fourth daughter of her parents and the youngest.Her father owned some agricultural land but produce from it was too insufficient to meet the daily necessities of the family. In spite of this acute struggle for survival they enjoyed a very peaceful life in their childhood. Daritree'sfather did not have any addiction and didn't beat his children. At 12 years old, Daritree was married toa man whohad an affair with another girl. Both the husband and her in-lawswere violent towards her: when she was carrying her first child she was beaten severely by an iron rod by him. Daritree said that she used to be struck by her mother with a broom. After three years, she

gave birth to another boy child. Sometimes, her husband would disappear from home and reappeared after some years. According to her, he would intensify his torture when he was back.At an extreme point of torture,she had no other alternative but to leave her in law's along with two sons.

In other occurrences, adolescent girls had decided to run away from home to follow a boyfriend or to get married out of their free will but faced with a point of no return in which their initial decision and made them trapped into an unwanted situation from which they couldn't escape.

Stories of women highlight that there often comes a point when, faced with life challenges that appear impossible to solve, they become prey to either trafficking or sexual exploitation (irrespective of whether coercion or deception happened or not). This turning point often is the result of a series of events at the end of which the young girl finds herself trapped in a situation she has no control of and in which her survival and that of her child(ren) is at stake.

Khadidja was tired being home with under her father's strict disciplinary environment while her mother was being sick. That's why she decided to acceptBabul's offer of marriage. She was 13 years old when she left with Babul, a teacher of an English medium school in the neighboring town. Khadidja 'shusband went to another district in his work place leaving her with his parents but Khadidja's mother in law never accepted this marriage. After some time, Babul started developing habit of consuming liquor and beating her whenever he was home. He also stopped sending money to her. She was not in a position to request her father for sending money since she has deserted them for marrying Babul.She then found herself in acute financial stringency and was unable to arrange even baby food for her son while her in-laws withdrew support to her. Through her brother, she managed to make amends with her father and they negotiated a divorce with Babul. She came back home with her son but felt bad about being too dependent from her father and seeing herself not being to answer to her son's needs in the future.

Susmita's mother was a sex worker. She deserted her though and she was left to the care of foster parents who took care of her in Sonagachi. When her foster father died, the family got in a financial crisisand Susmita had to drop out of school. She somehow managed a training job in a bag factory run by a NGO in the locality. During her way to the NGO office, she gradually got acquainted with a young man named Bijal. Bijal studied up to class eight and was working as an orderly of an advocate in the court. Susmita did not get approval from her foster mother in this marriage, instead, that marriage annoyed her foster mother. However, they got married anyway. Nothing was wrong in first 2-3 years; Susmita in the meantime gave birth to two male children. Suddenly Bijal lost his job. Hewas in deep trouble; hisincome was too small to run the family with two kids. Bijal was then in search of a new job. One day he announced that he got a job in Mumbai and convinced Susmita that she should accompany him. In Mumbai, they went to a brothel for accommodation;Bijal asked Susmita to wait there, but he moved out. She was not allowed to move out of the brothel. The owner of the brothel informed her that Bijalhadsold her to them and she would not be allowed to move out from here. She was forced to stay there. The owner and his henchmen were extremely rude and cruel; they used to torture physically the girls staying there.After four months of stay in that brothel, she along with another girl escaped from that brothel by jumping from the rooftop. She had a pair of golden earring; she sold that in the market and arranged some money for coming back to Kolkata. She then reached Sonagachi but her foster mother told her that she herself was responsible for her misfortune that she was carrying.

In several cases, single mothers stated that they knew someone (either a relative such as mother or grandmother or a friend) whom they knew was working in Sonagachi. Being connected to someone who is working/ has worked in Sonagachi doesn't necessarily lead to young women and girls taking the same path automatically, however it does mean that when confronted with a dire life event or situation, working in Sonagachi will be one of the potential options that they will consider to sort themselves out.

Biva's mum was a sex worker in Sonagachi where she got trafficked by her former boss. Bivas' elder brother was just two and half years older than her. During this time a babu was staying almost permanently with her mother in the same house. That babu was extremely intolerant and used to beat them regularly; even her mother was not spared. At the age of eleven, she proposed to her mother that she and her elder brother rent a house just outside Sonagachi to escape from that man. She accepted and they started to live there freely. As Biva was proud to say she was very competent to look after the house and didn't go to school, however the landlady used to complain to their mother about their ill behaviour and their mother used to beat them. One day the landlady thrashed them, and they were forced to go. Afraid that their mother would punish them again, they fled, and her brother was caught by the police. She made her journey to Mumbai by train but finally ended up in Delhi where she spent the next 2 years begging on the platform. One day she met with a young boy, Chandraraj, who was a rickshaw puller in Delhi. Chandraraj too had escaped from his family. According to Biva they lived their golden years and bore a son. She even made peace with her mother, until Chandraraj's father died. He started then to take drugs and gradually became unstable and violent. Biva had to undergo two abortions at quick intervals and she came back to Sonagachi to her mother where she gave birth to her fourth child after Chandraraj died of an overdose. She felt compelled to become a sex worker in Sonagachi.

This story illustrates the inter-generational dimension of poverty and the transmission of educational disadvantage and exclusion that lead to similar adverse outcomes along the generations. Without external intervention and support, there is high risk that patterns of exclusion, violence and penury will be repeated over time. And this negative cycle is exactly what mothers do not want to see happening: in the 10 life stories collected for this study, all women have stated that they do not want their children to witness their current work situation and be exposed to the risks and what they saw as a very negative and adverse environment in Sonagachi. This may be one of the major reasons why many women tend to leave their children to their mother's care instead of keeping them in Sonagachi.

At the age of 14 years, Ananya fled from home to escape from the violent treatment of her father. Although her father insisted on her education, she didn't care to go to school at the time and preferred staying out free. She settled for marriage with a Hindu boy, which was not accepted by her family. After 3 years, her husband started drinking and the couple were facing with economic difficulties. They were finally thrown out of their house and Ananya decided to move their daughter to her parents. She found a job in a bag factory but couldn't make enough surplus to secure her daughter's needs. She finally decided to meet her granny who lived in Sonagachi and used to be a sex worker there. But her granny refused to help her and advised to search for a different job. In fact, her granny hated this profession though she herself was a sex-worker. But Ananya was determined to join (as a sex worker)as she already came to know that an uneducated woman like her cannot earn comfortable money from any other alternative job. To pursue this, she then came to a land lady (Malkin) near Sitala Mandir (a place for worshiping goddesses) in Sonagachi and began her job as a sex worker.

Processes for entry into CSE

The causes that led women and girls to find themselves into CSE (whether coerced, deceived or not) are different from the actual triggers i.e. the actual individual or event that led them to a drastic change of situation in their lives.

As shown by the stories above, some of the women and girls got into that job through acquaintances or relatives although these may not necessarily may have been acting as recruiters as such (e.g., sharing personal information without attempting to recruit). Looking at means of recruitment from survey data, most of them found themselves in this profession through an intermediary that was known to them: either friends (28%), someone from the village (26%) or relatives and family or even husband (13%), pimp or brothel owner (7%). These intermediaries had some level of connection with red light areas either because they were working there or knew someone there, and typically would receive a payment for bringing someone in for CSE. About one fourth(23%) of women reportedly came to do this work by themselves.

Figure17. Percentage of mothers in CSE and means of recruitment

WHO RECRUITED YOU? (N=136)

Other	3%
The owner of this place (brothel owner)/pimp	7%
Someone from my family/relatives/husband	13%
No one, I came by myself	15%
Someone from my village told me about this	18%
Friends told me about this job	78%
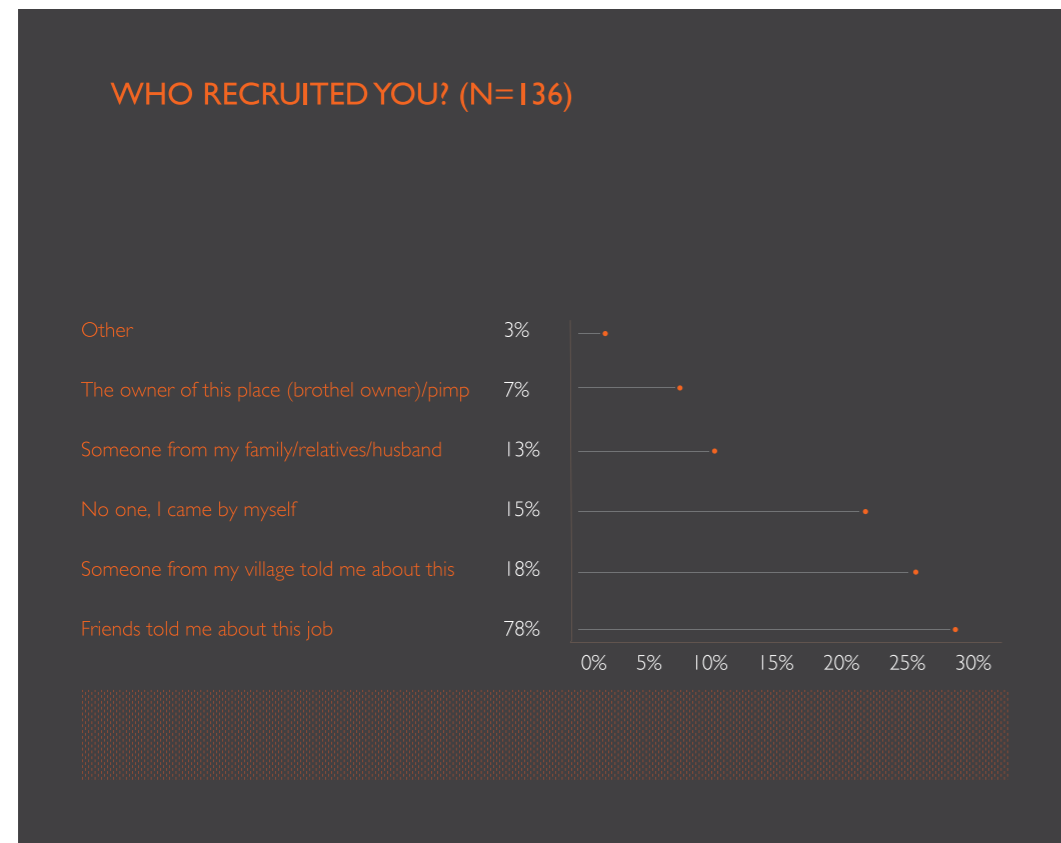
Among stories of women who got coerced or deceived into Sonagachi, the intermediary was usually someone quite close to them, either a friend or someone living nearby. Means of deception included fake offers of marriage or jobs as maids in Kolkata. There are also stories about husbands who chose to sell their wives when they are confronted with economic hardship.

Churni got married at 14 years to a man who gradually revealed himself as being mentally ill. She was regularly beaten by him and his family. She gave birth to 2 sons and decided to look for a job, as she had almost no means of taking care of them. One day she met a girl who was staying just near their house who mentioned she was working in Kolkata and could get her a job there too, as a maid servant. One day that girl informed Churni that she had finalised a maid servant's job for Churni in Kolkata at a monthly salary of Rs. 3000/- per month but she would have to stay there in the family of the employer. In fact, Churni was brought to a Sonagachi brothel. When she came to understand that she was brought to a brothel she tried escape, but she was prevented from leaving. In first days, she wept continuously, but gradually she came to know that there is no escape route from here since she has already been sold by that girl.

In some other cases, there are also accounts of external individual intermediaries who are from outside the community but provides fake job offers to young girls. This often involved forcing the girl into staying and working as a sex worker in exchange of repaying a debt.

Khadidjanoticed that a lady often comes to their village to sell cosmetics and sarees in the houses of the locality. Khadidja approached that lady for a job and that lady replied that there was a suitable job for her in Kolkata and Khadidja would need to stay there. Khadidja knew that her father wouldn't allow her to leave so they left in secret that night. They reached Sonagachi at 2 a.m. and the lady put her in a room and told Khadidja that she would come after two days to place her. She thought that she was put in to a ladies hostel. On the next morning the landlady met her and told her that Khadidja was sold by that lady at 30,000rupees. Knowing this she started crying and asked her to let her go back to her home. That lady told her that she would be allowed to back home only if she would repay the money given to that lady by her.

Yoshita was married off by her brother at the age of 12 years, in Nepal. Her father didn't approve but was sick and weak at the time. After some time, she gave birth to a boy, but they were living in such acute poverty in her in laws house that she remembers not being able to get milk for her baby. Her husband's father was a liquor addict and used to beat his wife as well as her. A lady whom Yoshita called Kakima (aunty) was staying near them and worked in Kolkatta most of the time, Yoshita thought she was working in a nursing home there. Yoshita approached her for a job there. The lady discussed with her husband and they decided to go and visit the lady's house there. At the time, Yoshita was just 17 years and had never been on an outing. Her husband brought her to Sonagachi in the morning and left in the evening saying that Yoshita would come back with Kakima. Later the landlady said to Yoshita that she had been sold by her husband and she needed to repay that money to her by working here. As Yoshita vehemently refused she started arguing violently with some men who used to stay with the land lady as her babu(acting husband) and he injured her with a blade. Yoshita begged the lady to release her but she convinced her that she had nowhere else to go out and that it would be not safe for her to go with her child. Yoshita came to understand that she had no other way out but to work here as a sex worker. She got a small room in the third floor of that house and began the duty of sex worker.

Living and working conditions

Work contract

In 2008, a key ethnographic study (Kotiswaran 2008) analyzed some of the key features of single mothers' lives in Sonagachi. It looked at the brothel as an institution and the various relationships between single mothers and the brothel (outside and inside the system). It drew an interesting typology of single mothers according to their status, their independence level, and income.

Kotiswarandescribes three modes of "sex work":

The Chukris (girl in Hindi) are virtually bonded to their madams, who usually make a down payment in advance, either to agents who supply single mothers or to the single mothers' relatives or associates for contracting the services of the sex worker. A chukri is obliged to work under the madam until she earns enough for the latter to pay off the advanced amount. The conditions of work are extremely harsh as the madam tries to extract as much income from the chukri as possible. Although the DMSC claim that chukris have been eradicated in Sonagachi, there is still evidence that this persists to some extent. A chukri has little or no negotiatingpower in terms of price or level of abuse vis-à-vis the customer when comparedto an adhiya sex worker.

In the Adhiya (possibly derived from the Hindi word adha, meaning half) mode, the brothel keeper, in exchange for a place to stay, takes half the price "per shot" (sex industry language) per sex worker. The Adhiyasingle mothers can typically choose to work under a brothel keeper in far less severe conditions than those of the chukri mode. When chukri single mothers have paid off their debt or perhaps escaped from abusive brothel keepers, they will often work for a brothel keeper on an adhiya basis. This mode can also be chosen by new single mothers when they join voluntarily because they cannot afford to pay rent independently nor do they have contact with customers.

In the independent mode, the sex worker operates independently and appropriates the income from her sexual labour. These include the "flying single mothers who do not reside in Sonagachi but visit there on a daily basis. A high percentage are wives, and some are street based single mothers who prefer the relative security of Sonagachi compared to other parts of Kolkata. They can rent a room for an hour directly from the landlord or brothel keeper. A second category of independent single mothers are residential single mothers who rent a room from a tenant who has paid a premium for the right to sublet the property and who has a secure tenancy interest in the property. The third category of independentsingle mothers reside in Sonagachi and has paid a premium for the right to rent a room to do sex work on her own.

Stories gathered in this study refer to all three types of organisation. Women describe how they are caught into debt bondage after being sold (prices varied from 7,000 to 30,000 Rupees) and bound to repay their debt. They also talk about being under the adhiyacontract which they describe as sharing profits in a 50:50 basis with a landlady (Malkin). This suggest that Chukris may either rapidly evolve to an adhiya contract once they have repaid their debt or that both modes may co-exist, i.e.,that in some cases there may not be any clear-cut distinction between women and girls who work under chukri or adhiya status as trafficked women can be described under both modes.

The malkinreportedly makes big profits from their work in exchange for a room and some form of protection.Some of them also propose child care services in exchange for exorbitant fees (personal communication, World Vision). Themalkin are important actors involved in the trafficking criminal networks, atthe receiving end of the chain.

Sometimes the landlady makes fake promises of sending that money to the family of the girl. After some time (sometimes weeks but could also be months or years), most girls/women interviewed managed to repay their debts and leave the Malkin. Since the survey is based on accounts from currently working single mothers, it is unclear how many women and girls manage to get out of commercial and sexual exploitation from there (additional research needed into this).

The next morning after being sold to Sonagachi on the pretense of a fake job offer, Khadija found herself in a house where the landlady explained that she had been sold for 30,000 rupees. Knowing this Khadidja started crying and asked her to let her go back to her home. The landlady told her that she would be allowed to back home only if she would repay the money given to the recruiter lady by her. Khadidja came to know that she has no escape route from this place. She would not be able to ask this money from her father under any circumstances. Finding no way, she started the job of a sex worker on the adhiya system contract. She thought that working under this adhyia system would not help her to pay back the money to the land lady and she would remain captive for a pretty long time. This realization compelled her to take a resolution that she would repay the thirty thousand rupees and would be freed and would back home within a very short period and accordingly would work hard. And Khadidjadid that. She repaid the money in just 20 days and for that she used to entertain thirty to forty customers daily. To forget the mental agonies and physical strain she started taking liquor throughout the day.After one month she came out of that house, but she suddenly realized it would not be   possible for her to back her home, in spite of being freed after paying back the loan. Thus, she decided to stay here and continue the business. But Khadidjacame out of this adhiyacontract after one month and shifted herself to a rented house from where she started doing her job independently.

Working conditions

Survey data about working conditions found that:
90% of women only earn their income through brothels (90%), while a small proportion also earned additional income through working other jobs such as domestic help and in beauty parlours.
On average, women reported working 7 hours per 24 hours (with most women working between 4 and 8 hours).

Means of recruiting customers are mainly street based soliciting (80%), but it is usually a combination of recruiting while standing on the streets, using phonesand pimps, as shown in Figure18 below. About one in ten (11%) use only pimps as means of recruitment.

These ways of working do not necessarily reflect how other groups of women in CSE work as there are different categories and codified ways of working within Sonagachi. This would be worth researching to better understand the vulnerabilities of single mothers according to their status and the group to which they belong.

Figure 18. Percentage of women in CSE who report on means of recruiting clients

MEANS OF RECRUITING CUSTOMERS (N=136)*

SOLICITING (STANDING ON STREETS): 80%
THROUGH PHONES: 29%
THROUGH PIMPS: 27%
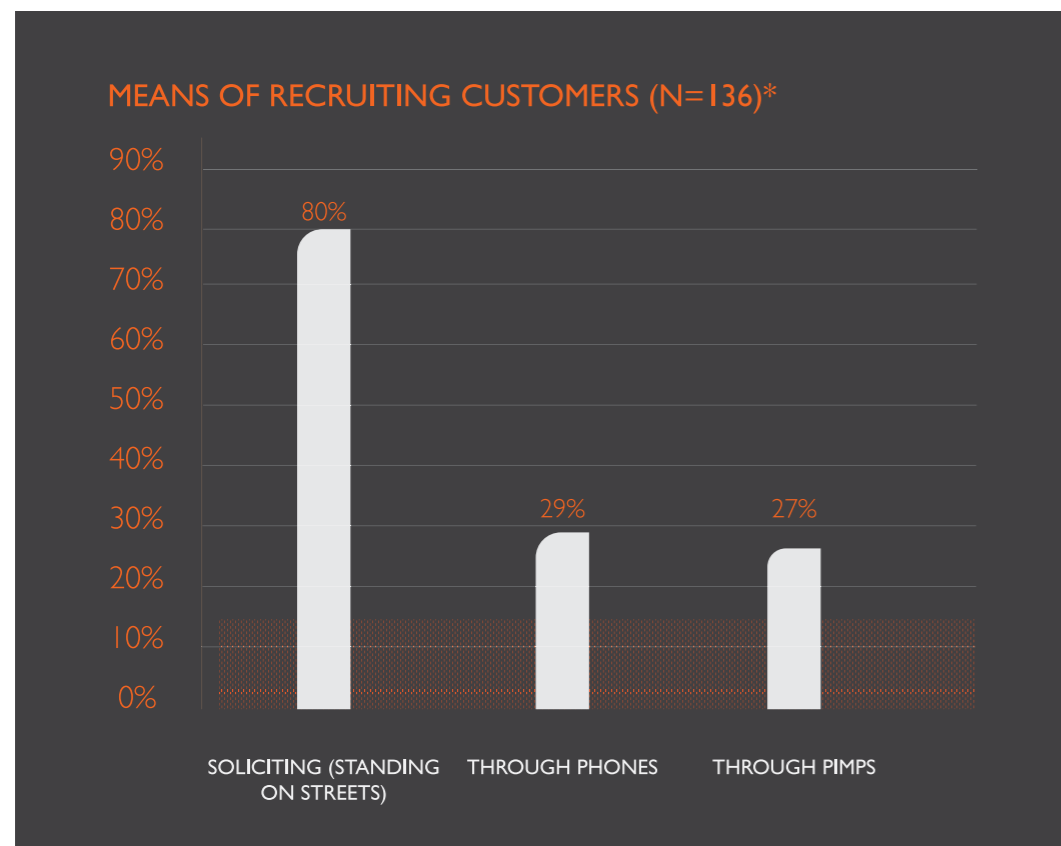
Percentages do not add up to 100% as multiple answers are possible.

Health

Quantitative findings highlight (see section above) that as many as 75% women interviewed suffered from difficulties/disabilities related to sight, walking or intellectual/concentration issues.

Many women also mentioned facing daily health issues such as piles needing surgery, fever, or gynaecological consequences from repetitive abortions. Interviews also suggested many feel sad, anxious, and worried about their lives, the future of their children in Sonagachi and the difficulties they routinely face.

Relationships

Depending on their personal situation, women in Sonagachi find themselves within a complex environment where multiple actors operatelike brothel owners, brothel keepers or madams, customers, police, gondas (thugs) and other women in CSE and their families.Different types of relationships can be formed among them, most of them exploitative in nature (as most stakeholders economically profit from the "sex industry") but not always. Local charities/NGOs and a professional association (DMSC) are also key stakeholders in Sonagachi.

Relationships developed within the brothel institution are mostly based on tenancy or labour types of contractsi.e.brothel owners, brothel keepers usually known as Madams who generate profit for themselves. These can be more or less exploitative, depending on the status and bargaining power women are able to exercise and the level of dependency to some stakeholders (landlord, Brothel keeper or Madam, money lender etc.).

For instance, self-employed women tend to have more freedom and independence as their peers under more exploitative/slavery like contracts (such as the Chukris).

Coming from outside the brothel institution, customers form a key stakeholder group, some of them regular and some not.Women in CSE form special relationships with some clients, referred to as babus (which can be a quasi-husband, permanent client or a lover). Not all single mothers have a babu (mostly independent living women in CSE who have their own private space) according to Kotiswaran and not all of them are in fact supporting women. In some instances, babus are men who actually live at the expense of the woman. In other cases, the relationship they develop is a marriage-like relationship or a quasi-permanent client so that the babu financially supports the woman in CSE. The babus usually have a life outside Sonagachi and can also be married and have children, with or without the knowledge of the woman in CSE.

Although more investigation is needed to understand what services (government/NGOs etc.) are available in Sonagachi, one key actor providing advice, security and reproductive health services to women is the sex workers union (DMSC).Formed in Sonagachi in 1995, the Durbar Mahila Samanwaya Committee (DMSC) is a key and very influential actor in West Bengal representing 65,000 members including Sonagachi. As a sex workers union, it is openly fighting for the formal recognition of sex workers as workers in the informal economy and for the legalization of prostitution.

It provides health services (STD clinics and HIV prevention work), as well as outreach for women in CSE. It also seeks to reduce violent incidents and assaults (brothels and individual single mothers can summon DMSC in case of a dispute with a customer or physical threats). .

In terms of other social relationships, results from this baseline show generally how socially disconnected women working in CSE in Sonagachi were from any positive social relationships or other type of support. Most women interviewed individually often mentioned how lonely they felt, with no friends to rely on in times of hardship; they spokefor instance about how they had no choice but to resort to money lenders (paying extremely high interest rates) when unable to get work because none of theirpeers would lend them money. They were stressed from this circumstance and resented their environment and the bad influence it had on their lives and that of their children.

Dharuna has no friends here. She avoids developing friendship as most of them are always involved in quarrelling among themselves, they cannot use soft languages rather habituated with using slangs. She does not like this culture. She prefers to do her job silently since she has come here to earn money, nothing else.

Hopes for the future

For most women interviewed (and enrolled for the current project), a major concern was being able to earn enough money to pay for their children's education and basic needs. And, their job was perceived as the only viable option to do so as most of them were uneducated.

Adyawants her daughter (including the niece she is also supporting after her sisters' death) to study as much as possible so that they can settle well in life independently and with dignity. She knows her life could have been different if she was blessed with education. Adya wants to go back to Nepal

withinfive years when her daughters are expected to complete their school education. She knows that she would not get any job in the village, and therefore has planned to open a shop in the village and that's why she has started saving seriously.

However, the women also spoke about their plans in the long term and their wish to exit Sonagachi and CSEto be able to lead what they perceived as a more socially acceptable life. Some mentioned saving to eventually buy a plot of land or buy a house for them and their children to go and live in. Many managed to hide the truth about the nature of their work to their relatives and children.

Chaitriknows that in this locality her son's future is not safe; he has already developed the habit of using slang and abusive language, and he is also exhibiting violent behaviour. She fears that someday he will fall prey to addiction and alcoholism. This is the reason why Chaitri intends to leave this area soon and to settle in a safe and civilized area where they can leave peacefully, where she can bring up her son as gentleman. She desires to leave this profession and switch over to a different profession where she does not need to camouflage herself.

Churni remains attached to this profession partly because of her attachment to her babu and partly because she knows that she is gradually approaching the end of her sexual appeal to clients (getting old).So, she has to earn as much as possible for the future. She has already purchased a small plot of land where she wants to build a house in the future to stay peacefully with her sons. Churni never brought her sons to Sonagachi fearing that her sons may start hating her which she could not bear. She also does not maintain any bank account because she is illiterate, and prefers to keep money with her mother. When she will have enough money, she will switch over to a different profession such as biri (indigenous variety of cigarette for poor people) binding. She would never allow falling into the shadow of this life for her sons.

PART V. Parenting and caregivers' relationship to their children

Caring practices of parents (Darjeeling/24 South Parganas)

Connection to caregivers

The degree to which adolescents feel connected to their caregiver was measured by calculating a mean score from the 15 items relating to interactions and theirrelationship with their caregivers (tested in other country settings). Items included whether or not adolescents felt listened to, encouraged, and comfortedby their caregivers, and the degree to which caregivers spent time with them and provided for material things they needed. The results are calculated as the proportion of children who feel a high, medium, and low connection to their parents or caregivers.

Overall, 49% of adolescentsreported a medium connection to their caregivers, while 39% reported a high connection and 12% reported a low connection.When looking at background and vulnerability variables, some significant differences were found. Vulnerable adolescents (MVCs) were less likely to report a high connection to their caregivers than were non-MVC: 31% MVC vs. 43% non MVC were found to have a high connection to their caregivers.

The area where they lived was also a determinant. Adolescents from Darjeeling were more likely to report a high connection (44%) than their peers from 24 South Parganas (33%) and less likely to report a low connection (6%) compared to 19% of children in 24 South Parganas.

Religious background also made a difference as 45% of adolescents from a Hindu background reported a high connection versus only 15% of adolescents from a Muslim background.

No difference was foundby sex, though a difference was found by age: more older adolescents (15-17 years) reported a higher connection to their caregivers than younger adolescents (12-14 years)(43% vs. 35%).

Figure19. Percentage of children reporting low, medium and high connection to their caregivers

ADOLESCENTS CONNECTION TO CAREGIVERS (N=885)
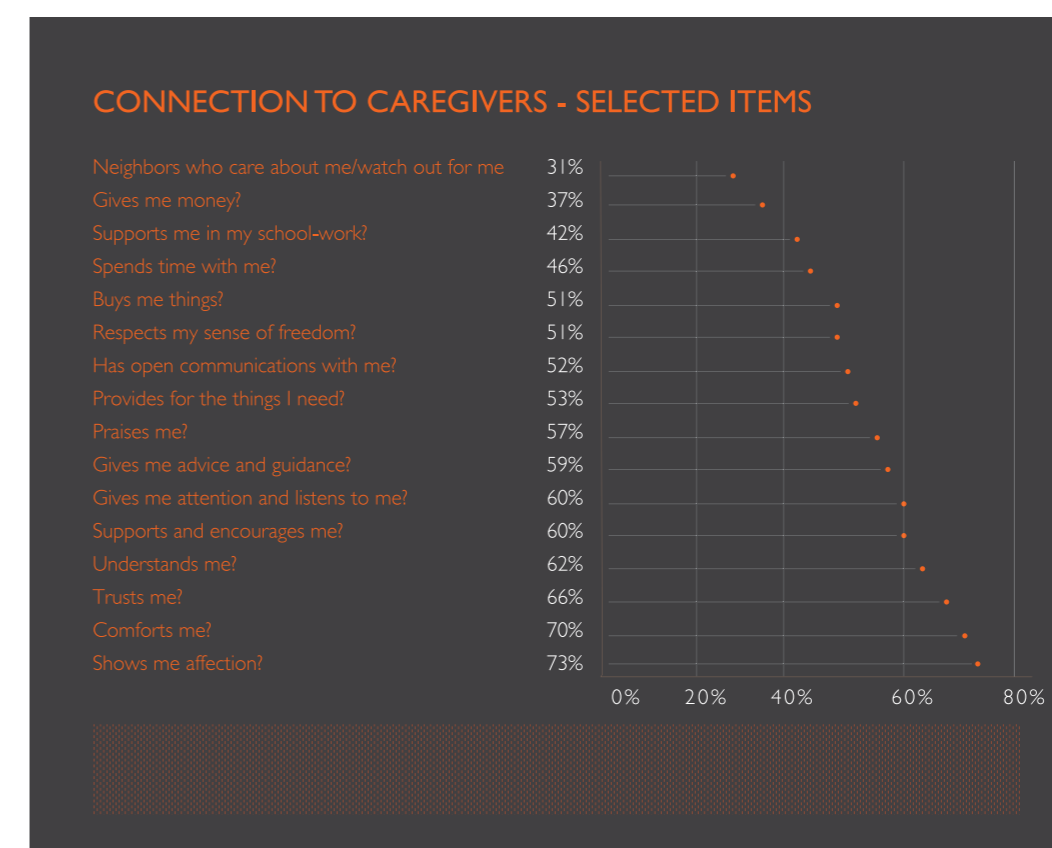
LOW 12%

HIGH 39%

MEDIUM 49%
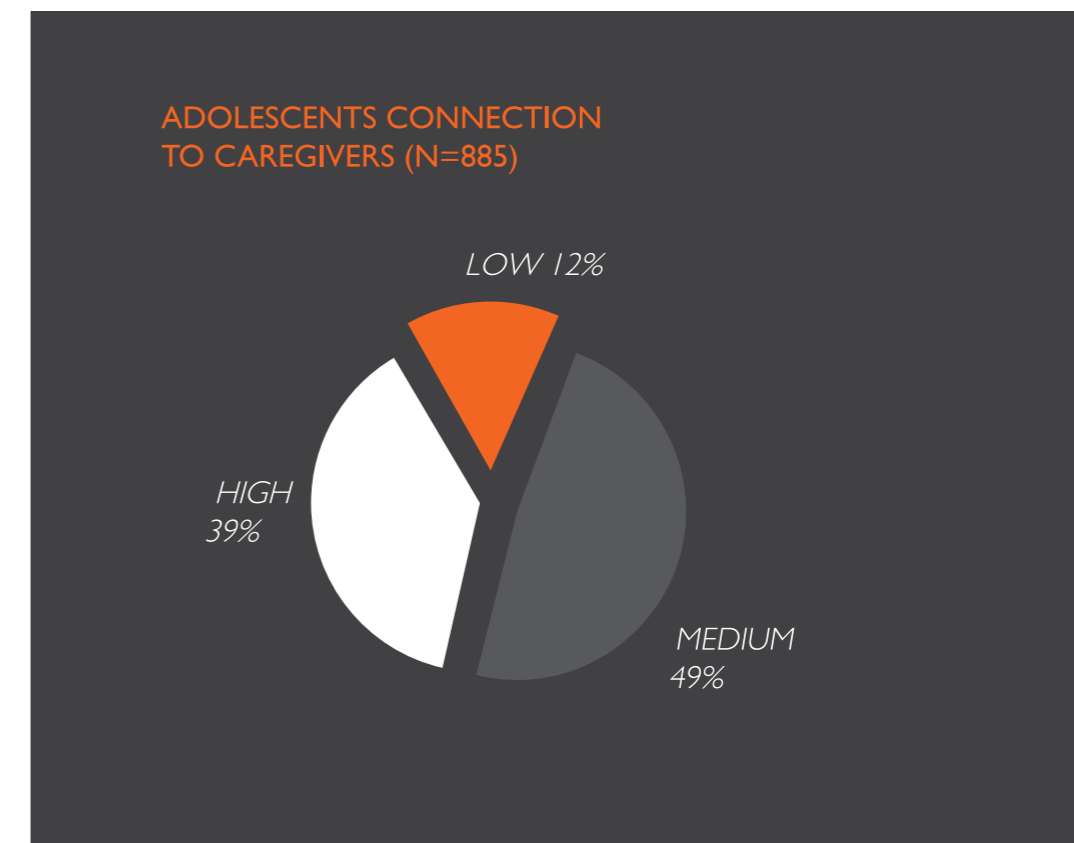
When looking at individual items on the scale, the items that were reported at high levels were: affection, comfort and trust, while items that were reported at low levels wererelated to material benefits received by caregivers (i.e., buys me things, provides for the things I need), and the degree of freedom, advice, and support for school work as shown in table 10 below.

		DARJEELING		24 SOUTH PARGANAS		TOTAL	
		N	%	N	%	N	%
Supports and encourages me?	Not at all	22	5%	46	11%	68	8%
	Sometimes	143	30%	146	36%	289	33%
	Often	314	66%	214	53%	528	60%
Gives me attention and listens to me?	Not at all	13	3%	47	12%	60	7%
	Sometimes	155	32%	136	33%	291	33%
	Often	311	65%	223	55%	534	60%
Shows me affection?	Not at all	15	3%	42	10%	57	6%
	Sometimes	87	18%	95	23%	182	21%
	Often	377	79%	269	66%	646	73%
Praises me?	Not at all	17	4%	42	10%	59	7%
	Sometimes	175	37%	146	36%	321	36%
	Often	287	60%	218	54%	505	57%
Comforts me?	Not at all	10	2%	39	10%	49	6%
	Sometimes	106	22%	107	26%	213	24%
	Often	363	76%	260	64%	623	70%
Respects my sense of freedom?	Not at all	38	8%	73	18%	111	13%
	Sometimes	175	37%	150	37%	325	37%
	Often	266	56%	183	45%	449	51%
Understands me?	Not at all	19	4%	42	10%	61	7%
	Sometimes	142	30%	135	33%	277	31%
	Often	318	66%	229	56%	547	62%
Trusts me?	Not at all	14	3%	46	11%	60	7%
	Sometimes	113	24%	127	31%	240	27%
	Often	352	73%	233	57%	585	66%
Gives me advice and guidance?	Not at all	18	4%	46	11%	64	7%
	Sometimes	155	32%	144	35%	299	34%
	Often	306	64%	216	53%	522	59%
Provides for the things I need?	Not at all	13	3%	61	15%	74	8%
	Sometimes	185	39%	154	38%	339	38%
	Often	281	59%	191	47%	472	53%
Gives me money?	Not at all	45	9%	89	22%	134	15%
	Sometimes	213	44%	210	52%	423	48%
	Often	221	46%	107	26%	328	37%
Buys me things?	Not at all	18	4%	69	17%	87	10%
	Sometimes	189	39%	155	38%	344	39%
	Often	272	57%	182	45%	454	51%
Has open communication with me?	Not at all	54	11%	89	22%	143	16%
	Sometimes	155	32%	127	31%	282	32%
	Often	270	56%	190	47%	460	52%
Spends time with me?	Not at all	32	7%	82	20%	114	13%
	Sometimes	189	39%	171	42%	360	41%
	Often	258	54%	153	38%	411	46%
Supports me in my school-work?	Not at all	35	10%	58	19%	93	14%
	Sometimes	162	48%	118	39%	280	44%
	Often	140	42%	129	42%	269	42%
I have neighbours who care about me and watch out for me.	Not at all	122	25%	136	33%	258	29%
	Sometimes	193	40%	160	39%	353	40%
	Often	164	34%	110	27%	274	31%
I know an adult who I can go to outside my family if I have a problem	Not at all	237	49%	148	36%	385	44%
	Sometimes	115	24%	158	39%	273	31%
	Often	127	27%	100	25%	227	26%

CONNECTION TO CAREGIVERS - SELECTED ITEMS

Item	%
Neighbors who care about me/watch out for me	31%
Gives me money?	37%
Supports me in my school-work?	42%
Spends time with me?	46%
Buys me things?	51%
Respects my sense of freedom?	51%
Has open communications with me?	52%
Provides for the things I need?	53%
Praises me?	57%
Gives me advice and guidance?	59%
Gives me attention and listens to me?	60%
Supports and encourages me?	60%
Understands me?	62%
Trusts me?	66%
Comforts me?	70%
Shows me affection?	73%

Caring environment

A caring environment was defined as having both a high level of connection to caregiver and a high level of support in their community.

In addition to being supported at home, children were also asked two additional questions about the possible support they could rely on in their community (I have neighbours that care and watch out for me; I know an adult who I can go to outside of my family if I have a problem). Results reveal that only one in five children (21%) report they can rely on their immediate network outside their family for support.

When combining the percentage of children who are reporting a high level of connection with their caregiver at home and the percentage of children who feel they can rely on outside community members if they have a problem, only 16% of children meet this definition of a caring environment (19% in Darjeeling and 12% in 24 South Parganas).

Violent discipline

The survey included a set of questions aimed at understanding practices of violent and non-violent discipline by caregivers. This was administered to both caregivers and adolescents.

Types of discipline that were characterized as violent were: physical (beat with an implement; hit or slap on the face; hit with something like a belt; spank, hit or slap with hand, pulling the hair and shaking, denying food, locking children somewhere, kicking out of the house at night) or emotional (calling bad names or swearing at; humiliate in front of others, threaten to do harm). Other discipline methods were also characterized as non-violent(take

away privileges, forbid something the child likes or forbid her or him to leave the house; explain why behaviour was wrong; give some extra work to do, compare behaviour with other more obedient children).

47% of adolescentsreported experiencing violent physical discipline at least once in the preceding 12 months. The forms mostly cited were "spanking/beating with hands" and "beating with objects". 20% reported violent emotional discipline. Furthermore, 31% reported both violent physical and emotional discipline.

TYPE OF DISCIPLINE REPORTED IN THE LAST 12 MONTHS N=885
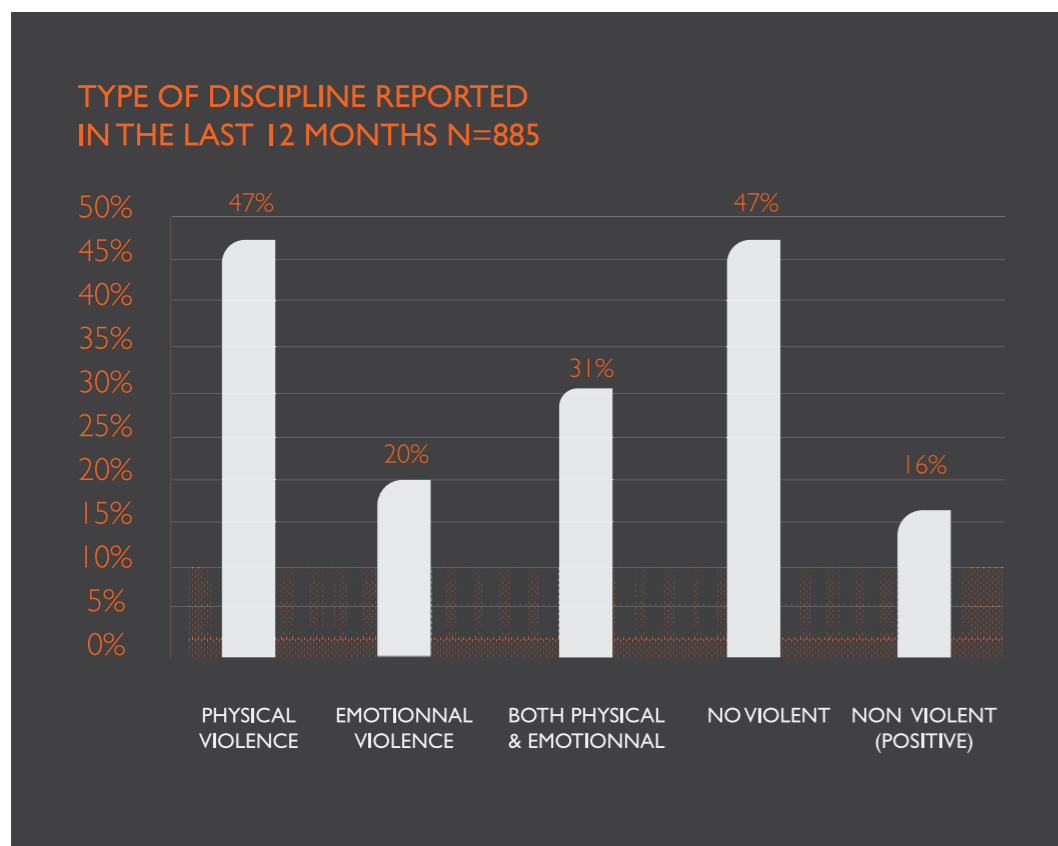
Table 11. Percentage of adolescents experiencing forms of discipline by frequency

ITEM	FREQUENCY	DARJEELING		24 SOUTH PARGANAS		TOTAL	
		N	%	N	%	N	%
Spanking/Beating with hands	no	266	64%	319	68%	585	66%
	one time	71	17%	93	20%	164	19%
	Two or three times	52	13%	29	6%	81	9%
	Four times or more	27	6%	28	6%	55	6%
Beating with objects (like a stick or belt)	no	323	78%	416	89%	739	84%
	one time	50	12%	32	7%	82	9%
	Two or three times	29	7%	7	1%	36	4%
	Four times or more	14	3%	14	3%	28	3%
Forced to stand or kneel (sometimes holding ears)	no	371	89%	427	91%	798	90%
	one time	23	6%	29	6%	52	6%
	Two or three times	14	3%	10	2%	24	3%
	Four times or more	8	2%	3	1%	11	1%
Taking away privileges	no	399	96%	435	93%	834	94%
	one time	11	3%	28	6%	39	4%
	Two or three times	4	1%	2	0%	6	1%
	Four times or more	2	0%	4	1%	6	1%

| ITEM	FREQUENCY	DARJEELING		24 SOUTH PARGANAS		TOTAL	
		N	%	N	%	N	%
Denying food	no	380	91%	430	92%	810	92%
	one time	30	7%	30	6%	60	7%
	Two or three times	5	1%	7	1%	12	1%
	Four times or more	1	0%	2	0%	3	0%
Threatening to harm or use violence	no	393	94%	429	91%	822	93%
	one time	17	4%	32	7%	49	6%
	Two or three times	5	1%	8	2%	13	1%
	Four times or more	1	0%	0	0%	1	0%
Calling you bad names, swearing at you	no	368	88%	415	88%	783	88%
	one time	32	8%	37	8%	69	8%
	Two or three times	12	3%	12	3%	24	3%
	Four times or more	4	1%	5	1%	9	1%
Explaining why the behaviour was wrong	no	348	84%	400	85%	748	85%
	one time	26	6%	37	8%	63	7%
	Two or three times	34	8%	23	5%	57	6%
	Four times or more	8	2%	9	2%	17	2%
Separating from other people for a time	no	382	92%	422	90%	804	91%
	one time	23	6%	32	7%	55	6%
	Two or three times	8	2%	15	3%	23	3%
	Four times or more	3	1%	0	0%	3	0%
Given extra work to do	no	393	94%	444	95%	837	95%
	one time	15	4%	20	4%	35	4%
	Two or three times	7	2%	5	1%	12	1%
	Four times or more	1	0%	0	0%	1	0%
Humiliate you in front of others	no	391	94%	435	93%	826	93%
	one time	16	4%	23	5%	39	4%
	Two or three times	5	1%	7	1%	12	1%
	Four times or more	4	1%	4	1%	8	1%
Comparing their behaviour to more obedient children	no	340	82%	430	92%	770	87%
	one time	23	6%	25	5%	48	5%
	Two or three times	45	11%	10	2%	55	6%
	Four times or more	8	2%	4	1%	12	1%
Locking children somewhere	no	408	98%	456	97%	864	98%
	one time	6	1%	10	2%	16	2%
	Two or three times	1	0%	3	1%	4	0%
	Four times or more	1	0%	0	0%	1	0%
Pulling the hair and shaking	no	395	95%	432	92%	827	93%
	one time	17	4%	29	6%	46	5%
	Two or three times	1	0%	7	1%	8	1%
	Four times or more	3	1%	1	0%	4	0%
Kick out of the house at daytime	no	332	80%	429	91%	761	86%
	one time	29	7%	23	5%	52	6%
	Two or three times	31	7%	11	2%	42	5%
	Four times or more	24	6%	6	1%	30	3%
Kick out of the house (night time)	no	373	90%	451	96%	824	93%
	one time	29	7%	17	4%	46	5%
	Two or three times	12	3%	1	0%	13	1%
	Four times or more	2	0%	0	0%	2	0%

The frequency of non-violent discipline reported by adolescents was very low. Only16% of adolescentsreported receiving at least one form of "non-violent"discipline two or more times per year (13% in Darjeeling and 20% in 24 South Parganas).The most cited forms of non-violent discipline were "explaining why the behaviour was wrong" and "comparing behaviour with more obedient children".

Perceptions of safety

The majority of caregivers thought that their children were safe from danger and violence in their neighbourhood"all" or "most" of the time (70% for adolescent boys and 66% for adolescent girls) as shown in Figure 22 below. In Darjeeling, perceptions of safety (for children) was higher than in 24 South Parganas (79% vs. 59% for boys; 74% vs. 58% for girls).

Among the top reasons for not feeling their children were safe were traffic related dangers (34%); misguided by bad company (16%); and drugs(10%). Other reasons (less than 5% each) included trafficking, kidnapping, sexual violence and gang related violence.

Figure22. Percentage of caregivers reporting feeling their children were safe from danger and violence in their neighbourhood (most of the time or all the time) by sex of child

PERCEPTIONS ABOUT SAFETY
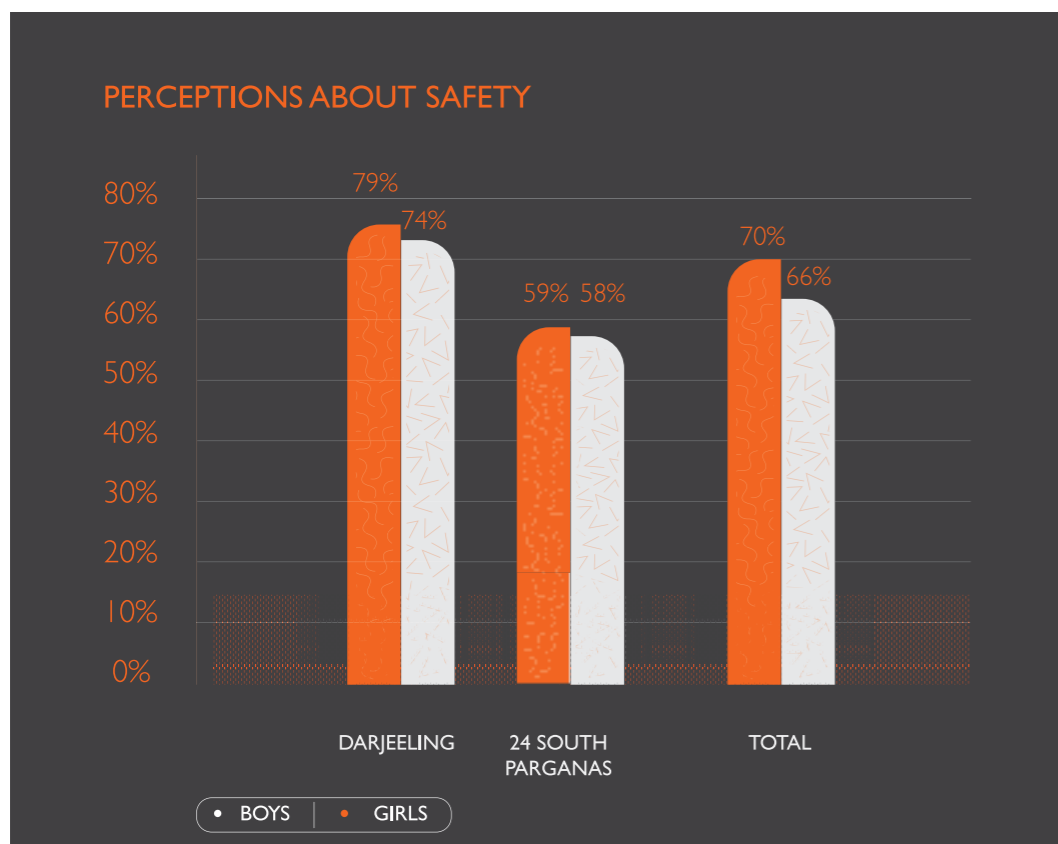
Caring for children in Sonagachi

For many single mothersin CSE interviewed in this baseline, caring for children in Sonagachi was considered particularly challenging and difficult due to the potentially harmful environment and the multiple risks children could face. Many saw that life in Sonagachi was not fit for their children.

Living and caring arrangement for children varied according to each specific situation. While 40% of children lived with their mother,the remaining majority (60%) lived elsewhere, most of them with maternal relatives (44%).

For most women interviewed, caring for children in Sonagachi was not morally acceptable as they feared that children who lived in Sonagachi would follow other children into bad behaviour including swearing, drinking, smoking, and early sexual activity.

Chaitriknows that in this locality her son's future is not safe; he has already developed the habit of using slang and abusive language, and he is also exhibiting violent behaviour. She fears that someday he will fall prey to addiction and alcoholism.

At the time of the survey, one in two women (49%) did not receive any support in caring for the children living with them.

Table 12. Percentage of children by caregiving arrangement

CAREGIVING ARRANGEMENT	N	%
Maternal relatives (respondent)	94	44%
With biological mother (respondent)	85	40%
Other	12	6%
Reception home/shelter/NGO centre	8	4%
Paternal relatives	7	3%
With biological and/or legal father	3	1%
Foster family	2	1%
Government centre	2	1%
Total	**213**	**100%**

Figure 23. Number of children that mothers had

TYPE OF DISCIPLINE REPORTED
IN THE LAST 12 MONTHS N=885

	1	2	3	4	5
%	57%	35%	5%	2%	1%
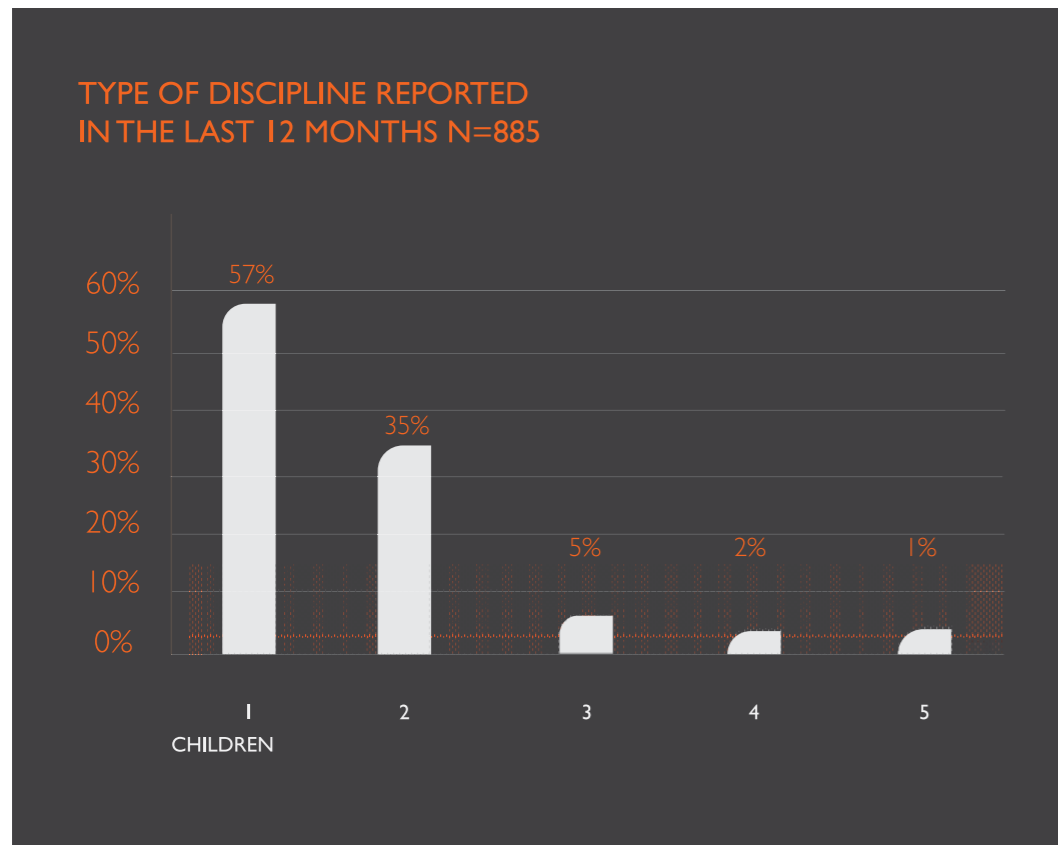
CHILDREN

Figure24. Percentage of woman who reported on whether they received any form of support for the daily care of their child

SUPPORT FOR THE DAILY
CARE OF CHILDREN

ONLY ME	MY MOTHER	RELATIVES	OTHERS
49%	18%	10%	23%
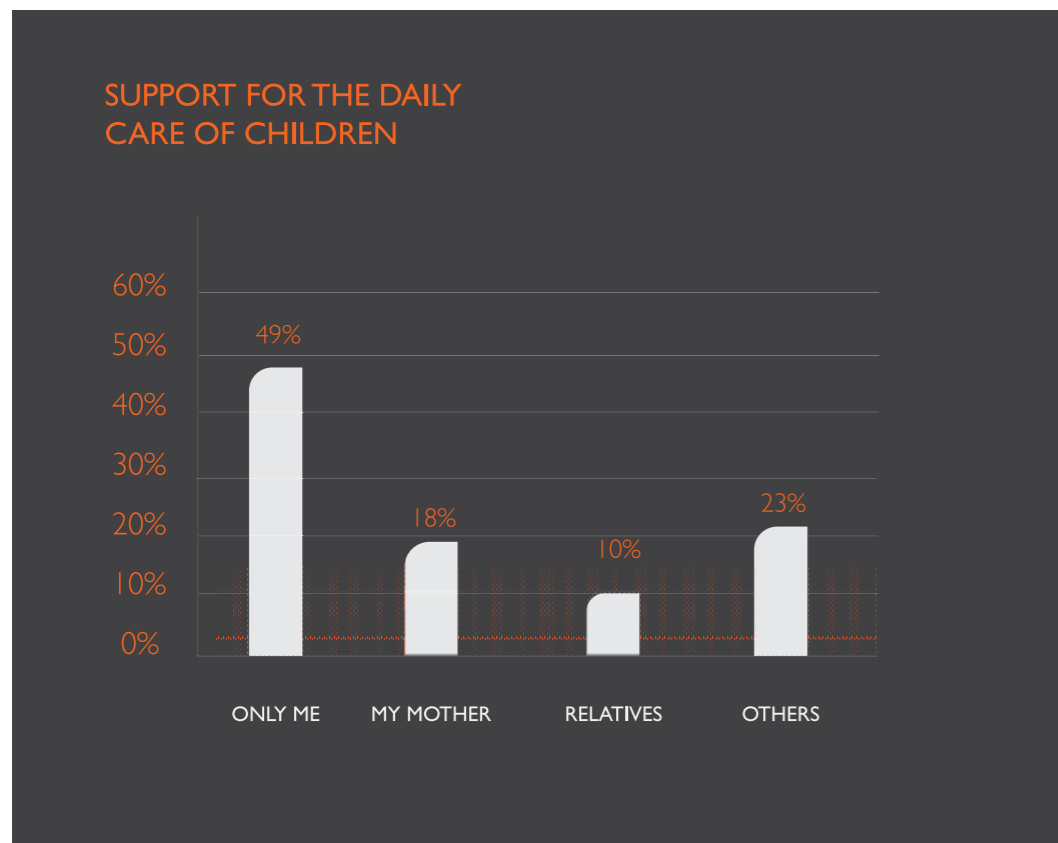
Basic needs

In order to better assess whether mothers were able to provide materially for their children, they were asked if they could provide one pair of shoes, one blanket for sleeping, two sets of clothes, and meet the health needs of their child in the last 12 months (cf. UNICEF basic needs PEPFAR survey), as well as provide three meals a day in the past week for all of their children aged 5 to 17 years old.

Analysis was done creating one variable for all caregivers who could respectively provide for all fiveof these needs and another variable for caregivers who could not provide for all five of these needs. Results showed that 53% of caregivers were able to provide all five basic needs and 1% were not able to provide any of these. The remaining caregivers (46%) were only able to provide these needs with some assistance or were only able to provide for some (not all) of these needs as shown by Figure 25 below.

When disaggregating by individual items, analysis showed that providing two sets of clothes and one blanket for sleeping was the most difficult need to fulfil for caregivers (39% and 37% of them cannot provide or only with assistance) followed by providing a pair of shoes (35%),going to the doctor or buying medicines (32%),and providing three meals a day (29%).

Figure25. Percentage of mothers who report being able to provide basic needs fortheir children

ADOLESCENTS CONNECTION
TO CAREGIVERS (N=885)

1%

46%

53%

● No (all 5 needs)

● Yes (all 5 needs)

● Others (with assitance or less than 5 needs)
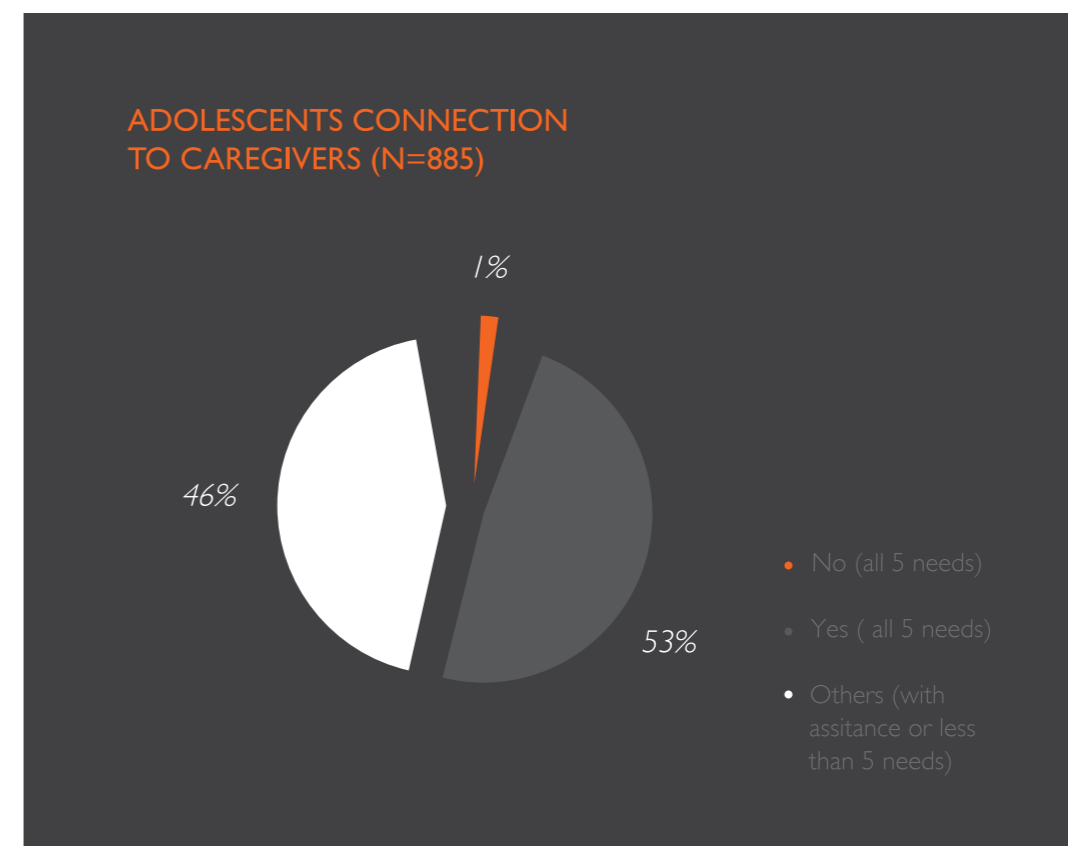
Education

Nearly all children of mandatory school age attend school (97%). Tithe remaining (3%) do not attend school, either for financial reasons or because they do not want to, according to mothers.

Early childhood development

A ten-item score was created using UNICEF Early Childhood Development Index (ECDI) to assess the development of children of single mothers in CSE aged 3 to 5 years in four domains: literacy and numeracy, learning, physical, and socio-emotional. Briefly, caregivers were asked a series of questions regarding their child's development. A child who was on track in at least three of four domains was considered to be 'on-track'.

Overall, 20 out of 36 children (56%) aged 3 to 5 years were "on track" (n=36) according to the scale. The domains of learning (81%) and literacy (69%) featured as the highest, followed by socio-emotional development (56%) and physical development (53%).

Since a high proportion of women are illiterate themselves, further assessment would be needed to confirm this data for the literacy/numeracy category as it is based on women's own perceptions/judgment on their children's abilities.

Figure26. Numbers of caregivers (of children 3 to 5 years old) who report their child was developmentally on track (per area) n =36

CHILDREN 3 TO 5 YEARS
DEVELOPMENTALLY ON TRACK (N=36)

- ON TRACK (INDEX): 20%
- LITERACY: 25%
- LEARNING: 29%
- PHYSICAL: 19%
- SOCIO-EMOTIONAL: 20%
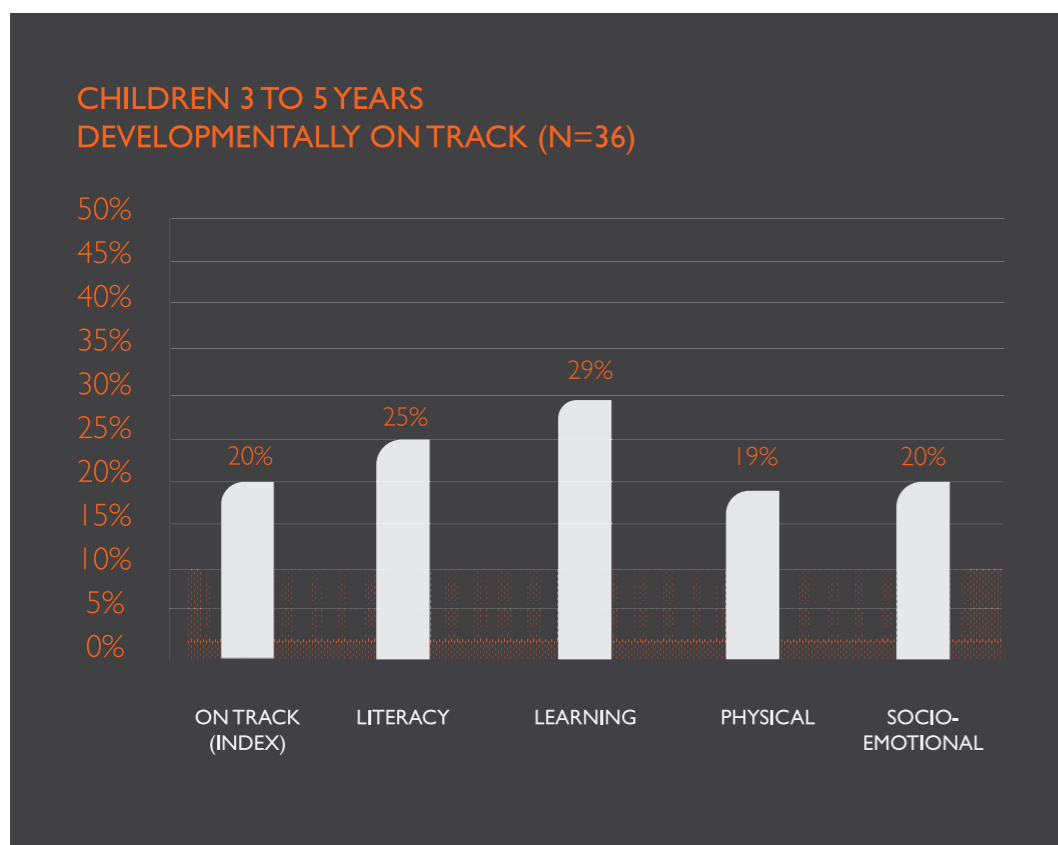
Child discipline

The reported use of violence as a means of disciplining children was quite high: 57% of mothers use at least one method of violent physical punishment (such as shaking, beating with the hand or an implement), 76% use at least one form of violent emotional punishment (such as shouting or calling dumb), and 82% used at least one method of physical or emotional punishment. Only 18% of mothers did not use either physical or emotional punishment (see Figure 27 below).

The types of physical punishment mostly used are 'spanking, hitting or slapping with hand' (46%) and 'hitting on the face, head or ears' (29%); of types of emotional punishment mostly used are 'shouting, yelling at or screaming' (73%) and 'Calling the child dumb, lazy, or another name' (40%).

When examining caregivers who do not use any violent discipline method and who also use alternative, non-violent disciplining methods (such as explaining why a behaviour is wrong), only 13% of caregivers fall into this category

Figure27. Percentage of mothers who report using at least one of the violent types of discipline

REPORTED USE OF VIOLENT
DISCIPLINE (SINGLE MOTHERS) N=136

- USED PHYSICAL DISCIPLINE: At least one 57%, None 43%
- USED EMOTIONNAL DISCIPLINE: At least one 76%, None 24%
- USED PHYSICAL OR EMOTIONNAL DISCIPLINE: At least one 82%, None 18%

Legend: None, At least one
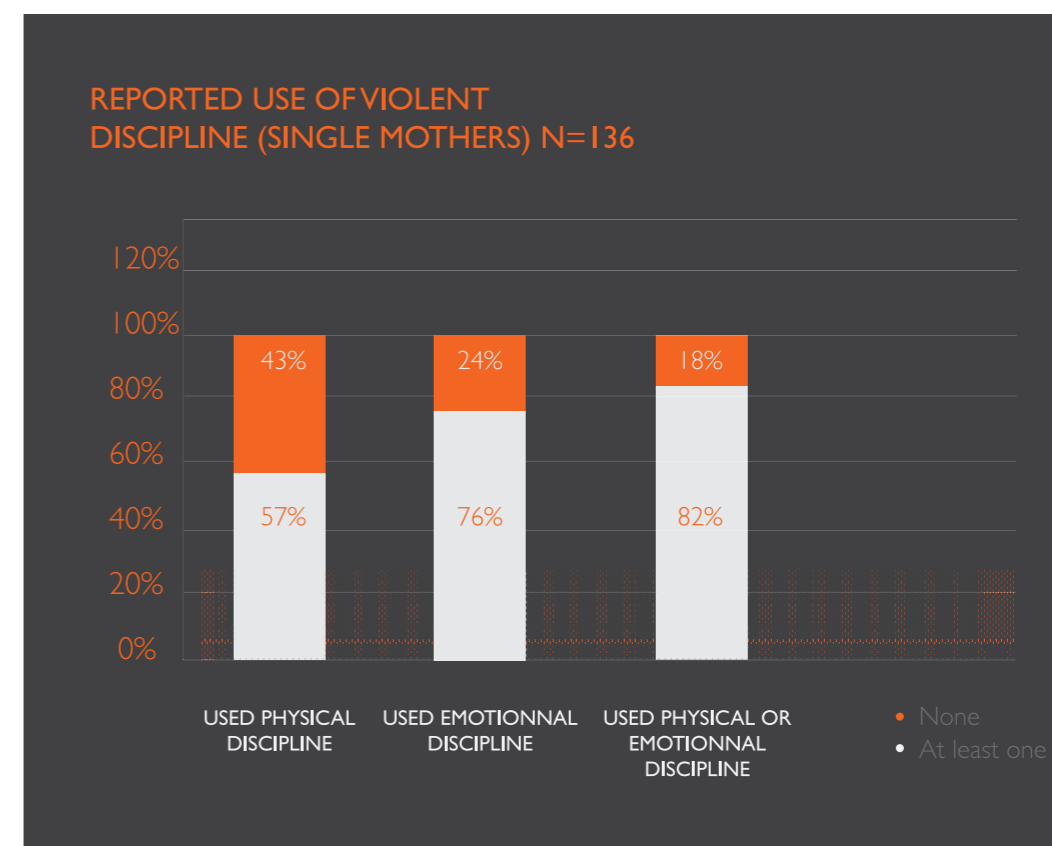
PART VI. KNOWLEDGE AND ATTITUDES RELATED TO GENDER

Caregivers

Gender Equitable Index

This section focuses on descriptive statistics and bi-variate analyses of the associations between educational levels, location, sex and gender-related attitudes. It uses the Gender Equitable Index, a tool that was developed by CARE to measure individual level gender equitable attitudes. These scales aim to assess the extent to which individuals agree with a specific belief system about masculinity or femininity. Separate tools (although similar) have been developed for adolescents and adults.

The questions on the Gender Equitable Index ask participants about a variety of gender equity indicators including, but not limited to, access to education, marriage rights, availability of leadership roles, and reproductive knowledge and rights. This tool may be used to support the implementation or evaluate of projects, but also can be used to compare aggregate gender equitable scores across time and countries/ contexts.

Gender score range from 0 to 36 with 0 being the least equitable and 36 the most equitable score (see Annex 1 for details of how mean score are computed).

Results show extremely positive scores among caregivers. Overall, the GEI mean score for caregivers was 31.1 (30.8 for males and 31.3 for females).

One reason for this is that respondents are living in a context where they know and report according to what they perceive is expected of them, as explained in the CARE toolkit (CARE 2014):

GEI baseline scores tend to vary considerably depending on the level of previous exposure of the population of interest to information about gender. Respondents exposed to a considerable amount of information will likely provide what are perceived as 'correct' answers at the baseline, instead of actual perceptions of their real attitudes. In such cases, scores tend to be high at the baseline, decreasing once respondents are exposed to gender programming and develop a clear understanding of their own gendered attitudes. Following a period of exposure to successful gender transformative programming, respondents' scores tend to increase again

Surprisingly, difference by sex were not found to be significant, a finding that was quite counter-intuitive as in other research, women tend to show more positive scores than their male peers.

An association was found between caregivers who wanted more children and a lower GEI score(less progressive) and this was true for caregivers who wanted more sons(at least 2 or 3) (p=.001)and to a lesser extent for caregivers who wanted more girls (p=.019) (at least one). In other words, GEI score

Internal reliability of the scale was acceptable (Cronbach's Alpha 0.84)
The question was : if you could go back in time and choose the exact
number of boys/girls you could have, what would that be ?

decreases as the number of children desired increases (which shows gender discriminatory attitudes is associated with preference for large families and many sons, i.e., more than 3).

Additionally, being a Hindu was associated with more positive scores (p=.038)as opposed to other religions.

Finally, a significant association was found between condoning violence against women (see section about Intimate Partner Violence below) and having lower GEI scores, which is what one would expect. But, this is an important argument for investing in programmes that seek to shift gender norms, attitudes and practices.

Analysis by specific items revealed some variations, although the way men and women answered was fairly uniform. Items that women tended to value less were related to men speaking about their problems with their male peers and respect for men who walk away from a fight.

One counter-intuitive finding is that women tended to favour less than men the importance of knowledge of family planning before marriage (for men and women).

Table 15. Percentage of caregivers agreeing with GEI Item by gender*

	Men	Women	Total
Women have the right to hold leadership positions in the community	89%	94%	91%
A female prime minister can be as effective as a male Prime Minister?	92%	94%	93%
At home, both boys and girls should ask permission to go play with their friends	91%	93%	92%
Girls have the same right to go to school as boys	97%	99%	98%
It is good for men to talk about their problems with their male friends	91%	84%	88%
Men and women both have the right to enrol in advanced schooling	96%	98%	97%
I respect a man who walks away from a fight	93%	83%	88%**
A husband and wife should decide together if they want to have children	96%	96%	96%
Both men and women have the right to choose who they marry	92%	90%	91%
Girls should be allowed to play sports	93%	95%	94%
Boys should be allowed to play sports	98%	98%	98%
If I saw a man hurting a woman, I would tell the man to stop	98%	97%	97%
If I saw a woman hurting a man, I would tell the woman to stop	98%	95%	96%
Men should know about family planning before marriage	95%	85%	90%**
Women should know about family planning before marriage	94%	85%	90%**

*For the ease of analysis, the response categories 'agree somewhat' and 'agree strongly' were merged to measure the percent of men and women who agreed with a particular item.

** Statistically significant p<.05

Decision-making in the household

Decision-making is fairly balanced when it comes to children, but not financial decisions, as shown in Figure29 below. Caregivers consider that the decision about the number of children to have should be shared (85%) while daily spending for the household should be the decision of the husband (64%).

Decision about work outside the home for girls is mainly taken by the father (49%) but is also considered to be shared among the girl and parents (40%), much rarely a mother'sor a girl's decision (5% each).Interestingly men tend to consider that it is their decision more than women (54% versus 38%)who in return tend to consider it theirs or a shared decision (47%).Here caution should be taken when assuming what decision-making is in reality. Women may well think that they have more decision making than they actually have for instance.

Decision-making is on the whole viewed as the onus of the father in the household by both men and women, although to a lesser extent by women. In other words, women tend to still view men as the decision maker.

Figure29. Percentage of caregivers who report on decision making for selected decisions
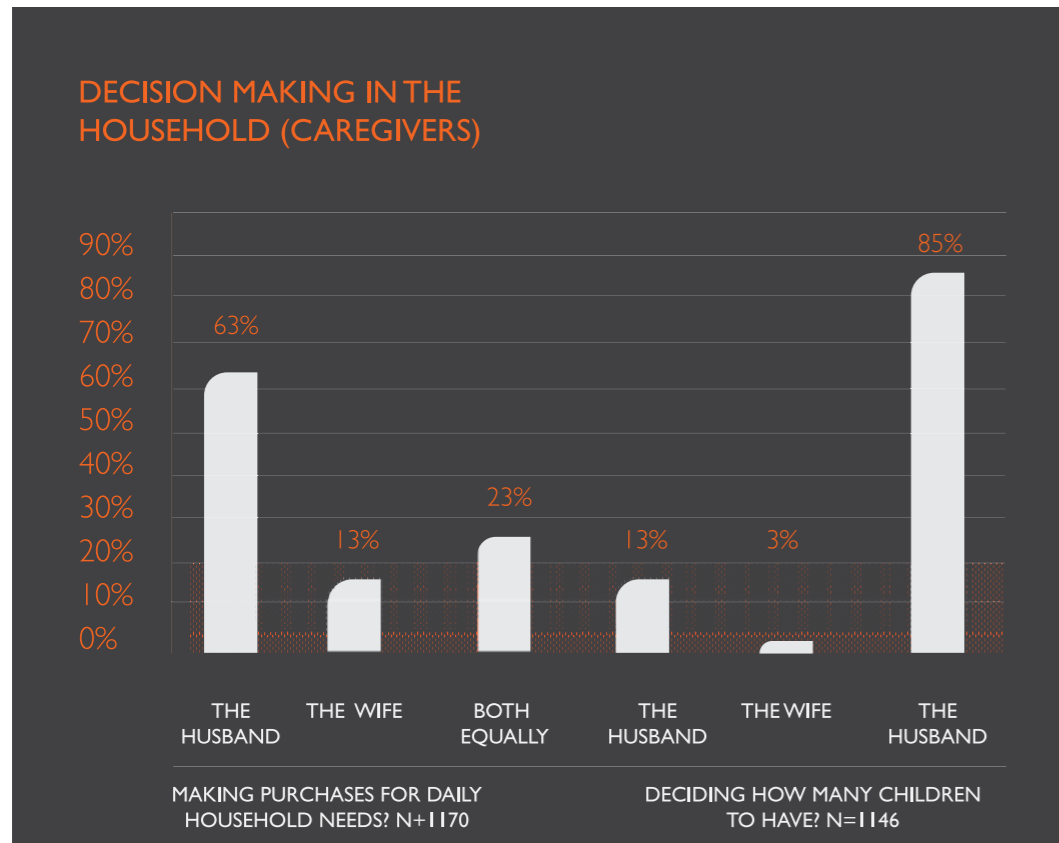
Figure30. Percentage of caregivers who report on decision making for selected decisions
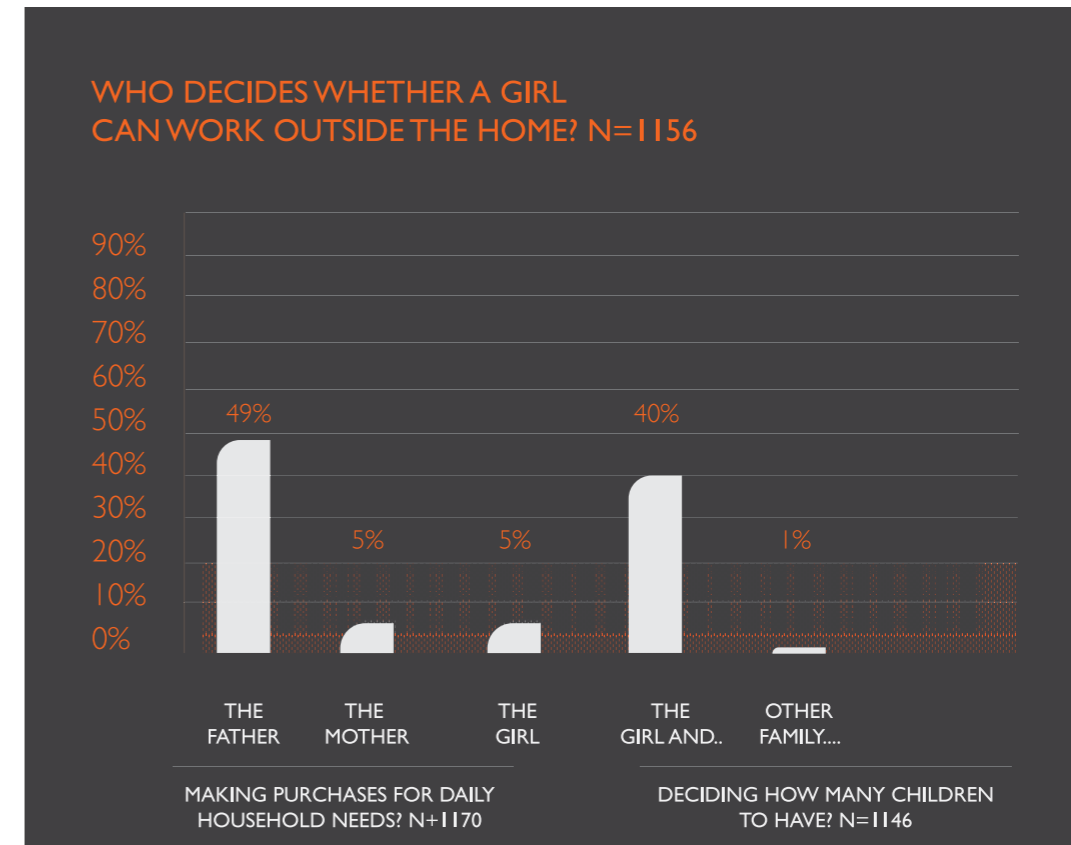
Figure30. Percentage of caregivers who report on decision making for selected decisions

		MALE	FEMALE	TOTAL
Making purchases for daily household needs?	The husband	69%	60%	64%
	The wife	7%	19%	13%
	Both equally	24%	21%	23%
Deciding how many children to have?	The husband	19%	10%	14%
	The wife	1%	7%	4%
	Both equally	81%	83%	82%
Who decides whether a girl can work outside the home?	The father in the household	54%	38%	46%
	The mother	3%	7%	5%
	The girl	4%	8%	6%
	Both the girl and parents/caregivers	38%	47%	43%
	Any other family member	1%	1%	1%

Attitudes related to Intimate Partner Violence (IPV)

A third of caregivers (33%) thought that violence towards women was justified in the householdin certain instances, and that result was, surprisingly, irrespective of gender. The analysis found no difference in responses among men and women, which means that a third of women also condone intimate partner gender-based violence.

However, differences between caregivers with no education at all and caregiver with at least primary levelwere found: 41% of caregivers with no education thought violence towards women was justified vs. 30% of women with at least a primary level education. (p=.021). When looking at some economic vulnerability characteristics, lower SES households (i.e., living in katchaor mud houses as a proxy variable for lower SES) were more likely to believe violence by men towards women was acceptable.Among the most cited justifications for violence were cases where the wife shows disrespect to her in-laws (24%); argues with her partner (21%); and neglects the house or children (20%).

In parallel, it is striking that other surveys show that the proportion of women experiencing violence (physical or sexual) is also about a third (32.6%) according to the National Family Health Survey 2015-16 (results for West Bengal).Although women showing acceptance of domestic violence may not be the same as those experiencing violence, further research would be needed to show how the two interlink.

Table 17. Percentage of caregivers who agree that violence against wife is justified by sex and reason*

	MALE	FEMALE	TOTAL
If she goes out without telling him?	18%	16%	17%
If she neglects the house or the children?	20%	19%	19%
If she argues with him?	22%	19%	21%
If she refuses to have sex with him?	15%	12%	14%
If she doesn't cook food properly?	15%	12%	13%
If he suspects her of being unfaithful?	19%	15%	17%
If she shows disrespect for in-laws?	24%	20%	22%

*Question: In your opinion, is a husband justified in hitting or beating his wife in the following situations?

Adolescents

Gender Equitable Index

The same scale was used to assess gender equity among adolescents .GEI scores ranged from 0 to 36 with 0 being the least equitable and 36 the most equitable score (see Annex 1 to access details of how mean scores are computed).

Similarly, to caregivers, the results show extremely positive scores among adolescents. Overall GEI score for adolescents was 28.9 (28.1 for males and 29.5 for females).

Items which had higher adherence from adolescents are related to equal rights to education (94%), sports (93%), and intervening when violence against women occurred (89%). Items which had less adherence were about shared decisions related to marriage (70%), having children (67%), and knowledge about family planning (65%), as shown by table x. below.

Items for which girls and boys differ the most was about women's ability to take leadership positions at community and national levels, which received higher agreement from girls.

Table 18. Percentage of adolescents agreeing with GEI Item by gender*

	ADOLESCENT BOYSV	ADOLESCENT GIRLS	TOTAL
Women have the right to hold leadership positions in the community	79%	90%	85%
A woman prime minister can be as effective as amale prime minister	82%	90%	87%
At home, both boys and girls should ask permission to go play with their friends	85%	91%	88%
Girls have the same right to go to school as boys	92%	96%	94%
It is good for men to talk about their problems with their male friends	83%	78%	80%
I respect a man who walks away from a fight	85%	81%	83%
Men and women both have the right to enrol in advanced schooling	93%	98%	96%
A husband and wife should decide together if they want to have children	64%	69%	67%
Both men and women have the right to choose who they marry	67%	72%	70%
Girls should be allowed to play sports	92%	94%	93%
Boys should be allowed to play sports	95%	96%	95%
If I saw a man hurting a woman, I would tell the man to stop.	86%	90%	89%
If I saw a woman hurting a man, I would tell the woman to stop	85%	88%	87%
Men should know about family planning before marriage	65%	65%	65%
Women should know about family planning before marriage	62%	64%	63%

Gender discrimination

Survey results show that at least 14% reported experiencing eve teasing, most of them by boy peers outside the home (at school, in the streets and in public transports).

Among focus group discussions, accounts of discrimination and sexual harassment (such as eve teasing) towards girls revealed that women and girls routinely experience unequal treatment and abuse:

> R: When girls take the local buses to school (it is a problem) you know how men and boys are, right?
> There is some inappropriate pushing and touching in the crowded bus
> R: Yes, there has to be a bus only meant for the girls and women.
> R: Travelling in public bus for girls is a huge problem.
> R: Yes, and a girl can never go and tell her father that 'look that person touched me here, this way etc.'
> So eventually she decides to leave school because she doesn't like to be touched in an inappropriate manner. There are so many problems girls face.(FGD, women, Darjeeling)

> On their way to school they would be regularly eve teased. When the girls stopped them the boys threatened that they wouldpull open their saris. The parents of these girls don't want to go through any hassle so they got their girls married.(FGD, girls, 24 South Parganas)

> It happened to me. On my way to school, a boy who is younger than me told me that I will open your clothes and tie them like a bandana on my head.(FGD, girls, 24 South Parganas)

For girls who are victims of sexual harassment, there is little way out as talking may not be an option:

> If small girls are touched in the wrong way they can't reveal this to anyone. This problem continues to exist.(FGD, women, 24 South Parganas)

> R: In all villages this is the situation of women. Can we not stop this?
> R: The women are always subjugated.
> R: There is no equality of rights of men and women.
> (FGD, women, Darjeeling)

PART VII. KNOWLEDGE AND ATTITUDES RELATED TO CHILD WORK AND TRAFFICKING
relationship to their children

Work and migration practices among adolescents

Connection to caregivers

19% of adolescents reported they are working at least part of the time (economic activity) either in or outside the family, irrespective of gender. Also, 15% of adolescents reported they had been away from home to work to support their families at some point in their lives . Girls also work and contribute to the family's income, sometimes at a very young age:

> I: Are girls from this area/village leaving to work outside?
> R: Yes
> I: What age are they?
> R: Some are 15 years, some are 13 years.
> R: Even at 10 years some girls go out to work.(FGD, women,Darjeeling)

In both districts, the migration of girls for workis perceived as common.Whether or not the work is considered harmful, parents are involved in the decision.
I want to share something which is happening here. There are some families who send their daughters outside to work, some in Delhi some elsewhere. The family does this knowingly" (FGD, Adolescent girls, Darjeeling)

Many girls have left the village for work. They are all doing well. Some work as domestic helps, some as security guards and few others who work in beauty parlors.(FGD, men, 24 South Parganas)

Poverty and the perspective of a good job to bring additional income to families meant that economically deprived families felt little choice but to accept the offer of traffickers:

> Yes, we have heard this happening in some families who are financially very poor. People come to such families and lure them with hopes of getting good income if they go out with them to work promising them good living conditions etc. The family is told that they are taken to good places to work but after taking them, they are eventually sold.

In the survey, adolescents were also asked who, if anyone, they would talk to if they were planning on travelling away from home for work.

Most adolescents reported they would talk to their parents (59%), 3% would talk to friends and 9% would talk to teachers, NGOs or other community members. 15% did not know who they would talk to, and 14% chose not to respond to this question.
It is unclear here whether the responses under "don't know" and non-response categories mean that adolescents are not planning any travels, they are unsure who to talk to if they wanted to travel, they choose not to respond because of the sensitive nature of the topic, or they simply don't know.

Figure28. Percentage of adolescents who would talk about their plans for travelling

IF YOU HAD TRAVELS PLANNED, WHO WOULD YOU TALK TO? (ADOLESCENTS N=885)

- 9%
- 3%
- 14%
- 15%
- 59%

- Parents
- Don't know
- Non response
- Friends
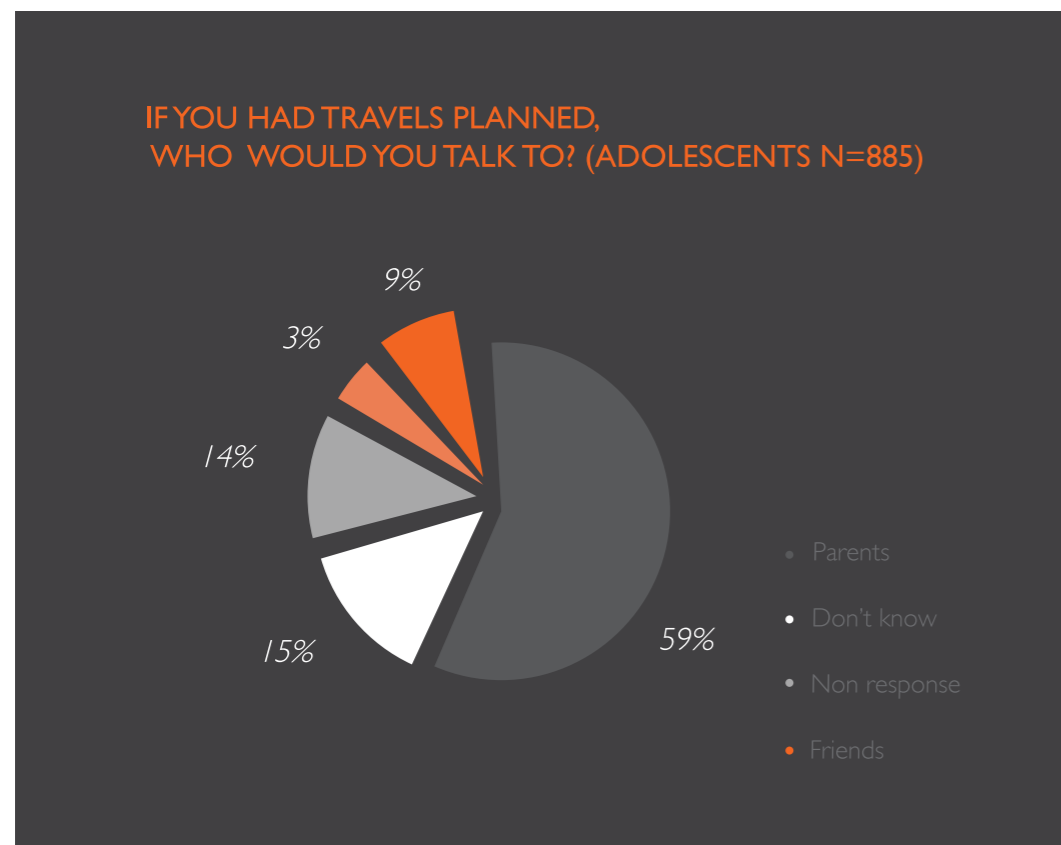
Knowledge about trafficking in source areas (24 South Parganas and Darjeeling)

Trafficking and its definition

Overall, about half of the caregivers (52%) reported that they knew about trafficking (Have you heard about trafficking?), as shown in Table 13. below. Differences were noticed according to location with a higher proportion of caregivers in 24 South Parganashaving knowledge about trafficking (54%) than in Darjeeling (49%) (p=0.004). Moreover, a higher proportion of caregivers knew about trafficking for child labour(42%) than for commercial and sexual exploitation of children (CSEC) (32%).

Caregivers thought that trafficking for sex was a risk mainly for girls (68% for girls,28% for both girls and boys, and 4% for boys). Meanwhile trafficking for labour was considered to be a risk for bothgirls and boys, but to a higher extent for girls(59% for both,34% for girls, and 8% for boys).

Noteworthy, there is a significant differencebetween those from a disadvantaged group (i.e., SC, ST, OBC) and being less aware of trafficking: (60%) compared to caregivers from the "general" group (74%) (p=0.009).

Among adolescents, 45% had heard about child trafficking (with no differences by location or sex). A higher proportion had heard about child trafficking for labour (39%), than for sexual exploitation (22%).Girls were reported to be more at risk than boys for both sexual exploitation (69% versus 29% for boys) and child labour (42% versus 9% for boys).For both groups, trafficking is very much considered to be a girl issue.

R: I have heard that children are taken and they are forced to beg on the streets, and some girls who are bit older are taken and made to do bad kind of things and sent to bad places.

I: What do you mean by bad places?

R: Places where girls are used.

I: What else?

R: The girls here do not want to go out, the family forcefully sends them to places like U.P and some foreign lands. Some many girls have been sent like this but in our village people have not been able to do anything about it. So I feel some help is required to trace them.

(FGD, adolescent girls, Darjeeling)

Not surprisingly, more older adolescents from 15 to 17 years had heard about trafficking than their younger peersaged 12 to 14 (50% vs. 41% respectively). Moreover, 45% of older adolescents and 33% of younger adolescents had heard about trafficking specifically for labour and 22% for CSE.

Table 13. Percentage of caregivers and adolescents who have heard about child trafficking by district

ITEM	DARJEELING		24 SOUTH PARGANAS		TOTAL	
	CAREGIVERS	ADOLESCENTS	CAREGIVERS	ADOLESCENTS	CAREGIVERS	ADOLESCENTS
	N=491	N=489	N=688	N=406	N=1180	N=885
Child trafficking	49%	46%	54%	44%	52%	45%
Child trafficking for labour	38%	34%	45%	44%	42%	39%
Who is most at risk	N=184	N=161	N=308	N=176	N=492	N=337
Both	8	2%	3	1%	11	1%
Boys	8%	14%	8%	5%	8%	9%
Girls	28%	36%	37%	48%	34%	42%
Child trafficking for CSE	28%	20%	34%	25%	32%	22%
Who is most at risk	N=138	N=91	N=233	N=102	N=371	N=193
Both	35%	37%	24%	22%	28%	29%
Boys	3%	1%	4%	3%	4%	2%
Girls	62%	62%	72%	75%	68%	69%

Knowledge about the local occurrence of trafficking

Overall,14% of caregivers reported that trafficking occurred in their area in the last 12 months while the majority (86%)reported that they did not know of any trafficking incidents. Differences were found by area. In 24 South Parganas, significantly more caregivers reported children had gone missing in their area (20% vs.7% in Darjeeling).

Table 14. Percentage of caregivers who have heard about trafficking incidents in the last 12 months in their area

		DARJEELING N=491	24 SOUTH PARGANAS N=688	TOTAL N=1180
In the last 12 months, have you heard about adolescent girls from this block who have gone missing?	NO*	93%	81%	86%
	YES*	7%	20%	14%
In the last 12 months, have you heard of any adolescents or youth in this area going to another area to work by themselves, not with their family?	No	73%	47%	58%
	Yes	9%	17%	13%
	DK	19%	37%	29%

		DARJEELING N=491	24 SOUTH PARGANAS N=688	TOTAL N=1180
In the last 12 months, have you heard of any youth younger than 18 who had to go get married somewhere else? Ifyes, how many?	No	69%	50%	58%
	Yes	7%	12%	10%
	DK	24%	38%	32%
In the last 12 months, have you heard of any girl under 18 in this area who went to went to work in some place risky or nothealthy (for sexual exploitation)?	No	73%	47%	58%
	Yes	9%	17%	13%
	DK	19%	37%	29%
Have you ever heard about adults recruiting children to "sell sex" in your area?	No	87%	88%	87%
	Yes	13%	12%	13%
In the last 12 months, have you heard of any children under 18 who have been rescued from trafficking (in your community)?	No	71%	64%	67%
	Yes	10%	9%	9%
	DK	19%	26%	24%

* The answers have been recoded here to reflect yes = at least one and No = 0.

Adolescent girls participating in FGDs seemed well aware that child trafficking (especially in the form of kidnapping) could occur.

We see that sometimes some people kidnap children while they are on their way to school, from school. Sometimes people lure children and give them sweets or something to eat and take them away. Also, sometimes girls fall in love with some boy and later they end up in trouble. (FGD, Adolescent girls, Darjeeling)

In 24 South Parganas, children revealed stories about kidnapping and murders of young girls that was shared at home by their parents, friends or local news. This contributed to raising their awareness of the dangers outside the house and the need to avoid strangers.

We have heard that she was taken away but what has happened to her we do not know. My mother says these are adult talk and I should not know about these. So we don't get to know actually what has happened. Everyone is speaking but actually what has happened I don't know. (FGD, Adolescent girls, 24 South Parganas)

My family tells me to be careful whenever I leave the house. Not to go with any stranger who calls me. (FGD, Adolescent girls, 24 South Parganas)

My aunt was narrating this. A girl of my age from my aunt's neighbourhood was at home that day. Her parents had gone to work and she had not gone to school for some reason. When she was sitting in her veranda, a man called her and told her that he would give her good food. She went out of her house with him. He raped her and then murdered her. Then he put her body in a sack, tied it and left the sack in one of the neighbour's cowshed. When the parents started looking for the child, they found her in the sack in the cowshed. (FGD, Adolescent girls, 24 South Parganas)

Overall, groups of adolescents were well aware that trafficking for CSE happened in their communities. Stories shared by girls mentioned that some could be lured by boyfriends pretending to love them or to marry them:

There was a girl, who was a student. A boy told her that he loves her, took her out of this village in a faraway city and forced her to do 'bad work'. Somehow she was brought back home. She was very sick there. She was undergoing treatment but she reached such a bad stage that she died.(FGD, Adolescent girls, 24 South Parganas)

Also sometimes girls fall in love with some boy and later they end up in trouble. (FGD, Adolescent girls, Darjeeling)

Girls were also said to be trafficked for other purposes such as forced begging or domestic work:
If the girl is young she is sexually abused and if she is a little younger she is forced to beg on the streets, work as domestic help.(FGD, Adolescent girls, Darjeeling)

As trafficking was seen as a threat frommale outsiders, getting married was perceived as a safeguard by parents and daughters:
R: Many boys come!
R: (They) give us phone numbers but some of us don't call back. Others call back. Certain incidents have happened here and if we narrate those then others will fight with us.
R: Its better we get married. (FGD, Adolescent girls, 24 South Parganas)

Also, trafficking of boys (for work) was also mentioned by one of the girls' groups:

R: But in my area this happens, especially for young boys.
I: Can you tell us how?
R: Young boys are taken to Nepal.
I: This happens in which area?
R: This happens in the nearby village Rabindrapur.
R: These boys who are below 18 years of age are taken for working as carpenters.
(FGD, Adolescent girls, Darjeeling)

Causes of Trafficking

As revealed in the qualitative data, trafficking was reported to go along with poverty, among families with no son, or being an elder daughter who had to be responsible for supporting the family:

We have heard this (trafficking) happening in some families who are financially very poor; people come to such families and lure them with hopes of getting good income if they go out with them to work promising them good living conditions etc. The families are told that they are taken to good places to work but after taking them they are eventually sold (FGD, Adolescent girls, Darjeeling)

Usually from poor families girls go out to work. Because of their very low financial stability to support the family the girl has to leave for work outside. This also happens where no son is in the family to go out and work. And being an elder daughter she sometimes has to take responsibility to support the family and do everything.

The girl is promised good income and good work so she is motivated to go out to work. For a few days it all goes well and she even contacts her family but eventually she goes missing and the family cannot trace or know anything about her (FGD, Adolescent girls, Darjeeling)

Stigma and trafficking

The qualitative data revealed that girls who would be returning to their community of origin after having fallen prey to traffickers would not be easily accepted.

In Darjeeling though, one key informant explained that the level of acceptance back in the community depends on religion and class: girls coming from Muslim communities are more likely to be ostracized (as well as their families) when they return. On the contrary, girls from tribal areas are less likely to be rejected by their communities and families as CSE is not viewed as a reason for exclusion.

I have personally witnessed a case of a survivor from a Muslim community where there was social stigma in the family andcommunity. The girl wanted to commit suicide. We then had to rehabilitate the girl in the shelter home. The whole community isolated the family of the girl. This particular survivor had returned from Delhi and was HIV infected also. She was trafficked in the pretense of a marriage and tortured in various ways. (KII, Darjeeling)

PART VIII. CHILD PROTECTION SERVICES

Knowledge about protective actions from trafficking

38% of adolescent respondents did not know any means for children to stay safe when travelling for work. When asked what they would recommend for children to stay safe when travelling for work,36% mentionedtravelling with friends or family, 26% mentioned keepingregular contact with family (or someone at home), 18% recommended the children live with family or friends, and 12% reported that knowing someone to talk to while away was a way to be safe (multiple response possible).

Figure31. Percentage of adolescents who know various ways children can stay safe when travelling for work

HOW TO STAY SAFE WHEN GOING AWAY TO WORK (ADOLESCENTS) N=885

TAKE ENOUGH MONEY TO PAY THE FULL COST OF TRAVELLING TO..	
KNOW SOMEONE TO TALK TO FOR HELP WHILE AWAY	
LIVE WITH FRIENDS OR FAMILY	
CONTACT FAMILY OR SOMEONE AT HOME REGULARLY	
TRAVEL WITH FRIENDS OR FAMILY	
NOTHING/ NO RESPONSE	

0% 5% 10% 15% 20% 25% 30% 35% 40%
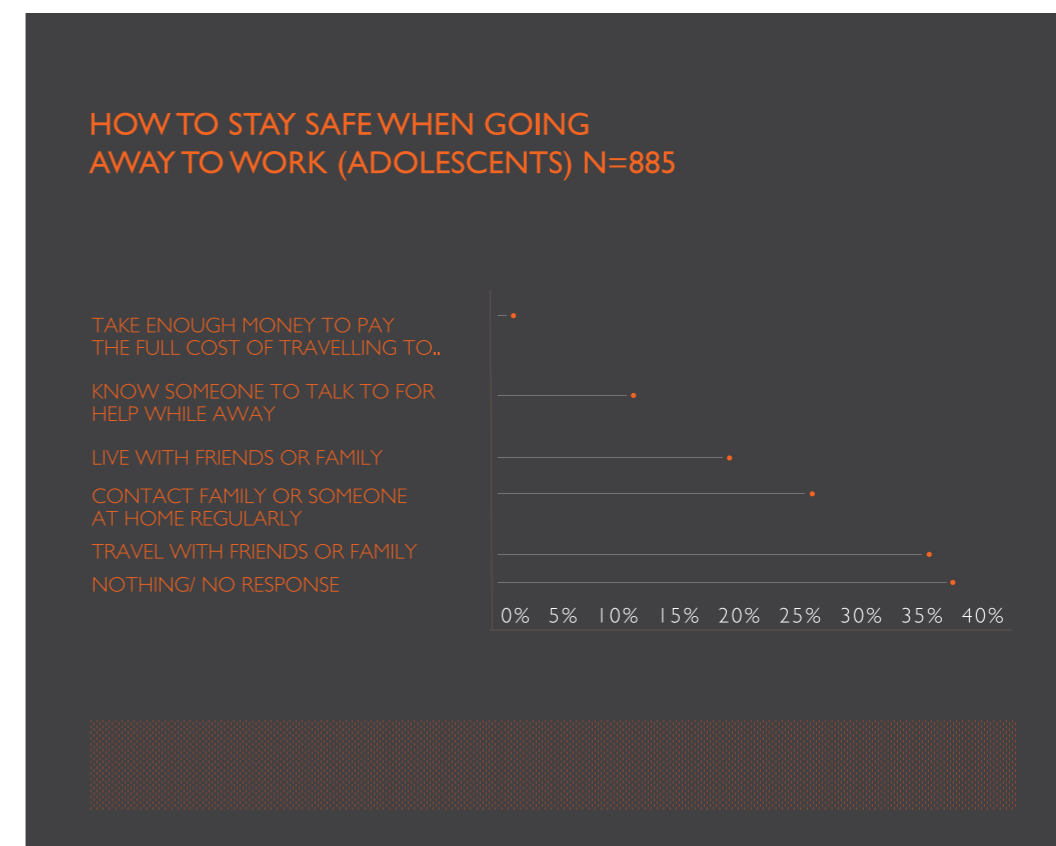
When asked about ways to protect themselves from trafficking, 59% of adolescents could not mention one way, 26% could mention only one way,8% reported two ways, and 6% mentioned three ways.

Location and group made a difference as more respondents from 24 South Parganas(12%) than their peers from Darjeeling (4%) knew of 3 ways, and more adolescents from "general" groups (13%) knew about protective actions than marginalised groups (6%).

Specific means mentioned to avoid trafficking were: not believe any offers of new opportunity (23%); knowing the location of a new job proposed (6%); checking the information provided by the employer or broker (4%); being careful about who to trust (3%); and being careful about marriage offers (3%).

Knowledge about services

Adolescents

28% of adolescents reported that they knew about services that can help children in case of trafficking, but the overwhelming majority (72%) reported not knowing about these serviceor didn't provide an answer (see Figure34. below).Among respondents, the most cited supporting actor was the police (91%), followed by the Village Level Child Protection Committee (VLCPC) (18%), the social worker (9%), the head of the Panchayat (3%), and Child Helpline (3%). Noticeably, there was no mention of NGOs, teachers, health workers, religious leaders, or the anti-trafficking unit of the police.

Analysis showed no differencesby location or sex. However, lack of knowledge about services was associated withless education: among adolescents who had never gone to school, 90% of adolescents who never attended school didn't know about services, compared to 71% who had been to school).

Figure32. Percentages of adolescents who report knowing ways of protecting themselves from trafficking

ADOLESCENT KNOWLEDGE ABOUT
SELF PROTECTION (TRAFFICKING) N=885

80%
60%
40%
20%
0%
59%   26%   8%   6%   1%

NONE   1 WAY   2 WAYS   3 WAYS   4 WAYS

Figure33. Percentage of adolescents whoknew specific protection actions from trafficking

HOW TO STAY SAFE FROM
TRAFFICKING (ADOLESCENTS) N=885

BE CAREFUL ABOUT MARRIAGE OFFERS   3%
BE CAREFUL WHO YOU TRUST, EVEN PEOPLE YOU KNOW   3%
CHECKING INFORMATION GIVEN BY EMPLOYER OR BROKER   4%
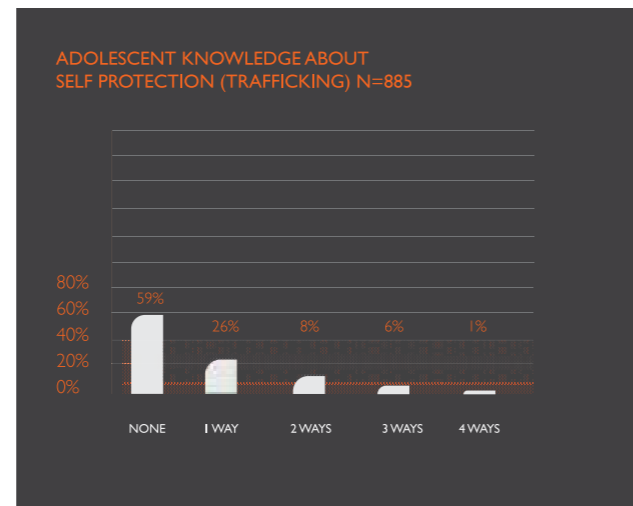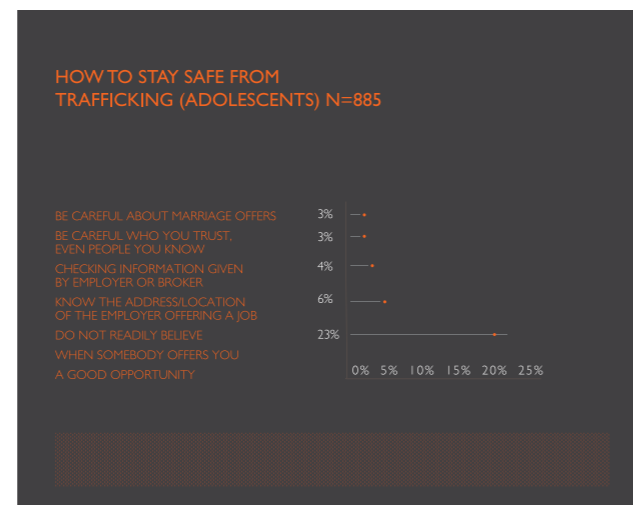KNOW THE ADDRESS/LOCATION OF THE EMPLOYER OFFERING A JOB   6%
DO NOT READILY BELIEVE WHEN SOMEBODY OFFERS YOU A GOOD OPPORTUNITY   23%

0%   5%   10%   15%   20%   25%

Reported knowledge was very much associated with projected use (of these services) as the majority of adolescents who reported knowing about services also reported they would "use these services" if needed (85%).

However, when asked to identify what would prevent them from using these services, 43% of adolescents reported that they were scared that their families would find out, 26% did not trust the ability or competency of these services to solve their problems, and 22 % did not think they would be listened to. Interestingly, financial reasons (transportation to access these services) was considered less an issue (cited by only 5% participants).Also, only 36% thought these services would hold perpetratorsaccountable, and that was more the case in 24 South Parganas(47%) than in Darjeeling (37%).

In Darjeeling, public trust in child protection services is likely to have been undermined by recent scandals involving authorities.In March 2017, Indian newspapers published shocking accounts of a district level child protection official's arrest over alleged involvement in child trafficking cases. This involved a Child Welfare Committee member too. This event is likely to have undermined local confidence and trust towards those responsible for providing assistance to vulnerable children .

There is a managing board with 5 members. They receive cases. There is not so much support. People don't know about the CWC. (KII, Darjeeling)

The findings above suggest that the level of knowledge about the child protection system as a whole (Child protection committees, Child Helpline and other specialised units) by adolescents is not strong; and the police are seen as one of the only alternatives in cases of violence and trafficking although not perceived as able to follow cases through to convictions.

I: So do children speak up if they ever face any risks?
All: No!
I: Why?
R2: Because often society will not be able to accept them or believe what they say. They fear if everyone will know about it and it will bring shame to the family. (FGD, Adolescent girls, Darjeeling).

Yes, the Gram Panchayat Pradhan (GP Head) helps a little bit but after a while nothing else is done. (FGD, Adolescent girls, 24 South Parganas).

R: I want to tell something. In our village a girl lived with her parents and her younger brother. At night when the parents had gone fishing, the girl was forcefully taken out of her house. They did wrong things with her (raped her). She was left in a boat. Later she was thrown in the river. When her dead body was found there were no clothes on her body.
I: So, weren't the police informed?
R: Yes, but they were very poor, so nothing happened. Here money speaks. Those who have money -- they win and the poor suffer. (FGD, Adolescent girls, 24 South Parganas)

Figure34. Percentage of adolescents who know about services that can help when a child is being trafficked

DO YOU KNOW ABOUT SERVICES THAT CAN HELP IF A CHILD IS BEING TRAFFICKED?

28%

28%

44%

- Yes
- No
- Don't know/NR
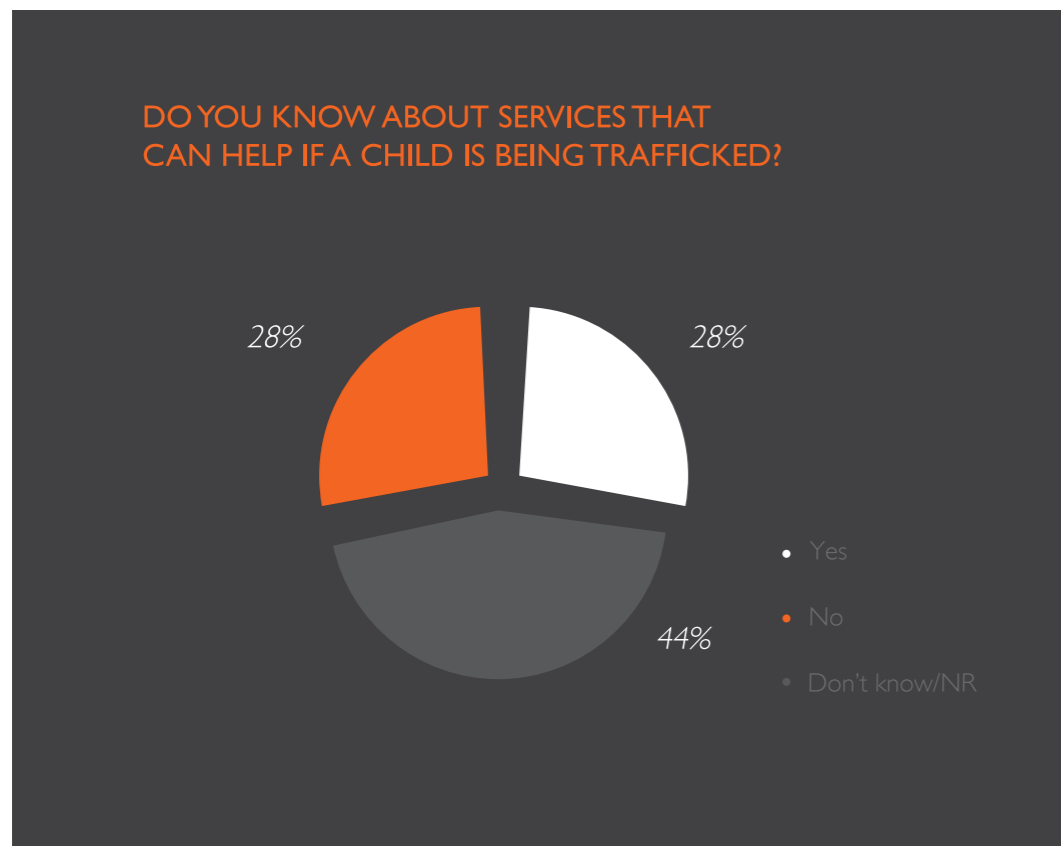
Figure35. Percentage of adolescents who report which organisation would help regarding the trafficking of children

WHAT ARE THE ORGANIZATIONS THAT YOU WOULD THINK WOULD HELP? (ADOLESCENTS N=241)

91%

18% 9% 4% 3%

100%
80%
60%
40%
20%
0%

POLICE "100" VILLAGE LEVEL CHILD PROTECTION COMMITTEE (VLCPC) SOCIAL WORKER PANCHAYAT SARPANCH CHILD HELPLINE
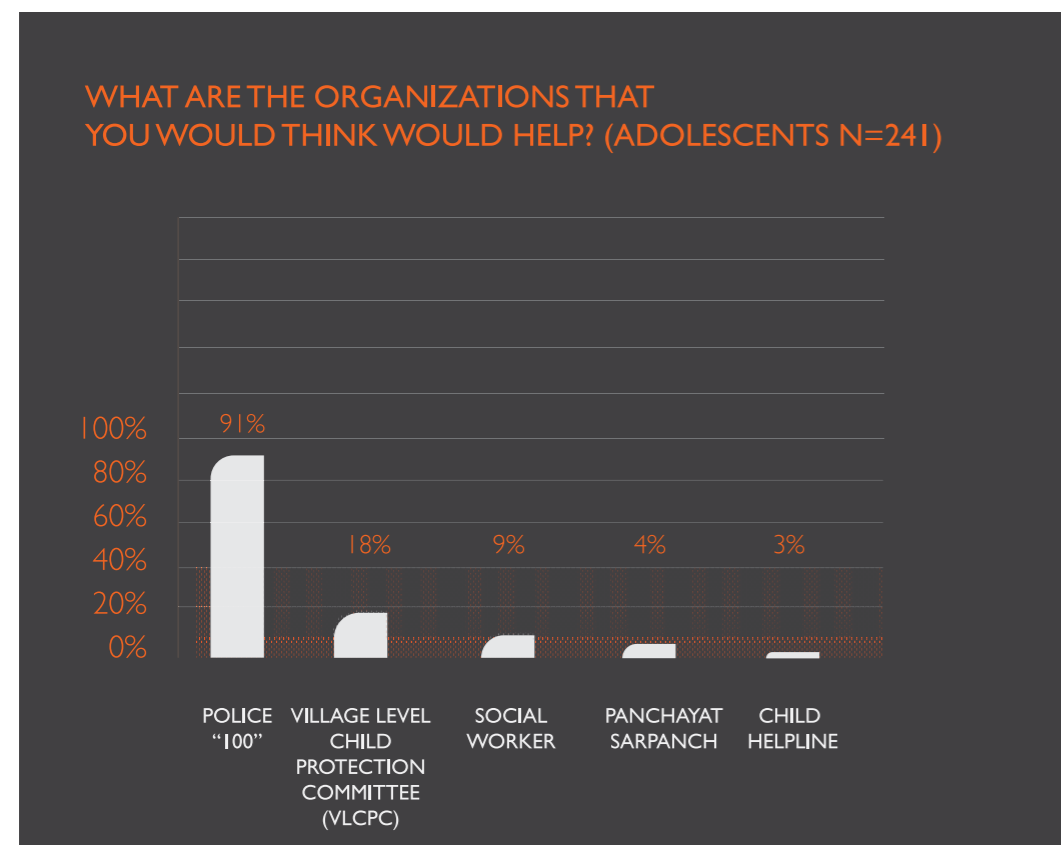
Figure 36. Percentage of adolescents who identify reasons for not using service

WHAT WOULD PREVENT YOU FROM USING THESE SERVICES IF YOU NEEDED THEM? (ADOLESCENTS) N=885

OTHER REASON — 8%
DON'T HAVE ENOUGH MONEY FOR TRANSPORTATION FEES — 5%
DO NOT THINK THE SERVICES/PEOPLE WHO WORK THERE WOULD LISTEN TO ME — 22%
DO NOT TRUST SERVICES (COMPETENCIES/ABILITY) — 26%
SCARED IF FAMILY FOUND OUT — 43%

0% 10% 20% 30% 40% 50%
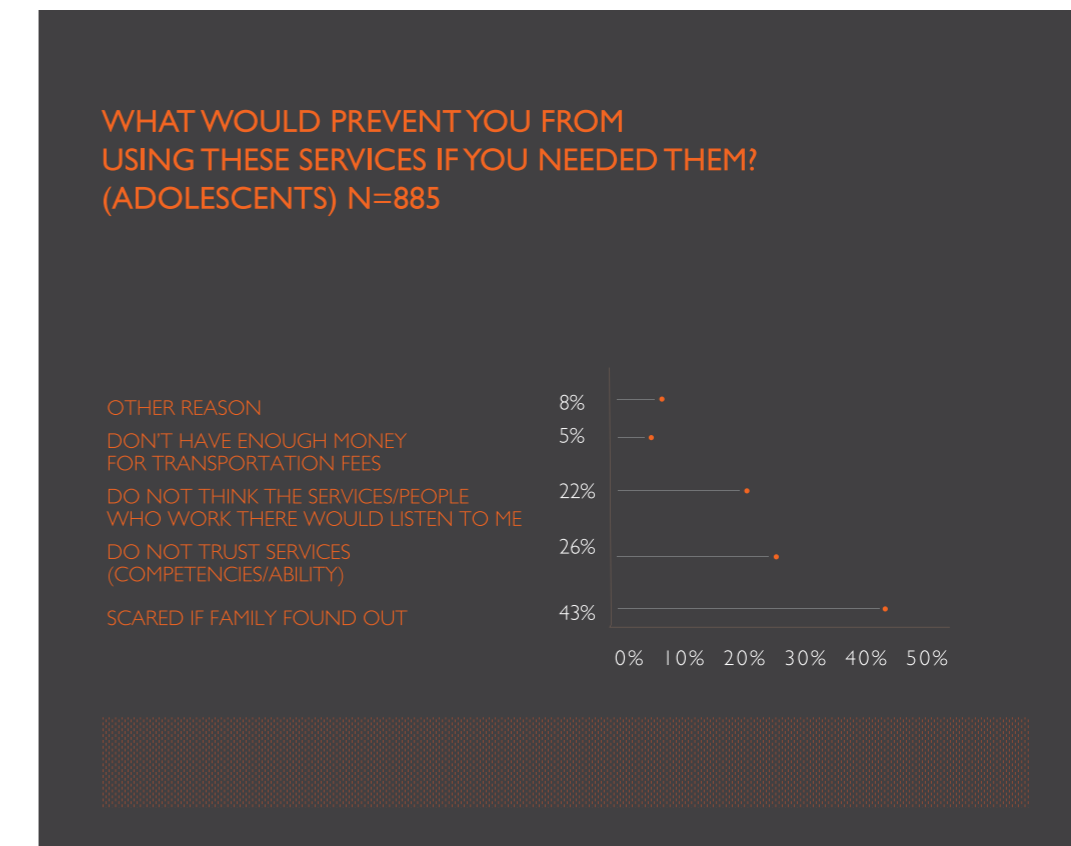
Caregivers

Among caregivers, 58% reported they knew services that can help children in case of trafficking with differences according to location (64% in 24 South Parganas and 49% in Darjeeling).

Very low awareness of specialised child protection services was known by participants in the study. The most cited supporting actor was the police (84%), followed by the Village Child Protection Committee (VCPC) (18%), the social worker (7%), and the head of the Panchayat (5%).

Significant differences were found by sex and groupregarding knowledge about services: more men (65%) knew about services than women (52%) (p=.003) as well as more members of the "general groups" (68%) thandisadvantaged groups (52%) (p=.001)

Main actors identified (by caregivers) to communicate messages about child trafficking were the police (44%) followed by media (17% radio, 16% newspaper and 1% TV).

82% of caregivers said they would report a case of child trafficking to the services mentioned and 89% trust that these services would hold perpetratorsaccountable.The gap is striking between caregivers and adolescents, as only 36% of adolescents believe perpetrators would be held accountable. This discrepancy is to be further investigated but it is likely that adults have answered more conservatively in the survey, although in reality, FGDs with adults (as well as discussions with specialist key informants) show that the level of confidence towards law enforcement agencies in following convictions and criminal cases is low:

My sister-in-law's daughter was raped and then murdered. The girl's parents think that because they did not vacate the house when the landlord had asked them to and because they did not lend the money that he had asked for, their daughter was murdered by him. The Police did not investigate further because they are poor people and they don't have the money to carry on a court case. (FGD, women, 24 South Parganas)

Three children were sexually abused and there is a legal process going on, but it is lengthy. We also rescued a child girl who was in child labour and later we found out she was sexually abused. The process is medieval. There are no witnesses. No punishment for the accused. (KII, NGO worker, Darjeeling)

Police are supposed to help, but sometimes there is no support from them (FGD, men, Darjeeling)

I: Can you tell me about the work of the CWC?
R: There is not so much support. People don't know about the CWC…The CPU officer is not there. They are in jail, the husband and wife…. There was a scandal – it was found they were doing child trafficking. They were sending small children abroad. It was HUGE money. So now they are in prison. (KII, Darjeeling)

Qualitative findings also show uneven knowledge about services: participants from 24 South Parganas seemed more aware that services other than the police (such as Childline) could be relied upon if child abuse or trafficking happened. They also knew about World Vision initiatives to provide assistance to girl victims of child trafficking.

Table 19. Percentage of adolescents involved in child protection activities by district

	DARJEELING N=491		24 SOUTH PARGANAS N=688		TOTAL N=1180	
	N	%	N	%	N	%
Reporting a Child Protection Incident (CPI) to local authorities	84	18%	67	17%	151	17%
Conducting advocacy with the Government	112	23%	119	29%	231	26%
Participating in Children's/Youth Club CP protection-related life skills training	87	18%	53	13%	140	16%
Participating in Children's/Youth Club CP public awareness activities (dramas, radio shows, public events, etc.)	101	21%	67	17%	168	19%
Participating in peer education	94	20%	58	14%	152	17%

Ladder of life

Adolescents

In order to get at perceptions of well-being or happiness, the picture of a ladder was presented to adolescents at the end of the survey and they were asked to rank their lives from the "best possible" life (=8) at the top of the ladder to the "worst possible" life (=1) at the bottom. This tool allowed them to "assess" their lives (i.e. how they felt about their lives generally) Previous research has grouped responses into thriving (scores 7-8), struggling (scores 3-6), and suffering (scores 1-2).

Overall, 22.4% of children's rankings on the ladder of life put them in the thriving category, while 58.2% were ranked in the struggling category, and 19.4% were in the suffering category. A higher percentage of girls than boys ranked themselves in the suffering category (23.0% vs. 15.4%). Furthermore, twice as many children in Darjeeling were ranked in the suffering category than children from 24 South Parganas (25.7% vs. 12.1%). When looking at sex and location, more girls from Darjeeling (30.0%) were in the suffering category, as compared to boys from Darjeeling (20.8%), girls from 24 South Parganas (14.8%) and boys from 24 South Parganas (8.9%) (Figure 37).

Figure 37. Percentage of Adolescents who Rank in the Suffering Category on Ladder of Life by Sex and Location

My sister-in-law's daughter was raped and then murdered. The girl's parents think that because they did not vacate the house when the landlord had asked them to and because they did not lend the money that he had asked for, their daughter was murdered by him. The Police did not investigate further because they are poor people and they don't have the money to carry on a court case. (FGD, women, 24 South Parganas)

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Qualitative findings also show uneven knowledge about services: participants from 24 South Parganas seemed more aware that services other than the police (such as Childline) could be relied upon if child abuse or trafficking happened. They also knew about World Vision initiatives to provide assistance to girl victims of child trafficking.

Table 19. Percentage of adolescents involved in child protection activities by district

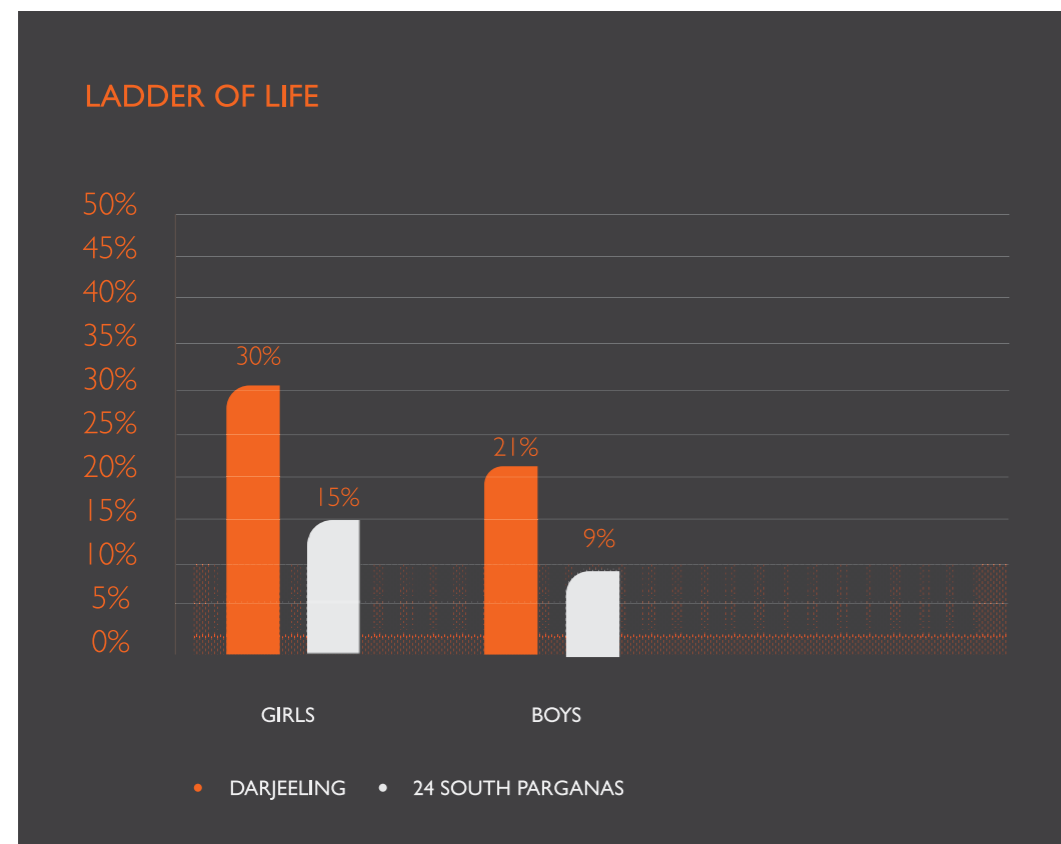
PART X. CONCLUSION AND RECOMMENDATIONS

Main findings: Darjeeling and 24 South Parganas

Background

☼ The majority of participants (62% of caregivers and 68% of adolescents) belong to the most disadvantaged socio-economic groups in India – scheduled castes (SC), scheduled tribes (ST) and other backward castes (OBC).

☼ Median income was just over $2 per day, with 24 South Parganas being significantly lower than in Darjeeling.

☼ Disability: 10% of adult caregivers and 5% of adolescents reported a disability.

☼ Education: Among adolescents, almost all (95%) had gone to school at some point in their lives and nearly three fourths (73%) reported they were currently attending school at the time of the survey. However, when looking at attendance, 14% missed 9 days or more in the preceding month. Almost all mandatory school age children were going to school (98%).

☼ MVC: 48% of adolescents have at least one type of vulnerability (vulnerabilities included child labour, disability, not attending school, living in family with sick breadwinner, and living in a family with 3 or more girls).

Knowledge about trafficking

☼ Knowledge about trafficking: 45% of adolescents and 52% of caregivers had heard about child trafficking. In general, girls were considered to be more at risk than their male peers. Awareness of trafficking for child sexual exploitation was lower than for child labour.

☼ Knowledge about local occurrence of trafficking: 14% of caregivers reported they were aware that trafficking happened in their local area in the last 12 months and almost the same proportion had heard about adults recruiting children for CSE in their area (13%).

Knowledge about services and protective actions

☼ Apart from the police, knowledge about other child protection actors is limited. 72% reported not knowing about services they could use in case of trafficking. This was particularly salient among children who had never gone to school. Among reasons for not relying on services were being afraid that family finds out (40%) and not trusting these services, their ability or willingness to help (48%).

☼ Knowledge about how to stay safe while travelling: 59% of adolescents reported not knowing any way to protect themselves from trafficking. However, 36% reported they would travel with friends or family to stay safe; 18% reported they would live with family, and 26% reported they would maintain regular contact with family.

☼ Reasons for not using child protection services: When asked to identify what would prevent them from using these services, 43% of adolescents reported that they were scared that their families would find out), 26% did not trust the ability or competency of these services to solve their problems, and 22 % did not think they would be listened to.

Attitudes about gender

☼ Gender Equitable Index:GEI score for caregivers showed very progressive attitudes (31) and slightly lower score for adolescents. One explanation is that scores can vary according to population exposure to messages about gender-based discrimination and violence. They are likely to change during and post intervention. Caregivers with lower GEI scores also tended to display higher son preference and acceptance of intimate partner violence (towards women).

☼ Intimate Partner Violence (IPV): A striking finding is that both men and women condoned violence towards women to the same degree, showing that women tend to follow the same (cultural) beliefs as their male counterparts. In spite of this, more women thought that decision making in the household was/should be shared, especially when it concerned children. Economic management of the household was seen by both as the onus of the husband.

Circle of care

☼ Connection to caregiver. Overall 39% of adolescents reported a high connection to their caregivers.Differences were found by location, religion, MVC status, and age group. Adolescents who lived in 24 South Parganas, were MVC,Muslim, or were in the younger age group, reported less of a connection to their caregivers.

☼ Community support & services: Only 21% of adolescents reported they can rely on their immediate network outside their family for support and only 16% feel supported both at home (connection to caregiver) and in the community.

☼ Violent discipline: More than half of adolescents (53%) experienced either violent physical or emotional punishment at home (47% physical violence; 20% emotional violence and 31% both forms of violent punishment). Only 16% reported non-violent (positive)punishment.

☼ Ladder of life: Only 22% of children were ranked in the thriving category, while 19% were in the suffering category. Significantly more girls, and children from 24 South Parganas were ranked in the suffering category.

Main findings: Single mothers who are in commercial sexual exploitation (Kolkata)

☼ Origin: 71% of single mothers in CSE come from West Bengal. Although not all have been trafficked into CSE, it gives some insight into the intra state nature of trafficking in West Bengal.

☼ Disability and health: three quarters of the women (75%) experience some difficulty in one domain(e.g., seeing, hearing, walking). Women reported living with multiple health problems.

☼ CSE and education: Single mothers in CSE show very low educational attainment: 43% have never gone to school.

☼ Children: Most of the children are of mandatory school age and the majority are at school (97%). 20 out of 36 children aged 3 to 5 years were developmentally on track (Child Development Index). Half of the mothers (53%) were able to provide for the needs of their children by themselves, and 46% could only provide for their children with assistance. Self-reported use of violent discipline was quite high, with 57% of mothers using physical violence; 76% using emotional punishment, and 82% using either physical or emotional.

☼ Age at first entry into CSE: 26% have started when minors (under 18 years). Though not representative of all single mothers in CSE in Kolkata, it gives us an idea of the proportion of trafficking for commercial and sexual exploitation of children within Sonagachi.

☼ Women's first sexual experience: The age of first sexual experience was found to be quite early (mean age 15 years) which shows that many young women were actually already sexually active before entering into CSE (trafficked or not). Another striking finding was that for 43% of women this first experience was not a free choice but was forced.

☼ Reasons for getting into CSE: The reasons for entry into CSE depend on a multitude of interwoven factors (e.g., poverty, lack of education for girls, child marriage, lack of support and work opportunities). It often results from an individual life trajectory in which one or two key events have changed and considerably weakened the life prospects of a woman who finds herself in a position where she has no other choice but to take this path. This was the case for women who initially experienced violence in their marriage, early and forced marriage, a sudden death or illness in the family (father or husband) or a partner or parent with an addiction to alcohol or drugs.

The decision to enter CSE work involved a reflection on the part of the mother about her survival as well as about her children's survival. This was a key factor (ensuring children's basic needs including education). This was also a key consideration about whether or not to stay and continue working in Sonagachi. Many women felt that with their current level of education, they would have little opportunity outside of sex workoffering the same level of income that they needed to ensure the future of their children.

☼ Recruitment into CSE: The process of recruitment for women and girls often involved an intermediary that was close geographically or known to them (friends: 28%; someone from the village: 26% and family or relatives including her husband: 13%).

Recommendations

There is no one single factor that can explain how girls become involved in commercial sexual exploitation. The phenomenon is complex, deeply entrenched and influenced by economic, social, and cultural factors.

Identification of risk factors

☼ Findings from this study show that:
- Interviews with single mothers from Sonagachi show that poverty, family conflict, living in a large family (4 or more children), substance abuse/alcoholism by a family member, low value of girls' education and women in general, child marriage, early divorce or separation, as well as intimate partner violence, are driving factors for girls and young women to become vulnerable to trafficking.

☼ Programmatic intervention could be tailored to include the specific needs of:
- Girls in poor families (particularly the eldest)
- Girls in large families (with 3+ siblings and with high number of girls)
- Girls who are engaged in child work and do not attend school regularly
- Girls in families with parental conflict
- Girls living in families in which one member is connected to Sonagachi
- Girls living in families where the breadwinner is sick/dead
- Girls at risk of being married and child brides

☼ Child marriage: Despite media attention and sensitisation about the law forbidding child marriage, marrying girls early is perceived by many as a way of maintaining girls' virginity as well as protecting girls from sexual abuse and trafficking. Future interventions should consider the linkages between child marriage and trafficking and work on social norms change to address these. One consideration would be to use a positive deviance model. It would also be important to take a slow, dialogue based approach with communities rather than a top down approach that lectures communities about child rights as this could produce backlash and drive the practice further underground.

☼ Working through schools: Since school registration is high, consider using schools to monitor girls who are drop outs (for labour or marriage or other reasons) – as it is already the case in some areas. Consider supporting PTAs or youth clubs attached to school in that purpose.

☼ Further research is needed (in Sonagachi) to better understand the root causes of trafficking. Case management records of women supported in Sonagachi can be the base for more in depth research on root causes and triggers that led women into CSE.

☼ Further research into other CSE locations: Findings from this study suggest that there may be areas other than Sonagachi where women are trapped in CSE and that are less visible. WV could consider supporting (directly or indirectly) research or initiatives with other actors interested in knowing more about these.

Prevention work

☼ Increasing knowledge about trafficking: Increasing knowledge about what is trafficking and safe migration, its modus operandi and its consequences on the lives of victims as well as available services. This intervention will consider how to make up for this knowledge gap (both in source and destination areas). As the qualitative data from Sonagachi found; many girls and young women who were seeking work became entrapped in CSE.
While this knowledge may be available to the more educated, men, and urban dwellers, it may prove difficult to reach out to the more remote rural areas and to groups that are discriminated against (i.e., women, marginalised groups such as ST, SC and OBC, and persons living with a disability).

☼ Need a community approach based: As much recruitment happens at the local level and is often very close to the girl/young women, approaches need to be driven by community level intervention and change. Girls who face difficulties should be able to rely on other positive community figures (support persons) who would be able to share positive norms and knowledge about protection mechanisms. Peer approach often shows positive results depending on context.

☼ Need to build life skills and competencies among adolescent boys and girls: Some girls seek marriage or work as a gateway to escape poverty. Any initiatives with adolescent girls and boys need to address harmful norms, attitudes, and behaviours that threaten the ability of girls to make their own choices and become full members of society. Consider modules geared to adolescents about making life choices, knowledge about self, healthy relationships, protective behaviours, etc.

Fostering gender equitable attitudes and practices

☼ Relationship between norms and behaviours: Reported positive gender attitudes (GEI scale) does not mean there is corresponding positive behaviour. Public disapproval may not lead to a change in actual discrimination or prevalence violence against women and girls. In some specific instances, violence against women is tolerated by both men and women.

Explore more if there is a disconnect between attitudes and practices (sometimes the case in contexts where people have been exposed to government; media or NGO messages, or as individuals are more educated and know "what answer" is expected from them - social desirability bias during survey).
Include women in activities challenging harmful norms and interpersonal violence: Given existing tolerance of domestic violence by women, women also need to be included in interventions that promote social norm change.

Services

☼ Strengthen existing community based CP system:
Support implementation of good case management practices: recommendation to strengthen existing child protection entities structures (DCPO; Village Level Child Protection Committees): support VLCPC to keep records of vulnerable families and children, maintain a case file for each child "at risk" of being harmed or in situation of abuse/exploitation (children in need of care and protection).

☼ Support the implementation of ethical standards: Support VLCPC members to follow procedures for safeguarding and maintaining confidentiality (of children in their caseload). Also support a "do no harm approach" and "Best interest of the child principles" to avoid re-victimisation.

☼ Increasing availability and accountability ofservices: Although increasing knowledge about services would help, it would not necessarily lead adolescents to report an incident –first, because there may not be community services available to report to (the most widely known actor is the police) and second, because of lack of trust in these services. Among adolescents who know about services, shame to report and lack of trust in services have been identified as potential impediments to reporting.

World Vision would benefit from mapping out all locally available services and screen for quality according to a set of criteria that would help rank their availability, efficiency and accountability to the service users. Village and higher administrative level Child Protection Committees are among such structures, but it may well be that other locally known organisations (informal child protection services) would be earmarked and work in coordination with other child protection actors (e.g., informal stakeholders such as women and youth associations, religious associations and groups, other human rights focused CBOs, local health centres).

☼ Establishing trustworthy partnerships: As recent public scandals have shown, serious doubts persists on the accountability and transparency of actors involved in the area of philanthropy and children: a recommendation for WV is to seriously research any potential partnerships(local authorities or other NGOs),assessingways of working and accountability.

☼ Support these services: Facilitate access to training for these services on basic psychological first aid, listening skills, referral mechanisms, etc. Trauma informed care has been identified as one gap by several NGOs in Kolkata: consider how to pull resources together to fill that gap.

Supporting parents

☼ Parenting practices: Findings show that while parents are resorting to physical violence (53% as reported by adolescents), emotional violence doesn't feature as high as in other contexts. On the other hand, non-violent methods of educating children do not appear to be widely in use, with only 16% of adolescents reporting experiencing one of the non-violent methods (such as explaining why behaviour was wrong, separating for a time,etc.). This suggests that there is much room for improvement about disseminating non-violent (and positive methods) of education. This could be done by using public campaigns, social media and mainstream, but also through more targeted intervention (e.g., parenting groups). It may prove fruitful to work with community groups to start a dialogue about harmful practices and convey messages dispelling the belief that corporal punishment is justifiable and to consider working with networks of parents who would effectively disseminate good communication practices and convey public disapproval at violent discipline.

Positive parenting will not only aim to reduce the practice of corporal punishment and emotional abuse, but also improve connection to caregiver outcomes.

Supporting single mothers (working in Sonagachi)

☼ Risk strategy: Sonagachi is a particularly harsh environment to work in, and with its own particular social dynamics, existing institutions and ways of working for many years. Consider how WV's actions (e.g., new resources, staff, establishing partnerships with some and not others, etc.) will possibly have an impact on existing structures and support mechanisms. WV to think about how to foster social cohesion and avoid risks for beneficiaries as well as its own organisation. Maintaining a relationship with Durbar, the very influential union for sex workers should be one key element.

☼ WV to develop a risk mitigation plan on how to work in Sonagachi: this will consider how WV's intervention will likely modify the existing dynamics for locally provided services or relationships inside Sonagachi and will look at strategies to minimise harm and foster social cohesion. Consultation with mothers on any potential risks for her while engaging with this project, consultation with other actors working in Sonagachi (including Durbar) and stakeholders' analysis (who will likely impede the course of the project) is needed.

☼ Map out existing services dedicated to single mothersand their children in Sonagachi.

☼ Define working relationship with DMSC: Clarify DMSC role in maintaining under aged girls in CSE in Sonagachi; define communication channels and approach to working with or side byside with DMSC. Even if approaches differ,given the size and influence of the organisation though, it is advisable that at least some dialogue should happen.

☼ Short term needs:
  - Address health related (including mental health) issues that mothers in CSE may face.
  - Think about ways to support and strengthen emotional well-being of women (fostering social cohesion among women who feel isolated)
  - Start from a "resilience" approach (vs. a deficits approach and labelling as victims) working with women as actors of their own life.
  - Supporting mothers to care for themselves and their children is likely to lead to positive outcomes for children living with them.

☼ Medium and long-term needs may include:
  - Looking into the caring arrangement of children to establish if it is in child's best interest
  - Referringwomento viable professional education and economic alternatives (as many wish to exit CSE)

☼ Supporting alternative care arrangement (when not harmful to the child): grandmothers (maternal side) often have a role to play in caring for children, see how individual child situation can be assessed.

☼ Assess literacy of children (of single mothers) during programme (as current baseline estimates rely on mother's perceptions, 40% of whom are illiterate).

☼ Support for women to develop their own plan and objectives for the short term and medium term future), women to be involved in developing their own care plan.

M&E framework

☼ As a complement to log frame activities, a qualitative component focusing on behavioural outcomes, starting from a reflection on What changes are we aiming at? Suggestion to use some of the tools developed by the outcome mapping approach (an approach developed to reflect and measure behaviour change) for instance.

Work with government and other service providers

☼ Support government to improve and coordinate anti-trafficking mechanisms: there are a number of actors and procedures related to anti trafficking in every state (specialised police units, Anti Human Trafficking Units - AHTUs, Child Helplines, Women Helplines, Missing children database, trafficked persons' database, Village level Child Protection Committees.etc.) with different mandates and keeping different information: WV to consider supporting government to centralise and unify all initiatives to a single plan of action.

☼ Identify advocacy strategies to work with government: together with other NGOs and actors working in the area of child trafficking, identify gaps in response and implementation of existing law, policies and Standard Operating Procedures (SOPs) and their implementation and influence/support government to address these.

☼ Map existing services in districts of intervention: as many NGOs are taking an interest in child trafficking for CSE, there is a need to map out NGOs and their area of expertise. Some have developed strong rescue and legal aid experience (for instance Justice & Care and International Justice Mission) while others have prior experience in protection and rehabilitation. Support district level CPC (Child ProtectionCommittee) to carry out this task in coordination with all mandated actors taking an interest in child trafficking.Analyse gaps throughout the whole process of supporting victims.

☼ Referral pathway: Support mapping district or lower level referral pathway and identify gaps in response, gaps in timeliness, quality and relevance of response for victims of trafficking. Help support a local plan of action for improving response.

☼ Support to government shelter homes: should be done in line with Minimum standards of care and Protection (UNICEF); include trained social workers (social workers working with girl victims of CSE should be women). Suggestion to also look at promising practices in the field of reintegration and M&E, such as the recent toolkit published by the RISE network .

☼ Psychological assistance: identified as a gap by NGOs involved in rescue, rehabilitation and reintegration of victims of trafficking: WV to consider working in partnership with resource persons with expertise in psychological first aid training to social workers in the area of GBV – emphasis should be put on user friendly and child friendly approach/language (avoiding using complex and specialised terms such as trauma), adopting a resilience approach and support positive coping strategies. All staff working directly with survivors of CSE should have been trained on how to communicate withsurvivors of CSE.

GOAL: ENSURE THAT ALL CHILDREN ARE CARED FOR AND PROTECTED FROM WORST FORMS OF CHILD LABOUR, ABUSE, NEGLECT AND EXPLOITATION AND OTHER FORMS OF VIOLENCE WITHIN SUPPORTIVE FAMILIES AND COMMUNITIES

and % of girls and boys aged 12-17 years engaged in child labour, by age group and type of child labour

Indicator measurement:
Within the child survey, children 12-17 years were considered as child labourer's when working excessive hours (UNICEF criteria) :

☼ Economic activity (paid/unpaid) for others, family or self
If aged 12-14: 14 hours or more per week
If aged 15-17: 43 hours or more per week
☼ Household chores
Aged 12-14: 28 hours or more per week
If aged 15-17: 43 hours or more per week

The survey also included questions about children's perceptions about their work, which overall provide some idea about whether or not the work children did was hazardous or not (although it didn't record specific dangers which can tell whether or not the work can be considered hazardous).

https://riselearningnetwork.org/wp-content/uploads /2016/05/RISE-ME-of-Reintegration-Toolkit-working-draft-2016-V2.pdf

and % of girls and boys who can identify at least 3 methods for protecting themselves

Indicator measurement:
Within the child survey, the following questions related to this indicator:
Do you know of anything you can do to protect yourself from physical violence?
Do you know of anything you can do to protect yourself from trafficking?
What can you do?

This indicator was measured using the % of children/youth who report they know 3 methods to protect themselves (from physical violence and trafficking) and was determined by creating a new variable adding responses identified by children and another variable creating a % based on individuals who named 1, 2 and 3 responses.

Proportion of children aged 3 to 5 years are developmentally on track in at least three of the following four domains: literacy-numeracy, physical, social-emotional and learning

Indicator measurement:
Within the single motherquestionnaire, a set of 10 questions related to the development of children aged 3 or 4 were asked (Early childhood index):

Literacy numeracy
1. Can (name) identify or name at least ten letters of the Bangla alphabet?
2. Can (name) read at least four simple, popular words?
3. Does (name) know the name and recognise the symbol of all numbers from 1 to 10?

Physical
4. Can (name) pick up a small object with two fingers, like a stick or a rock from the ground?
5. Is (name) sometimes too sick to play?

Learning
6. Does (name) follow simple directions on how to do something correctly?
7. When given something to do, is (name) able to do it independently?

Social-emotional
8. Does (name) get along well with other children?
9. Does (name) kick, bite, or hit other children or adults?
10. Does (name) get distracted easily?

and % of girls and boys (ages 12-17) especially the most vulnerable, report living in a more protective and caring home environment

Indicator explanation/ measurement:

This indicator measures the percentage of children who feel connected with their parents or primary caregivers.

Connection to caregiver
The person who cares for you the most at home, your parent or main caregiver, does he or she do the following: supports and encourage me, gives me attention and listen, shows me affection, praises me, comforts me, respects my sense of freedom, understands me, trusts me, gives me advice and guidance, provides for the things I need, gives me money, buys me things, has open communication with me, spends time with me, support me in my school-work?

Answers: three-point likert scale: not at all, sometimes, often
As the scale has only three items the results can be categorized as low, medium and high connection.

Children were sorted into three categories: group 1 reporting low connection to caregivers, group 2 reporting medium connection to caregivers and group 3 reporting high connection to caregivers.

Three new variables were created based on the mean score for each child:
Group 1. Low connection (majority of "not at all" answers) mean score ≤ 0.93
Group 2. Medium connection (majority of "sometimes" answers) mean score between 0.93 and 1.67
Group 3. High connection (majority of often) mean score ≥1.67 (maximum is 2)

Two additional statements were related to the community environment of children:

I have neighbours that care about me and watch out for me.
I know an adult who I can go to outside my family if I have a problem.

One final variable was created combining both connection to caregiver (high level) and community care (high level)

Proportion of parents or caregivers able to provide well for their children

Indicator measurement:
% of single mothersable to provide (without assistance) two set of clothes, a blanket for sleeping and a pair of shoes in the last 12 months and three meals a day in the past week for all children from 5 to 17 years.

Proportion of caregivers who show discriminated/positive attitudes towards gender

Indicator measurement:

Gender equitable Index (GEI) Care international
The Gender Equitable Index (GEI) is a survey that intends to measure individual-level gender equitable attitudes.
Each survey has 15 statements, to which respondents are asked the extent to which they agree or disagree. These 15 items can be used to calculate a gender equitable index score.
The GEI score can only be computed for those respondents who answer all questions on the Gender Equitable Index Survey.

The survey response options for each question on the GEI are quantified as follows:
Disagree Strongly = 1
Disagree Somewhat = 2
Agree Somewhat = 3
Agree Strongly = 4

On all three versions of the GEI, questions # 1 – 9 are general questions about gender equity. Questions # 10 – 15 are paired male/female questions (identical questions asked about males and females). Individual answers to these questions are summed according to the following formula:

The most equitable score would be: 36 - |12 – 12| = 36
The most inequitable score would be: 9 - |12-3| = 0 or 9 - |3-12| = 0

An individual's gender equity score equals the sum of his or her answers to the general gender equity questions (questions 1 – 9), minus the absolute value of the difference between the sum of his/her answers to the female questions and the sum of his/her answers to the male questions. This means that the most inequitable score an individual can obtain is zero while the most equitable score an individual can obtain is 36, as follows:

$$\text{GEI individual} - \sum \text{General} - \left| \sum \text{female} - \sum \text{Male} \right|$$

of % of adolescents who report experiencingnon-violent (positive) forms of discipline

Indicator measurement:

In the child survey, the following items were used to assess types of discipline experienced

Violent /Physical punishment
Spanking/Beating with hands
Beating with objects (like a stick or belt)
Forced to stand or kneel (sometimes holding ears)
Denying food
Locking children somewhere
Pulling the hair and shaking
Kicking out of the house (at night)

Violent/ Psychological aggression (emotional punishment)
Threatening to harm or use violence
Calling you bad names, swearing at you
Humiliate you in front of others

Non violent (positive)
Taking away privileges
Explaining why the behaviour was wrong
Separating from other people for a time
Given extra work to do
Comparing their behaviour to more obedient children

Answers: NoOne time 2-3 times4 times or more

Violent method was calculated using the percentage of children experiencing at least one of the physical or emotional punishment method (answer "4 times") (answer "2-3 times" and "4 times or more" combined)

Noviolent method was calculated using the percentage of children experiencing none of the physical or emotional punishment methods (answer "no")

Non-violent (or positive) discipline was calculated using the percentage of children experiencing at least one of the positive methodsand no violent ones.

and % of parents/caregivers willing to report a child protection issue to a local CP Mechanism

Indicator measurement:
Within the caregiver survey, the following questions related to this indicator:
If you suspected that a child in the community was being abused, physically or sexually, would you feel safe reporting it?
Answer: yes, no, or DK

Outcome 3. Communities including faith communities are working together to establish and sustain a safe and protective environment for all children especially those engaged in or vulnerable to worst forms of child labour (WFCL).

and % of parents/caregivers who feel that their community is a safe place for children.

Indicator measurement:
Within the caregiver survey, the following questions related to this indicator:
How safe do you feel your children are from danger and violence in your neighbourhood?
Answers: They are safe most of the time/ they are safe some of the time/ I don't feel that they are safe.
This indicator was measured by using the last question (answer most of the time)

and % of communities with a functional child protection mechanism

Indicator measurement:
Within the caregiver survey, the following questions related to this indicator:
Does your community have organisations where you can report cases of suspected physical or sexual abuse of a child?
Answer: Yes No DK
This indicator used answer: yes

Children who are doing well as measured on the ladder of life

Indicator measurement:

Within the adolescent survey, the following questions related to this indicator:
Do you know what a ladder is? If not, explain. Imagine your life is like a ladder, with the best possible life being at the top, and the worst possible life being at the bottom.
Where on the ladder you feel you are right now?

Answer: scale from 1 to 8

7 to 8 answer options were recoded 1 "thriving"
4 to 6 answer options were recoded 2 "struggling"
1 to 3 answer options were recoded 3 "suffering"

Indicator used category 1 "thriving"

Annex 2. Children in Need of Care and Protection

MVC definition

National law, The Juvenile Justice (Care and Protection of Children) Act, 2015 defines most vulnerable children as Children-in-Need-of-Care-and-Protection (CNCP). Section 14 of the said act, identifies following 12 categories of children as CNCP.

(i)   Homeless / Street children/run-away children
(ii)   children engaged in labour / begging / living on the street (street children, children involved in domestic work)
(iii)   children who reside with a person who is known to have committed / convicted of crime against children (killed, injured, exploited, abused or neglected)
(iv)   Children with Disability (CWD)
(v)   Children of parent or guardian who is unfit or incapacitated; (children deprived of parental care)
(vi)   Orphans (with no one to take care of)
(vii)   Missing child / run away child
(viii) Children who has been or is being or is likely to be sexually abused / tortured
(ix)   Children who are vulnerable to trafficking; or
(x)   who is being or is likely to be abused for unconscionable gains; or
(xi)   Children who are victims of/ or affected by armed conflict, civil unrest or natural calamity; or
(xii)   Children who are at imminent risk of early/child marriage

In addition to this, national level analysis found following category of children as Most Vulnerable Children:
1.   All girl children of BPL (Below Poverty Line) families where the primary bread-winner is incapacitated for reasons like death, terminal illness, unemployment and desertion.
2.   Un-accompanied children especially girls who are migrating to urban centres for employment/ child labour;
3.   Children of commercial sex workers / living in red-light areas vulnerable to sexual exploitation;
4.   Children whose parent has passed-away/ deserted and the remaining spouse marry another person (step-parent) where children are vulnerable to abuse and exploitation;
5.   Children on the move – children of families crossing border illegally and found with no citizenship documents;

MVC definition process

WV India subscribes to the definition given by national law, The Juvenile Justice (Care and Protection of Children) Act, 2015. (Section14) reads: "child in need of care and protection" means a child

(i)   who is found without any home or settled place of abode and without any ostensible means of subsistence; or

(ii)   who is found working in contravention of labour laws for the time being in force or is found begging, or living on the street; or

(iii)   who resides with a person (whether a guardian of the child or not) and such person—

    a.   has injured, exploited, abused or neglected the child or has violated any other law for the time being in force meant for the protection of child; or

    b.   has threatened to kill, injure, exploit or abuse the child and there is a reasonable likelihood of the threat being carried out; or

    c.   has killed, abused, neglected or exploited some other child or children and there is a reasonable likelihood of the child in question being killed, abused, exploited or neglected by that person; or

(iv)   who is mentally ill or mentally or physically challenged or suffering from terminal or incurable disease, having no one to support or look after or having parents or guardians unfit to take care, if found so by the Board or the Committee; or

(v)   who has a parent or guardian and such parent or guardian is found to be unfit or incapacitated, by the Committee or the Board, to care for and protect the safety and well-being of the child; or

(vi)   who does not have parents and no one is willing to take care of, or whose parents have abandoned or surrendered him; or

(vii)   who is missing or run away child, or whose parents cannot be found after making reasonable inquiry in such manner as may be prescribed; or

(viii)   who has been or is being or is likely to be abused, tortured or exploited for the purpose of sexual abuse or illegal acts; or

(ix)   who is found vulnerable and is likely to be inducted into drug abuse or trafficking; or

(x)   who is being or is likely to be abused for unconscionable gains; or

(xi)   who is victim of or affected by any armed conflict, civil unrest or natural calamity; or

(xii)   who is at imminent risk of marriage before attaining the age of marriage

Annex 3. Weighting procedures

After fieldwork, the achieved sample of caregiverswas weighted to compensate for:

(a) Unequal probabilities of selectionof households within PSUs.

Although PPS sampling ensures household selection probabilities are equal (within districts), there were two reasons why the probabilities of selection were unequal in practice:

(i)   there was a small number of large PSUs in the sampling frame (where the number of households was larger than the sampling interval) which could have resulted in some PSUs being selected more than once. To avoid this, their probability of selection was fixed to 1.0 (i.e. they were selected but only once) which resulted in the overall household probabilities being slightly variable between PSUs.

(ii)   In some PSUs (especially in Darjeeling), enumerators did not follow the sampling protocol and did not sample the required number of households per PSU (26 for PSUs in Darjeeling and 20 for PSUs in 24 South Parganas). This resulted in unequal selection probabilities of households (and in some cases, the differences were quite large).

(b)   Differential response probabilities of households.

Non-response weights were calculated to correct for differential household response rates by GP.

(c) Unequal probabilities of selection of caregivers within households.

In households with two resident caregivers, enumerators were instructed to select one at random (using random tables provided) so that male caregivers are selected with a probability of 0.7 and female caregivers with a probability of 0.3 (this was done in order to boost the number of male caregivers in the sample to facilitate analysis by gender). However, enumerators in the Darjeeling district did not follow the sampling protocol and selected male and female caregivers with equal probability. Therefore, the selection weight was calculated as follows: (i) 1 in single-caregiver households, (ii) 2 in two-caregiver households in Darjeeling, (iii) 1/0.7 for male caregivers living in two-caregiver households in 24 South Parganas, (iv) 1/0.3 for female caregivers living in two-caregiver households in 24 South Parganas.

(d) Differential response rates of caregivers.

The composite weights from the previous steps were adjusted (calibrated) so that the weighted achieved sample (weighted by the final weight) matched population estimates by GP and gender. As there is no data available on the population of caregivers in the study population, total population estimates within GP were used instead. This stage of the weighting corrects for differential caregiver response rates by GP and gender.

The final caregiver weight was calculated as the product of the weights from each of the 4 steps (household selection, household non-response, caregiver selection, caregiver non-response) and scaled so that the weighted and unweighted sample sizes are the same (1180 cases).

A complex sample analysis plan was developed in SPSS so that all analyses take into account the clustering, stratification and weighting of the sample.

Because of problems encountered by enumerators implementing the sampling protocol when selecting adolescents in households, it was not feasible to weight the adolescent sample. As a result, analysis of adolescents is reported unweighted.

References

Amnesty International 2016. Consultation seeking views on UN Women approach to sex work, the sex trade and prostitution.

Care 2014. Gender Equitable Index. Toolkit 2014.

Enakshi Ganguly Thukral. HAQ Centre for Human Rights and Campaign against Child Trafficking (CACT). Child Trafficking in India. 2016.

Falb, K. L., H. L. McCauley, M. R. Decker et at. 2011. "Trafficking mechanisms and HIV status among sex-trafficking survivors inCalcutta, India". International Journal of Gynaecology and Obstetrics, 113(1): 86–87.

GAATW, 2007. Collateral damage: The impact of anti-trafficking measures on human rights around the world.

Ganguly, E., 2016. Child Trafficking in India.

George, A., Vindhya, U., Ray, S., 2010. Sex Trafficking and Sex Work: Definitions, Debates and Dynamics – A Review of Literature.

Government of India. Ministry of Youth Affairs & Sports. New Delhi. March 2007. Draft final report of the working group on youth affairs and adolescent's development for formulation of the 11thfive-year plan (2007-2012).

Jana, S., B. Dey, S. Reza-Paul et al. 2013. "Combating human trafficking in the sex trade: Can sex workers do it better?". Journal of Public Health, Volume 36, Issue 4, 1 December 2014, Pages 622–628.

Justice and Care. 2017. Adolescence at the border.

Khan, A., 2015. Child trafficking in India: a staid predicament.

Kotiswaran P. 2008. Born unto Brothels—Toward a LegalEthnography of Sex Work in anIndian Red-Light Area. Law & Social Inquiry. Volume 33, Issue 3, 579–629, Summer 2008.

Ministry of Health and Family Welfare, coordinated by the International Institute for Population Sciences, Mumbai. 2015-16. National Family Health Survey (NFHS-4)http://hetv.org/india/nfhs/index.html (accessed 7th May 2018).

Ministry of Home Affairs. National Crime Records Bureau. 2016. Crime in India.

United States Department of State, 2013. Trafficking in Persons Report - India, (19 June2013)

Nair, P.M., IPS, and National Study Team. A Report on Trafficking in Women and Children in India 2002-2003. Rep. Institute of SocialSciences-New Delhi, National Human Rights Commission-New Delhi, United Nations Development Fund for Women-New Delhi, 18 July2004.Public Health, first published online 31 October 2013: Doi: 10.1093/pubmed/fdt095

National Institute of public coopération and Child developmentRegional centre, Lucknow.Effect of Low Sex Ratio on Marriage Practices: A Study in Punjab,

NCRB, Ministry of Home Affairs, Government of India.Crime in India: Compendium 2016. Delhi (Accessed 14 April 2018 http://ncrb.gov.in/)

O'Connor M; Healy G. 2006. CATW.The Links between Prostitution and Sex Trafficking: A Briefing Handbook (Manifesto, Joint CATW-EWL Press Conference, 2005).https://ec.europa.eu/anti-trafficking/sites/antitrafficking/files/the_links_between_prostitution_and_sex_trafficking_a_briefing_handbook_en_1.pdf (accessed 3rd May 2018)

Sarkar K., B. Baishali, R. Mukherjee et al. 2008. "Sex trafficking, violence, negotiating skill and HIV infection in brothel-basedsingle mothers of eastern India, adjoining Nepal, Bhutan and Bangladesh". Journal of Health, Population and Nutrition, 26 (2): 223–31.

Santhya, K G, S J Jejeebhoy and S Basu. 2014. Trafficking of Minor Girls for Commercial Sexual Exploitation in India: A Synthesis of Available Evidence. New Delhi: Population Council.

Sen, S. and P. M. Nair. 2004. A Report on Trafficking in Women and Children in India 2001–2003: Volume 1. New Delhi: Instituteof Social Sciences, National Human Rights Commission and UNIFEM

UNICEF India. 2014. Evaluation of Empowering Young Girls and Women in Maharashtra, India.

UNICEF MICS global indicators data source (child labour) https://data.unicef.org/topic/child-protection/child-labour/ (accessed 4th June 2018).

UNODC-UNECE(2010), Manual on Victimisation Survey 2009, Accessed 14 April, 2018 https://www.unodc.org/documents/data-and-analysis/Crime-statistics/Manual_on_Victimization_surveys_2009_web.pdf