Evaluating Children's Participation In Decision Making

: A case study of a child helpline in India

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Abstract

Beneficiary participation is now well established as essential to all development projects. However when the beneficiaries are children, the validity and relevance of their participation is debated and questioned. In my research I attempted to evaluate the nature of children's participation in a national child helpline project in India and analyse the relationship between participation and project outcomes. I also explored the key factors that affected the level of participation.

My findings are derived from my research involving an in-depth study of 4 cities where the helpline is operational. I had focus group discussions and interviews with approximately 300 children – street children, children in residential homes and children living in slum communities. Additionally I met with 40 frontline workers working with the child helpline. I have used the data from children and frontline workers along with statistical data from the helpline to arrive at my conclusions. I am also drawing on my professional experience of working with the helpline for over 5 years.

Whilst examining the relationship between the level of participation and project outcomes, I conclude that helplines with higher levels of participation were reaching out to more marginalised groups of children and were more credible amongst children. The understanding of participation played a key role in this process by influencing the way outreach was conducted in the four cities. However there was no observable relationship between the level of participation and the effectiveness of the helpline in changing attitudes of allied systems (police, doctors) or in affecting policy change. I analysed that the perception of the frontline workers to children's competence and consequently the best interests of the child were key factors in varying the level of participation at the helplines. I also observed that the management style mirrored the level of children's participation.

I suggest that participation should be linked to influencing decisions; that participation does play a role in affecting project outcomes; and that polices and programmes with children should be grounded in a child rights framework to be flexible and responsive to the diversity in life situations of children.

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List of Abbreviations/ Terminology

CL	CHILDLINE, helpline
CIF	CHILDLINE India Foundation, the national body to support the development of the helpline across India, based in Mumbai
CAB	CHILDLINE Advisory Board that consists of key officials from the local authorities who meet once in three months to review the calls to the helpline in a city
Collaborative organization	The phone receiving centre in a city. The helpline team of about 8-10 members is based at this organisation
Nodal organisation	The organisation responsible for training and advocacy. It is usually an academic institution or a network. One full time person is based for the helpline at this organization
Support organisation	This organisation assists the phone receiving organisation if there is a call in the geographic area. One part time member is based at this organisation
ChildNET	The computer documentation system to document the calls received by children
NICP	The National Initiative for Child Protection that was launched in 2000 by the Government of India in partnership with CIF to sensitise allied systems on child rights
Frontline workers	The team at the helpline that answers the calls from children and conduct outreach
Open house	A monthly forum for children to monitor the service
Uncle/Didi	Terms the children use to call a frontline worker

Acknowledgements

1 An Introduction to the Research

: Defining the research questions

Beneficiary participation is now well established as essential to all development projects. However when the beneficiaries are children, several authors, academics and practitioners have debated on the importance and relevance of participation, though the principle of children's participation is enshrined in the United Nations Convention on the Rights of the Child, 1989.

The practice of children's participation is seen to be at the centre of a " crisis in children's rights" (Invernizzi and Milne 2002 , pp 403). The literature on children's participation has identified several issues regarding children's participation which would broadly be classified into three key debates. The first debate relates to *the perception of children and childhood* and questions whether there can ever exist a balance between seeing children as social actors on the one hand and their need to be protected on the other. The second debate relates to the *mechanics of participation* that includes questions such as does participation require that adults hand over all power to children who may not be ready to handle it and whether only a few vocal children would dominate. The third debate relates to *whether children's participation leads to better outcomes for children* and questions whether participation diverts attention from addressing children's basic immediate needs.

In this research I have attempted to evaluate participatory practices with children in a children's helpline in India to better understand some of the issues related particularly to the first and third debate outlined above.

1.1 The prominence of children's participation in projects

Stakeholder/beneficiary participation (which was until recently understood as adult participation) is now an essential component of development projects. It is true that adult participation does appear to have several critics. Francis Cleaver for example has noted

> *Participation has been translated into a managerial exercises based on*
> *'toolboxes' of procedures and techniques, it has been domesticated away*
> *from its radical root; we talk of problem solving, rather than*
> *problematisation and critical engagement*

> (Cleaver 1999, pp 608)

Additionally, it is pointed out that while participation has the potential to challenge patterns of dominance, it may also be the means through which existing power relations are entrenched and reproduced. This reflects the view that sharing through participation does not necessarily mean sharing in power and Sarah White comments: " *Incorporation rather than exclusion, is often the best means of control*"(White 1996, pp 7). In spite of these criticism however, most critics also acknowledge the transformative power of participation. As Francis Cleaver points out

> *In questioning.. it is not my intention to deny the usefulness of a people-*
> *centered orientation in development, nor to dismiss all attempts at*
> *community-based development as well-meaning but ineffectual"*

> (Cleaver 1999, pp 598)

Additional Sarah White writes " *The idea of participation as empowerment is that the practical experience of being involved in considering options, making decisions, and taking collective action to fight injustice is itself transformative* " (White 1996, pp 8). The critics of current participatory practices with adults thus believe that there is a need for a reassessment of the methodologies and interests in promoting

participation. However they do affirm the positive value of participation in empowering adults and in addressing injustices against them.

Children's participation remains an area of much contention amongst professionals working with children. In terms of academics, the disciplines of psychology and sociology, as I shall discuss in the next chapter, have studied children as becomings, dependant, less mature, can easily be manipulated and less competent and this has influenced the way professionals work with children. Steven Walker notes " *some professionals believe that this (participation) is at best misguided or at worst undermining parental and or professional responsibility*"(Walker 2001, pp 45). Research has pointed out that professionals working with children tend do have dichotomous and polarized views on whether they can participate or not, are to be rescued/protected or have rights/ can participate(Shemmings 2000, pp 241). Additionally as Trinder points out " *practice then becomes founded upon certainties, the perfected (single) procedure, based on the single conception of the child*" (Trinder 1997, pp 301)

Michael Edwards summarizes at least five reasons for the invisibility of children's participation not only in professional practice but also in policy:

> *Firstly, planners use a standard model of childhood which has its roots in 19th century western thinking which treats children as immature and irrational. Secondly, children are seen as inherently non productive and hence excluded from definition and measurement of work. Thirdly children are seen as by products of other units of study such as the household, family or parent. Fourthly adults feel that as they have once been children, they understand the needs of children. Lastly by treating children as passive and dependant, adults reinforce their monopoly of power in the world over and above that required to nurture children towards adulthood.*

> (Edwards 1996, pp 47:48).

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Since the late1980s there have been several innovative projects, handbooks, and literature on children's participation, even in developing countries (Mayo 2001; Thukral 2002; O'Kane 2003). The literature on participation has urged organizations to create structures and mechanisms to allow children into the decision making process. Ruth Sinclair traces the popularity of children's participation in the 1990s amongst organizations working with children. She believes that the acceptance of children's participation has been fueled by the convergence of new and developing ideas coming from several different perspectives.

> *Three are of particular importance: the growing influence of the consumer; the children's right agenda and new paradigms within social science that have increased our understanding of the child as a competent social actor.*
>
> (Sinclair 2004, pp 107)

The United Nations Convention on the Rights of the Child, 1990 provided a powerful stimulus to discussion of the issue of children's participation. The principle of the child's right to participate in decision-making is stated in Article 12.1 of the Convention:

> *State Parties shall assure to the child who is capable of forming his or her own views, the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child*
>
> (United Nations Convention on the Rights of the Child, 1989)

Article 12 has been identified as one of the most radical and far reaching aspects of the UN Convention (for example Hart, 1997; Lansdown, 2001a), and also one of the provisions most widely violated and disregarded. In the last few years, there has been a move to critically look at how these approaches have been working. Diana Mc Neish highlights that participation has become a popular concept but the transfer of power and choice, which is necessarily associated with meaningful participation, often fails to occur (McNeish 1999, pp 194).

1.2 Emergence of the research questions

My research attempts to provide an evaluation of children's participation in a telephone helpline for marginalized groups of children in India. The specific questions that I seek to address in this thesis emerged from my five year work experience in the child helpline for street and working children which I briefly describe in this section. The helpline was initially started in one city (Mumbai) on an experimental basis by an institute of social sciences in 1996 that was able to obtain a non metered number (1098) from the telephone department, using India's ratification of the UN Convention as an advocacy tool (Billimoria 2001). In 1998, it became a project of the Ministry of Social Justice and Empowerment, Government of India in partnership with children, Non Governmental organisations, academic organisations, state governments, corporate sector and the community. The helpline was replicated in other cities in India since 1998 and was operational in 56 cities across the country as of April 2004. Nationally, the helpline had responded to over 2 millions calls between1998 to 2004 (Billimoria 2004).

In each city where the child helpline is operational, there may be one or more phone receiving centres and a network of support organisations. Based on the nature of the call received, the frontline worker may either: meet the child to address the emergency need and if required link the child to other support organisations for long term care or else address the problem over the phone. The types of calls vary across the country and the key intervention related calls received are for: medical assistance, shelter, protection from abuse, repatriation, tracking missing children and sponsorship. For example if a child calls from the railway station that s/he is ill, then

the frontline worker will go to the station and take the child to the nearest government hospital. In addition to responding to calls, in every city/district, the helpline also organises regular training programmes with personnel from the health, police personnel and juvenile justice system to strengthen avenues of collaboration.

As the helpline believes in utilizing existing resources and local expertise, it follows a franchise model, with local partners in each city, coordinated by a national body- CHILDLINE India Foundation (CIF). CIF is responsible for supporting the development of the helpline service across the country. It achieves this by facilitating local children's organisations to set up the helpline; monitoring the quality of the service; providing training inputs; facilitating networking amongst partners; promoting advocacy of children's issues based on the calls to the helpline. A profile of calls received by the helpline in 2003-2004 is outlined below:
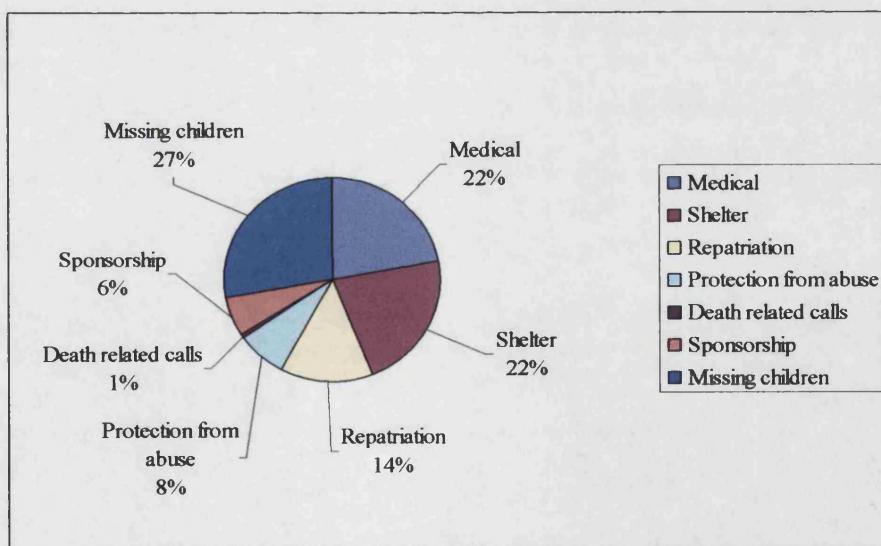
Figure 1.1: Calls received by the helpline nationally

(excluding calls for emotional support and follow-up)
Source: Annual Report, 2004 Page 24, CHILDLINE India Foundation

Children's participation is a core philosophy of the helpline that the organization seeks to translate into its creedo and implementation activities. The guidelines provided for setting up a helpline outline that children are involved in the setting up phase through a Need Assessment Study (NAS) and workshops, they are involved in answering calls in certain phone receiving centres and also involved in monitoring the service through monthly open house events that enable them to voice their concerns and issues (Billimoria, Fernandes et al. 2001).

During my work experience at CIF, however I observed differences between the levels of children's participation amongst the cities. I was thus keen to investigate the reasons for these differences and if these differences resulted in different outcomes.

1.3 Clarifying the concepts used in the research

Before elaborating upon the research questions, I would like to define the key concepts in the title of the research 'Evaluation of children's participation: A case study of a child helpline in India'.

- **Children:** I have used the term to include individuals who are below 18 years. The literature shows considerable variation as regarding the definition of the terms, 'children' and 'young people'. Some of the literature refers to work with young people upto the age of 25 years whilst others distinguish between children and young people with the break coming around 12 years. I however use the age definition of the UN Convention of 18 years.

- **Participation:** In the research, I seek to understand children and adult perceptions to the meaning of participation. My working definition of the term participation was the children's ability to have an influence on decisions.

- **Decision – making**: I have looked at decision making at the private (individual) and organizational (collective level).

  o Individual decisions: I have studied the role of children in making individual decisions with regards to their calls to the helpline for medical assistance, shelter, wanting to go back home, protection from abuse etc.

  o Organizational decisions: I have also studied the role of children's involvement in decisions to decide strategies of planning new activities, conducting existing ones, monitoring and evaluation of the service.

- **Evaluation:** In this research, I have attempted to evaluate (a) the level of children's participation and (b) the project outcomes. As elaborated upon in Chapter 3, whilst evaluating the level of children's participation, I use benchmarks to score the level of participation in the helpline. Whilst evaluating project outcomes of the helplines, I use certain indicators to help me compare the effectiveness between helplines. I have used the second level of project outcomes

- **Child Helpline:** This research is located within the context of a free, 24-hour helpline for children in India called CHILDLINE. The helpline is operated on a franchise model where the local implementing partners subscribe to a common creed and receive funding based on the recommendations of a central co-ordinating agency called CHILDLINE India Foundation (CIF). CHILDLINE India has adopted its own unique model of intervention. Some of the characteristics that distinguish it from other children's helplines across the world are:

  o <u>Face to face contact with children:</u> The helpline uses the telephone as a medium of contact to reach out to children rather than just as a means to provide a counselling based service to listen to children. The helpline thus aims to meet the child and plan the intervention with the child.

  o <u>Provision of basic services to children</u>: The helpline aims to provide direct assistance such as medical assistance, shelter. The helpline workers are with the child till he or she is linked to an appropriate service.

  o <u>Children as well as adults can call the service :</u> The majority of callers to the helpline are adults who refer children. However where the caller is an adult, the frontline workers meet with the child to determine his/her wishes.

  o <u>The brand –add-on model of the helpline :</u> CHILDLINE India has developed a unique brand- add- on management model. As part of this model, CIF identifies local partners already working with children to 'add- on' the telephone service to their programmes.

  o <u>Partnership with the government and academic organisations</u>: At the city and national level, the local authorities and an academic/research based organisation are integrated into the organisational structure of the helpline to facilitate continuous research , documentation, and advocacy for children's services.

1.4 Defining the research questions

The two key questions that I have attempted to answer in this research are outlined below. The relevance of these questions and the existing explanations to these has been elaborated upon in more detail in Chapter 2.

> **Research Question 1:** **Do projects with better child participatory practices have better outcomes?**

Despite the growth of children's participation activity and a growing literature that describes this, there is lack of evaluation about projects using participation (Kirby and Bryson 2002; Sinclair 2004; Theis 2004). In my literature study, I have observed that there appear to be various perspectives on the measurement of children's participation. However, I also observed that there was a lack of research on the relationship between children's participation and organisational outcomes; children's perception of participation and the interaction between frontline workers and children in the participation process.

In analysing this relationship, I attempt to explore if the outcomes of projects vary with differing levels of children's participation. While no relationship of causality is being studied in this research, it aims to firstly explore if such a link is tenable and detail the contextual situations of this linkage. Also I am focusing on project outcomes i.e. the generally more immediate and observable change of the service and have not studied impact which in contrast with outcomes, would involve longer- term, sustainable changes . The rationale for attempting to answer this

question was to understand if organisations with more child participatory practices had better service outcomes as well. I do recognise that participation is a right of the child, irrespective of the outcomes. However by searching to answer this question, I aim to understand:

- How do children and frontline workers understand the concept of children's participation?

- Is there a link between levels of participation and project outcomes?

- What is the role of participation, if any, in influencing outcomes?

In the research setting of the children's helpline, the level of children's participation would be measured (as elaborated upon in the tools of data collection) based on children's participation in the planning, implementation, evaluation and monitoring of the helpline. As the helplines aims to provide emergency assistance to marginalised group of children, the effectiveness of the helpline would be based (as elaborated upon in the tools of data collection) upon the service outcomes of the helpline in term of responding to calls from groups of marginalised children, dialoguing with allied systems (police, doctors) and advocating with state officials on children's issues.

While I agree that projects are effective to the extent that they enhance the holistic well being of beneficiaries and that participation as a right aims at this holistic well-being, for the purpose of this research, I limit my focus on participation vis- a-vis the project outcomes for children.

Research Question 2: How do the perceptions of frontline workers to children's competence, best interests and the management style of the organisation influence the level of children's participation?

In the literature I reviewed as outlined in Chapter 2, I identified several areas of explanations for the variations in the level of children's participation that related to: the relevance of the project to children; the structure of participation; the cultural context; attitudes of the frontline workers, skills of the frontline workers, resources available to the project and the organisational culture.

The helplines across the country are operating within a similar cultural context and CIF has a common training and funding policy for organisations implementing the helpline. I decided in this study to focus on researching the attitudes of the frontline workers and the management style of the local organisation. The literature on adult attitudes to children's participation generally all relate to how they construct the capacity of children and perceive the child's best interests (Freeman, Henderson et al. 1999; Lansdown 2004). I therefore decided to focus on how the frontline workers at the helplines perceived children's capacity and best interests. Additionally while there is a common policy on the culture of participation at the helpline, the local organisational culture of the partner organisation implementing the helpline could influence the level of children's participation. I therefore focused on understanding the local management style of the helpline.

By searching to answer this question, I aimed to understand

- Did children and frontline workers differ in their understanding of capacity and best interest?

- How did frontline workers assess the concept of capacity of children and determine a child's best interests?

- Was there a link between how frontline workers understood and assessed capacity and best interests with the level of children's participation at the helpline?

I perceived this question to be relevant as it would enable further research on developing strategies and interventions that could be more child friendly and participative.

1.5   Motivation for the Research

The issue of children's participation and the importance of listening to children may appear trivial- especially at a time when, as indicated in the UNICEF State of the World Report, 2004 – one billion children – every second child is living in poverty, 640 million children in developing countries live without adequate shelter, 400 million children have no access to safe water, 270 million children have no access to health services(UNICEF 2004, pp 103:145). Further at a time when several adults are denied the right to participate, is talking about children's participation, going a bit too far, too soon? My motivation for this research stems from the following:

- *To examine the process whereby adults and children are partners in change:* I would like to contribute towards the theoretical and practical debates on guidelines for effective participation of adults and children working together.

- *To add to the literature on children's participation*: In my research I attempt to add to the literature on measurement of children's participation and analysing the impact of children's participation on project outcomes of organisations.

- *To add to the body of literature that examines children as social actors*: The Save the Children Fund in its document to the UN World Summit on Social development, 1995 highlighted six key problems in current planning for children: a failure to collect child specific information, lack of recognition of children's productive contribution; no participation of children in decision making; the use of an in-appropriate standard model of childhood; the pursuit of adult interest in ways which render children passive and lack of attention to gender and generational relationships. Children's welfare has been largely inextricably woven into women's welfare and women's social condition. Through this research I would like to add to the study of the social condition of childhood that includes children into the script of the social order. I am also aware of the risk pointed out by some authors(Alldred and Burman 2005, pp 192) that , by drawing attention to children as a particular social group, we may construct children as 'little aliens', somehow essentially different from adults. Such reflection prevents us from assuming that our work is bound to be liberating. However a better understanding of the social conditions of childhood would then provide a firmer basis for working towards implementation of their participation rights.

- *To contribute towards the conception of marginalized children in India:* Through this research, I would like to highlight the problems and constraints faced by these children in attaining the rights enshrined in the United Nations Convention of the Rights of the Child.

- *My work experience with CHILDLINE India:* During my five year work experience with CHILDLINE India, I have observed significant variations amongst organisations regarding their approach to encourage children's participation. I have encountered several different attitudes towards children across India and dilemmas faced by professionals in the limits to children's participation. I have therefore been interested in understanding how the differing attitudes of professionals towards children's participation may lead to differences in service provision. Based on the findings of the study, I would also like to suggest policy and training needs for the organisation.

1.6 The Structure of the thesis

This thesis is divided into eight chapters including this introductory chapter. In the second chapter I review the literature from where I have constructed the conceptual framework for the research. I have attempted to highlight the range of issues in each area of children's participation that I have attempted to study in the research. In the third chapter, I elaborate the research design and the tools that I have used to collect my data. I particularly emphasise the techniques of data collection with the children I met and outline some of the ethical issues I faced in this process.

In the fourth, fifth and sixth chapters I analyse the main findings from my field work. In the fourth chapter, I begin the analysis by understanding the meanings of

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participation that children and frontline workers spoke about. In the fifth chapter, I present my key findings regarding the evaluation of the level of children's participation and the level of project outcomes in the four helplines. In the sixth chapter I highlight my key findings regarding the factors that I have identified that influence children's participation namely: the perceptions of the frontline workers to the best interest principle & capacity of children and the management style of the organization.

In the seventh chapter, I consolidate the key arguments from my findings and analyse my findings in the light of my conceptual framework and debates highlighted in the literature. In the concluding chapter, I analyse the implications of the findings for social policy.

2 The Theory and Practice of Child Participation

: Developing a conceptual framework for the research

In this chapter, I review the literature on children's right to participation. While doing so, I aim to show the relevance of the research questions, identify the major issues with regards to children's participation, outline my assumptions that guide the research and identify the themes for the measurement and analysis in my evaluation of children's participation.

This chapter is divided into five sections. In the first section, I begin by understanding the different approaches to study children as I draw key assumptions from the new sociological approach to childhood. In the second section, I analyse the existing research on the approaches to understand, measure and evaluate children's participation in decision making. In the third section, I review the existing research undertaken to evaluate children's participation. In the fourth section, I highlight the debates regarding the factors that have been found to be associated with promoting or hindering children's participation. In the final section, I summarise the conceptual framework that guided the research. In this section I identify the themes that have assisted me in my analysis of the data.

In the next chapter, I elaborate on how I translated the analytical framework that I derived from the literature into a strategy for data collection, analysis and interpretation.

2.1 Approaches to understand children and childhood

"How *we are seen determines in part, how we are treated, how we treat others is based on how we see them; such seeing comes from representation*"

(Dyer 1992, pp 1)

As I outlined in Chapter 1, the debate on children's participation, differs from that of adult participation largely due to the nature of how children are perceived. In this section, I therefore briefly examine how various disciplines approach and study children and childhood. The table below summarises the key assumptions about children amongst the disciplines I reviewed and shall briefly highlight:

Discipline	Ontology (Assumptions about children)
Philosophy	Children as evil, innocent, blank slates
Evolutionary Science Charles Darwin,	Children as developing beings
Development Psychology (Piaget)	Context – free : Universal, Timeless, Isolable Predictable: Standard, progressive development Irrelevant: Unformed, passive-dependant, unreliable
History (Phillipe Aries,)	Childhood is a social construction
Sociology (Talcott Parson)	Plastic Children can be moulded/socialised into adult roles
Anthropological (Charlotte Hardman)	Minority Part of the decoration
Geography (Bunge, Roger Hart, Katz, Denis Wood)	Spatial structure and interaction, pressure of the environment n the young use of environment in socialisation. The way adult presence and absence is inculcated in children spaces and places
Economics	Children as part of the family
New sociology of children (James, Jenks)	Children as social actors

Table 2-1: Approaches to study children and childhood

Philosophy: Philosophers from Aristotle, Locke, and Rousseau wrote about children and postulated theories about cognitive and moral development, children's rights, agency and the goals of childhood. David Archard explains that historically the two key philosophical arguments were: Firstly, between those such as Plato or Descartes, who maintained that the mind possesses from birth an innate knowledge of certain fundamental ideas or propositions (such as the existence of God or truths of mathematics and logic), and those such as Locke, who held all ideas to be derived from experience. The second debate concerned the relative influence of nature and nurture upon on individual's character (Archard 2004, pp 43:44). In Theorising Childhood, Allison James et al have categorized the philosophical thoughts about children into ' the evil child', found in the work of Thomas Hobbes ; 'the innocent child' ,found in the work of Jacques Rousseau; and the ' immanent child' , found in the work of John Locke (James, Jenks et al. 1998, pp 10:16). These philosophical writings on children reflected and influenced the assumptions on which children have been studied by various disciplines.

Evolutionary science: These scientists thought that the study of the early development in humans of cognitive, motor and communicative skills, as well as the expression of emotions, bore an intimate relation to the evolutionary thesis, namely that there is developmental continuity between humans and lower animals. In Charles Darwin essay: A Biographical Sketch of the Infant in Mind in 1877, he explains that the individual human is believed literally to develop out of an animality which is at the origin of its own species' evolution. Again, the child is said to inherit and display preserved phylogenetic (species) memories and instructs which are only lost as she grows up (Archard 2004, pp 40:41). While the strict form of this

biogenetic law is widely discredited, it has had a tremendous influence on much psychological theory to which, I now focus.

Psychology: The study of ' the child' has been for more than a century, the territory of development psychology (Hogan 2005, pp 22). The dominant developmental approach to childhood provided by psychology is based on the idea of natural growth. It is a self- sustaining model whose feature broadly is that rationality is the universal mark of adulthood with childhood representing the period of apprenticeship for its development. Childhood is therefore important to study as a pre-social period of difference, a biologically determined stage on the path to full human status. In Piaget's account, child development has a particular structure, consisting of a series of predetermined stages, which lead towards the eventual achievement of logical competence. It was Freud who focussed on childhood as adult pasts. In Freudian theory, consciousness and rationality are finally brought through the supremacy of the superego, the experience of the collective other which regulates the presentations of self and integrates the child into the world of adult conduct. The explanations for aberrant adult behaviour can be found in childhood leading to parent-child relationships that transform the child into the unconscious self (Mills and Mills 2000). However developmental psychologists are now embracing the challenge of a more cultural approach (Woodhead 1999, pp 10).

Sociology: The scientific construction for the irrationality, naturalness and universality of childhood through psychological discourses was translated directly into sociological accounts of childhood in the form of theories of socialisation during the1950s. Within structural functionalist accounts of society, individuals were

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slotted into finite number of social roles. Socialisation was the process whereby these social roles come to be replicated in successive generations. To a large extent, this accounts for sociology's long neglect of the topic of childhood and also demonstrates why children were considered under the sociology of the family (James, Jenks et al. 1998, pp 25)

Economics: In as much as children are considered at all, the mainstream economic view is of children as household dependants- neither decision makers nor productive economic actors- who have value as potential economic resources, a status they attain with adulthood. Investment in children is assessed in terms of its role in increasing their economic productivity as adults rather than its potential for furthering the interests and welfare of children themselves (Boyden and Levison 2000, pp10:18).

History: It was the historian, Phillipe Aries who claimed that it was not until the late 17th Century that the concept of childhood began to emerge and that in medieval society the idea of childhood did not exist (Aries 1962). Aries came to his conclusion by: studying medieval writings, looking at the portrayal of children in art, the ideas of how children should dress, the history of games and pastimes and the way writers of the time thought of childhood innocence. David Archard points out that it is important to distinguish between the concept of childhood (i.e. children distinguished from adults in respect of some unspecified set of attributes) and conceptions of childhood (i.e. the specification of those attributes). While Aries favours a modern conception of childhood, he argues what cannot be sustained is that past societies lacked a concept of childhood (Archard 2004, pp 29). However Aries, with his

historical approach to childhood, was able to show that that there is a distinctively modern conception of the child which had been constructed and this differed from earlier conception of the child.

Anthropology: Children have been present in anthropological ethnographies, largely through an interest in socialisation, in anthropology most notably through the work of the Culture and Personality school during the period 1930-1960 (Benedict, 1946; Mead, 1968, Whiting & Child, 1953) though in Mead's work, children were recognised as informants (Christensen and Prout 2005, pp 46:47). Charlotte Hardman however heralded a new anthropological approach by identifying the invisibility and muteness of children in cultural studies. She extended the anthropology of children through: elaborating the idea of a semantic system which depends not only on speech but on the bio-physical environment, by analysing children's sayings, by examining the oral traditions, their games, playground activities or by analysing children's drawings (Hardman 1973, pp 99).

Geography: Geographers of childhood study the way young people are placed, at what scale they operate and in which ways their identities are fixed (Aitken 2001, pp 19). Children as outsiders need allies and geography with its concern with the politics and power of space and spatiality is well positioned in this respect(Matthews, Limb et al. 1999, pp 135).

New sociological approach to study childhood: Researchers have over the years, begun to develop new approaches to the study of childhood. The primary distinction between the traditional conception of the socially developing child and the four- fold

classification (tribal, minority, social structural, social constructed child) developed

by James et al (1998) is one to be made between notions of becoming and being.

> *In contrast, our four new discourses of childhood understand the child as*
> *being. The child is conceived of as a person, a status, a course of action, and*
> *a set of needs, rights or differences- in sum as a social actor. The being*
> *child is not static for it too is in time. There is no necessity to abandon ideas*
> *of past and future just because we have shifted from a conceptual framework*
> *that is predicated on becoming. The epistemological break claimed is the*
> *move to study real children or the experiences of being a child*

<div align="right">(James, Jenks et al. 1998, pp 207)</div>

While the perspective of geography and the new sociological approach both see

children as social actors , I have located my research within the new sociological

approach to enable me to better understand the perceptions of different groups of

children and adults to participation I draw on the model of a socially constructed

childhood in the following ways:

- <u>Understanding of Childhood as a variable</u>: In this research, I have understood

  childhood to be a variable along with other variables such as the life situation of the

  child.

- <u>Childhood would be understood as a social construction:</u> Using this approach, I have

  attempted to pay attention to the social construction of childhood alongside what

  particular actual children have said. As I was keen on understanding the meaning of

  participation from both the perspectives of children and the frontline workers, this

  approach provided a backdrop of seeing children as social actors, which the other

  perspectives do not necessarily focus upon.

- Agency of children: The research assumes that while children do have the agency to be social actors, there is a structural power that is subtle that is not always acknowledged that need not be spoken and yet that controls children. The structure imposes conditions and constraints on the choices to children. Most discourses about ' children's participation' refer back, at least implicitly, to notions of power; less often, however, does that involve explicit identification, clarification and deconstruction of what is meant by power and how power operates. In the research, I have focussed on children's perceptions of their situations. In my research study, I have considered the power dynamics between adults and children and have attempted to understand the perceptions of the project worker's feeling of power as they listen to children and allow children to set the agenda and make decisions.

The literature does highlight some limitations of the social constructionist model of childhood. The first concern is the social and political implications of the relativism implied by the social constructionist literature in the face of the political, social and economic maltreatment ventured against children on an international scale. It has been argued that the social constructionist believe that all knowledge is particularized in a specific context denies all institutional and systemic phenomena and as Martin Woodhead argues ' *a point must be established where diversity becomes deprivation, where variation becomes violation, plurality becomes pathology, by any standards'*(Woodhead 1999, pp 16). Further, Diana Gittins, writes that the problem with the model is that it can end up trivializing and even denying inequalities based on difference and '*there is a real danger of forgetting the centrality of power and power relations in such models* (Gittins 1998, pp 44). A second limitation of the model pointed concerns the biology of childhood bodies and the extent to which

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children are subject to its dictates. Social constructionists such as Susan Bordo show how the body, too, can be seen as discursively constructed and operate as a "metaphor for culture". She argues that children are not simply at mercy of their bodies but that it is the ways in which those bodies are thought about and acted upon which makes children vulnerable to particular discourses of power (Bordo 1993, pp 13). It has thus been argued that while this approach to childhood research makes great play of children as active agents in social life several authors of this school of thought have questioned that the body as an example of a physical, material reality.

While addressing the first limitation of the model, I agree with White's suggestion that the issue is not so much as to how to 'solve the relativism/universalism problem, as to how to embrace and make productive use of it (White 1999, pp 136). Ben White outlines a more useful and productive kind of cultural relativism that insists that we remain sensitive to differences simply as a practical analytical tool.

> *Relativism then becomes in addition to the general principle of respect for the ways of life of others, a tool of learning and understanding, a way of shaking up and questioning supposed universalist ideas and opening up possibility of others; in other words, a way of opening our eyes to the variety of human ideology and practice, but not a basis for legitimizing whatever we may see when we do this.*

(White 1999, pp 137)

Additionally, Martin Woodhead notes: " *the challenge to cultural relativism cannot be answered, unless a relationship is articulated between theoretical ideas about the status of child development beliefs and practices, on the one hand, and moral and political imperatives to intervene with children, on the other* " (Woodhead 1999, pp 16). I believe that while it is important for each culture to outline minimum principles (that cannot be comprised and merits intervention) and desirable principles (which a culture should aspire towards). These principles need to be

arrived at by each culture. It is however important that the voices of all sections of that culture are represented. The social construction model then is a model to understand various truths as experienced by people. Woodhead cautions that the danger becomes when specific cultural images of child development quality are promoted as a standard, under the guise of universal principles (Woodhead 1999, pp 28). I perceive the model as a means to initiate a dialogue amongst people to arrive at their minimum and desirable standards. Whilst using this approach, I have been aware of the power relationships amongst adults and children and between children themselves and do not think that the use of this approach necessarily negates the study of power relationships.

With regards to the criticism on the limitations of biology of children's bodies, I review the impact of age and gender on studying children's participation and implications for the research.

Age and participation: Anne Solberg (1997) notes that *"for parents, their conceptions of what age means sets the limits within which they permit negotiations to take place, these limits are therefore expressive of those conceptions. But through the very process of negotiating, these prior conceptions of age may be modified and the limits altered"* (Solberg 1997, pp 128). Solberg's view is that researchers should use 'ignorance of age' as part of their professional code so that they can see how age is acted out differently in different social contexts. Allison James et al (1998) acknowledge that a refocusing on the material bodies of children could enable an exploration of childhood as both a construct of discourse and an aspect of children's lives which shapes social relations as much as it is shaped by them. They argue " *In*

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this way we want to underline a very necessary insight about bodies and children which social constructionism risks undermining: that social action is generally speaking embodied action, performed not only by texts, but by real living corporeal persons" (James, Jenks et al. 1998, pp 147)

In this research I have taken age as one of the variables along which I defined the groups of children I would meet. As I have outlined in the next chapter, the children with whom I met were in the age group of 6 to 18 years. Based on the convention being used amongst non governmental organizations of grouping children into younger (6-12 years) and older (13-18), I too followed the same. I therefore had focus group discussion with boys and girls amongst these two age groups. In Chapter 4, I discuss my findings regarding the differences between the two sets of age groups. I however have not been able to examine the differences in great detail as in the focus groups with children in the 6 – 12 years range, most of the children were between 10-12 years and hence I have not been able to ascertain a range of views of children below the age of 10 years.

Gender and participation: In my research, given the nature of children's access to the helpline in India, it has been not possible for me to contact an equal number of girl children living on the street or working compared to boys. This is a limitation of the study in that the focus groups with children are predominately with boys. In this section, I review the literature on studies that have highlighted that the issues faced specifically by girls in difficult circumstances as compared to boys, in order to identify concerns to be sensitive towards during my research. In a study entitled 'Urban Girls' by Gary Barker et al (2000), the authors point out that within the mass

of urban poor, adolescent girls are at a disadvantage – on four grounds: their age; their gender; their poverty and often their ethnicity. They highlight that in many cases, the problems facing urban girls represent generational cycles which are passed from mother to daughter. In addition, the inequalities affecting these women start even before birth, due to prenatal selection and in some cultures female infanticide. During childhood girls may receive less food and healthcare than their brothers and on reaching adolescence there is a greater likelihood that they will have to drop out of schools (Barker, Knaul et al. 2000, pp1:4).

In my research, as I focus on children on the streets and children in work, I review the studies on the situation of girl children particularly in these difficult circumstances.

- *Girls living on the street*: It is highlighted that street life is a fluctuating condition and both girls and boys may move from homes to the street to institutions in order to satisfy their physical and emotional needs. However there is some evidence to show that this experience differs for boys and girls. Whilst reviewing 13 research studies regarding the lives of street children, Barker et al point these studies indicate that once girls leave home, the rupture is more permanent and definitive than for boys, primarily because a girl's departure is more frequently because of sexual harassment or physical violence within the home or unwanted pregnancy (Barker, Knaul et al. 2000, pp 9). Additionally, some research suggests that the breakdown of the relationship with a primary care giver- mother or other close family member- has especially severe consequences for girls possibly because the socialisation patterns of young

women are much more dependant on this primary relationship(Gillian 1992; Aptekar 1997). The review of research studies on street children by Barker et al, also revealed that while both boys and girls suffer when a primary relationship is broken, street boys show more resilience and the programme reports from Kenya, Senegal, Bolivia, Brazil and Guatemala report that girls display more psychological damage- probably because of the combined effect of sexual abuse and rupture of the family – than boys do. Also aside from mental health problems, street girls face numerous health hazards: respiratory infections, skin diseases and the risks associated with unwanted pregnancies and abortion (Barker, Knaul et al. 2000, pp 8-12).

- *Girls engaged in work*: The statistics on the ratio of boys and girls working is not easily available. The 1981 Indian Census showed that 5.5 million out of the 13.6 million urban working children were female (Weiner 1991). The India Human Development report highlights that the participation rate for female children in the work force increases as income falls and that traditional beliefs have contributed significantly to girls and Dalits remaining out of schools and into work (Thukral 2002, pp 289). Both boys and girls engaged in work suffer disadvantages in schooling, abuses at work, and low wages. However the situation of working girls is worse since they face the same double working day as their mothers, combining wage labour with their domestic chores. Several studies have pointed out that while boys may have time for education around their workday, girls have little time left over after work and housework and as less value is placed on the education of girls, they often begin work at an earlier age (Barker, Knaul et al. 2000, pp 13). These studies also pointed out that the chores in the home began as soon as the girls were able to understand the tasks

and in most cases, the work chosen by girls was based largely on the work of their mothers. For example Oloko (1991) described that in Lagos, Nigeria, street trading is a female dominated activity and men and boys who engage in street trading regard it as a temporary employment, while girls know that it will be their future job (Oloko 1991). In India , several of the girls work in the invisible and unorganised sectors and it is estimated that nearly 50 percent of female child workers in urban areas are engaged in domestic work (Thukral 2002, pp 225). The exploitation of girls in domestic work often goes unrecognised in most countries because it is both widespread and at the same time more isolated than any other form of child labour. This isolation is reinforced by cultural boundaries: in many cases the girls who are cut off from their family and rural culture, speak a different dialect and find it difficult to communicate with the few contacts they have (Barker, Knaul et al. 2000, pp14).

Eileen Kane et al (1998) describe the experience of applying participatory research to issues relating to girl's education in The Gambia. During the research the authors found that it was girls who were denied access to primary education and that although education for all is the official aim, from a cultural perspective, education for boys is a right (which some are denied) while education for girls is a privilege which has to be hard- earned. They also discovered that teenage girls who were pregnant, married or about to be married constituted an invisible segment of the community and that 25 percent of the girls in the village were missing from social maps. This invisibility of girls was reflected in other socio-cultural factors which influenced girl's participation in education: the lack of female role models, markedly gender biased textbooks, too few female teachers. The authors also identified that the

endless hours of labour restricted girls' study time and that their workload was heaviest (and boys at its lightest) throughout the most intense period of schooling: preparation for exams. The authors learnt that Participatory Research Appraisal techniques are not automatically gender- sensitive and that gender sensitive participatory research is most often attributable to the personal consciousness and commitment of those facilitating the research, rather than to the methodology itself (Kane, Bruce et al. 1998, pp 31:36).

In my research, as mentioned above, while I have not been able to have an equal representation of girls (living on the street or working) in my focus group discussions, However when I was arranging focus groups with girl children, I made a note to ensure that the timing of the discussion was not too inconvenient to their schedule. Whilst I analysed the comments of girls separately as the sample of girls was relatively few, I have not been able to analyse gender differences in the understanding of participation amongst children. As presented in the following chapters, whilst I did not observe any significant differences in the responses between the boys and girls, I noticed a similarity in responses between boys and girls in the same life situation i.e. living on the street, residential homes or slum communities. I reflect on some of my observations on gender in Chapter 8.

Thus, I have located my research within the new sociological approach to study childhood which understands children as social actors in both shaping and being shaped by their environment. In the next section, I now review the different approaches that have used to understand and evaluate the level of children's participation.

2.2 Approaches to measure the level of Children's Participation

In this section, I attempt to explore the meanings of participation and the studies that have been undertaken to evaluate the level of children's participation and thus analyze the different meanings ascribed to children's participation. Several academics and practitioners have devised scales to measure the level of children's participation. Many of these have remained academic exercises, while few have been actually implemented in the field.

I now review some of the approaches suggested to measure and evaluate children's participation.

Model	Focus of the evaluation of children's participation	Meanings of participation
Roger Hart, Ladder of participation, 1992	Level of decision making offered to children by adults	Participation as decision making with adults
Mary John, Bridge of Participation, 1996	Children's networks, children's responsibility	Participation as a children's movement
Butler and Williamson, Partnership graph, 1996	Degree of autonomy, power	Participation as power as a zero sum game in the context of individual decisions
Emmanuelle Arbrioux, Spherical model, 1998	Degree of movement important, not level	Participation as decision making based on context
Nigel Thomas, Wall of participation, 2000	Autonomy, choice, control, information, support and voice	Participation defined by its key elements in individual choices
Nandana Reddy, Grid of children's participation, 2002	Nature: representing oneself, organisation Structure: informal, formal Who initiates: child, adult, joint	Participation as protagonism within organisations

The ladder of participation: Adapting Arnstien's ladder(Arnstein 1969), Roger Hart has illustrated the different degrees of initiation and collaboration children can have when working on projects with adults.

" Participation is the process of sharing decisions which affect one's life and the life of the community in which one lives. It is means by which a democracy is built and a standard against which democracies should be measured. Participation is a fundamental right of citizenship"

(Hart, 1992:5)
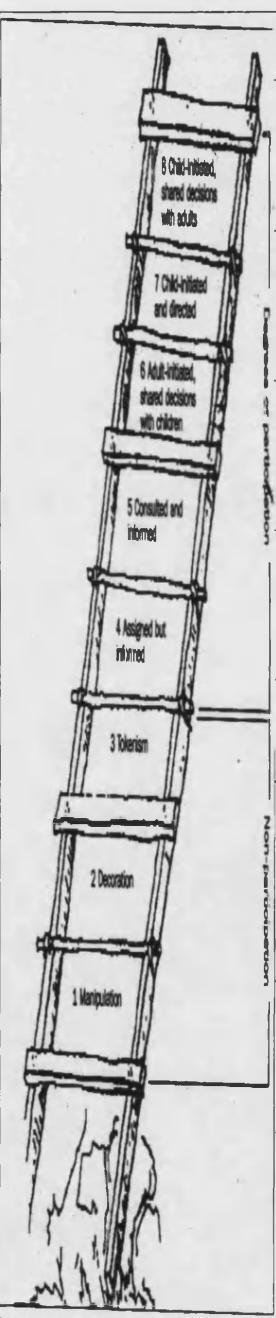
	Degree of participation (Hart 1997, pp 41)
	Child initiated, shared decisions with adults: A climate of trust is established where in children feel that to involve adults does not necessarily mean subjecting themselves to adult control.
	Child initiated and directed: Adults help without directing, recognise children's initiatives, allow them to happen but do not control them, children carry out such projects
	Adult initiated, shared decisions with children: Shared decision projects where children are involved in some degree in the entire process.
	Consulted and informed: These projects are designed and run by adults with children understanding the process, being consulted and have their opinions treated seriously
	Assigned by informed: Hart refers to this as social mobilisation and often does not reflect genuine participation
	Tokenism: Adults design projects in which children seem to have a voice but in fact have little or no choice about the subject or the style of communicating it, or no time to formulate their own opinions.
	Decoration: When children wear costumes or T- shirts promoting a cause, but have little notion of what the cause is all about and no involvement
	Manipulation: Adults consciously use children to carry their own message. At times adults with good intentions, deny their own involvement in a project with children because they want others to think that it was done entirely by children.

Table 2-3: The ladder of Children's Participation

Roger Hart has devised this ladder based on a global study of various projects involving children ranging from community schools in the Preuvian Amazon, plays schools in New York, street children organizations in Zimbabwe, Ecuador, Environmental clubs in West Africa Sri Lanka, United Kingdom to local government children's councils in Italy. The ladder is meant for adult facilitators to establish the conditions that enable groups of children to work at whatever levels they choose. He notes:

> *while the upper levels of the ladder express increasing degrees of*
> *initiation by children, they are not meant to imply that a child should*
> *always be attempting to operate at the highest level of their competence.*
> *A child may elect to work at different levels on different projects or*
> *during different phases of the same project*

(Hart 1997, pp 41)

The important principle according to Hart is to avoid working at the three lowest levels- the rungs of non-participation. Roger Hart has used this measure whilst evaluating environmental projects with children.

Harry Shier, 2001, has offered a new model for enhancing children's participation in decision-making based on five levels of participation: Children are listened to, Children are supported in expressing their views, Children's views are taken into account, Children are involved in decision-making processes, Children share power and responsibility for decision-making (Shier 2001, pp 110). At each level of participation, however individuals and organisations may have differing degrees of commitment to the process of empowerment. The model seeks to clarify this by identifying three stages of commitment at each level: openings (readiness amongst workers to operate at that level), opportunities (resources, skills, knowledge, procedures) and obligations (policy requirements). The model provides a simple question (if they are ready for the opening; if a procedure/knowledge exists; if there

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is a policy requirement) for each stage at each level. By answering the questions, the reader can determine their current position and easily identify the next steps they can take to increase the level of participation. In reality, it is unlikely that a worker (or an organisation) will be neatly positioned at a single point. Working with the model could be a useful first stage in developing an action plan to enhance children's participation in organisations working with children.

While the ladder of participation has been useful in understanding children's participation, some authors have highlighted its limitations. It is argued that the definition does not discuss the child's current capacity for participation in relation to the different levels of participation (John 1996; Gittina 1998). Mary John however is of the opinion that the ladder of participation " can be seen as reinforcing traditional notions of patriarchy" (John 1996). She argues that the ladder is offered and the child with various assistances from the adult is empowered to move up it into mainstream society and mainstream citizenship.

"This is an old model of rights that one might call the model in which rights are bestowed by the powerful on the less powerful. Such a metaphor is unfortunate in all the implications it has of bestowing rights on a passive receiver. Surely the rights discourse is about transforming power rather than giving a less fortunate member of the community a helping hand up into the world of the dominant majority"

(John 1996, pp 15)

Shier has tested this model at the field level and it is helpful in determining where the organisation wants to go. The only limitation I find with this model is that it fails to outline the level of participation in various activities within the organisation.

The bridge of participation: Mary John   uses a bridge as a metaphor to understand

participation. She states that:

> *To understand children's participation, we require a model which is more*
> *dynamic, which takes account of the politics of child participation and which*
> *also encompasses the construction of creative alliances with adults on which,*
> *it could be argued children's participation must be based.*

<div align="right">(John 1996, pp 16)</div>

 The pillars to support this bridge are Responsibility (where difference is accentuated

and in-group similarities are celebrated), Unity (involves making sure that the

members of the minority group at least speak with one voice to the outside world and

Community Action (when the group starts to make itself visible in the community

and turn its attention outwards from an inward- looking, power building movement

for solidarity towards pressing for recognition). In this model it is not the dissatisfied

consumer but the participant in the decision making process that speaks.
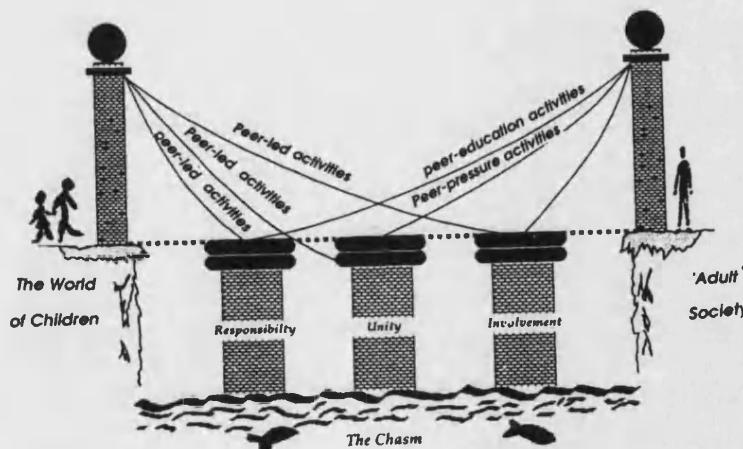
Figure 2.1: The Bridge of Participation

Mary John argues that these pillars must be put in place before the chasm between

the world of the child and world of the adults from which they are initially excluded

in any powerful sense can be spanned.

"They move from the solidly established base of their own in group politics to negotiate and collaborative activities with adults. At this point there is a radical change in the character of the operation- the pillars are in place and the collaborative work of spanning the chasm can begin. Thus a bridge can be built which involves firm foundations within the group and for its ultimate success, the collaboration of both parties "

(John 1996, pp 21)

In considering the form this collaboration might take, John outlines different types of

peer partnership activities (based on Penny Townsend's characterisation) such as

Peer pressure (members of the peer group are used to put pressure on other members

relying on the internal politics of the group); Peer education (young people used to

educate their peers but the script for such education has been determined by adults)

and Peer led work where this sort of work is concerned with delivering messages

arising from the insight and concerns of the peer group but using adult supplied

resources, skills and training to address the issues and facilitate the work. It

demonstrates children guiding and focusing adult thinking

The bridge building as a model for the participation of children is a useful one as it

underlines the individual, collaborative and negotiate elements of the process- a

process in which children are not passive but active constructors.

This model is useful in drawing attention to the perceptions of children towards the

process. However it has remained mainly theoretical and has not been tested in the

field with empirical data.

Participation as power: This conceptualisation of Participation is elaborated by Ian Butler and Howard Williamson in their article ' Safe'?: Involving children in child protection. Based on findings of a study of 200 children and young people aged between 6 and 17 to understand how child protection procedures and social work practice should alter in order to reflect children's own accounts of the experience of abuse and of the kind of help children and young people find most useful (Butler and Williamson 1996).
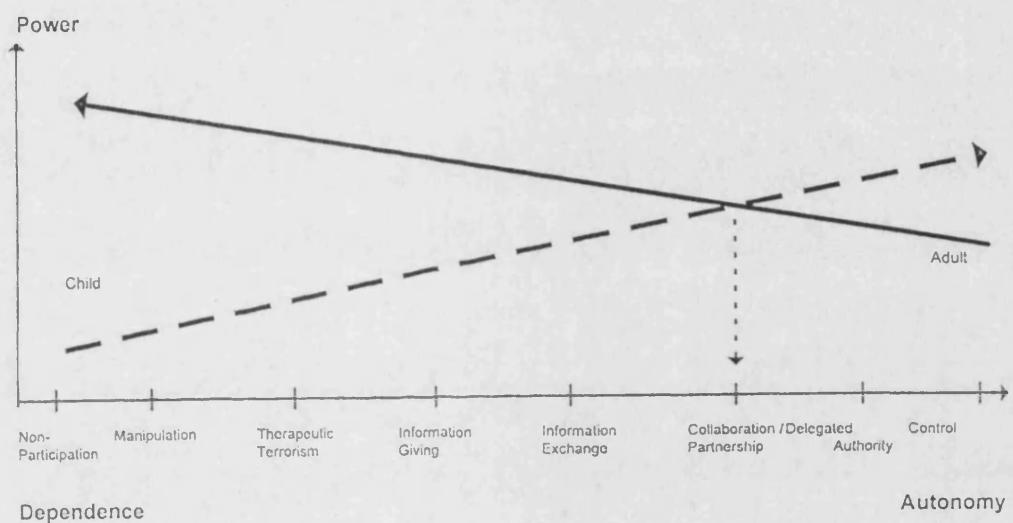
Figure 2.2: The graph of children's participation

They outlined levels of children's participation based on the level of dependence /autonomy and power of children and adults in the situation. These levels are:

o *Non Participation*: This is the passive kind of non participation where a child is simply ignored

o *Manipulation*: This is where a child is only required for forensic or evidential purposes or simply for administrative convenience to play a part in the process

o *Therapeutic terrorism*: This is where the child is 'social worked over' as part of an absolute requirement for them to recover

- *Information giving*: This is a form of tokenism where a chid is told what may happen to them but not given any real choice. Involvement here takes the form of working agreements or contracts which contain lots of things that the child must do, a few that social workers might try, sanctions for the child and absolutions for the social worker

- *Information exchange*: This is where the co-operation begins and the involvement of the child might just make a difference. The child's views are collected, a little like stamps for ritual purposes of doing social work by the book, but the fact that the child is heard does create the opportunity that what is said might be occasionally valued.

- *Collaboration/partnership*: Involvement here means that what the child says, is acted upon, at least in so far as it is permitted to alter the opinions and judgements of the adults involved.

- *Delegated authority*: Involvement here means the child is controlling some of what is happening and wit the active support and advice of a social worker, is being fully consulted on those matters that remain outside of his/her control.

- *Control*: Involvement is wholly on the child's terms and we should be talking about the involvement of the social worker. This could be active non participation either through disruptive, un-cooperative behaviours or simple inactivity through which the child ensure the process grinds to a halt.

While this model highlights the desirability of partnership as a mode of participation, it seems to treat power as a zero sum game and it is only in partnership that the power of children and adults are equal.

Spherical Model of participation: This model was conceptualised by Emmanuelle Abrioux, 1998. By using this model, Abrioux points out in her work with Muslim girls in Kabul that where personal rights for so many woman are restricted, it may appear that there has been only minimal level of participation in involving them in youth activities (Abrioux 1998, pp 25:27). She emphasises that the facilitator's first concern should be for the safety of the people participating in activities: the implication might be that too strong a commitment to a staged model of participation on the part of professionals may on occasion actually lead them to work against the best interests of the people concerned. Johnson et al develops this idea and offers a visual image of the spherical model of participation.

Starting from
no
participation

Starting from a
more
participatory
context
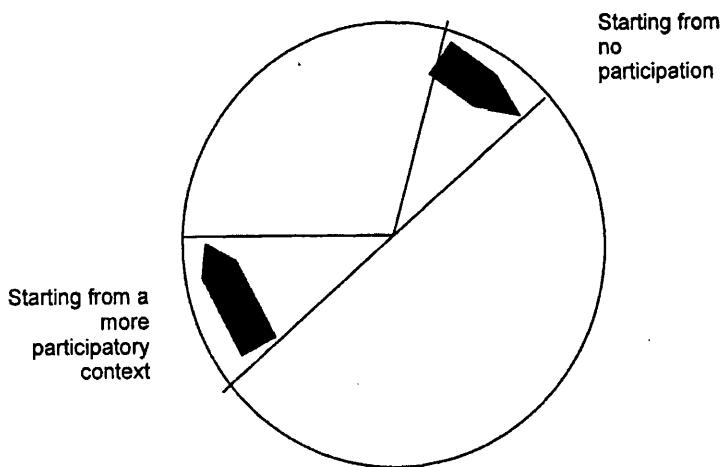
Figure 2.3: Diagrammatic representation of Abrioux's model by Johnson

Johnson points out that it is process and incremental effect on children's lives which will be the measure of the degrees of participation achieved and the measure of success (Johnson, Pridmore et al. 1998, pp 61). The methods of participation and the objectives of a project may be different depending on the starting point on the model. The aim of the sphere is to shift the focus onto the degree of movement rather than an absolute position on a scale.

The climbing wall of participation: This has been developed by Nigel Thomas, and Claire O' Kane. The authors point out that the images of bridges and barriers to participation are more helpful in thinking about what facilitates participation rather than what it is.

> *However the idea of a wall – not as an obstacle or boundary but as a construction... can extend both laterally and vertically and within limits it can also extend unevenly at different points*

(Thomas 2000, pp 175)
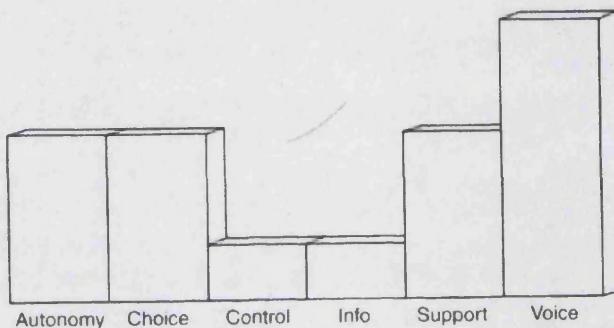
Figure 2.4: The climbing wall of children's participation

The authors outline the following components in measuring the level of

- The choice which the child has over his or her participation

- The information which s/he has about the situation of his/her rights

- The control which she has over the decision making process

- The voice that she has in her decision

- The support that she has in speaking up

- The degree of autonomy which s/he has to make decision independently

This model is useful to think about what is involved in giving children an effective part in individual decisions. However as with some other indicators, at an organisational point of view, it does not distinguish between types of decisions that children may be involved.

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The grid of children's participation: Nananda Reddy and Kavitha Ratna from the Concerned for Working Children, India suggest the metaphor of a spiral instead of a ladder in conceptualising children's participation.

> *"These roles are neither watertight compartment nor are they purely black or white scenarios. We have seen adults play all these roles sometimes intentionally or unintentionally. It is possible that the same group of adults play one or several of these roles with the same group of children or different groups of children at different times"*
>
> (Reddy and Ratna 2002, pp 21)

They suggest that children's participation should be understood on three dimensions: Firstly the nature of participation which could be representing oneself, represented through the organisation, representing the organisation. Secondly the structures of participation which could be: informal interaction, informal consultation, formal consultation and formal joint decision making and thirdly who initiates participation which could be: adult initiated, child initiated or joint initiated.
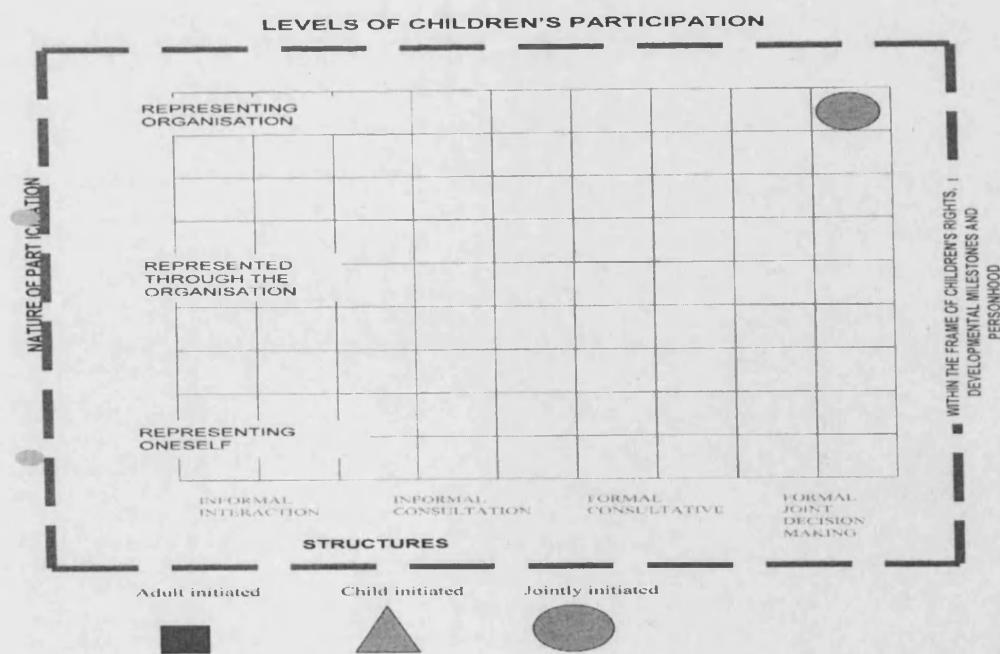
Figure 2.5: Grid of children's participation

This is a model that has been tested in organisations in India but is not very useful to draw comparisons between the levels of participation amongst organizations.

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Spider model of participation: The Save the Children Alliance global interest group on child-led initiatives and organisations has developed a tool for assessing child-led organisations that has been given form by Clare O'Kane. The 'spider' tool consists of key quality elements against which child led organisations can be measured. Each of the quality elements comes with a set of indicators or benchmarks that have been grouped into four levels ranging from low to high achievement. In determining how best to move towards the future ideal, the spider tool is used both as an assessment and a planning tool (Theis 2004, pp 125) .
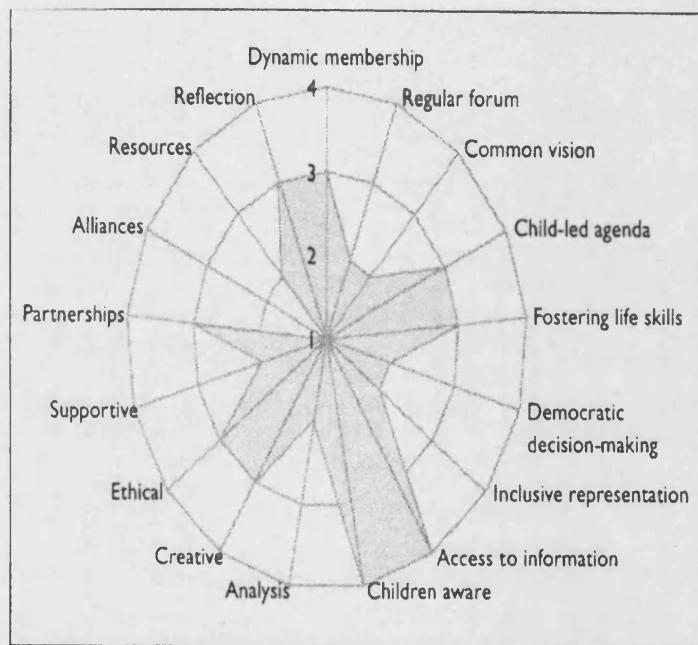
Figure 2.6: Spider of children's participation

The Alliance emphasises that benchmarks should be generated and agreed upon through a participatory process that involved children and adult stakeholders.

This model is very useful in formulating yardsticks for measuring performance; however for the purpose of this study, the 18 indicators are very exhaustive.

Participation in different stages of the programme: Joachim Theis, from Save the Children has devised some scales based on the experience of Save the Children. He outlines two of these in the Save the Children Handbook (Theis 2004). An evaluation of Save the Children's work in Cuba assessed the levels and quality of children's participation in project activities. One of the tools used in the evaluation demonstrates the use of a scale to identify current practice and to set targets for future action. This is illustrated below:

Holguin project (as assessed by project workers)

A = current level of child and youth participation
B = planned level of child and youth participation

Children's and young people's involvement in:	Levels of child and youth participation			
	Not involved	Receive information and services	Provide input	Responsible for planning and action
Planning the service or project			A	B
Recruiting staff	A			B
Selecting leaders and volunteers			A	B
Project management	A		B	
Delivering the service			A	B
Reviewing and evaluating the service			A	B
Training and peer education			A	B
Policy advocacy work	A		?	

Figure 2.7: Assessing children's participation in projects

In the example below, practice standards have been ranked/scored. This is a simple and flexible tool that can be used with different stakeholder groups to discuss and agree on quality standards for children's participation.

Comparing two child participation activities (A and B) against quality standards

Attributes of child participation	Low			High
	1	2	3	4
Transparent, honest, democratic and voluntary approach		A	B	
Equality, inclusion, non-discrimination and fairness			A	B
Child-friendly environment	A		B	
Child participation is appropriate to the child's age and maturity		B	A	
Enhances the child's personal development		A	B	
Ensures and promotes child safety and protection			A	B
Staff are competent and effective		A	B	
Follow-up and feedback	A			B

Figure 2.8: Tools to Compare levels of child participation activities

In these tools, especially the second one, it is possible to compare the participation of children in various activities of the organisation.

Based on a review of the ways to evaluate children's participation, I identified three

main sets of meanings associated with participation

	Children's movement	Children represented through NGOs	Children representing themselves in individual decisions
Models	Bridge Grid	Ladder Sphere Spider Phases	Graph Wall
Meanings	Participation is to encourage/facilitate children to organise themselves to bring about change	Participation is to provide an opportunity for children to work with adults to influence change in services and policy	Participation is a negotiation between adults and children
Themes for the research	Motivation for participation for children and adults	Creating benchmarks for levels of participation at different stages in the project	Role of frontline workers in individual decision making

Table 2-4: Implications of the models on children's participation

I have drawn from these models of evaluating children's participation in the

following ways:

- Whilst talking about participation as children representing themselves, I realised

  the importance of motivations of both children and adults in the participation

  process.

- From the models on participation through NGOs, I adopted the framework of

  evaluating the level of children's participation at each stage in the project

- Whilst I am not concentrating in this research on the individual decision making

  process, I have drawn on these models to understand the kinds of decisions that

  frontline workers are more comfortable to allow children to participate more than

  others.

In the next section, I shall now review the key studies that have been undertaken to

understand the role of children's participation in affecting project outcomes.

2.3 Studies on the impact/outcomes of children's participation

There have been very few studies that have attempted to understand how children's participation has affected project outcomes. In my literature review, I came across four studies in the last few years that have examined these aspects. I have highlighted the main findings from these studies below:

Evaluation of children's participation	Key Findings
Building a Culture of Participation: Perpetua Kirby et al, 2003 (Database of 150 organisations, 29 case studies in UK)	Low level of evidence but participation led to - improved service development, improved client support, improved access and utilisation of services and increased participatory practice
Children changing their world: Plan International, 2004	Positive- Mostly impact in the individual realm, some impact in familial and

(a) Building a culture of participation: Involving children and young people in policy, service planning, delivery and evaluation by Perpetua Kirby, Claire Lanyon, Kathleen Cronin and Ruth Sinclair., December 2003 (Kirby, Lanyon et al. 2003). The study had five main components: formation of a Young Advisory Group and training young researchers, establishing a database of 150 organisations, selecting case study projects, 29 organisations, conducting the case studies and analysing the data. The authors note that there were several reasons why the cases studies did not have more evidence of outcomes: some organisations felt that it is too early in the development of participation work to measure outcomes ; where evaluations do exist, they are often descriptive accounts of the organisation's work rather than attempts to measure the outcomes that participation has achieved; it is difficult to measure some possible outcomes, such as increased self-esteem and confidence; it can be difficult to make causal links between outcomes and participation activities.

The authors also speculate that many agencies, having accepted the principles of participation, have viewed this process as an outcome in itself and have therefore concentrated efforts on reflection of the process of participation rather then what may be achieved through the process. The authors analyse the following outcomes of participation:

- *Improved service development:* the study found evidence of instances where young people had been involved in changing the design of elements of service and resources. Changes often centred on physical site improvements, particularly play and leisure facilities. Young people often suggested changes to services such as

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improved food, visiting hours, sanitary or toilet arrangements. In some cases, new services had been introduced by organisations to satisfy the expressed demands and needs of children and young people, in order to fill existing gaps such as youth centres, information centres and leisure facilities. New resources have also been introduced: a local authority agreed to publish a booklet for newly arrived young refugees, following a request from the Young Refugee Rights Project. There are several examples where young people have identified their own concerns within service provision. One such project was the Durham County council where a common theme identified was transport. Durham County council agree to spend £100,000 per annum to extend the concessionary fares scheme to young people aged between 14 and 16 years. Another theme was young people's concern for their safety.

- *Improved client support*: There is some evidence from the case studies to suggest that the employment of participatory activities within a learning setting can improve the education attainment of children. Teachers explained how the feel listening to children improves their teaching practice. In previous research on involving young patients in health services, the benefits to staff were seen to include ' the intrinsic value of the points young patients make' and' that staff cannot second-guess what really matters to patients (Lightfoot and Sloper 2002, pp 2). It is also believed that when children are involved in final court judgements that affect them, and understand how and why these decisions are being made, it is much more likely that they will have a greater acceptance of the final decision.

- *Improved access and utilisation of services*: The general impression given by projects is that children and young people have a more positive experience of services, are more engaged and feel greater ownership when they are involved. Also

they use services more and services reflect their needs better. There were several examples where children and young people had expressed that the opening hours of services were not convenient for them and so these had been changed, which helped increased access.

- *Increased participatory practice:* The research has found that many of the case studies have improved their own knowledge of how to involve children and young people and the value of doing so.

(b) Children changing their world: Understanding and evaluating children's participation in development. Study undertaken in Kenya, Ecuador and India by *Lisanne Ackerman, Jason Hart for PLAN International*, June 2004(Hart, Newman et al. 2004). The authors identify four realms (Individual, Familial, Communal and Institutional) that they derive from both direct and implicit discussion in the literature.

o *Realm One : Individual* – The mostly commonly cited impact of children's participatory programmes , particularly for girls is increased self-confidence and self esteem such as dealing with sexual abuse, greater awareness of health issues and ability to voice concerns such as female genital mutilation to parents and other elders. The children also had more useful knowledge as a result of participatory projects. In Kenya, the children from the clubs were very well informed about HIV/AIDS and prevention activities. They were able to engage in an exchange of relevant information with their peers. Children in a Bal Panchayat in Delhi pointed out that via their projects they were more informed about the various services available to them and often had greater familiarity with service-providers than their peers and even their elders. The participatory projects commonly appear to require

and encourage children to develop an array of skills that are likely to prove useful beyond the project activities as well. This may include areas such as leadership, group facilitation, fundraising, accounting, public speaking and skills relating to health and environmental care. One way in which participatory projects seem to promote a sense of personal identity for example is through providing a forum within which older children serve as positive role models. In Kenya, India and Ecuador, projects valued opportunities for interaction between the genders that is often lacking in their everyday lives.

o *Realm 2: Familial-* In all the countries, children's participation seems to lead to better understanding between parents and children as well as greater dialogue around the challenges faced by the family. In India parents emphasised children's heightened understanding of the difficulties faced by the family and said that children were increasingly willing and able to share burdens and responsibilities. In field visits both children and parents described how the enhanced knowledge and skills children had gained through their involvement in projects had enabled them to contribute more effectively to the well being of the household.

o *Realm3: Communal-* Participatory projects provided important opportunities for the building of strong bonds of friendship and solidarity among children. In Ecuador, adolescent girls explained how the project was a space for developing solidarity, friendship, sharing affection, getting support, building networks and giving protection. Children in projects visited in India suggested that community awareness about issues such as early marriage, child marriage, female foeticide, child abuse and alcoholism has dramatically increased thanks to the efforts o the Bal Panchayats throughout the country. The projects also resulted in the enhancement of relationships between adults and children in the community. Graduates of one Bal

Panchayat in India explained that having proven their newly developed capacities, key resource people now take their concerns seriously and are happy to work with them to improve children living conditions within the community.

o *Realm 4: Institutional -* The researchers did not find any significant impact at the institutional level and they looked at improvements in schooling, enhanced processes and institutions in governance and better functioning of agencies

The authors were also alert to negative impacts. In one Indian village, they noted a case of potential conflict of interest. The members of the Bal Panchayat were active in efforts to prevent the cutting down of trees for use as firewood in the local tobacco curing industry. However, for the parents of the some these children, this industry was the source of their livelihood.

© **Children's Participation and Policy Change in South Asia by Emma Williams, (2004).** This report compares five case studies: an HIV/AIDS conference in Nepal; the 2001 children's parliament in Sri Lanka (both of which were one- off interactions); two Indian working children's unions, and a children's movement in Bangladesh which raises issues of importance to street and working children (Williams 2004). The paper shows that children have been most successful in influencing local – level decision making which does not significantly challenge society's power relations, although it should be recognised that the idea of children being taken seriously on public policy issues in itself challenges age hierarchies. Policy spaces which have developed more slowly and have become institutionalized have greater potential for long term influence over, and change, in policy than one-off issue –based confrontations, although these may be the only route to influence

some more controversial issues. Children have enforced accountability most effectively when there are formal mechanisms in place for tracking the implementation of decisions in which they have been involved. The key findings of the paper are:

- Despite the widespread rhetoric of empowerment and policy influence, only a few of the groups or organisations reviewed for this study actually appeared to have had an observable influence on policy at any level. Often, influence was limited to local decisions rather than policies.

- Children and young people in all five case studies have engaged most effectively with policy makers at the agenda setting stage

- One of instances of engagement between children and young people and policy makers generate more media attention than long-term processes of engagement, but less in the way of sustainable change. However the nature and extent of media involvement depends on the type of issue concerned.

- Of the five case studies, the strategy adopted by Bhima Sangha (a working children's union in South India), of working through children's councils linked to village councils, offers the most sustainable and comprehensive channel for policy influence. However it involves a trade-off between the level of engagement, which remains local, and the sustainability of access to decision-makers. While effective for decisions about local development planning, it may not be so effective at achieving change in wider policy issues.

(d) Measuring the Magic: Evaluating and research young people's

participation in public decision making (2002) by Perpetua Kirby with Sara

Bryson (Kirby and Bryson 2002). The report examines the evidence for what works.

The report focuses on evidence from 27 studies undertaken by academics, independent researchers as well as self evaluations in the UK. The key findings of the research are:

Regarding the impacts of participation

- *Public decisions*: Whilst young people are increasingly being involved in participatory projects, the evidence from existing evaluations is that they are still having little impact on public decision making, although this varies across contexts and between different types of organisations. Few evaluations have looked at the quality of the decisions made (or influenced by young people).

- *Wider community:* Little attention in evaluations is given to how adults (facilitators and decision makers) benefit from their involvement in participatory projects. There is some evidence that good youth participation work helps increase dialogue and relations between young people and adults, and between peers. Undertaking participatory work can help to promote the importance (and means) of involving young people in the community.

- *Young people:* There is substantial evidence that good participatory work benefits the participating young people, but that token involvement may not. This includes confidence, self-belief, knowledge, understanding and changed attitudes, skills and education attainment. Young people also benefit from having fun and making friends.

How decisions were improved by involving children?

- Increased knowledge about young peoples views and needs

- Improved quality of decisions (based on careful consideration, informed by accurate information, accurately reflect the needs of young people, are affordable to implement)

- Adults can give more effective care when they use information from children. Encouraging children to share in solving problems can channel their ideas and energy and they unique viewpoints into finding better solutions.

- Groups of children have continued to be abused when no adults were willing to listen to them

- Talking together while making decision can help to prevent misunderstandings or disagreements and children becoming anxious, or resisting what might be done to them

- Habits of consulting increase mutual trust can decrease rivalry, rows, violence and stress and provide effective ways for groups to cope with problems that arise.

- People are more committed to decisions which they have proposed and agreed, and they will want to make them work

- Sharing responsibility for making informed decisions like how to spend budgets helps children to know more about the value and the limits of funds and resources. Learn well to work in groups

- Learn to think creatively, critically and independently

- Helps them to be and become more responsible

The research studies that have been undertaken helped me conceptualise as to how I could study the role of children's participation in affecting project outcomes in the helpline in the following manner:

o Most of the studies have concluded that participation has benefited the participating children but not really other children. They have explained the participation of children has not really influenced policy changes that would affect services for a greater number of children, especially those children not participating directly in the project. As the helpline works with individual children as well as conducts training workshops and in engaged in advocacy, the setting would enable me to examine the role of children's participation in all these aspects.

o Each of the research studies studied a different level of impact. Most of the studies have focussed on evaluation of outcomes though the study conducted by PLAN did look at evaluating the change in children's lives due the project. In the helpline setting, drawing on the studies conducted by Perpetua Kirby et al, I decided to focus on evaluating the project outcomes in terms of the objectives of the helpline: responding to children; training with the allied systems and advocating for children's services. Thus, in the study I do not study how individual children were benefited by participating, but evaluated the service in terms of strategies of the helpline in delivering the service, supporting children and the access and utilisation of the service by children. I was not able to study the impact in terms of change to children's lives due to the lack of baseline data and the time frame of the study.

o In my research, I would attempt to draw linkages between participatory practices and outcomes as many studies pointed out that further research is required to better understand the relationship between the two aspects.

In the next section I review factors that influence the level of participation

2.4 Factors that influence the level of children's participation

In this section, I review the literature to highlight the factors that influence the level of children's participation, especially in a developmental organisation. I have summarised the key factors that I have identified in the table below:

Factor	Issues involved
Cultural Context	Is the culture supportive to children's voices being heard?
Resources available to the organisation	Does the organisation have the time, finance and human resources required to invest in children's participation?
Skills of frontline workers	What is the range and level of support that frontline workers offer and what are their training opportunities?
Structure of participation	Is the participation representative? Do children have access to information, ways to complain and opportunity to access the service?
Relevance of project to the children	Do the children feel the relevance of the project to their lives? How do children feel about being helped by professionals?
Attitudes of frontline workers	How do they implement the evolving capacities of children and determine the child's best interests?
Management Style	Is the organisational culture flexible, consultative, innovative and what is the vision of the senior staff

Table 2-6: Summary of factors affecting the level of children's participation

I shall now briefly highlight the explanations offered in the literature as to how these factors influence the level of children's participation in projects. In my research study as I shall outline in Chapter 3, the cultural context, resources available , skills of the frontline workers and structure of the participation are similar. Hence I shall focus in greater depth on understanding how the other factors influence participation.

Cultural Context: It is widely acknowledged that to facilitate child participation, there is a need to actively raise the status of children within the community (Pridmore, Rachel et al. 1998, pp 153) How professionals interact with and on behalf of children is subject to a wide range of influences. On the one hand they can be the product of professional training, but on the other may be also the result of a more general societal attitude towards children (Freeman, Henderson et al. 1999, pp 81). In their report Understanding and Evaluating Children's Participation, Lisanne Ackerman and Jason Hart recommend that organisations conducting participatory programmes with children therefore need to bring parents and other adults in the community on board from the very beginning to ensure transparency and the cultivation of trust, sufficient to overcome such barriers(Hart, Newman et al. 2004).

Resources available to the project: Most of the studies on factors also indicate that sufficient resources are necessary for participation in terms of time, finance and human resources. (Lansdown 2001)

Skills of the frontline workers: In terms of the support offered by agencies, the provision of effective and appropriate facilitation is a particular priority (Reddy and Ratna, 2002; Hart J, 2002). Agency staff need to be able to adapt the level of support to the needs and interests of different individuals and groups. The agency literature has made it clear that in many contexts staff lack capacity and skills in facilitating and communicating with children and have difficulty supporting children's participation. Similarly the knowledge of how to bring the results of consultation with children effectively into decision making and planning was also raised as a concern (Mayo 2001, pp 286). This is due to a number of factors: lack of good

quality training manuals, a dearth of field staff with expertise, difficulty replicating training and management and co-ordinators who offer little support. Overarching all these concerns is the problem of staff turnover and the likelihood of learning, trust and institution memory being lost due to the perpetual cycle of staff turnover (Kirby and Bryson, 2002).

Structure of participation: Judy Cashmore in her research with children and young people in care pointed out that the level of children's participation is affected by the ways in which the service is structured(Cashmore 2002, pp 841). This includes: the opportunity and choice of ways to participate; access to relevant information; a trusted mentor; ways to complain; policy and legislation that require children and young people to be consulted; and ways for services to evaluate their performance.

Relevance of the project: There is also evidence in the literature of organisations working with children that there is greater participation where children perceive the project to be relevant to their daily lives.

Attitudes of frontline workers: The attitudes of the frontline workers to children's competence and best interests have been highlighted as key determinants in affecting the level of children's participation at the project level(Hill 1999; Alderson 2000). In her research on exploring attitudes, Alderson highlighted the following points which I have classified into the competency and best interests issues.

In principle it is the right thing	In principle it is the wrong thing
Competence of children	
- Children like adults have the right to be consulted and to express their views (UN, 1989) - Formal consultation methods show the adults good faith and concern for principles of justice and respect - To consult children respects them and thereby sets examples which help them to respect themselves and other people as part of the duty of care which adults and children have towards others	- With young children, the pretence of democracy is irrelevant to them - To consult young children is to confuse and worry them and the duty of care means just that- adults caring for children by not passing responsibility on to them, but letting them enjoy some years of carefree innocence. - Responsible staff insist that children keep to the standards expected by the average parent and they are accountable parents, tax payers and to the colleagues not to children
Best Interests of children	
Talking and listening help children and adults to see which plans problems and values they share and	- The views of young children are unreliable - Children have the right to be protected by adults and to rely on them. A duty to consult children is

The debates in the literature regarding the child's competence and best interests that I identified are outlined below:

- *The right of children to decide:* It is questioned whether children are incompetent at making decisions for themselves and whether adult professionals are competent at making decisions? Phillips argues that there is no proof for adult rationality(Phillips 2000, pp 25). While some workers explain that children do not have the experience or skills to participate, Carolyne Willow of the National Children's Bureau, UK, argues that if children are not allowed to make decisions because they have no experience of decision making, how do they ever get started (Willow 1996). She outlines how a self-fulfilling prophecy can result where adults believe young people cannot make decisions and we therefore do not help or allow them to make decisions which leads to a situation where young people do not have the skills or confidence to make decisions and this reinforces our view that we were right: young people cannot make decisions. Many argue that children are not equipped with the skills to take part in the adult work of more formal decision-making. However other commentators have demonstrated that there are other methodologies possible to enable children to participate. Additionally it is stressed that participation does not mean child beneficiaries are left to themselves. Vygotsky showed that many of the decisions affecting children are at a level of difficulty he called the zone of proximal developments during which adults/peers play an important role. He argued that children's participation does not mean supplanting adults but rather that participation is a dynamic process.

- *Assessing the child's capacity:* While one argument is that competence increases with age- do people linearly increase in competence as the years pass? What test would there be to indicate competence? Some authors have suggested that it would be hard to find grounds on which all adults passed and all children failed. How do we decide which child is competent? Does competence need to be measured on a case-to-case basis then? There is a need for a framework to guide these decisions though some human rights activists have also questioned whether adults/children should be subject to evaluation by outsiders before they can be conformed competent at making decisions affecting their lives. A more scientific justification based on Piagets work claims that children lack the ability to understand multiple perspectives: to see things from someone else's point. Rogoff in a study of 50 non- industrial countries indicates that the most common age for beginning of responsibility for looking after livestock and even caring for younger siblings is about 5-7 years and that working children contributed about a third of the family income. (Rogoff, Sellers et al. 1976). Different professionals in the same context may have different opinions.

- *Defining the child's best interests:* The notion of ' best interests' is not without problems in itself(Thomas and O'Kane 1998, pp 138). The principal difficulties experienced by it may be described as the problem of indeterminacy (we cannot know what is in the child's best interests or what values are important) and the problem of culture (one culture may not be accepted by another and children may have an interest in being part of that culture which may have to be balanced against their other interests. Participants often admitted that they were thinking as much of their own interests as of the child. Mnookin made the point 'many decisions are

made because of organisational considerations' but justified under the vague rubric of best interests'(Mnookin 1976, pp 273:274)

- *Balancing the child's best interests* and capacity: Does one look at short or long term perspectives, each of which may throw up different answers. Schofiled and Thoburn argue against those who imply that it is a question of balancing the child's wishes and feelings against their best interests and contends that good practice consist in bring the two together?. They argue that "it is likely that we are deciding between a range of options, each of which will meet some but not all of a child's needs and some not all of her wishes(Schofield and Thoburn 1996, pp 18). Not simply asking the child to give their view of a complex situation, but the subtle and sensitive work may be needed to elicit the child's wishes and feelings in their proper context.

Management Styles of organisations: The literature on children's participation highlights some evidence of (a) organisational barriers to children's participation, and (b) processes undertaken by organisations to encourage children's participation. In this section I review this evidence to identify criteria to better understand the management style of the organisations implementing the helpline in my research.

A lack of genuine senior level commitment to democratic, participatory approaches is commonly cited as a fundamental factor contributing to failure of participatory programmes (Theis 2004). Children's participatory programme are seen as time consuming, requiring a high degree of staff involvement and alertness, which is perceived as a heavy burden on staff (Reddy and Ratna 2002). It has been shown that

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barriers to children's participation are rooted in the complex and bureaucratic nature of organisations and internal politics (Cavet and Sloper 2004). They highlight that these include: short term nature of some thinking and funding; hierarchical, non-democratic structures within agencies; lack of systematic support for staff; little promotion of democratic process and donor funding which does not offer the flexibility to develop genuinely participatory processes(Cavet and Sloper 2004, pp 616).

Kirby, Lanyon et al (2003) in their research study entitled 'Building a Culture of Participation' report that for many agencies, children's participation is a new concept and way of working. The authors point out that there are different cultures of participation and organisations need to be clear about their reasons for undertaking participation. Some organisations are focussed on doing consultations to develop their services and products, some undertake isolated participation activities whilst others develop child/youth focussed organisations which put children's participation, at the heart of what they do. While they acknowledge that all have a place in enhancing children's participation, it is only the latter that creates a culture in which it is automatically assumed that all children and young people will be involved in any decisions affecting their lives.

The authors also point out that even organisations that have been working to support children's participation for many years have not yet, necessarily, developed the skills necessary to document and reflect critically upon their own experiences in order that they and other may learn. Inevitably there is also considerable pressure for organisations to be seen as successful, particularly in front of potential donors. Therefore, many of the

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most valuable learning experiences, which come out of apparent failure, may not be shared openly for the benefit of all (Kirby, Lanyon et al. 2003).

In the evaluation of children's participation in development by Plan International in 2004, the authors point out that paternalistic organisations cannot make children participation work (Hart, Newman et al. 2004). They identify certain criteria in organisational processes that have helped mainstream children's participation. These included:

- Staff selection where field staff were selected in light of the conditions that prevail in the particular locations where projects are to be pursued.

- Involvement of children in agency governance

- Interaction between agencies benefited the organisation as this led to a more open discussion on the strengths and weaknesses, success and failures.

- Vision and Commitment of senior staff that reflected the transformation from a more traditional, top-down management style to a more democratic style of leadership.

Blackburn (1998) stresses that the true challenge of participation is in organisations transforming themselves (Blackburn 1998, pp 168). This includes a profound change in an institution's prevailing attitudes, behaviours, norms, skills and procedures (Thomson 1998, pp 108). Kirby et al (2003) point out that change needs to happen at: senior management level to get their backing for the new ways of working; at the grassroots with staff who engage with children and young people on a daily or regular basis; at the policy level to ensure participation becomes an openly stated and expected part of the way the organisation works. They also explore factors that have helped organisations to

institutionalise children's participation. They identify four key phases in the process of developing a learning organisation. The key characteristics of these phases are summarised in the table below:

Unfreeze	• External pressures and internal drive
	• Highlight need for change
Catalyse	• Identify existing champions
	• Establish new champions
	• Build senior management support
	• Develop a vision and commitment
	• Organise and plan for change
	• Develop partnerships and networks
	• Involved children and young people early on
	• Identify funding
	• Understand culture and politics of organisations
Internalise	• Communicate and develop a common vision
	• Develop understanding of participation in practice
	• Build capacity
	• Motivate and sustain
	• Acknowledge conflict and opposition
	• Be organised
	• Reflect and evaluate
Institutionalise	• Scale up , out and onwards

In my research, I have drawn on this literature to better understand the management styles at the organisations operating the helplines. While the helpline has a common national policy regarding the selection of staff, funding and children's participation in the governance structure, I identified the following factors that varied amongst the organisations that could reflect the participatory management style of the organisation. These included:

- Level of delegation to the co-ordinator: In each organisation operating the helpline, the director of the organisation delegated differing responsibilities to the co-ordinator of the helpline.

- Staff- management interaction: The organisations also differed in terms of how decisions are taken at the organisation and the involvement of all staff in reviewing and reflecting on policies of the organisation.

- Networking with other agencies: The organisations also differed in their willingness to network with other agencies.

- Vision of senior staff: The directors of organisations also had differing views on the need and purpose of children's participation.

Based on these indicators I have examined the management styles of the four organisations operating the helpline and the key findings regarding the management style of the organisations are analysed in Chapter 6.

In this research study, I will explore some of the themes discussed above in examining the relationship between the helpline frontline workers and children calling the helpline. Whilst I acknowledge that the factors such as the cultural context, resources available and skills of the frontline worker also influence the level of participation, these factors as I shall highlight in Chapter 3 are quite similar across the four helplines, though there would be differences that affect the level of children's participation. In order to understand the variations amongst the helplines in their levels of participation, I attempted to study: the perceptions to the competence of children, perceptions about the best interests of children and management style of the organisation.

2.5 Developing an analytical framework for the research

I have drawn on the literature reviewed, to base my assumptions upon which I undertook the research as well as identified the themes that guided my analysis. In this section, I attempt to outline the assumptions and themes that I have drawn from the literature. I have summarised this in the table below:

Children's perception of relevance of the project	Frontline workers perception to children's competence and best interest	Other factors (not studied) Culture Resources Skills	Management style/nature of the organisation

Understanding and Implementation of participatory activities

- Meanings
- Motivations
- Fears/Dilemmas

Level of children's participation

- Planning
- Implementation
- Monitoring & Evaluation

Organisational Outcomes

- Responding to calls from marginalized groups of children
- Training with Allied systems (Police, Doctors)
- Dialoguing with local authorities

Figure 2.9: Analytical framework of the research

Based on the analytical framework that I drew from the literature, I was better able to understand how children as social actors are shaped by the structure of the environment but also have the agency to bring about change in their environment.

Children as change agents: The level of project outcomes could affect the degree of relevance perceived by children to the project which in turn could lead to greater participation of children in the project. This in turn could lead to a change in the frontline workers perceptions to children's capacities and best interests. Additionally a renewed understanding of child participation amongst frontline workers could also lead to changes in the organizational culture.

Themes for the research: The themes that I identified to guide the research include:

- I am trying to draw linkages between the level of participation and the level of project outcomes

- I am studying the factors that could vary the level of children's participation namely the frontline workers understanding of the child best interests and perceptions to competence and the organisational culture. I attempt to understand if there is a link between these factors and the level of participation.

- I attempt to understand how the factors vary the level of children's participation

- I also attempted to understand if children's involvement in the project changed the frontline worker's perceptions of children's competence and best interests.

In the next chapter on my methodology, I elaborate on how I have translated this approach into a strategy for data collection, analysis and the ethical considerations that guided my research.

3 Researching children's experiences

: The approach & strategy for data collection and analysis

In the previous chapters, I have outlined my research questions, and reviewed their relevance to the literature on children's participation. In this chapter I now focus on the issues I faced while translating the research questions to my field work setting and the process I followed to analyse the data collected from my field work to arrive at my conclusions.

I have subdivided this chapter into eight sections. The first section on the research design for the study contains the overall approach to answer the questions. In the second section, I describe the characteristics of the four helplines and the children and frontline workers that I met during my field work. In the third section, I explain the indicators used to measure children's participation and project outcomes. In the fourth section, I examine the ethical concerns whilst undertaking the research. In the fifth section, I provide an overview of the data collection process. In the sixth, I describe the tools and techniques used for data collection. In the seventh section, I describe my experience of data collection with the frontline workers. In the final section, I detail the audit trail process I followed whilst analysing and writing up my findings.

3.1 The Research Design

"Research design is concerned with turning research questions into specific projects"

(Robson 2002, pp 79)

As outlined in Chapter 1, my two key research questions were: (i) to explore whether projects with higher levels of child participation had better organisational outcomes and (ii) to understand the factors that enable or constrain children's participation in an organisational setting. As I shall elaborate below, I chose a flexible research design, using the case study method of a child helpline, operating in four cities in India in my attempt to answer these questions.

3.1.1 Locating the research question to the field

As mentioned in Chapter 1, the research question emerged from the field and the choice of setting thus influenced the way in which I attempted to answer the question. I perceived that the helpline setting provided me an effective arena to address my research questions for the following reasons:

- The helpline which started in 1996 was the first such service in the country, where children could call, when they want. This was thus an innovative service and I would be able to understand the experiences of children and frontline workers in responding to calls where children called, identifying their need.

- The helpline operates on a franchise model. There is a national co-ordinating agency (called CHILDLINE India Foundation) that is responsible for supporting the development of the helpline service across the country. This support includes: identifying local organisations to operate the helpline, training the team

members, monitoring the quality of service, branding the image of the service, conducting national awareness, research and document and policy development. The local organisations were responsible to implement the project based on the guidelines of CIF. This model was thus relevant as it provided me a framework of common aspects between the local helplines which would enable me to focus on variations in project effectiveness, more clearly.

- The helpline works at three levels at the city/district level. The first level is to respond to calls from children by addressing the emergency need and linking the child to long term care. The second level is to work with the allied systems- police, doctors, and juvenile justice personnel to develop avenues of collaboration. The third level is to meet with the local authorities to brief them on the problems faced by children to get more resources and change attitudes towards children's issues. I would be able to understand the role of children's participation at each of these levels.

- The helpline aims to reach out to the most marginalised group of children in each city. The groups of children that the helpline aims to reach out to: children on the street, children engaged in labour, child addicts, missing children, child whose families are in crisis, children with disabilities, children who are mentally ill, children in conflict with the law. The setting of the helpline would thus enrich my understanding of the use of participation in addressing children who are most vulnerable in a developing country. In the next section, I elaborate upon the selection of the research design to answer my questions.

3.1.2 The choice of a flexible research design

Robson (2002, pp 84:85) distinguishes between a research design that is fixed (a tight pre-specification before the main data collection stage) and a flexible design (that evolves during data collection). In fixed research designs, the data is almost always in the form of quantitative numbers while in flexible designs, the data is typically in the form of words and non numerical. This research seeks to understand experiences and attitudes to children's participation as well as outcomes of service. Since I am concerned with exploring children's and frontline workers responses and the processes, which influence these responses, I selected a flexible research design for this study. The key factors that influenced the choice of a flexible research design for this research study are:

- The questions to be addressed in this research relate to examining processes leading to outcomes. A flexible research design recognises that realities are multiple since they are influenced by respondent's different identities and perspectives and that there is no objective truth. A flexible research design suggests the use of "unstructured" methods to allow responsiveness to the research setting. Additionally a flexible research design takes into account the role of the researcher as an instrument of data collection.

- The purpose of the study is exploratory to understand a variety of meanings towards children's participation and not on descriptions or predictions.

3.1.3 The case study approach

Robson (2002, pp 165) highlights three particularly relevant flexible research design strategies relevant to real world studies. These include: *Case Studies* (development of detailed intensive knowledge about a single case or of a small number of related cases), *Ethnographic Studies* (that seek to capture, interpret and explain how a group, organisation or community live, experience and make sense of their lives and their world) and *Grounded Theory Studies* (that aims to generate theory from the data collected during the study).

This research adopts a case study approach, which has been defined as,

> "...*an empirical enquiry that investigates a contemporary phenomenon within its real life context when the boundaries between phenomenon and context are not clearly evident. A case study inquiry copes with the technically distinctive situation in which they may be many more variables of interest than data points and one relies on multiple sources of evidence and this inquiry benefits for the prior development of theoretical propositions to guide the data collection and analysis"*

(Yin 2003, pp 13:14)

I selected the case study method as being appropriate to this research on children's participation for the following reasons:

- *A phenomenon in its real life context*: As I was researching how children participate in an organisational setting and the effectiveness of the organisation, it was important to understand the dynamics involved in processes that occurred in the daily lives of children and frontline workers.

- *Boundaries between the phenomenon and context*: The understanding of participation is not only restricted to the helpline setting, but pervades many arenas. Hence the boundary between the phenomenon and the context is blurred.

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- *Multiple sources of data collection*: The tactics of data collection in this research would include observation, focused group discussions, secondary data, interviews and questionnaires which are widely used in the case study approach.

- *Many variables of interest*: In this research, I was interested in understanding how participation was understood by children and frontline workers, how it could be evaluated in practice, what factors influenced perceptions to participation and how effective the helpline was in reaching out to marginalised groups of children. The evidence to answer these questions thus would thus suggest many variables of interest.

- *Prior development of framework:* As there already has been a body of literature developed on the evaluation and impact of children's participation, the framework that I have outlined in section 2.5 in the previous chapter would assist in guiding the analysis of the research.

3.1.4 Selection of the case studies

> " *Each case must be carefully selected so that it either (a) predicts similar results (a literal replication) or (b) predicts contrasting results but for predictable reasons (a theoretical replication) using the embedded unit of analysis approach*"
>
> (Yin 2003, pp 47)

The factors that I took into consideration whilst selecting the case studies included:

- *Time available to conduct the study:* Based on the time available of about 6 months, I determined that I could do an in-depth study of four helplines , spending at least 20 days in a city.

- *Number of years in operating :* The expansion of the helpline across India is outlined below.

Year	January-April	May-August	September-December
1996		Mumbai	
1998			Delhi, Hyderabad, Nagpur,
1999	Kolkata, Chennai	Patna	Coimbatore
2000	**Jaipur, Bhopal**, Varanasi, Goa, Bhuaneshwar, Cuttack, **Puri, Trivandrum**		Ahmedabad, Indore, Vijayawada
2001	Alwar, Lucknow, Kutch, Baroda,Pune, Vishakapatnam, Kochi, Guwahati	Mangalore, Trichy, Shillong	Chandigarh, Allahabad, Ranchi
2002	Udaipur, Kalyan, Kozhikode, Salem, Madurai	Bangalore, Imphal	Wayanad, W. Medinipur
2003	Solapur, South 24 Parganas, E.Medinipur, Jalpaiguri, Nadia	Ahmednagar, Tirunelveli, Agartala	Ujjain, Thrissur
2004	Aurangabad	Nasik	Kota, Murshidabad

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Jaipur, Varanasi, Cuttuck,

en that all these cities would

the CIF team, I chose the four

er to study cities in different

hiruvanthapuram), Jaipur, Puri

As highlighted in the table above, the first major set of h

quarter of 2000 and these included the cities of

Bhubaneshwar, Puri, Goa, Bhopal and Trivandrum. Giv

have a similar development phase and inputs provided by

helplines that I would study from amongst these. In ord

parts of the country, I chose Trivandrum (now called Th

and Bhopal.

3.2 The profile of the cities, children and frontline workers

I have attempted to compare the level of children's participation and the impact of the helpline service across the four cities I studied.   The four cities that I studied included:

- Trivandrum , Kerela in South India
- Jaipur, Rajasthan in North Western India
- Bhopal, Madhya Pradesh In Central India
- Puri, Orrisa in East India
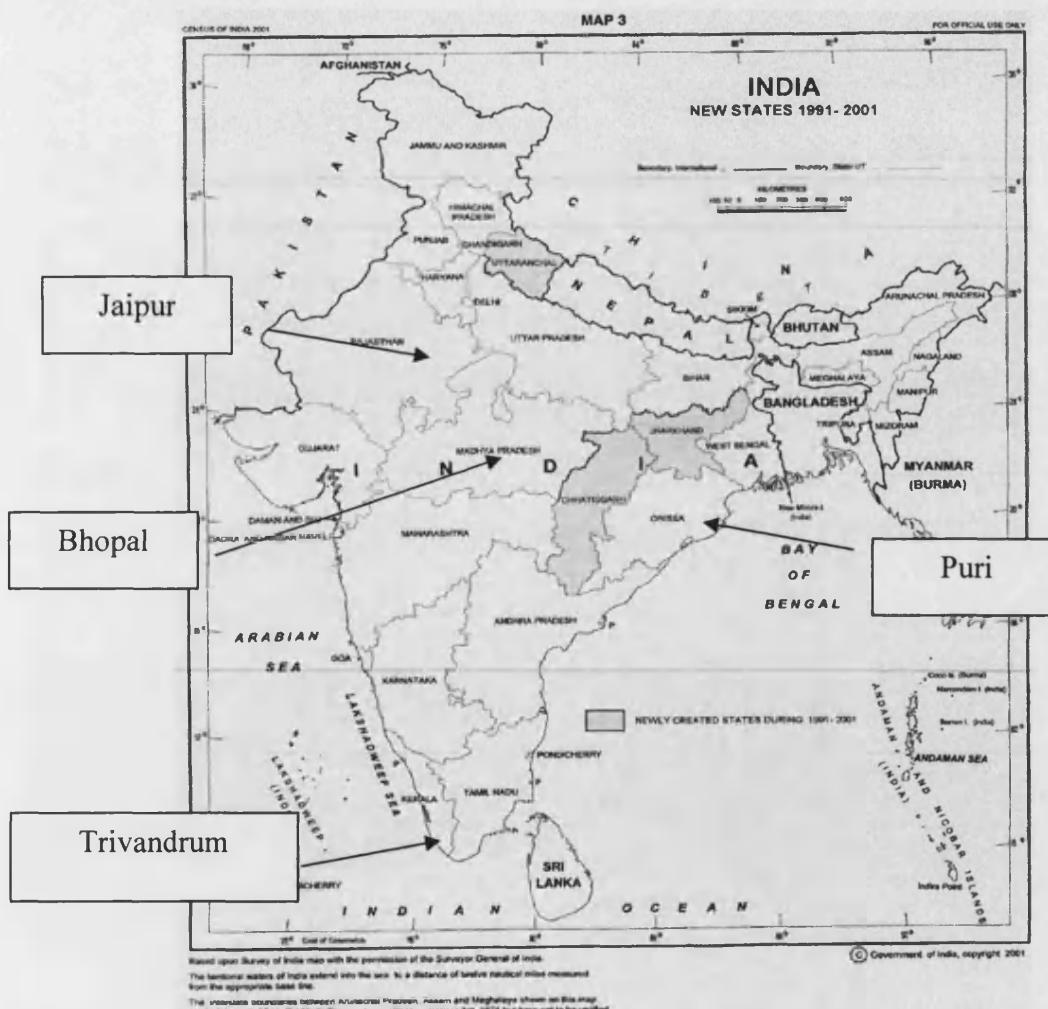
Figure 3.1: Map of India outlining field work locations

3.2.1 Characteristics of the four cities

The four cities that I have selected have the following common features:

- They all started the helpline in April 2000. They have thus all been in operation for four years prior to my study, giving them a similar time frame to create awareness about the service. While I have studied the processes in the service over the past four years, much of the data that I have used is based on the statistics for the year 2003 – 2004.

- They all have similar number of project partners and staff associated with the project. In all the four cities, the organisational structure of the helpline is similar i.e. they have one nodal organisation, one phone receiving center and upto 2 support organisations along with an Advisory Board (comprising of government representatives and NGOs). The full time staff associated with the project in all the four cities is also similar i.e. 13 staff (except in Jaipur that has 14 staff)[1]

- The projects have received similar funding for the helpline project for service delivery and awareness generation. The annual funds received by the cities are: Trivandrum- Rs 5,86,972 (£7820) Jaipur – Rs 6,08,060 (£ 8100), Bhopal- Rs 516140 (£ 6880) , Puri- Rs 4,92,259 (£ 6560)(Source: Billimoria 2004)

- The CIF team has been providing similar training inputs, across the four cities and conducting monitoring and facilitation visits over the four years. CIF conducts two annual visits to the cities and organises one annual partnership meet each for the city co-ordinators, teams and directors. The four cities have participated in these Meets.

- The teledensity of the four cities are similar, except Trivandrum which has a higher teledenisity (Trivandrum – 20.51 ; Jaipur – 11.49 ; Bhopal – 7.33; Puri – 13.51)[2].

  - The child population (0-18) in the four cities varies (Trivandrum – 2,96,000; Jaipur – 8,89,000; Bhopal – 5,00,000 , Puri - 3,67,000) [3]. However the human development index for these cities is similar , except Trivandrum which is higher (Trivandrum – 0.628; Jaipur – 0.492; Bhopal – 0.491 ; Puri – 0.469)[4]

  - The organisations implementing the helpline service have been identified by the CIF as having the necessary resources and infrastructure

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[1] Jaipur has 2 support organisations, Thiruvanthapuram has one and Bhopal and Puri have none
[2] Source : Rajya Sabha Unstarred Question No. 1733, dated 18.12.2003
[3] Source: 1991 Census, Government of India
[4] National Human Development Report 2001, Planning Commission, Government of India

The differences amongst the cities are outlined below and their implications for the research

o *The groups of children identified as marginalised by the city:* In each city, the CIF team along with the directors of the partner organisation identified the priority of the helpline in addressing the needs of different groups of children. I have ranked this in the table below which indicates 1 as the most priority. The concerned organisations have ranked these groups based on their perceptions of the magnitude of the children in each group, in their city.

	Trivandrum	Jaipur	Puri	Bhopal
Street/Working children	2	1	3	1
Children who are physically, sexually abused	1	3	1	2
Children whose families are in crisis	3	2	2	3

Table 3-2: Priority groups of children as identified by the frontline workers

In my research, I attempt to understand the perceptions of the organisation in

3.2.2 The profile of children that I met

The data for children that I use in this research was collected from : my focus group discussions with children, interacting with children during the Open house (a monthly meeting of children) and individually meeting with children.

Focus groups with children: Focus group with children can result in more information generated by individuals who are encouraged to voice their opinions when others do so (Kitzinger 1994; Hill 1997; Hennessy and Heary 2005). In each of the four cities I had six focus group discussions with children. This included:

	Children on the street		Children in slum communities		Children in Institutions		Total
	6-12 yrs	12-18 yrs	6-12 yrs	12-18 yrs	6-12 yrs	12-18 yrs	
Thiru	1	2	1	1	1		6
Jaipur	1	2		1	2	2	8
Puri	1	2	1	1			5
Bhopal	1	2	1	1	1		6
	4	8	3	4	6		25

Table 3-3: Number of focus group discussions conducted

Each group had approximately 15 children (except in the institutions where there were approximately 20 children and with girls on the street which had only 3-4 girls). While some of the groups had boy and girls together, the group discussions with children in institutions and on the street were done separately with boys and girls. This has been elaborated upon in the data collection section with children.   A list of the focus group discussion with children is enclosed in Annexure 1.

The groups included children who have called the helpline or has known about the helpline but not called and in some communities and institutions children had not heard about the helpline.

The characteristics of the children that I had focus group discussions with included:

		Children on the street				Children in slum communities				Children in Institutions				Total
		Th	Jai	Pur	Bhp	Th	Jai	Pur	Bhp	Th	Jai	Pur	Bhp	
Male	6-12 years	12	14	16	15	8		7	6	14	12		9	**113**
	13-18 years	13	16	14	12	9	13	10	12		14		12	**125**
Female	6-12 years					7		9	8		16			**40**
	13-18 years	3	4	4	4	10	9	9	11		12			**66**
		28	34	34	31	34	22	35	37	14	54		21	
		127				**128**				**89**				**344**

Table 3-4: Number of children in the focus group discussions

o *Type of Residence:* I had focus group discussions with children living on the

street, children in slum communities and children in institutions (residential

for a girl to live alone on the street. However in each city I did manage to speak to a few girl children who were under the protection of a man. With children in slum communities, I had focus groups with boys and girls together as they were from the same community. With children in institutions, I had separate group discussions with boys and girls.

Individual interviews with children: I also has a total of 45 individual interviews with children in the four cities that I met during outreach, children who had called the helpline, children who had received assistance by the helpline. The characteristics of the children with whom I had interviews with included:

		Children on the street				Children in slum communities				Children in Institutions				Total
		Th	Jai	Pur	Bhp	Th	Jai	Pur	Bhp	Th	Jai	Pur	Bhp	
Male	6-12 years	2	3	1	2	1	2	4	2	2			3	22
	12-18 years	1	3	1	1	2	1	3	1	1			1	15
Female	6-12										1			1
	12-18 years													2
		3	7	3	3	2		4			4	6	3	3	5
		18				9		43			16				

f Interviews with children

Open House with children: In each city a monthly event organised by each he feedback from children on the service. T 5 had a mix of boys and girls and had , I attended one session of open house that is lpline, in different parts of the city to get he open houses which I describe in Chapter approximately 30-50 children at each open

3.2.3   The frontline workers that I met

During my field work, I interacted with all the frontline workers in each of the cities. There are approximately 10 frontline workers in each city. These frontline workers are responsible for responding to the calls from children and conducting outreach amongst children. There is a centre co-ordinator for each team. Additionally at the nodal organisation, there is a city co-ordinator who is responsible for training with allied systems and in advocating for children's services.

I had 2 to 3 focus group discussions with the frontline workers in each city. Additionally, I had a questionnaire for each of the team members. I also had individual interviews with the coordinator/s in each of the cities. I have described this process in the section on data collection.

In addition to the frontline workers I also interviewed the director of the local partner organisation (collaborative organisation) as well as the director of the nodal organisation.

3.2.4   The CIF team that I met

I also conducted interviews on email, phone and in person with some of the senior members at the CIF based in Mumbai city: who included the executive director, head services and the four staff members associated with monitoring and evaluation for each of the four helplines. .

3.3 Indicators for children's participation and service outcomes

As explained above, in each of the four cases, I attempted to evaluate the level of children's participation and evaluate the project outcomes.

3.3.1 Measuring children's participation across the four cities

As explained in the previous chapter, I have looked at the level of children's participation in each of the four cities by examining children's participation in various aspects of the organisation. Whilst using this approach, it was necessary for me to arrive at benchmarks to enable me to evaluate the level of children's participation in each of the helplines. Whilst constructing these benchmark criteria, I attempted to take into account the nature of the involvement of children rather than the numbers of children involved. The four aspects of the helpline that I identified where children would be involved were:

Planning: The level of children's involvement in the Need Assessment study (NAS) that is conducted prior to starting the service. CIF recommends that children be involved in the planning and implementation of this NAS

Implementation

- Organisational structure: The level of children's involvement on the Board, as frontline workers, as volunteers, in recruiting staff, in training activities

- Individual decision making: The level of children's involvement in calls to the helpline

Monitoring & Evaluation: The level of children's involvement at Open houses and in suggesting changes in practices, policies of the helpline.

Based on children's involvement in each of the phases of the helpline project, I developed benchmarks to capture the range of practices followed by helplines. I developed these based on the lessons from my pilot study, the literature I reviewed and my experience with the helpline.

Criteria	1	2	3	4
Level of participation ———————→				
Planning	Informal consultation with children	Adult led need Assessment study amongst children	Adult led need Assessment Study amongst children and meetings with children to discuss findings	Need Assessment Study conducted jointly by children and adults and meetings with children
Organisational structure	Children only asked to spread awareness on a sporadic manner	Children involved as volunteers, as club members	In addition to (2) Children involved as team members responding to calls	In addition to (2) and (3), Children involved as Board members

3.3.2 **Measuring the outcomes of the service**

In order to measure the outcomes of the service, I have looked at indicators for each of the organisation's objectives. These indicators thus do not directly measure the impact of the intervention on the child, though I have included the perception of children towards the service in each of the cities. The key indicators that I have selected to measure the outcomes of the helpline service in each city, as outlined in the table below, include:

Level of Service Outcomes			
Primary Objective	**Responding to calls from marginalised groups of children in the city**		
• Number of intervention calls	Less that one intervention* call a day	One intervention call a day	Two to Three intervention calls a day	More than four intervention calls a day
• Nature of calls in reaching out to marginalised children	Comparison between cities in reaching out to • girls , younger children , children without family support, children outside the educational system		
Secondary Objective	**Sensitisation of Allied Systems (Police, Doctors, Teachers) to child rights and protection**		
• Number of Training workshops	Less than 100 personnel trained**	Between 101 to 500 personnel trained	Between 501 to 1000 personnel trained	More than 1000 personnel trained
• Nature of outcomes of training workshop	Comparison between cities in • Regularity of conducting the training, Diversity of allied systems, Range of levels trained within the system, Avenues of collaboration between allied systems		
Secondary Objective	**Influencing the local authorities to allocate more resources to children**		
• Number of CAB meetings	1 CAB meeting a year	2 CAB meetings a year	3 CAB meetings a year	4 CAB meetings a year***
• Decisions taken at the CAB	Comparison between cities in • Nature of decisions taken at the CAB and level of follow-up		
* The CIF classifies one intervention call per day as low ** The CIF classifies training of less than 100 personnel per year as low **** The CIF classifies 4 CAB meetings per year as the ideal situation			

Table 3-7 : Indicators to measure the level of effectiveness of the helpline

Primary Objective: Responding to calls from marginalised groups of children

- <u>Number of calls received by the helpline</u>: The primary objective of the helpline is to respond to children in need to care and protection. I examine the actual number of calls received by the helpline.

- <u>Nature of calls:</u> Based on the data available I examined how the helpline was reaching out to marginalised groups of children. The groups who I defined as marginalised would include: Younger children, children without family support, children out of the educational system, and children with disability.

Secondary Objective: Training workshops with Allied systems

- <u>Number of training workshops with the Allied Systems</u>: I examined the frequency of interaction with these allied systems

- <u>Nature of training workshops</u>: I analysed the nature of the training workshops and the collaboration that has been developed between the helpline and the allied systems.

Secondary Objective: Influencing local authorities to increase resources for children

- <u>Number of CAB Meetings:</u> I examined the number of CAB meetings organised

- <u>Decisions taken at the CAB:</u> I also analysed the issues discussed and followed up at these meetings.

I have attempted to evaluate each of the four helplines based on these indicators to enable me to draw comparisons about the effectiveness of the project outcomes of the helplines.

3.4 Ethics of the research

Research has been stated to be ultimately a political activity and research with children has the potential to shift ways of thinking about children and about how childhood might be lived. Morrow and Richards contend that ' the biggest ethical challenge for a researcher working with children is the disparities in power and status between adults and children'(Morrow and Richards 1996, pp 98). A key ethical concern is 'the way in which researchers perceive childhood and the status of children in society' (Punch 2002, pp 321). As Berry Mayall suggests that researchers with children should

> "... aim for more than children's descriptions of what they see and
> experience; it also means eliciting their interpretation and knowledge of
> what it is to be a child in the society they live in. Then, in turn, adult
> interpretation of the conditions of childhood, the rights and wrongs of
> childhood has to remain sensitive to the accounts given by children. An
> important means towards linking child and adult stories is to think of
> research for children as being research with children; an interactive,
> participatory, reflexive activity"

(Hood, Mayall et al. 1999, pp 14)

Nigel Thomas and Claire O'Kane point out that there is a debate whether ethically sound techniques add value to the research or whether methodological soundness may improve the ethics of the research. They argue that the reliability, validity and the ethical acceptability of research with children will be augmented by using an approach which gives children control over the research process and methods which are in tune with children's ways of seeing and relating to their world (Thomas and O'Kane 1998, pp 336:337) . John Davis summarizes the issues related to the ethics of children's research into three main groups namely: informed consent, confidentiality and protection (Davis 1998, pp 328). A useful framework to assist in

examining ethical research with children has been devised by Alderson in consultation with many child researchers(Hill 2005, pp 66). I have attempted to explain how I addressed these issues in my research as outlined in the table below:

Topic	Issue	How I address it in my research
Research Purpose	Whose interest is served by the research?	Outlined in Chapter 1
Costs and Benefits	What are the risks for children in doing or not doing the research? What are the potential benefits?	Outlined below and chapter 8
Privacy and Confidentiality	What choices do children have about being contacted, agreeing to take part, withdrawing, confidentiality	Outline below
Inclusion and exclusion	Who is included? Who is excluded, Why?	Outlined below and in Section 3.2
Funding	Are funds' tainted? Should children be recompensed	Outlined below
Involvement and accountability	To what extent can children contribute to the research aim and design? What reforms or revisions	Outlined below

d implications clearly explained?	Outlined below		Information	Are the aims an
e rights to refuse co-operation espected? Are 'informal' pressures	Outlined below		Consent	How well ar explained and used?

Costs and Benefits: The risks that I identified for children and frontline doing the research were: fear that their comments might reach the adults/directors; costs of time in speaking to me; costs for children on the street in not working during the time. The benefits that I hoped that children/frontline workers may gain from the research were that the process and outcomes of the discussions would make them more reflective of the participation process.

Privacy and Confidentiality: I explained to children that the information they provide would be confidential and that in my report, I would not be mentioning any names of children. I added that in case there was any information that I learnt and would like to discuss with the frontline workers, I would do so only when s/he gave me their consent.

Inclusion and exclusion: As explained in the profile of children, the children that were included in my research were mostly those associated with the organisation running the helpline. However as pointed out in the next chapter I was unable to speak with many children below the age of 10 years, especially girls.

Funding: In my research, I also made it clear that my research was not connected to the CIF (especially as I had worked there earlier).

Involvement and accountability: In my research I discussed with children which research techniques they think are appropriate as explained in section 3.6. Children views in the pilot study informed my benchmark scale in the level of children's participation in individual decision making. In the interpretation that I conducted, as

the focus groups were sometimes spread over 2 sessions, I could discuss some of my reflections with the on the data. However children were not involved in the analysis after I left the field or in writing up or as researchers.

Information: I attempted to explain the aims and implication of the study to the children prior to starting my focus group discussions.

Consent: I realised that some children may be co-operating under pressure, afraid to decline or challenge authority figures. I therefore tried to communicate to children that their participation was voluntary and that they could end that power to end participation whenever they wanted. I was thus clear with children regarding: the aims of the research, what time and commitment is required; who will know the results; whether there will be feedback; whether confidentiality is promised. I asked the children's consent to tape record conversations and on some occasions click group photographs.

Dissemination: Based on my analysis, I will prepare a summary note and email it to all the four helplines. I did children that I would keep a copy of my findings with the coordinator of the helpline and they could get a copy which was due to be ready in the middle of 2006.

Impact on children: In my analysis, I have attempted to ensure that I have tried to keep the interpretations of what children and the frontline workers told me as accurately as possible.

3.5 The data collection process

The data collection process has been a very stimulating process for me and has sharpened my skills as a researcher. It has taught me

3.5.1 <u>Time line of the data collection</u>

After formulating the research questions, I conducted a pilot study from July 2003 to September 2003. I was keen to understand if the approach I was undertaking to study the questions was relevant. I visited five cities in India where the helpline was operational – Delhi (North India) , Varanasi (East India), Chennai, Kochi (South India) and Pune (Western India). I spent a week in each city and met with children and frontline workers. I chose these cities as they are in different parts of the country and varied in size. A summary of the report of my pilot visit is attached in Annexure 5.

This pilot study helped me refine the indicators for measuring children's participation as well as project effectiveness. I gained an understanding of the different motivations of team members towards participation. Additionally it enabled me to review which techniques for data collection worked better than others.

The second phase was the Intensive data collection phase (February 2004- July 2004). I undertook my detailed field work in four cities. I spent an average of 20 days in each city. The data analysed in this thesis is based on the information I collected from the cities during this phase.

3.5.2   Setting up the Interviews/Focus group discussions

In each city, I arranged my visit to the city by directly calling the director of the local organisation running the helpline and explaining the purpose of my research. I scheduled my visit to the city, so that I was able to participate in the monthly open house, organised by the city. Once I arrived in the city, I met with the director and co-ordinator of the project and discussed my research plan. With regards to the focus groups with children, in all the cities, I managed to give the children at least a day's notice, prior to the discussion. With my focus group discussions with street children, I would go along with a frontline worker, the previous evening to the railway station/market place and meet a few children/ a leader of the group and tell them about the topic I wanted to discuss with them. I asked them for a convenient time when I could talk them about it. I would then go the following day to have the group discussion with them. With regards to children in residential homes, I had spoken to the warden/superintendent of the home to arrange an appointment a few days in advance and then went over to have the focus group discussion with the children. I generally arranged my visits to the home on a weekend, so that children who were going to school during the daytime could also be present. While I had separate discussions with boys and girls, I spoke to all the children in the home. With regards to the children in slum communities, these children generally met for non- formal education classes, so I met them at these classes. In some cities, I marked communities where the team had yet to outreach.

3.5.3   Tools and Techniques of data collection: An Overview

In this section, I provide an overview of the techniques that I have used to collect

data. The main techniques for data collection included: Focus groups, Interviews,

Questionnaires, Vignettes, Observation and Documentary evidence. In the following

sections however I describe my experiences with using these techniques with

children and frontline workers.

Focus groups: Focus groups have been viewed as having advantages over

interviews for furthering certain types of qualitative data (Hennessy and Heary 2005,

pp 236). They outline research evidence that points out that it: allows participants

greater openness in their responses; does not have to be terminated when an

individual does not respond; reduced pressure on individuals to respond to every

question.   The disadvantages of focus groups have been pointed out as: they are not

appropriate for drawing inferences about larger populations or for statistical testing

and that interpersonal interaction and the group dynamics may not always be

positive. I had focus groups with children and frontline workers and describe my

experiences in the subsequent sections. During the focus groups I also discussed

some vignettes which I have described below.

Vignettes: Vignettes have been described as ' short stories about hypothetical

characters in specified circumstances, to whose situation the interviewee is invited to

respond' (Finch 1987, pp 105)

> *A vignette produces a snapshot of a given situation. This offers*
> *participants distance and space to provide a discursive interpretation*
> *within the context of the vignette. Where this snap shot does not often*
> *enough information for an individual to make a decision or prove an*
> *explanation- characterized by an 'it depends' response, the situated*
> *context of a vignette can be used to explore the main influencing factors.*

(Rhidian 1998, pp 383)

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It has been pointed out that vignettes fail to take into account the interaction and feedback that is a necessary part of social life. In my research, I have used vignettes to better understand how children and frontline workers interpret situations related to participation. Parkinson and Manstead (1993) argue that emotion created from a vignette cannot be applied to real word experiences as we don't know enough about the relationship between vignette and real life responses(Parkinson and Manstead 1993, pp 301). They can however complement other forms of data collection to provide a more balanced picture of the social world which researchers seek to understand. In my research, based on my pilot study, I selected 2 case scenarios that appeared common amongst the cities – one of a girl who is being physically abused and the second of a boy who is sexually abused. I chose the scenarios in cases of abuse to enable me to better understand children's capacity and best interests. These 2 vignettes are outlined in Annexure 6 .

Interviews: Hennsey suggests that interviews and open-ended questions have the potential to provide valuable information on children's evaluation that cannot be tapped by rating scales. As outlined above, I also had interviews with children and frontline workers.

Questionnaires: I also had questionnaires for the frontline workers and the directors of the organisation. The format of the questionnaires in enclosed in Annexure 3 and 4

Observation: In each city, there were certain events and processes that I observed and analysed. These included:

o Events : the calls to the helpline ; Interventions made by frontline workers, operation of the structure of the service, awareness strategies of the service, Open Houses

o Processes: The processes of children's involvement in the planning, implementation and monitoring of the service, decision making between children and project workers; interaction between children and project workers, organisational culture

Documentary evidence : I also analysed the documents available in every city that related to the following:

- The Need Assessment survey that is conducted with children prior to setting up the service and includes workshops with children to discuss the idea with them

- Call statistics relating to the nature of calls to the helpline that are made by children and adults; interventions by the helpline for emergency assistance

- Reports on awareness of the service conducted amongst children that is done on a daily basis in every city/district

- Report on Open houses that are organised every month in a city to enable children to share feedback on the functioning of the service

- Minutes of the CHILDLINE Advisory Board meetings

- Documentation from the CHILDLINE India Foundation

I obtained this documentary evidence from the city as well as CIF

3.6 Data collection with children

The tools for listening to children reflect the ways in which children are perceived. Punch explains that there has been a tendency to perceive research with children as one of two extremes: just the same or entirely different from adults (Punch 2002, pp 322). The new sociological approach to childhood that I outlined in the previous chapter perceives children to be similar to adults but to possess different competencies and the research tool and techniques have to be sensitive to these aspects.

> *Researchers do not have to have to use particular methods... when working with children. Rather it means that the practices employed in their research have to be in line with children's experiences, interests, values and everyday routines*
>
> (Christensen and Prout 2002, pp 482)

Whilst reviewing the tools and techniques that may be most sensitive to children's competencies, Morrow and Richards (1996) argue that employing a variety of research techniques that allow children to feel part of the research process can reduce the power of adults. As John Davis (1998) suggests children are asked to write about hypothetical situations, for example their futures(Hallden 1994); complete unfinished sentences ; or to draw about their actual lives. Hypothetical and real situations are discussed through participating in children's play, using draw and write technique(Pridmore and Bendelow 1995), utilising visual prompts, exploiting pictorial vignettes, instigating role playing or through focus groups. In my research I therefore attempted to give children a range of options for them to choose between in order to answer the questions I put to them.

3.6.1 Focus groups with children

The structure of the focus group discussions with children is outlined below:

Time	Activity	Purpose
5-10 minutes	Introductions and purpose of research	
10 minutes	Preparing badges	
15- 30 minutes	Eco Map drawing and discussion on participation in decisions	*meaning of participation
10- 15 minutes	Current concerns/issues	* problems with allied systems/services
Break/ Next session		
20-30 minutes	Talking about CHILDLINE	* participation, experiences, evaluation
15-20 minutes	Vignettes discussion/ role plays	* children's competence
5 minutes	Documenting the profile of children present	
10-15 minutes	Sharing impressions about the discussion; Asking me questions	

Table 3-9: Structure of focus group discussion with children

With street children, I generally had one session whereas with children in residential homes and children in slum communities I was able to break up the focus groups into 2 sessions. I had the helpline team members in some discussion and a translator in two group discussions in Trivandrum.

platforms of stations and in market places. I met with children in institutions, in the residential home itself. I met with children in slum communities in a common space in their community.

The tools that I used to collect data from the children are outlined below:

- At the beginning of the focus group discussion with children in slum communities and residential homes, I asked the child to prepare a badge with their name and decorate it by sticking on some beads. With street children, as many of them are not comfortable with writing, we began with each member singing their favourite song, reciting a poem or telling jokes.

- In the focus groups with children in slum communities and residential homes, I asked the children to complete an eco-map: a chart of people and places in their network which were important to them. We then used the eco-map to talk about who children turn to in specific situations. With street children, I had asked them to identify people they interact with during the day. I then prepared a card with the persons they identified (police, doctors, etc) and asked the child to pin up the card on their shirt. I then gave a ball of string and each child had to throw it to another and narrate an experience of how they interacted with that person on the card.

- I gave children in all the focus groups, the option of using role plays to illustrate their responses. This technique worked very well with street children compared to children in residential homes/slum communities. The street children mostly used role plays to indicate the interaction of the police and doctors with them.

- I used picture / photographs as prompts (recommended by Curray and Russ 1985; Backett and Alexander 1991) to explore the differences between children and adults. I had prepared a collage of children and adults doing various activities and asked the children to comment on the things they though children could do which adults could not and vice versa.

- I used vignettes as a key technique to initiate discussion on the meaning of participation and understand the child views of best interests and competence. I also gave the same cases to the frontline workers to discuss the two vignettes that I gave all groups of children as enclosed in Annexure 6 were
  - o A case of a girl child in domestic work who was being physically abused
  - o A case of boy child who was being sexually abused by an uncle who lives with the family.

I found the focus group discussions to be particularly effective as they created a safe peer environment (Mauthner 1997, pp 23) and I observed that children were encouraged to give their opinions when they heard others do so. The focus group also made the children feel that they were sharing experiences rather than being questioned by an adult.

While conducting the data collection with children at interviews or in the focus groups , I was particularly sensitive to the following issues that Ann O' Quigley summarises in her book on the findings from research(O'Quigley 2000, pp 28:29).

o The adult needs to bear in mind that the child will need adequate information if they are to express an opinion and opportunities need to be provided for exploring options (ChildLine 1998, pp 23). I attempted to address this by providing children an opportunity to discuss options about the vignettes.

o The adult should reassure the child that there are no right or wrong answers; it is the child's own experience and opinions that are important (Neale 1999, pp 14)

o The interview should begin with open, general questions to establish rapport and free discussion and move on to specific, closed questions (Hall 1996, pp 66): I began my discussions with participation in their lives and then moved into participation at the helpline.

o The adult must learn to allow the child to tell their whole story and not rush to interpret the child's story (Barnes,1996) : I was attentive to give time and not rush on till I felt that child had finished his/her thoughts

o The adult should adopt a non-intrusive style of interviewing, adopting the mode of learner and friend rather than protector, educator or controller: I had the tape recorder which fascinated the children, used it to build rapport with the children.

3.7   Data collection with frontline workers

I generally had two focus groups with frontline workers. The first focus group

discussion generally followed the following pattern

Time	Activity
10 minutes	Introduction and purpose of the research
30 minutes	Understanding of participation
15 minutes	Case illustrations of conflicts between children and frontline workers
15 minutes	Children's involvement in the helpline
Questionnaires filled in by the frontline workers	

Table 3-10: Structure of first focus group with frontline workers

The second focus group discussion, towards the end of the stay in the city generally

had the following pattern

Time	Activity
10 minutes	Discussion on Vignettes
30 minutes	Fears about participation
15 minutes	Lessons from children
15 minutes	Problems faced by the team
10 minutes	Feedback received from the children, sharing my observations

Table 3-11: Structure of second focus group with frontline workers

In addition to the focus group discussion, I also had individual interviews with

children (Interview guides attached in Annexure) and observed their interaction with

children on the phone, outreach and whilst responding to calls

3.8   The audit trail of the study

The analysis process has been a reflective process, constantly going back and forth between the literature, my field notes and the computer package (NVIVO) that I used.   In this section I elaborate upon the process I followed to analyse the raw data, interpret the themes I identified   and report my findings.

3.8.1   Role of the researcher

There are general issues of representation in and by research that feminists have queried and these have a specific resonance in relation to children. Researchers themselves have to be brought into view within the frame of research.

> *This is why researcher reflexivity needs to go beyond the research dialogue (in the interview or any other data collection exercise) to encompass the political judgements and subjective processes that enter into interpretative, authorial and editorial decisions about our representation of children's voices... Being reflexive about analysis means stepping back from the tools and conceptual resources employed, including the categories invoked and subjecting them to the same scrutiny.*

(Alldred and Burman 2005, pp 176: 178)

However research reflexivity should not replace 'a view from no where with a dream of everywhere, but rather should explore the implications of the view from somewhere quite particular indeed' (Bordo, 1990:142)

> *The researcher plays an active role in attending, listening and making meaning of what the interviewee says- and making' meaning' reminds us that this is an active process of interpretation. It is therefore culturally and historically specific and thus incomplete, particular and to some degree subjective.*

(Alldred and Burman 2005, pp 191)

In the research process I have tried to articulate my own biases, assumptions as clearly as possible.

3.8.2 Documenting the data

Focus group discussion with children/ frontline workers: I recorded the data of the focus groups on tape. In Trivandrum and Puri, I also had a translator who made notes. In Jaipur and Bhopal, I had an assistant (from another project o the organisation) who accompanied me for the group discussions. With regards to the interviews with the directors or the frontline workers, I had interview schedule notes and questionnaires that I gave to each frontline worker I maintained a daily field work diary during which I wrote down observations and things that struck me during the day, as well as how I needed to improve asking certain questions. With regards to the documentary evidence, I photocopied details of the calls as well as got information about the city statistics from CIF

3.8.3 Organising the raw data

The first stage of analysis focused on making the data manageable through the reduction of data. I transcribed all the data from the focus group discussions and interviews from the audio cassettes and prepared a summary report for each focus group. Whilst I had a daily diary of events, I wrote up the visit reports when I came back from the city. They were mostly in Hindi and I translated them whilst transcribing. I then entered the information into the NVIVO package. I chose NVIVO as it appeared a simple package to use and the computer analysis would enable me to undertake a comprehensive analysis and not only focus on the selected information.

3.8.4 Interpreting the data

The interpretation process of this research has been one of constant reflection and clarification. With the children, I attempted to clarify observations immediately. With the frontline workers/directors I have been able to clarify observations even after leaving the field, through email and phone. During the interpretation process I was consciously aware that an interviewee's own authentic voice is heard through such "filters as the participants' perceptions of the situation, the research focus, interview questions, as well as structural constraints they face and their personal values and biographies" (Alldred and Burman 2005, pp 181). Therefore it became important to see children's accounts as reflecting any or all of these- that is other aspects of their social identity may be more significant than their age in producing their perspective. The NVIVO package enabled me to maintain the context of data through my analysis. I attempted to make sure that I accurately understood the views of children and the frontline workers. As Christensen and Prout (2002) highlight:

> *To ensure that children's accounts will be understood in the fullest way, researchers need to describe children's perspectives and everyday life accurately. This requires a research practice that gives a differentiated picture of their lives and social experiences of children drawing out both commonalities and differences between them*
>
> (Christensen and Prout 2002, pp 484:485)

The interpretation process required me look at differences in perceptions between age groups, life situations and between children and frontline workers. Within each category I then looked for differences and similarities amongst children and frontline workers, between the four cities, amongst frontline workers, amongst children (based on age, sex and place of residence). The NVIVO package helped me to retrieve data along these differences and I was then able to read through the comments to develop themes for the interpretation. My conceptual framework and

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research questions outlined in Chapter 2 (section 2.5), guided me in the interpretation

of the data. I have attempted to specify this process in the table below.

Research area	Questions highlighted from literature review	Process of interpretation	Themes from the data
Meaning of participation	What does participation mean to you?	Classifying the variations in meanings	*Described in Ch 4* Affection ; Asking Questions ;Listening Influencing decisions
Motivation towards participation	Why do you feel participation is important/ not important?	Classifying the variations in motivations	*Described in Ch 4* Informative, Instrumental, Conflict avoidance, Supportive
Fears towards participation	What are the dilemmas you have faced?	Description of fears/dilemmas	*Described in Ch 4*
Evaluating the level of participation	Based on indicators outlined in Table 3-6	Summarising the evidence	*Described in Ch 5*
Evaluating service outputs	Based on indicators outlined in Table 3-7	Summarising the evidence	*Described in Ch 5*
Children's perception about the relevance of the project	How does the project help? What is your role in the project? Responses to vignettes	Describing views of children about the project	*Described in Ch4*
Perceptions of capacity	Do children have capacity How is it assessed Responses to vignettes	Classifying responses	*Described in Ch 6* Variation in levels of capacity Criteria for assessment
Perceptions of best interest	Definition of best interests? How do you arrive at this?	Classifying responses	*Described in Ch 6* Children's role in defining bests interests
Management styles	Based on indicators mentioned on page 74:75	Summarising the evidence from the city	*Described in Ch 6*

Table 3-12: Clarifying the analysis process

Having transcribed the data onto the NVIVO software package and having my research areas, I then began coding the data. I first did a general broad stroke coding of data. For example I coded all responses to the question on meaning participation as 'ParticipationDefinition'. I then retrieved all the responses to understand the variations in responses through which I observed four sets of meanings to the term that I describe in Chapter 4. A final list of codes that I used during the research is attached in Annexure 7.

3.8.5 Credibility/ Integrity/plausibility of the data

Some of the ways in which I addressed issues regarding to the validity of the study are:

o Subject Bias: I met with children in their setting and involved a youth worker in the process, with whom they can identify with:

o Observer Bias: I maintained detailed records of data without interpretations. I have tried to present the most dominant views as quotations in the research unless otherwise mentioned.

o Construct validity: I have tried to show that the measure to assess participation/ outcomes of the project are relevant criteria to the context and case. I have used different techniques of gathering this data: observation, focussed groups, interviews, role plays

o Internal validity: One of the relationships explored in this study include the level of children's participation and its influence on the programme effectiveness and outcome. However, I am not looking at cause- effect relationships amongst the above variables but in exploring that these are associated and correlated.

3.8.6 Confirmabilty/reliability/consistency of interpretation

In order to assess the reliability of my interpretations, some practices/techniques that I had in place:

- Given that there were variations in attitudes and perceptions, I was careful to look for recurrence of themes

- I have attempted to analyse the data from all my questions

- Analysing alternative explanations for the achievement of the project outcomes, besides the level of participation and discussing evidence for and against my arguments

- Outlining the scope and limitations of the research

- Discussing the analysis with my supervisor

3.8.7 General ability/ Transferability of the data

It has been debated whether it is possible to generalise from qualitative studies. Schwandt (1997) argues that generalisation is not possible because evaluation is context specific and there are no context free meanings. One type of qualitative generalisation described in the literature is representation (Lewis and Ritchie, 2003) i.e. within a similar setting. As I was studying about perceptions to children's participation and in all the four cities, I noticed differences in approaches, there would be further differences amongst the other helplines in India as well. However the analytical framework could be used to understand the process in other helpline settings. I have tried to describe the setting and opinions of participant's implicit and informal understandings as well so that readers may see parallels with the situation in which they work.

3.8.8 Limitations of the research

There are limitations to this research and considerations I would have included, if I had to start my research afresh. These include: focussing more consciously on gender amongst children, having more joint meetings with children and frontline workers, involving children in the interpretation and analysis of findings to a greater extent.

- *Focusing on younger children*: Due to the nature of the helpline setting, I was unable to meet with younger children (below 10 years) who call the helpline, in the time that I spent at the helpline center.

- *Evaluating changes to children's lives*: In this research, I am studying project outcomes as defined by the helpline. However in subsequent research, I would be interested in understanding the changes in children's lives due to the helpline interventions.

- *Limitation of time in involving children in research design, analysis*: Children have not been included to a great extent in the analysis of the data and would have been able to disseminate information back to children more easily.

- *Limitation of Data*: In evaluating the service, there were gaps in information on what the cities recorded and what is recorded in the computer programme. I used the computer programme to go by the data. There also did appear to be different criteria for categorisation of calls to the helpline. Additionally there was certain categories of data such as disability that was not available.

In the subsequent chapter, I discuss the interpretation of the data I collected and analyse its implications for theory and practice.

4 Understanding the meanings of participation
: Children's and Frontline worker's perceptions

In order to effectively measure and evaluate children's participation, it was important that I understood how children and the frontline workers interpreted the concept of participation. In this chapter, I therefore attempt to explore the meaning of participation as understood by the children and the frontline workers whom I met during my field work. As highlighted in Chapter 2, there is a lack of research on how children perceive being involved in participatory processes and hence I was keen to include this aspect in my research. The literature on adult perceptions to participation has also focussed largely only on the level of children's participation offered by adults to children. I was interested in understanding the motivation of adults in facilitating children's participation and hence also focus on this aspect whilst understanding frontline worker's perceptions of participation.

This chapter is divided into three main sections. In the first section I describe the meanings of participation that children spoke about; in the second section I outline how frontline workers perceived participation and in the third section I analyse the differences between the different meanings of participation and the implications of this difference. In the following chapter, I draw on aspects of participation, elaborated upon in this chapter, to measure the level of children's participation in the four helplines.

4.1 Children's understanding of participation

In this section, I explore the meanings of participation outlined by the groups of children that I met during my field work. I have analysed this by firstly outlining the area and types of decisions that children perceive they are currently involved in. I then go on to look at children's perceptions of participating in the helpline project. Next, I examine the children's expectations from adults in being involved in decision making in an organisational setting. I then conclude this section, by analysing children's perceptions of their situation.

As explained in the previous chapter, I had 25 group discussions with 344 children who included children living on the street, in institutions (residential care) and in slum communities.

The majority of children I met during my field work were not familiar with the term participation. In order to begin dialoguing with children about participation, I explained that I was interested in talking to them about how decisions that involve them are taken. As explained in Chapter 3, I did this by asking children to identify the people (adults and children) that they interact with during the day and then look at decisions that adults took regarding children in each of the settings that they had mentioned.

4.1.1 <u>Talking about participation to children</u>

"No one has asked us these questions before."

Boy, living on the street, 9 years Jaipur(FCJ1)

"Its not right to talk about our elders"

Girl, living in a residential home, 14 years, Bhopal(FCB5)

The children were quite surprised that someone should ask them about their views on evaluating decision making in adult- child interaction, as they said no one had ever asked them about how they feel about it. They were also a bit fearful of talking about adults. In some situations as in Jaipur, as I have elaborated in the previous chapter, the group discussions were broken up over two sessions to facilitate rapport building and to ensure that the children were comfortable to talk and understood the purpose of my questions.

Based on my group discussions with children in the four cities, the key decisions that children mentioned that adults took/involved them:

Family	School	Community/ Allied systems	NGOs/CHILDLINE
▪ The time they get to play/for recreation ▪ The kind of friends they make/the people they meet ▪ Work they do to support their family ▪ Clothes that they wear ▪ The school that they should attend	▪ The school timetable	▪ Journalist asked street children about problems faced on the street ▪ Police, doctors decide that children are thieves/too dirty to be treated	▪ Their daily routine in the shelter ▪ Whether the children want to go back home ▪ Whether they want to stay in a shelter ▪ Where they want to go

Table 4-1 : Children's list of the nature of decisions involving them

I shall briefly examine the key comments from children regarding the decisions taken by adults on their behalf.

Involvement of children in family decision making: Children perceived family as

the area where the most decisions are made for them but where they are given the

least control over decisions.

> *"Our parents decide what and when we eat, wear, go... They should ask us",*
>
> Boy, living on the street, 9 years, Puri (FCP1)

> *"My parents know what's good for me, its okay for them to decide for me."*
>
> Girl , living in slum community, 14 years, Trivandrum(FCT5)

Whilst children who were now living on the street felt that parents should listen more

to children, the children in slum communities were mostly of the opinion that

parents were wiser and so parents were justified in taking decisions for them.

Involvement of children in decision making in school: Children perceived school as

the setting where they had the least role to play in terms of decision making.

> *"In school, what decisions can we participate in? We are there to learn from the teachers."*
>
> Boy , living with famiy, 8, Puri(ICP4)

> *"We as children cannot change anything in our school. Only the head master and government can"*
>
> Girl, living with family, 10, Trivandrum(FCT4)

Only in one group of children going to school did they suggest that they could be

involved in planning the time table and timings of the school to be more convenient

to them – to start earlier and finish earlier. Whilst discussing if they were happy with

their schools, most of the groups listed problems such as no text books/note books,

no games/sports equipment, no water/electricity, other children fighting with them.

They however felt that their involvement would not solve any of these problems and

it required the intervention of adults.

Children's involvement in decision making with the community: The children did not feel that they were involved in any decision relating to: the kind of environment on the street (for street children); how the residential home was run (for children living in residential homes) or regarding the problems of the community (for children living in slum communities). Street children expressed the hostility they faced by the community and many felt that only a few community groups were really interested in knowing about their lives.

Children's involvement with NGOs: Children rated NGOs/CHILDLINE as the setting where they were given the most scope to make decisions

> " Didi and Bhaiya asks us what we want to do, play.. they listen to us "
>
> Boy , living in residential home, 7 years, Jaipur (FCJ5)

This was the aspect that I explained to the children, I was most interested in studying in my research. I analyse the children's perceptions of participating in the helpline in the next section.

4.1.2   Children's understanding of their participation in the helpline

I have attempted to look at children's understanding of participation in the helpline taking into consideration the nature of their participation, their motivation to participate and their overall experiences. While I evaluate the perceptions of children in each of the four helplines in the next chapter, in this section, I aim to provide an overview of children's perceptions to their involvement in the service and the kinds of decisions that they were involved in. In each of the four cities where the helpline is operational, I observed that the children's perceptions varied according to the group of children, their role in the service and at different phases of the project.

Hence, I analyse the meaning of participation to children by examining their different perceptions based on the roles that children perceive themselves to play within the project; their involvement at different stages in the project – planning, implementation, monitoring /evaluation ; and the differences amongst groups of children towards their perceptions of participation in the helpline.

Children's perceptions regarding their ownership to the helpline: In order to assess the children's perceptions regarding their participation in the service, I began by asking each group : "Childline kiska hai?" (Who does the helpline belong to?). As explained, while I evaluate the participation of children in each helpline separately in the next chapter, in this sub-section, I aim to highlight some of the overall aspects that children perceive about their participation in the service. My key observations are outlined in the table below.

	Trivandrum	**Jaipur**	**Puri**	**Bhopal**
Children on the street	- CL belongs to Don Bosco - children call 1098 when they have a problem	- CL is an organisation - children call 1098when they have a problem, call for their friends, tell their friends about 1098	- CL belongs to many organisations - children call 1098, when they have a problem, call for friends, tell their friends about 1098,	- CL hum sab ka hai (belongs to all of us) - children call 1098 when they have a problem, call for friends, tell their friends, take friends to hospital
Children in residential care	-Belongs to Don Bosco/ Fathers - children call 1098 when they have a problem	- CL is run by I India - children call when they have a problem	- CL belongs to OLS - children call when they have a problem	- CL belongs to Aarambh - children call when they have a problem
Children in slum communiti es	- Belongs to Don Bosco - children call 1098 when they have a problem	- CL is run by uncle and didi at I- India. - children call when they have a problem	- CL belongs to many organisations - children call when they have a problem, to spread awareness	- CHILDLINE belongs to children - children call when they have a problem, call for friends, spread awareness

Table 4-2: Children's perception of ownershipto the helpline

Based on my conversations and focus group discussions with children, across the four cities, there were two groups that felt a high degree of ownership towards the project. I then asked these groups as to what made them believe that CHILDLINE belonged to them. Some of their comments were:

"... CHILDLINE is there for children 24hours, whenever we need help"

- Boy 11 years, child on the street, Jaipur(ICJ2)

".... CHILDLINE listens to what we have to say"

- Girl, 15 years, child living with family, Puri(FCP2)

"... .Uncle/didi at CHIDLINE spend time with us, they ask us about our day, they don't tell us – this is what you have to do"

- Girl, 12 years, living on street, Bhopal (FCB2)

To feel ownership of the service, the sense I got from children is that they needed to feel that the helpline could be trusted; was accessible to them- when they needed; and a service that did not 'look down' upon them. Some of the children spoke about 'testing' the service before they developed this sense of ownership.

> *"We used to call at 2.00 am... (when the public transport has shut down) to see if the CHILDLINE team member would come to help us. Now we can tell this to you, but at that time, we used to hide and laugh when we saw the team member searching for us"*
>
> - Boy 13, years child living on the street, Trivandrum (FCT2)

There was another boy on the street in Jaipur who explained how initially he used to call into the service and abuse the frontline worker. He said he did this because it was a free number and that it helped him vent out his anger. However he said after two months, then the frontline worker did not get angry but instead kept telling him about how he should become a volunteer and tell other children about the service, he decided to try it out. He attended an open house held on the railway station and is now an active helpline volunteer, telling other children about the service.

One of the key observations I made was that children perceive themselves to participate in the helpline mainly by making a call and in service delivery. None of the children expressed that they play a role in planning, monitoring or evaluation of the service. However on further discussion, children did identify roles that they played in monitoring and evaluation of the service which I analyse in the following subsections.

Role of children in CHILDLINE project: I asked children why they wanted to participate in the helpline and what were the benefits or drawbacks they felt whilst participating. I have summarised their comments based on their role in the helpline project, as outlined below:

	Child Volunteers	**Children who have referred friends to the service**	**Children who have been assisted by the service**	**Children who know about the helpline but have had no contact**
Nature	Awareness, assistance in hospital, identifying new children	Calling 1098	Calling 1098 themselves or through someone	Attending open houses
Motivation	• CL meets our practical needs • To help children • To beable to talk with the police /doctors • To contribute • To earn respect • As a duty	• CL is there to help • To help a friend • I promised uncle/didi that I would call for a friend • CL has helped me	• To get help • To be happy • To ask uncle/didi's advice	• Have not felt the need to call
Benefits/ Drawbacks	Feeling of pride to be a volunteer Some felt it was symbolic as they were not given Id cards like the CHILDLINE team and hence did not feel as valued	Was not given any feedback on the intervention process or informed about follow-up Feel comfortable to refer children	Listened to only when convenient I was really happy to see a friendly face CHILDLINE listened to what I was saying	We have had no opportunity to call CHILDLINE

Table 4-3: Children's motivation to participate

My general observations on the perceptions of children to participation vis- a -vis their role in the service are outlined below:

Roles of children: The children identified that they played roles of volunteers, in calling the service for themselves of friends. Children were involved in other aspects of service delivery such as monitoring of the service, but did not talk about these aspects. Based on my conversations with children, across the four cities, there were variations on how children perceived the meaning of participation based on their role in the service which I attempt to analyse below:

- *Child Volunteers*: These were children mostly on the street and in communities who were involved in spreading awareness about 1098 and child rights, calling 1098 when they saw a child in need, identifying new children on the railway station, taking care of children in hospitals. The main motivation of these volunteers was that they had been assisted by the helpline and now they wanted to reach out to other children. To these children, participation meant being involved in all aspects of the service. Most of them expected to play a greater role in the service and receive more authority. There was a feeling that amongst many volunteers that CHILDLINE involves them in awareness but does not support them completely (through ID cards etc). Some of the comments from the child volunteers were:

> *"There should be CHILDLINEs in every city in Madhya Pradesh"*
>> Boy, 10, living with family, Bhopal (FCB4)

> *"When building a shelter for children, it should not be near the railway station, otherwise children are attracted back to the platform"*
>> Boy, 10, living on the street, Trivandrum (ICT2)

> *"There should be a fund for children who want to start a business... we should start a catering business"*
>> - Boy, 15, living on the street, Puri (FCP3)

Most of the children felt that CHILDLINE needed to broaden its scope to address wider issues than it currently was doing.

- _Children who have been assisted by the service:_ In my focus groups with children when I asked children how they were involved in the helpline, there were children who said that they have been assisted by the helpline. When I asked these children why they had called the helpline, most of the children said that they had been referred by a friend, adult or the police. Amongst the children who called the service when they had a problem, they explained that their motivation for doing so was: because the service was open 24-hours and the frontline workers were able to talk to doctors/police who were rude to them. In each city there were children who spoke positively and negatively about the assistance provided. However when I asked these children what they felt about becoming volunteers and tell other children about the service, the responses I received were:

> _"I did not know how we could help other children in CHILDLINE"_
>
> > Girl, 8, living in residential home, Jaipur(FCJ6)
>
> _"Is CHILDLINE going to pay us for this work?"_
>
> > Boy, 15, living on the street, Bhopal (ICB3)
>
> _"If children want help they will call themselves"_
>
> > Boy, 11, living in slum community, Puri(FCP4)
>
> _"We don't want to get into fights with the police, older boys"_
>
> > Boy, 7, living on the street, Trivandrum(ICT1)
>
> _"We don't have much time with all our studying and then going to work"_
>
> > Girl, 15, living with family, Trivandrum (ICT9)

There were thus a range of reasons for children not wanting to participate to a greater extent. For this group participation did mean a cost that they had to pay, which is rarely discussed by the frontline workers.

- *Children who have not had any contact with the helpline* In all the cities, in many open houses I met with children who had not had any contact with the helpline. Some of them had known about the helpline while others were hearing about it for the first time. Amongst children who had known about the service, their comments were:

> *" I have not had any opportunity to call CHILDLINE"*
>
> Girl, 15, living with family, Trivandrum(ICT8)
>
> *" I can talk to my parents and teachers about my problem"*
>
> Girl, 12, living with family, Bhopal (FCB4)
>
> *" What can CHILDLINE do?"*
>
> - Boy, 11, living on the street, Jaipur (ICJ3)

The sense I got from children who had known about the service but not yet called was that they were a bit sceptical of the service and were not sure if it could really make a difference to them. With regards to children who had not heard about the service before, they were all inclined to use the service the next time they had a problem and needed to speak to someone

By talking to children about participation, I understood the importance of asking children what they expected from participation. The frontline workers often at open houses would urge children to become volunteers, without asking children what their expectations were about the process. In the following sub section I examine the expectations that children had regarding the involvement of frontline workers and adults in decisions.

4.1.3   Children's expectations about adult involvement in decisions

While analysing the comments of children about their involvement in decisions, I specifically asked the groups of children about their expectations from the frontline workers and adults in decisions affecting them. Some of their comments were:

> *"Adults should listen to our side of the story"*
>
>   Boy, 7, living in residential home, Trivandrum(FCT6)
>
> *"Adults should treat us with respect"*
>
>   Girl, 14, living on the street, Jaipur (FCJ3)
>
> *"Adults should treat us with respect. They should beable to sit down on
> the ground and eat with us, laugh at our jokes",*
>
>   Boy, 10, living in residential home,Trivandrum(FCT6)

In all the four cities, children emphasised that the biggest factor that adults needed to change was to treat them with 'izzat' - respect. There was a general feeling that adults treated children as inferior. The examples the children gave to illustrate this included: cutting a child's conservation, doubting a child immediately (saying the child is doing a 'natak' (drama), hitting/scolding a child without finding out what the child has done. They narrated several examples where if they did not do homework, or if another child complained against them, they were not even listened to for their version of events. They felt that adults should listen to their side of the story. They emphasised that adults should not begin with doubt, but rather start objectively in any interaction with them. While focussing on decision making in NGOs, for children, respect was shown in an attitude of acceptance, of eating meals with them, of not getting annoyed all the time with them, of listening to their complaints, of joking with them.

Based on these responses, it does appear that children perceived participation as an adult-child relationship, which was based on respect. They did feel that they may not always make the correct decisions and are happy to have adults to guide them. As

children stated that there were happy to have adults guide them, I asked children what decisions they required adults to assist them. In my focus groups with children, it became apparent that children had an understanding that there were a range of decisions and that they did require adults to assist them in decision making. Their comments regarding this are outlined below:

"When we call CHILDLINE, we want uncle/didi to help us, that's why we call"

- Boy, 16, living in slum community,Puri (FCP5)

"As sometimes bhaiya/didi forces children to go back home or sends us to the chiller room (remand home), we have to tell lies or run away"

- Boy, 16, living on the street, Jaipur (ICJ3)

In general, the decisions that children felt requiring levels of adult assistance were:

	Children living on the streets	Children living in residential homes	Children living in slum communities
Decisions they should be left to them	❑ Their friends ❑ How they spend their money ❑ If they want to go home	❑ If they want to go to school	❑ When they want to play
Decisions they need adult advice	❑ Finding jobs ❑ Getting a house ❑ Getting education ❑ When doctors/police are rude ❑ To go back home	❑ Problems with studies ❑ Problems with older children bullying them	❑ School they should go to ❑ Work they should do ❑ Problems they face
Decisions left to adults	❑ Finding the correct uncle/didi for the project (1 group)	❑ If the shelter has to be shut down ❑ How many staff should be employed in the shelter	❑ Whom they should marry ❑ If they have to leave their home, due a disaster

Table 4-4: Levels of decision making mentioned by children

While in each group there was some debate on the classification of decisions in these categories, the message that I got from children was that they understood that there were different kinds of decisions and that they needed adult intervention and guidance in some.

4.1.4 Children's perception of their situation

In my focus group discussions with children, I was keen to learn how they perceived their situations. A summary of responses is outlined below:

	Children in residential organisation	Children residing in slum communities	Children on the street
Why oppression of children?	Due to age/injustice	Due to age/ lack of knowledge/ skills	Due to injustice
Role of child/family in the problem	Problems due to individual reasons	Problems due to poverty/lack of resources	Problems due to attitude differences
Children's attitude to adult- child power difference	Acceptance of imbalance of power	Not much articulation of power imbalance	Questioning of imbalance of power
Suggestions for better services	More free time	More clubs, children's groups	More resources

Table 4-5: Perception of children about their violation of rights

In my analysis I found that children's perceptions to their situation were quite similar

highlighted these below:

Children perception of child- adult differences: The children with whom I had group discussions in these residential institutions largely saw adults different in terms of having the ability and authority to decide their daily routine. Additionally they felt that adults could show anger when they wanted and could express that anger by hitting, whenever they wanted, whereas they were unable to do so. The children residing in slum communities that I met were doing work such as embroidery, domestic work, polishing stones, cutting/rolling supari (beetle nut). They felt that

lifting heavy weights, making a house. In my discussions with children on the street, I learnt that these children saw very little difference between them and adults.

Role of child/family in the problem: With regards to these children naming their own oppression, most of the children in residential homes saw their problems as due to their individual problems (a step parent, alcoholic parent, disability). I found that children in residential institutions had developed strong peer group networks to protect themselves from exploitation that that they felt. The main problems discussed by children living in slum communities were lack of time to play, that their family needed to work, lack of proper housing and water. They felt that poverty was the key reason for the cause of their problems. Their acceptance of doing the work they did was to overcome poverty and they were happy that they could help their families. I perceived that children on the street saw their sniffing glue, taking too drugs, as a means to protect them from a society that looked down upon them. While discussing the reasons for their situation, the children on the street strongly felt that it was society's attitude towards children that results in their oppression and them being looked at as criminals.

Children's attitudes to adult- child differences: The children in residential organisations seemed to accept the imbalance that existed between adults and children and that solutions had to be found within this framework. The children living in slum communities did not articulate difference as a major issue of concern between adults and children. The children living on the street were very questioning of the imbalance between adults and children and conveyed that this imbalance had to be corrected if solutions to problems were to be addressed.

To conclude this section, based on my group discussions with children, I observed that it is no single voice of childhood. While the children living in slum

communities seemed to perceive that once they get the resources to power (education, skills) then they would be empowered, the children living in residential homes and on the street were less convinced of this approach. They asserted that it was not merely these resources that gave them power, but that it was essential that adults took children more seriously.

When I looked at the responses from the focus groups separately for children in the age group 6- 12 years and then those in the 13-18 years age group, I did not find any variation in the kinds of issues they raised. The only difference I found was the intensity with which some of these issues were put forth. Children in the age group of 13-18 years who were living on the street or in slum communities were at time more forceful in expressing their opinion. I did perceive that the life situations of children shaped their world view and their perceptions. With the analysis on the child's life situation however, I do not wish to imply that all children in the similar life situation would necessarily have similar perspectives, but their life experience seemed to colour their outlook to life more than their chronological age. However as I have pointed out in Chapter 3, my study was mainly amongst boys mostly between 10 to 18 years, it is likely that gender and disability could be the other significant variables in understanding their life situations. Thus to summarise, the main conclusions regarding children's understanding of participation are:

- Children perceived participation as a relationship with adults. To them, participation involved a relationship of respect, of adults listening to their side of the story and that there were levels of decisions to which they could contribute.

- Children perceived their participation in the helpline more as beneficiaries, rather than being involved in the entire project .

4.2 Understanding frontline workers perceptions to child participation

The literature review highlighted the range of attitudes of adults towards participation of children in decision making. While the literature focussed on the level of child participation extended by adults, there was a gap in understanding the motivations that prompted adults to facilitate child participation. Additionally there was a gap on how front line workers view the balance between the protection, participation and provision rights of children.

I have divided this section into four parts. In the first part, I explore how the front line workers interpret child participation. In the second part I identify their motivation to promote participation, and then I outline their fears and dilemmas in promoting children's participation. In the fourth part I attempt to map the different motivations of the front line workers with reference to their concept of childhood, their fears and their understanding of participation.

As explained in the methodology chapter, in each of the four cities I had 2 focus group discussions with the 10 member team. Additionally I was at the helpline centre for approximately 15 days during which I accompanied the team members on calls, had individual discussions with the frontline line workers and observed their interactions amongst themselves and with children who called the helpline.

4.2.1 Meaning of children's participation to the front line workers

In my research, I attempted to look at the meaning of participation based on the frontline workers interaction with children. In the focus groups, I asked the adult frontline workers to define and discuss their idea of child participation. The frontline workers in all cities used terms of 'respect', 'partnership' and 'dialogue' and during my discussions with them; I attempted to unpack the meanings they associated with these terms. I have identified four levels of meanings attributed to participation. Each level builds on the previous one as it requires the elements of the previous level. The main meanings of participation given by the frontline workers included:

Participation as speaking to children with 'affection': These frontline workers whom I spoke to (15 out of the 40 frontline workers) stated that speaking to the children 'with affection', was the most important component of participation. On further elaboration of what the front line workers defined as talking with 'affection', most meant talking to the child without anger, with affection, using language that the child can understand. Some of the workers also equated participation with building a rapport with children. These frontline workers did not list hearing or acting on what children had to say as a key ingredient whilst talking to children with respect. They rather focussed on how the adults spoke to the child.

> *When we talk about participation with children, we must remember that*
> *they have less experience, they cannot recognise right or wrong and they*
> *have less knowledge. So the adult who works with children, he must give*
> *the child choices and knowledge based on his (adults) experience. And in*
> *that decision the adult needs to talk with respect so that the child knows*
> *what is wrong, what is right and the advantages of the decision*
>
> <div align="right">- Team member, Trivandrum</div>

Participation as asking questions: There were (8 out of 40) frontline workers who explained that asking questions was the most important aspect of participation. For this group of front line workers, it was important to probe into the mind of the child. The need to ask questions was an attempt to ensure that the interventions that the frontline workers had in mind would be effective.

> *Children's participation in decision making means trying to find out what the child is thinking. We need to keep checking with the child, if we (adults) understand what they (children) are saying*
>
> - Frontline worker, Jaipur

These frontline workers felt that in order to get to know what the child is thinking it is important to observe the child's nonverbal communication as well as ask the child relevant questions. These frontline workers however did not speak about the role of children in influencing decisions.

Participation as listening: Some front line workers (7 out of 40) defined participation as listening to children. Their definition of listening included paying attention not only to the verbal but also to the non-verbal aspects of the child's communication. These frontline workers stated that it was important to understand the child perspective, before making decisions. However these workers were ambiguous about the role of children's influence in decision making. Some workers felt that the decision had to be made by the adult, based on the information from the child whilst others felt that the child should make the final decision.

> *Participation in decision making is about understanding the child's situation and need. This can only be achieved when adults listen to what the child is saying*
>
> - Frontline worker, Puri

Both the above levels of asking questions and listening are attempts to understand what the child is saying. However in asking questions, there is an assumption that the

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child constantly needs to be probed to elicit information, whereas in listening, the frontline workers have a perspective that the child is capable of articulating their problem and that they have to pay attention to what the child says.

Participation as influencing decisions: There were some front line workers (10 out of 40) who held the view that participation was a partnership between children and adults. They stressed that there must be a give and take in decision making and an openness on both sides to dialogue and reach a consensus on the way ahead.

> *In my view, child participation is when two parties (children and adults)*
> *are talking, understanding each other and then taking a decision. We can*
> *say it is participative, when they have together taken the decision*
> *mentally*
>
> — Frontline worker, Bhopal

While there are elements of all the above forms of participation, viewing participation as children influencing decisions encouraged the view of a dialogue between adults and children. Many of these front line workers believed that they had to be flexible in using different strategies of listening, keeping in mind the situation of the child. These workers were also aware of the need to provide a supportive environment for children to voice their concerns.

> *Each child is unique and participation means understanding and then*
> *acting on the individual needs of the child*
>
> — Frontline worker, Puri

Thus while, most of the frontline workers talked of participation as respect, it had different connotations and therefore becomes important to further understand the motivations of the frontline workers towards child participation which I have attempted to outline in the subsequent section.

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4.2.2 Motivation of the frontline workers to encourage participation

While most of the frontline workers agreed that theoretically, the participation of children was important; their motivations to promote child participation differed. There were 3 out of the 40 frontline workers who stated that participation of children was not important. They felt that the decisions made at the helpline were crucial to the child's future wellbeing.

I analysed the motivations of the front line workers based on decisions that they would take on calls received and through my personal observations whilst being with them. Their responses of the interventions with children formed the basis of my analysis on their motivations towards child participation. Based on this analysis, I noticed four different set of motivations amongst the frontline workers to children's participation. I have classified under the following categories:

o *Informative*: Where participation was used to explain to the child what the frontline worker had decided

o *Instrumental* : Where participation was to convince children of what the frontline worker had decided for the child

o *Conflict Avoidance* : Where participation was used to avoid dialogue

o *Supportive* : Where participation was used to dialogue with the child to understand their life situation

In the table below, I have summarised the responses of frontline workers to different situations to illustrate their motivations in children's participation

Informative	Instrumental	Conflict avoidance	Supportive
Children not meeting shelter eligibility criteria, now wanting to go home			
■ Listen to the child ■ Send the child home	■ Talk to the child ■ Make the child comfortable ■ Send the child home	■ Talk to the child ■ If the child does not want to go home, refer the child to the Child Welfare Committee	■ Talk to the child ■ Find out the needs of the child requiring shelter ■ Try to find/convince a resource organisation, maybe outside the city to meet the child's needs ■ Arrange temporary shelter
Children without families, refusing shelter			
■ Listen to the child ■ Bring the child to the shelter	■ Explain to the child the benefits of the shelter and danger of the street ■ Bring the child to the shelter	■ Talk to the child ■ If the child does not want to come to a shelter, tell the child to call 1098 when they want	■ Talk to the child ■ Find out the reasons for the child not wanting to stay in the shelter ■ If it a new child, introduce him/her to the street volunteers ■ Maintain contact with the child
Children addicted to drugs			
■ Take away all the material used by children ■ Enrol the child in a de-addiction programme	■ Explain to the child the harmful effects of drugs ■ Take away all the materials used by children to sniff ■ Ensure a drug-free environment in the shelters ■ Convince the child to attend	■ Talk to the child ■ If the child does not want to attend the programme, tell the child to call 1098 when they would like to	■ Talk to the child ■ Start on the child's level ■ Explain that the child must gradually give up the drugs ■ Assess the shelter, education, vocational training needs of the child
Children not taking follow-up medicines			
■ Bring the child to the shelter	■ Explain to the child, the danger of having a relapse ■ Bring the child to the shelter	■ Talk to the child ■ If the child does not want to take the treatment, give the child the papers and ask the child to call if he or she has a problem	■ Talk to the child ■ Understand the reason/fear of the child ■ Involve the child's peer group ■ Monitor the follow-up with the child
Children who do not recognise their abusive situation			
■ Rescue the child	■ Explain to the child, the consequence of the abusive situation on them ■ Resuce the child	■ Talk to the child ■ If the abuse is severe, rescue the child ■ If the abuse is not severe, tell the child to call 1098 if they want	■ Talk to the child ■ Depending on the circumstances and the nature of the abuse, take appropriate action
Children who want to leave their homes			
■ Tell the child to stay at home as the street is a dangerous place	■ Explain to the child the benefits of staying in a family ■ Advice the child to stay at home	■ Talk to the child ■ If the child wants to leave, explain the support available to him/her	■ Talk to the child ■ Understand the reason for the child wanting to leave home ■ Discuss strategies to work towards resolving them

Table 4-6: Motivations of frontline workers

I now describe these response strategies that have been outline above

Informative: Some of the frontline workers (10/40) were interested in using participation as speaking to children in giving information, options to the child about the solutions to his/her problems. These frontline workers felt that they would not learn anything new from children. They used participatory techniques because the helpline policy required it and they felt that it was important as professionals working with children that children are not spoken to rudely or insulted. A typical response of the frontline workers with such a motivation for children's participation is illustrated below:

> *"We had a call from a concerned adult that a child was being abused in domestic work in a neighbours house. The child did not want to come with us. We had to force the child out of the home and brought her to the shelter. Today she is happy at a shelter for girls and is going to school. If we had not rescued her from the home, she might still be working there"*
>
> <div align="right">Frontline worker, Trivandrum</div>

The comments regarding the purpose of participation for these workers included:

o   Its important to use simple language that the child can understand when talking to the child

o   It is part of CHILDLINE's   creedo

o   Children do not generally know what's best for them, otherwise they would not be calling, so we need to decide for them

o   We need to hear what the child says, but it is our responsibility to take care of the child

The above comments were part of conversations that reflected that participation was being used because it enabled them to inform the child what the intervention would be in a respectful manner.

Instrumental interest: Some of the frontline workers (11/40) had already decided what the 'right' outcome was for the child. Their interest in using participation was to ensure that the child was able to see their (adult) point of view. Some of the typical responses to intervening with children on the street who was refusing shelter included:

> *"Sometimes we get calls from concerned adults for children on the street.
> After we bring the child to the centre, normally the child will tell like lies
> that his mother/father is dead or some other type of lies. At that time, we
> should not pressure on the child. After 4- 6 days we should speak to the
> child again and be a bit emotional by talking about the child's family,
> talking about his mother and asking if she would be concerned about
> him. The child w ill then start thinking and will tell us true situation and
> then we will send the child back home"*
>
> Frontline worker, Jaipur

The comments regarding the purpose of participation for these workers included:

- If you don't talk with love, then the child will not share any information with you and you will not be able to help the child

- To get the correct information from the child. For example in a case of a missing child, we need to ask questions to the child

- So that our interventions are effective. For example in a repatriation case- if we send the child home without his/her consent then s/he may run away again

- Participation is important to prepare the child before sending him/her home

- Calls for children who have been sexually abused, can only be solved with the participation of the child

- To do a detailed case study, we require information from the child, which we can get only if the child participates in the service

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Conflict avoidance interest: Some of the frontline (7/40) workers had not decided the outcome and saw the child's decision as the final line of intervention. Their interest in using participation was to act on what the child was saying. Some of the typical responses of workers with this type of interest included:

> *"Sometimes we come across concerned adults who call to tell us that there are children on the pavement or railway station. When we go there, we ask the child if they want to come to a shelter and tell them the rules of the shelter. If they agree, we bring them to the shelter. If the child does not want to come to a shelter, we tell the child to call 1098 when they want to stay in a shelter"*

Frontline worker, Puri

In this type of motivation, I observed that there was neither an attempt to understand the situation or context of the child is saying nor any attempt to discuss options with the child. Some of the frontline workers felt that it was important to encourage children's participation for the continuation of the service

- It is important to listen to what children are saying, so that we can act based on their voices

- We need to build a rapport with children, otherwise they will not call

- If children participate, then they will tell their friends about the service and the calls to the service will increase

Supportive interest: Some of the frontline workers (12/40) attempted toaddress the problem with the child, acknowledging that there are structures of power around the child that contribute towards the problem and that they too need to be addressed. Their interest in using participation was therefore to understand the context of what the child was saying, utilise resources in the environment of the child and maintain follow-up. Some of the typical responses included:

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" When a child refuses shelter, we talk to the child and try to find out the reasons for him/her not wanting to stay in the shelter. If we have a shelter that meets the child's requirement , we will refer him/her. If not, and If s/he is a new child to the street, we will introduce him/her to the street volunteers and maintain contact with the child"

<div align="right">Frontline worker, Bhopal</div>

The comments regarding the purpose of participation for these workers included:

- So that children get emotional confidence. Many of these children are from troubled backgrounds, so by encouraging participation, it builds up their confidence

- Participation enables permanent solutions with logical ends

- We cannot intervene without the participation of the child

- Participation of children encourages them to share their problems

- It is the right of a child to participate in decisions that affect him/her

- So that we can understand what children are thinking, it is important to listen to them

The frontline workers also highlighted several of their fears/dilemmas which concerned them about child participation. I have highlighted these in the following section.

4.2.3   The fears/dilemmas of the frontline workers

The frontline workers faced several fears and dilemmas regarding child participation that I attempted to understand. These included:

- ***Children would give wrong information / Children will tell lies*:** Several of the front line workers gave examples of children on the street that had given wrong addresses or had "lied" about their family situation. As a result, the workers felt that they were put in embarrassing situations, wasted time and money. These

experiences had led them to distrust children. When asked if children gave wrong information due to too little participation rather than too much, the feeling of the workers was that because the adults were being perceived as ' nice', the children were taking them for a ride and not taking them seriously. In such situations they felt it was important for children to have a fear of adult presence, knowing that the adults meant best for the child.

- *Children's minds are not fully grown up* : Several of the frontline workers also illustrated examples of 13-14 year having boyfriend/girlfriend issues or of not realising that home is the best environment by either wanting to run away or not wanting to go back. The frontline workers argued that since they have evidence that children's minds are not fully developed, it would not be proper for them to participate in decision making.

- *Children on the street are not used to rules and like living a free life*: Many of the frontline workers also explained that children on the street were used to living a free life and required to have strict boundaries. Hence they felt encouraging participation amongst this group of street children would not be fruitful. They quoted examples of street children taking drugs, engaging in sexual activities, despite being counselled by the frontline workers, as evidence of participation not working with this group.

- *Children can be manipulated by others*: The frontline workers listed examples of calls where they felt children had been manipulated to complain about others- a parent, a friend, teacher by an older sibling, relation or friend. They felt that

children did not perceive this manipulation and hence if allowed to participate on their own, they would be making a wrong decision, thinking it was their own.

- *Children are not reliable decision makers/ Children make wrong decisions*: Several frontline workers cited examples as evidence that children do make wrong decisions and do not know what is best for them. Some of these examples included: a 15 year old girl who refused shelter to stay on the street with a man ; a 12 year old boy who refused to stay in the Government Observation home, even though he wanted to study; children who continue to sniff glue despite knowing that it is harmful for health.

- *Children can misuse the phone* : Some frontline workers also felt that by allowing children to think that they 'own' the phone, would lead to misuse as they would play pranks which is evident in the amount of silent and crank and fun calls.

- *Children will have unrealistic demands/ Children could have worthless demands:* Some of the front line workers gave examples of calls from children such as not wanting to go to school; or wanting a sibling, or wanting a car – as unrealistic demands. They argued that participation encouraged children to think up these unrealistic demands.

These comments reflected to me that the frontline workers were fearful that participation would lead to children controlling the decisions I have attempted to understand the basis for these fears as well as how they may be overcome in the subsequent section.

4.2.4   <u>Analysing the perceptions of the frontline workers to participation</u>

In this section, I analyse :

- the motivation of the frontline workers to child participation and the meaning of participation to them

- the motivation of the frontline workers to child participation vis a vis their fears

Motivation of the frontline workers to child participation vis a vis their understanding of child participation : Whilst analysing the motivation of the frontline workers with reference to their understanding of participation, I observed the following:

o   All the frontline workers (10) with an informative interest in participation spoke about participation as 'speaking to children with affection'. This suggests that the frontline workers believed that they already had all the information necessary to make a decision.

o   The frontline workers with an instrumental interest in participation (11) had a wide range of meanings towards participation. Some felt (5) that participation was equivalent to rapport building (speaking to children with affection), whilst others (5) felt that it involved asking questions and one frontline worker stated that it meant listening to children.

o   The frontline workers with a conflict avoidance interest in participation (7) had an understanding of participation as that of asking questions (3) or listening to children (2) and influencing decisions (2) . These workers were interested in

getting the child to express their need, but were not concerned about making any of their own assessment regarding the situation.

o   The frontline workers with a supportive interest in participation (12), spoke of participation as listening to children (4) and influencing decisions (8). The four frontline workers who had believed that participation was about listening to children felt that though participation is a negotiation between adults and children, they did not share the belief that children's participation in decisions would not change systems around the child as this was not feasible

It is no point giving the child a false hope that the police will change, it is better to dialogue and listen to the child to cope and deal with police harassment

Frontline worker, Puri

By analysing the motivations of frontline workers to participation, I realised that frontline workers with the same goal of encouraging children's participation had differing meanings of how participation translated into action. Through this analysis, I also realised that the frontline workers who understood participation as 'influencing decisions' (10) had differing sets of motivation with 8 frontline workers having a supportive interest and 2 frontline workers with an conflict avoidance interest. This observation highlighted that there were differing values frameworks whilst having a common understanding of participation as 'influencing decisions'. In addition to understanding participation as influencing decisions, it is also important that the frontline workers have a 'supportive interest' that motivates them to understand the situation of the child.

Motivation of the frontline workers to child participation vis a vis their fears

All the frontline workers, irrespective of their motivation towards children's participation had fears and doubts about children's participation in decision making. Some of my findings regarding the motivation of frontline workers to child participation vis-a-vis their fears in promoting child participation are outlined below:

o The frontline workers with an instrumental or informative interest in participation fears about children's participation in decision making included: children giving them wrong information/lies; making unrealistic demands, their minds not fully grown up, not being reliable decision makers, misusing the phone, not being used to rules. This suggested that they looked at children as largely incompetent.

o The frontline workers with a conflict avoidance interest in participation fear about children's participation included that if children did not correctly express themselves then the wrong decision would be taken. They also feared that if the child is not aware of the service then they would be unable to avail of any assistance. This suggested that they looked at children's inability to express themselves as the key stumbling block towards encouraging fuller participation.

o The frontline workers with a supportive interest in participation had the fear that children could be manipulated by other adults and hence faced several dilemmas in encouraging participation. Some of these frontline workers also feared that the service may not have sufficient resources to meet children's needs. This suggested that these frontline workers perceived that adults needed to be trained

effectively to listen to children and be honest in their role of encouraging children's participation.

My observation from this analysis was that there are several fears that all frontline workers experience in encouraging children's participation. Some of these fears were based on experiences of the frontline workers' interaction with children whilst others on their perceptions of children. By sharing and talking about their dilemmas about children's participation, the frontline workers articulated their viewpoints of how they perceive children and their (frontline workers) role in interventions. This discussion on dilemmas towards children's participation could thus be a starting point towards supporting the frontline workers to be more participate with children.

4.2.5 Changes in perceptions to children

Most of the workers (30 out of the 40) stated that felt that their perceptions about children had changed since their work at the helpline. When I asked them how their perceptions had changed, there were three main categories of responses.

There was one group that felt that that their perception about children's innocence has changed.

> *Children can do terrible things. They are not always as sweet as they look*
>
> Frontline worker, Puri

Another group that felt that they did not realise that children were facing and coping with such problems. They thought them to be victims but now think of them as resourceful which some though positively and others negatively

> *Children know exactly how to manage their lives, where free food is available etc*
>
> Frontline worker, Trivandrum

> *Children are smart, they can take both me and you together for a ride*
>
> Frontline worker, Jaipur

The third group talked about an understanding of children having rights. There were five team members who perceived that they had moved from an instrumental motivation since they started to having a transformative motivation.

> *" I initially used to think that participation was important to get correct information from the child. However now I realise that it is their right to participate, just like other human beings"*
>
> Frontline worker Bhopal

As the literature had pointed out, I did observe that many frontline workers seemed to move from one extreme position to the other extreme and tended to generalise some experiences onto all groups of children.

4.3   Perceptions to participation of children and frontline workers

In this section, I analyse, the differences in perceptions between children and the frontline workers with reference to their definitions of participation and their motivations to participate.

In my research, I have found that children are already participating in a variety of ways in their daily lives. However most children seem to undervalue the work they do and do not think the work they do is important. In the group discussions with children, they initially listed a long list of things that children could not do such as work, cooking, using tools and when they saw pictures of children doing this work and when this was discussed, some of children explained that they were involved in the work, this list become shorter.   In my discussions with children, I did not come across any 'unrealistic demands' from children. In all the focus groups, children came up with 'normal', practical demands and suggestions for services- to be treated with respect and dignity.   Children wanted to be treated as equals. They did acknowledge that there are various kinds of decisions and that there were some they could take whilst others required consultation with adults and still others were left best to adults.   The fears of the frontline workers however reveal that when participation is associated with decision making, they have a perception of children controlling decisions and hence are wary of this process.

One of the main themes that children gave for participation in the helpline was that it aimed to meet an important need of theirs (medical assistance or shelter or to interact with other children). The other factor that was important to them was to see that there

was progress that the service was moving towards actually meeting their needs. The children also stressed that participation gave them a sense of respect and as volunteers they felt proud to be part of the service. For most of the frontline workers, there was no flexibility in the end decision, but there were using participation as a process for the child to accept the outcome. For most children, participation was a level of trust in which was not only a process but also left the outcome open for them to influence.

While words like partnership, dialogue all help in conveying certain elements of participation and these words were being used by all frontline workers. Based on my conversations with frontline workers, I gained an understanding of the importance for participation to be linked to influencing decisions; having flexibility and openness about outcomes; and being rooted in a value framework. I shall further discuss these three elements of participation in Chapter 7.

In conclusion, based on my discussions with children in the four cities, the children stated that the helpline project was very relevant in meeting their needs and concerns. Based on my interactions with frontline workers, I realised that children's participation had also resulted in changes in attitudes amongst some of the frontline workers who began to perceive children as being more competent.

Having gained an understanding of the meanings of participation from children and the frontline workers, in the next chapter I now attempt to evaluate the level of participation and service outcomes.

5 Evaluating participation and service outcomes
: A comparison of the four helplines

My key research question aimed to understand whether projects with higher levels of child participation produced better outcomes. As emphasised in the first chapter, I recognise that participation is the right of every child, irrespective of its practical effects. However, as the literature highlighted that there was a gap in research on the actual linkages between participation and outcomes, I attempted to explore this relationship. I have used the framework mentioned in Chapter 3 to measure the level of children's participation as well as the outcomes of the project. In this chapter, I present my findings from the four helplines.

I have divided this chapter into three main sections. In the first section I compare the level of children's participation in the helpline across the four case studies. I analyse this by examining children's participation in the planning, organisational structure, individual decision making and monitoring& evaluation of the helplines in the four helplines. In the second section I compare the project outcomes of the helplines in the four cities. I analyse this by examining the nature of calls received by the helpline, the training workshops with allied systems and the functioning of the CHILDLINE Advisory Board (CAB) in each city. In the third section, I summarise the key findings regarding the level of participation and the project outcomes of the four cities.

I explore the role of children's participation in achieving the outcomes of the service in Chapter 7.

5.1 Comparing the level of children's participation

As explained in Chapter 3, I attempted to measure the level of children's participation in the helplines of the four cities by examining the role of children in the planning, implementation, individual decision making, monitoring& evaluation, based on the benchmark criteria that I had identified. I have arrived at my analysis based on the documentation available at CIF and the city and my discussions with the frontline workers and children in the city. An overview of the findings of my research regarding the level of participation in the four cities is summarised in the figure below:
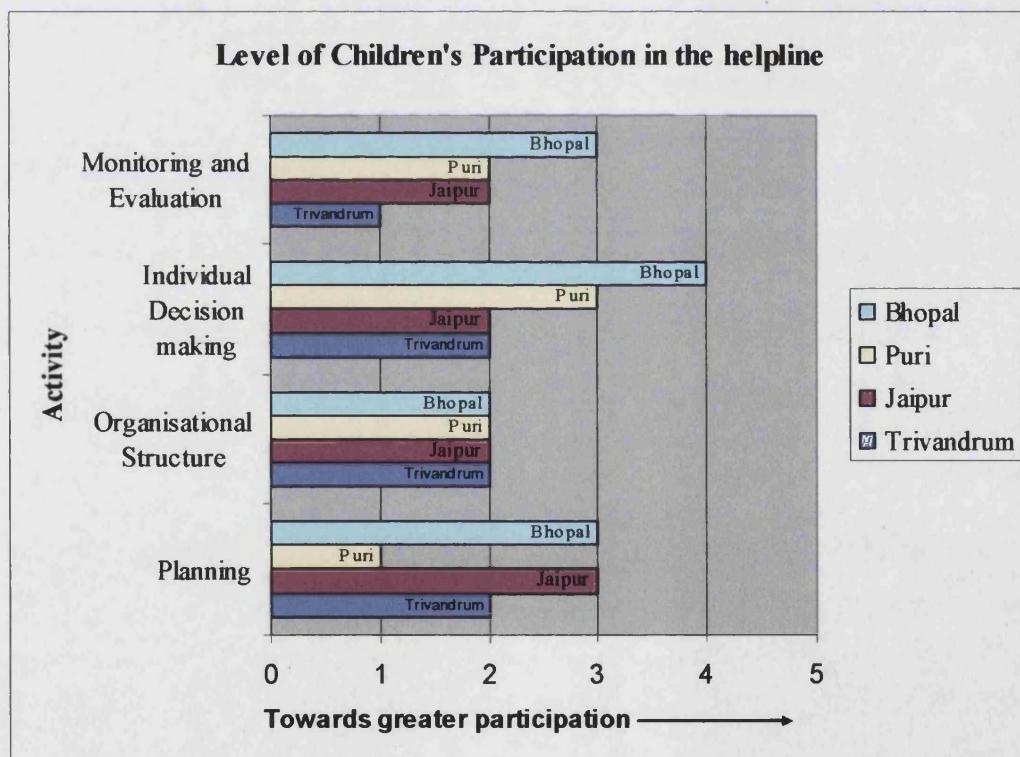
Figure 5.1 Comparison of the level of children's participation in the four cities

In this section, I now describe the evidence with which I made the above conclusions

5.1.1 Children's participation in planning the helpline

(a) **Trivandrum:** In Trivandrum, an informal Need Assessment Study (NAS) was conducted. The staff at the city explains that a formal need assessment was not conducted due to the large number of street children on Trivandrum station, which made it obvious that there was a need for such a service. The CIF agree that the helpline in the city was started without conducting a formal NAS due to shortage of time to meet targets and also due to the fact that there was no academic organisation in the city involved in the planning stage to anchor the NAS. There were three informal meetings of children's organisations in the city that were conducted prior to the launch of the service. The CIF team met with children at the implementing agency to discuss the issues faced by them. Children were present at the inauguration of the service and performed songs, dances.

(b) **Jaipur:** In Jaipur, a formal NAS was conducted in the city. A sample of 600 children comprising of street and working children and children in slum communities were asked for their comments. The main potential reasons given by children for wanting to call the helpline included: vocational training, employment, protection from the police. There were three meetings of children's organisations in the city that were conducted to discuss the findings of the NAS. Additionally there was a workshop with children organised to determine their views on the functioning of the helpline. The Minutes indicate that the objectives of the meeting were to find out the role children could play as volunteers in spreading awareness about the service.

(c) Puri: In Puri, the helpline was started as a response to the Cyclone that affected Orrisa in 2000. As the helpline was initiated as an emergency relief system, the standard processes were not conducted. There was a meeting of NGOs in the city, based on which RUSH was selected as the phone receiving centre. However there was no Need Assessment Study with children conducted though CIF met informally with children to discuss the nature and concept of the helpline with children.

(d) Bhopal: In Bhopal, a NAS was conducted in the city with a sample of 946 children comprising of street and working children and children in slum communities. The main potential reasons given by children for calling the helpline included: medical help, shelter, protection from the police, sponsorship. There were five meetings of children's organisations in the city that were conducted prior to the launch of the service. Additionally there were two workshops with children organised to determine their views on the functioning of the helpline. The children did identified that they would call for employment. As in Jaipur, the Minutes indicate that the objectives of the meeting was to find out the role children could play as volunteers in spreading awareness about the service.

(e) Summary of the level of children's participation in planning the service: Based on the documentary evidence I have evaluated the role of children in planning the helpline as follows:

City	Activity	Level
Trivandrum	Adult need Assessment undertaken and informal consultations with children	2
Jaipur	Adult need assessment undertaken and meetings with children to discuss findings	3
Puri	Informal consultations with children	1
Bhopal	Adult need assessment undertaken and meetings with children to discuss findings	3

Table 5-1: Children's participation in Planning the helpline

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5.1.2 Children's participation in Implementation (Organisational Structure)

(a) Trivandrum: In Trivandrum, children were involved in the functioning of the service in the following capacities:

- Staff of the helpline: There were no children/youth staff members. Additionally, none of the frontline workers had a background of ever having lived on the street. The reasons given by the city level staff for no children/youth on the team were: the calls for emotional support and guidance cannot be handled by street youth; the high degree of educated unemployment due to which graduates/post graduates are willing to work at the helpline salary scales as well the lack of literacy skills amongst street youth to do the detailed computer documentation required.

- Paid volunteers: There were no youth as paid volunteers. There were 2 street youth paid as volunteers from 2000- 2001. Their role was to conduct daily outreach amongst children to spread awareness about the service as well as assist in interventions especially medical cases when a volunteer was required to stay with a child in a hospital. The frontline workers however explained that the street youth were not accountable and would not be available at the time they were required, so they were made redundant.

- Volunteers: During my field work I met with a group of 15 youth volunteers who were performing the above role.

- CHILDLINE club members: There were currently 'CHILDLINE clubs' in 2 communities where the collaborative organisation works. Based on my interactions with the children, I observed they had a very good knowledge of the helpline.

During my group discussions, I interacted with Volunteers and CHILDLINE club members. These were largely children on the street and children in slum communities. These children (7) regularly referred children who were new to the city to the helpline or when they noticed a child who was ill on the platform.

(b)Jaipur : In Jaipur, children were involved in the functioning of the service in the following capacities:

- Staff of the helpline: There were no children/youth staff members. The team explained that given the stressful nature of the work, it would not be feasible for children to be full time members.

- Paid volunteers: There were c three youth as paid volunteers. Their role is to conduct daily outreach amongst children to spread awareness about the service as well as assist in interventions especially medical cases when a volunteer was required to stay with a child in a hospital.

- Volunteers: In Jaipur there were several children (boys) who live in the shelter of the phone receiving organisation who are active volunteers

- CHILDLINE club members: There were two CHILDLINE clubs in the city.

During my focus group discussion, I interacted with volunteers in the residential home that were active volunteers for the helpline. These volunteers had prepared a special skit and song on the helpline. They were also observant to refer children they came across whilst on their way to school who may need assistance.

© Puri: In Puri, children were involved in the functioning of the service in the following capacities:

- <u>Staff of the helpline:</u> There were no children/youth staff members. The team explained that given the nature of child protection work, it would not be appropriate to put children at risk by involving them as frontline workers

- <u>Paid volunteers:</u> There were no child volunteers in the team

- <u>Volunteers:</u> In Puri, there were several children and adults that have been identified in communities as child friendly contact persons.

- <u>CHILDLINE club members:</u> There were' CHILDLINE clubs' in 5 communities where RUSH works. Based on my interactions with the children, they had a very good knowledge of the helpline.

In my focus group discussions with children, I met with children who volunteered their services and they were largely children in slum communities. They said that they were very active in spreading awareness about the service and in testing phone connectivity.

(d) Bhopal: In Bhopal, children were involved in the functioning of the service in the following capacities:

- <u>Staff of the helpline:</u> There were no children/youth staff members. The team explained that given the nature of documentation skills and time schedule of the helpline, it would not be feasible for children to be frontline workers.

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- Paid volunteers: There was one paid volunteer. His role was to conduct daily outreach amongst children to spread awareness about the service as well as assist in interventions especially medical cases when a volunteer was required to stay with a child in a hospital.

- Volunteers: In Bhopal there were several communities that had helpline volunteers. This includes both children and adults who have been identified as child friendly persons

- CHILDLINE club members: There were ' CHILDLINE clubs' in 5 communities where the collaborative organisation works.

Based on my interactions with the children, they had a very good knowledge of the helpline. Several children had called the helpline for themselves or to refer a friend. They had conducted awareness programmes in schools for children and teachers.

(e) **Discussion on level of children's participation in the organisational structure:** Based on the above evidence, I have evaluated the level of children's participation in the organisational structure as follows:

City	Activity	Level
Trivandrum	Children involved as volunteers, as club members	2

5.1.3   <u>Children participation in Individual decision making</u>

Children's participation in individual decision making is the core activity at the helpline. I have based my evidence on the level of children's participation in individual decision making based on the responses to the vignette situations that I discussed with the frontline workers; my observations at the helpline centres and discussions with them and my interactions with children who had called the helpline. In Chapter 6, whilst analysing children's capacity and best interests, I further elaborate upon the issues highlighted here. In this section, I therefore summarise the key observations regarding children's participation in individual decision making.

(a) Trivandrum: In Trivandrum, the frontline workers explained that they felt that children did not have the capacity to influence decisions. However they did discuss some groups of children that could influence decisions such as older street boys (17 or 18 years). They explained that if these older street children did not want to go home or refused shelter then the frontline workers would respect their decision. The age profile of callers as outlined in Graph 5.6 (page 168) indicates that above 50% of the callers are above 15 years. However the Graph 5.8 (page 170) also reveals that only 7.3% children are children living on the street (alone). Hence the proportion of older street youth calling the helpline who are involved in decision making were less than 7 percent of all children. My observations at the helpline centre confirmed that children were not asked their opinions on intervention strategies or outcomes though the frontline workers made an attempt to make the child comfortable whilst talking to him/her.

(b) Jaipur: In Jaipur, the frontline workers explained that they thought street children or children who were in slum communities but working, could influence decisions with regard to protection such as wanting to go home. The frontline workers were of the opinion that adverse economic conditions resulted in greater competence of the children. They felt that in decisions of medical help or shelter there was not much scope for children's participation due to limited choices. They also felt that children could not be involved in rescue decisions. Based on the life situation of children calling the helpline, there are about 72% children in slum communities, and around 5.5% children living on the street alone. The team basically narrowed down the decisions where children could have a say to calls related to missing and repatriation and these account for approximately 24% of the calls (Figure 5.4, page 166). Even assuming that all these calls are from street children/working children the statistics indicate therefore that only around 25 % of children are involved in influencing decisions.

(c) Puri: In Puri, the frontline worker perceived that children could influence most calls except those for rescue. They explained that these calls require specialised intervention so children would not be able to influence the outcomes in such situations. The calls for rescue account for approximately 8 % (Figure 5.4, page 166) and frontline workers are therefore open to children influencing outcomes in the remaining 92 % of calls to the helpline. My observations at the helpline centre confirm this as children were asked about their wishes and explained about choices regarding interventions.

(d) Bhopal: In Bhopal, the frontline workers felt that every child could influence any decision. They perceived that it was important to dialogue with children and to support each child in expressing their opinion on decisions. Hence all children calling the helpline could influence outcomes. My observations at the helpline centre confirm this.

(e) Summary on the level of children's participation in individual decision making: Based on the data I collected, I have evaluated the level of children's participation in individual decision making at the helpline as follows:

City	Activity	Level
Trivandrum	Children mostly do not influence decisions, older street children can	2
Jaipur	Street children/Working children can influence decisions except that of abuse/rescue	2
Puri	Children's views can influence decisions except decisions regarding rescue	3
Bhopal	Every child can influence any decision	4

Table 5-3: Children participation in individual decisions

Based on the above analysis, I have therefore evaluated Bhopal as highest followed by Puri and then Trivandrum & Jaipur

5.1.4 Children participation in monitoring & evaluation of the helpline

I have evaluated the level of children's participation in monitoring the helpline through the evaluation of the way in which the Open houses are conducted in the city. The Open house is facilitated by the frontline workers and is a monthly meeting

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with children in different parts of the city to provide a forum for children to review the performance of the service and suggest ways to improve its effectiveness

(a) Trivandrum: There were no written minutes on the Open house conducted by the city. However the frontline workers explained that each month on an average 30-40 children participate in the Open houses. The frontline workers view that the main objective of the Open house was to make children aware of the 1098 number and get them more involved in the functioning of the service so that they would be able to tell their friends about the service. I attended an Open house for children where 32 children were present. This Open house was organised in the premises of the collaborative organisation. The children attending were from the same community that had the CHILDLINE clubs. During the open house, the children were asked to think about a skit on how the helpline could be presented in schools as well as a song that could be used in the script. The children were divided into three groups and each group was given approximately 25 minutes to discuss this amongst themselves and then present it to the larger group. The children were very enthusiastic in their preparations and all three groups presented their skits. The frontline worker was very appreciative of the skits performed by the children. There was however no plan of action as to how these skits could be taken forward such as by being performed in communities. During this open house, I also observed that the children were not asked for any feedback on issues regarding the improvement of the service.

(b) Jaipur: There was no written documentation on all the Open Houses organised in Jaipur. The frontline workers explained that generally each month on an average 15-20 children participate in the Open houses. The frontline workers view the main objective of the Open house is to make children aware of the 1098 number and get

them more involved in the functioning of the service so that they would be able to tell their friends about the service. I attended an Open house for children where 50 children were present. This Open house was organised in the premises of Jan Kala, the support organisation. During the open house, the children were asked about the problems in their community. The children listed out problems such as educational; (non availability of books, in ability to pay school fees, need for uniforms); health (non availability of medical supply , problems of admission and getting beds, absence of doctors), social (hooliganism, alcoholism, early marriage, CD parlours showing pornography) ; amenities (lack of water, poverty, restricted access to phones, non availability of electricity). The facilitator spoke to the children and explained that these issues would be presented to the CAB. My observation of this process was that the children were not explained the action steps that would need to be followed up to meet their concerns and issues.

(c) Puri: The documentation indicated that the helpline organises Open houses on a regular basis and on an average 15-20 children were present. I attended the Open House in Puri that was attended by 15 children in a slum community. The facilitator began by welcoming the children and explained that the purpose of the Open House was to tell the children about the helpline. He then explained about the nature of the helpline and asked the children as to when they would call the helpline. The children explained that they could call if they had an accident, a family member was ill or if they were lost. The facilitator asked the girls present at the Open House specifically if they had any reasons they would call the helpline or if they had concerns at present. One of the girls explained she would call if anybody was teasing or beating her. The facilitator outlined all the problems that the children has listed and also told

them that it was important to tell their friends about the service. My observation was that the facilitator engaged with children to identify problems though the children were not made aware of the ways in which they could rally themselves to address some of the problems.

(d) Bhopal: There is no documentation about the Open houses. The frontline workers however informed me that each month on an average 25-35 children participate at the Open House. At the Open House that I attended in Bhopal, there were approximately 15 children. It was held on the railway station at Bhopal. At the station all the children had called the helpline either for themselves or for a friend. The facilitator began by thanking the children for attending the Open house. He then explained that the purpose of the meeting today was to get feedback for the helpline to improve. Through a game, the children were asked not to be afraid of the frontline workers but to speak what they felt. The Open house began with a skit performed by youth. This skit introduced the helpline and when children could call the helpline. After the skit, the children were asked how many had previously known about the helpline – 7 out of the 15 children had called the helpline. The facilitator asked the nine children who had called the helpline, if they had any problems getting through if they were satisfied with the response given by the helpline. Three children had called for medical help and four children had called as they had seen new children on the station and so called the helpline. The children who had called to refer other children said they knew the frontline workers responded to the calls, but were unaware of what had happened later. The facilitator asked if the children would like to be kept informed and they children said they would appreciate this feedback. The facilitator then promised the children that in future when they were on outreach they would tell the volunteers about the follow-up of cases. He also suggested that the volunteers

who refer children could call 1098 to check the status of the intervention. The facilitator then asked the other children how they thought they could be involved in taking the helpline forward. Some children suggested that children in schools should know about the service and especially teachers. The facilitator then fixed up a day when they would go to speak to the school to conduct an orientation on the helpline service. The facilitator stressed that the helpline is available 24 hours if children wanted to talk about anything that was troubling them. My observation was that the facilitator made a keen effort to identify issues/problems regarding the helpline and discuss solutions with the children. These discussions however revolved more around awareness issues and did not cover other concerns that children may have.

(e) Summary of the level of children's participation in monitoring & evaluation:

Based on the evidence I have collected, I have evaluated the level of children's participation in monitoring & evaluating the helpline as follows:

City	Activity	Level
Trivandrum	Children involved in ways to spread awareness about 1098	1
Jaipur	Children involved in identifying issues of concern	2
Puri	Children involved in identifying issues of concern	2
Bhopal	Children involved in discussing issues of concern	3

Table 5-4: Children's participation in monitoring and evaluation of the helpline

My observations at attending the Open House were that children could be more actively involved in monitoring and evaluating the service. The open houses were being regularly conducted on a monthly basis by the cities and provided a mechanism for children's views to influence the service and an opportunity for the frontline workers to listen and dialogue with children. In the next section, I shall analyse the evaluation of the service outcomes of the four cities. I return to summarise the key conclusions regarding the level of children's participation and service outcomes of the four cities in the conclusion of this chapter.

5.2 Comparing the level of service outcomes in the four cities

In this section, I have described the evidence I collected to evaluate the service outcomes of the helpline in the four cities. As explained in Chapter 3, I attempted to do this by examining the three project outcomes of the service: Nature of calls in responding to marginalised groups of children, the training workshops conducted with allied systems to develop avenues of collaboration, and the functioning of the CHILDLINE Advisory board to generate more resources for children.

Based on only the quantitative outputs in terms of implementation of activities, the comparison of the project outcomes of the four cities is summarised below:
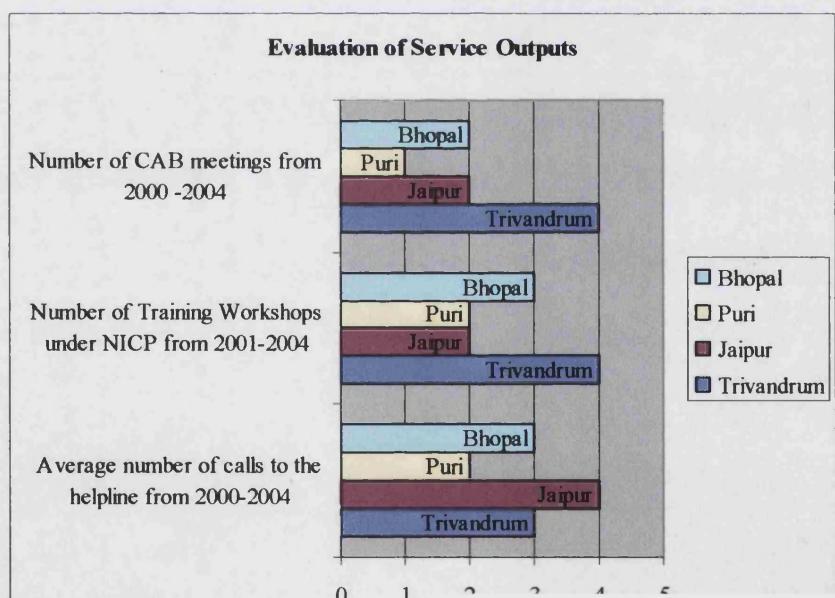
Figure 5.2: Comparison of service outpu

However, I have also attempted to understand the ef

immediate objectives of reaching out to marginalise

of collaboration with allied systems and allocation o

5.2.1 Objective 1: Responding to marginalised groups of children

In this sub section, I analyse the nature of calls received by the helpline in responding to marginalised groups of children in the city. The calls to the helpline are classified into four categories: Intervention, Emotional Support and Guidance (ES&G), Information and Miscellaneous. In my analysis, I shall focus on the Intervention calls to the helpline. I have not done a detailed analysis of the calls for ES&G due to the varied understanding from chat calls to counselling. Additionally, these calls are not considered as the primary focus of the helpline. In this subsection,I

(a) analyse the **Intervention** calls that include medical, shelter, sponsorship, death related, repatriation, rescue and missing from 2000- 2005

(b) analyse the **Intervention calls in ChildNET** (the computer package) for the year 2003-2004
   - Types of Intervention calls to the helpline
   - Timings of Calls to the helplines
   - Age distribution of children assisted by the helpline
   - Sex of children assisted by the helplines
   - Family support of children assisted by the helplines
   - Educational background of children assisted by the helpline

(c) analyse the **Emotional Support &Guidance** calls to the helplines from 2000-2005

(d) analyse the **Information** calls to the helplines from 2000-2005

(e) analyse the **Miscellaneous** calls to the from 2000-2005

(f) analyze the number of children directly calling the helpline

(g) Discussion on comparison of helplines based on the nature of calls by marginalised groups of children

(a) <u>The number of Intervention calls received by the helplines</u>:

		Medical	Shelter	Sponso rship	Death related	Repatria tion	Rescue	Unclassif ied	Missing	Total
2001- 2002 *	Trivandrum	92	170	151	2	50	48		59	572
	Jaipur	552	157	0	1	7	151		186	1054
	Puri	298	11	1	2	155	7		66	540
	Bhopal	35	34	1	1	143	15		203	432
2002- 2003 *	Trivandrum	90	213	157	4	37	42		66	609
	Jaipur	1065	148	2	0	133	105		142	1595
	Puri	287	30	6	11	117	28		115	594
	Bhopal	16	25	1	2	69	22		252	387
2003- 2004 **	Trivandrum	31	119	50	3	19	20		36	278
	Jaipur	1053	116	0	0	196	83	60	146	1654
	Puri	181	13	3	15	49	34		121	416
	Bhopal	17	34	3	0	84	17	123	225	503
2004- 2005 **	Trivandrum	67	102	74	0	25	28		44	340
	Jaipur	1203	167	3	0	213	150	4	228	1968
	Puri	132	23	0	9	14	37		159	374
	Bhopal	7	21	3	1	69	8	106	261	476

Table 5-5: Intervention calls received by the helpline in the four cities across the years
* As reported by the city   ** Based on ChildNET
Source: CIF as compiled from reports sent in by the concerned city

- The calls for medical assistance range from children having a headache, bruises to serious injuries and illness requiring hospitalisation. The frontline worker on meeting the child may therefore give the child first aid or take the child to the Out patient Department (OPD) of the nearest hospital and if required the child could be admitted into the hospital. Jaipur received the highest number of medical related calls amongst the four cities.

- The calls for shelter are from children who have left home or are abandoned, children who require shelter because they are ill or parents who seek shelter for their children. The frontline worker makes an assessment of the situation and

refs the child to an appropriate organisation. Trivandrum received the highest number of calls for shelter amongst the four helplines.

- The calls for sponsorship are related to financial assistance towards educational or health expenses of children. Trivandrum received the highest number of calls for sponsorship. In such situations the frontline worker refers the call to an appropriate individual or organisation.

- The calls for death related services refer to the services provided by the helpline to cremate/bury a child who has passed away and has no family support. Puri received the most number of calls amongst the four helplines.

- The calls for repatriation are for children who have left their homes and now wish to return. These children may reside within the city or outside. The frontline workers contact the family and then if possible escort the child back home and inform the nearest helpline to the child's family for follow-up. Jaipur recorded the highest number of calls for repatriation, across the five years.

- The calls for rescue are to intervene in calls where children are being physically, financially and/or sexually abused. The frontline workers assesses the situation and if required the child is placed in a Juvenile home or shelter. The helpline in Jaipur reported the highest number of calls for rescue amongst the four cities

- The Unclassified calls are those that cannot be easily categorised into the framework. Bhopal had the highest number of unclassified calls. These calls are generally related to family problems but did not amount to rescue.

- The calls for missing children include children who are lost/trafficked and come into contact with the helpline as well as parents who seek assistance in tracing their missing child. Depending on the situation, the frontline workers liaise with the Missing Persons Bureau as well as the Police to trace the child's family

(where children are lost/trafficked) and the child (where parents report a missing child). Bhopal received the highest number of calls regarding missing children across the five years, amongst the four cities.

The graph below plots the intervention calls received by the four helplines across the five years.

Intervention calls

	2001	2002	2003	2004
Triv	572	609	278	340
Jaipur	1054	1595	1654	1968
Puri	540	594	416	374
Bhopal	432	387	503	476
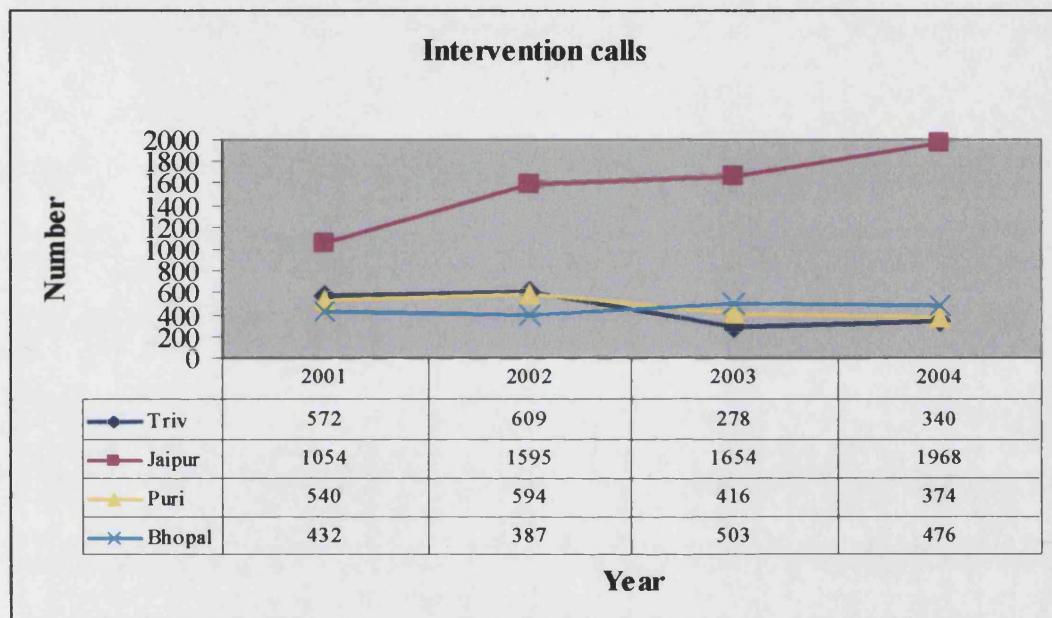
Figure 5.3: Intervention calls across the five years

The graph above indicates that Trivandrum, Puri, Bhopal report an average of approximately 450-480 calls annually. Jaipur reported an average of approximately 1500 calls annually. This was due to the high number of medical calls intervened by the helpline as it associated itself in public health provision such as vaccination camps. Additionally, the helpline classifies one child under several categories. For example if a child who wishes to be sent home, is provided temporary shelter and is

subsequently, I have looked at the data captured by the computer programme for all calls received during the year 2003-2004 to ensure a common analysis of calls within similar parameters.

(b) Analysis of Intervention calls in 2003-2004 recorded in ChildNET: CIF began entering data of the helplines into a specially designed computer package starting in 2003. I therefore was able to use this data to better understand the nature of calls received by the helplines. There was however a discrepancy in the calls reported by the cities and those recorded onto the ChildNET programme. CIF reports that for the year 2003-2004, Trivandrum has 81% of calls recorded onto ChildNET, Jaipur has 69%, Puri has 95% and Bhopal, 93%. The reasons for the discrepancy are being investigated by CIF and the cities. However there have been instances where all calls received by the helpline have not been documented. In my analysis of who the helpline reaches out, I have looked at the calls that have been officially documented onto the ChildNET computer programme. CIF is scheduled to publish the ChildNET data for 2004-2005 in May 2006, so I have not been able to include this data in my analysis, except for the total number of calls during the year.

The calls received by the helpline are first logged onto a register and then all intervention calls are written onto the specially formatted register which has details about the call, child, problem and assistance etc. All the Intervention forms for the year 2003-2004 were photocopied by the city and sent to CIF where there were centrally entered onto the ChildNET computer package. CIF employed and trained special data entry personnel for this purpose. Any unclear forms were marked and sent to the city for clarification and then entered onto the package.

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Calls received by the cities (2003-2004) as captured by ChildNET

	Trivandrum	Jaipur	Puri	Bhopal
Medical	31	1053	181	17
Accident	2	13	14	1
Casualty	1	2	20	
First Aid	5	848	55	13
Hospitalization	16	5	60	
OPD	4	111	30	3
Not recorded	3	74	2	
Shelter	119	116	13	34
Child Left home	41	60	3	14
Child Left shelter	6	9		2
Abandoned	40	9	5	11
Medically ill	1	4		
Parents seeking shelter	26	10	5	5
Not recorded	5	24		2
Sponsorship	50	0	3	3
Education	47		1	1
Foster care	2			1
Health	1		2	1
Death related	3	0	15	0
Accident	2		8	
Disease			7	
Suspicious	1			
Rescue	20	83	34	17
Physical abuse by neighbours	4	2	3	
Physical abuse in institutions	1	12	1	1
Physical abuse in family	3	14	18	7
Physical abuse in workplace	2	45	4	2
Physical abuse by police	1		2	
Sexual abuse by neighbours	2			
Sexual abuse in institutions	1		1	
Sexual abuse in family			1	3
Sexual abuse in workplace	1			1
Financial abuse	1		2	
Not recorded	3	10	2	1
Unclassified*	0	60	0	123
Repatriation	19	196	49	84
Within the city	0	120	21	23
Outside the city	19	76	28	61
Missing children	36	146	121	225
Child Lost	18	80	61	98
Parents seeking	18	66	60	127
Total	278	1654	416	503

Table 5-6 : Calls captured by ChildNET

Notes: This excludes calls for Emotional support and guidance

- The number of calls received by the helpline (2003-2004) in percentage

Types of calls (ChildNET) 2003-2004

	Medical	Shelter	Sponsorship	Death related	Rescue	Unclassfied	Repatriation	Missing
■ Trivandrum	11.15	42.81	17.99	1.08	7.19		6.83	12.95
■ Jaipur	63.66	7.01			5.02	3.63	11.85	8.83
□ Puri	43.51	3.12	0.72	3.61	8.17		11.78	29.09
□ Bhopal	3.38	6.76	0.6		3.38	24.45	16.7	44.73

Type of call / City

(Y-axis: Percentage, 0 to 70)
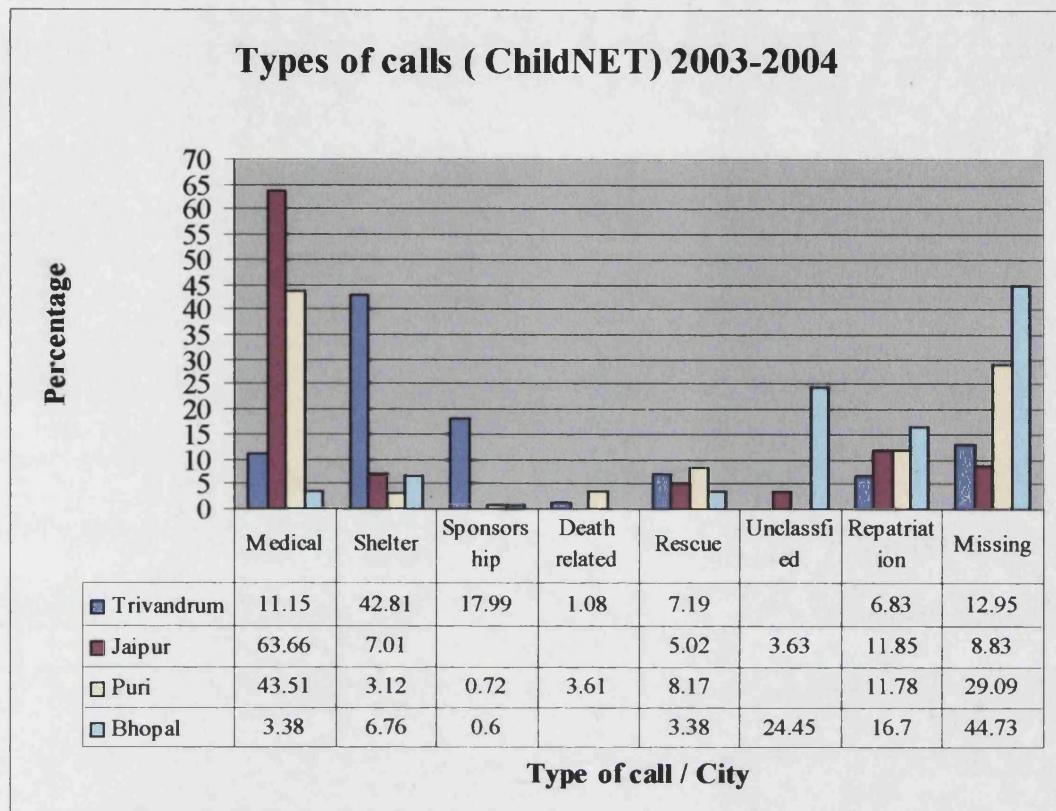
Figure 5.4 Type of calls received by the four helplines (2003-2004)

Source: ChildNET data. CIF

receive with the following reasons. In Jaipur, they explained that it is a commercial

The timings of the calls : The helpline is operational 24 hours to enable

children to call whenever children want to speak to someone. The timing of the calls

is an indicator of the ability of the helpline to reach out to children who are unable to

access other services. As explained in the methodology chapter, I have therefore

analysed the timings of the calls received by the four helplines, to examine the

number of calls received from 6 pm to 10 am , when other organisations are

generally closed and hence children have very few other services to approach.
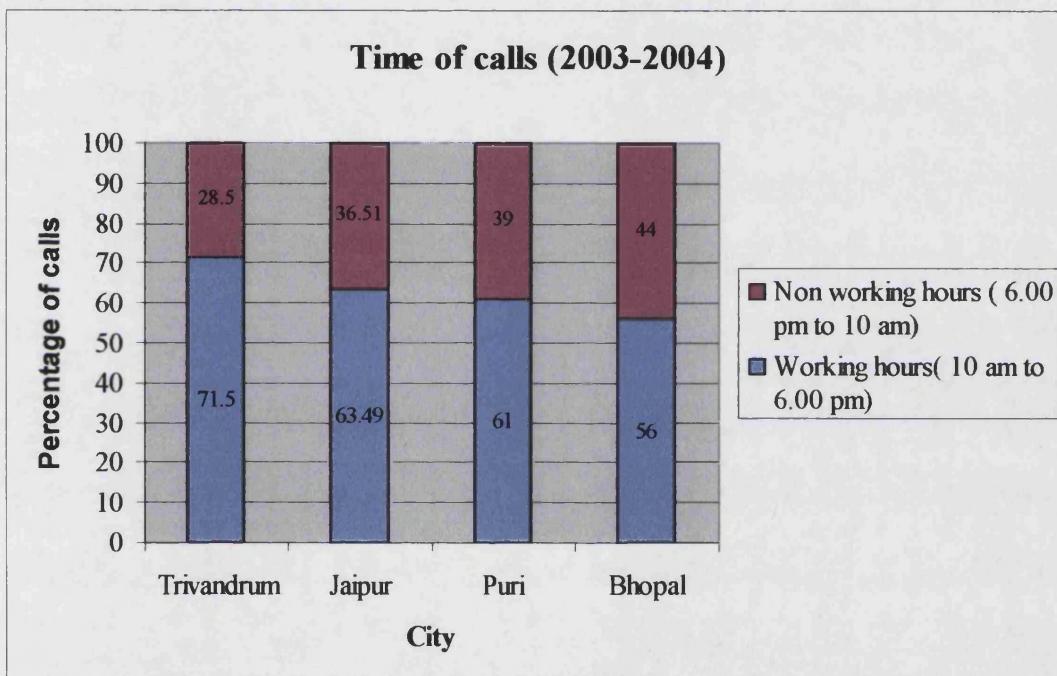
Figure 5.5:Timings of calls received by the helpline (2003-2004)

Source ChidNET, CIF

The above chart illustrates that Bhopal receives the highest percentage of calls in the

night/when other organisations are closed i.e. from 6.00 pm to 10.00 am and

CHILDLINE Trivandrum receives the least percentage of calls during the day.

In terms of ranking cities in reaching out to children in the nights, Bhopal is first,

followed by Puri, then Jaipur and finally Trivandrum.

The age distribution of the children assisted by the helpline : As outlined in the methodology chapter, I have classified certain groups of children as being marginalized, with age of the child as a factor. I have outlined the age distribution of children assisted in order to understand how many younger children (below 10 years) access the service or are benefited from it.
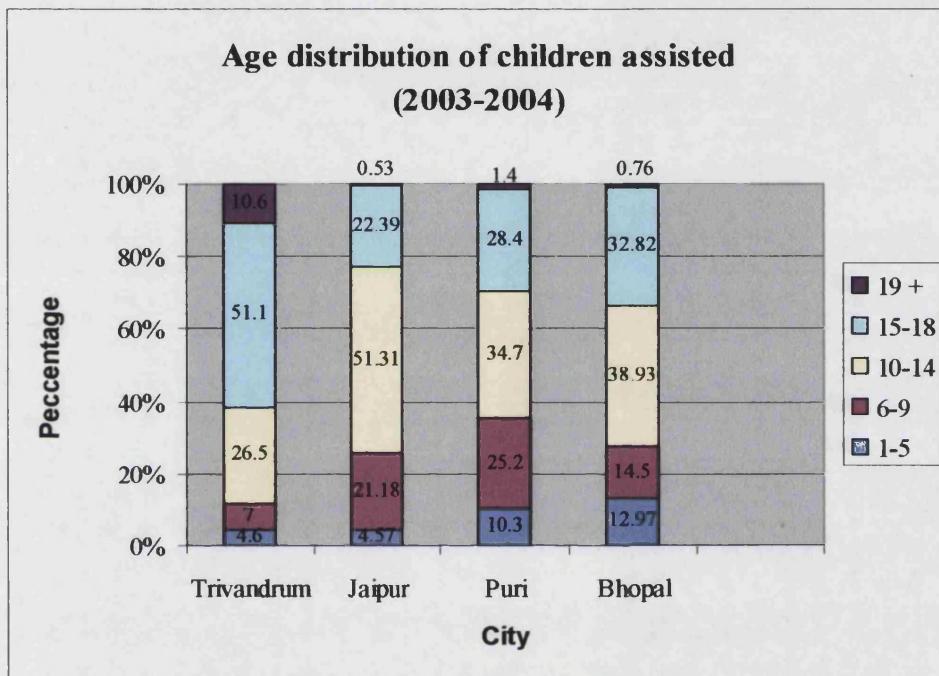
Figure 5.6 Age distribution of children assisted

Source: CIF, ChildNET

Based on the above graph, I observed that CHILDLINE Puri (35.55%) assists the highest percentage of children who are below the age of ten, followed by Bhopal (27.47%), Jaipur (25.75%) and Trivandrum (11.6%). CHILDLINE Japiur (51.31%) reaches out the highest percentage of children in the 10-14 age group and CHILDLINE Trivandrum (61.7%) assists the highest percentage of children in the above 15 category.

In terms of ranking cities in their ability to reach out to younger children therefore Puri comes first, followed by Bhopal then Jaipur and then Trivandrum

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The sex of children assisted by the helpline: As outlined in the methodology

chapter, I have classified certain groups of children as being marginalized, with sex

of the child as a factor. I have outlined the sex distribution of children assisted in

order to understand how many girls access the service or are benefited from it.

Sex of children assisted (2003-2004)
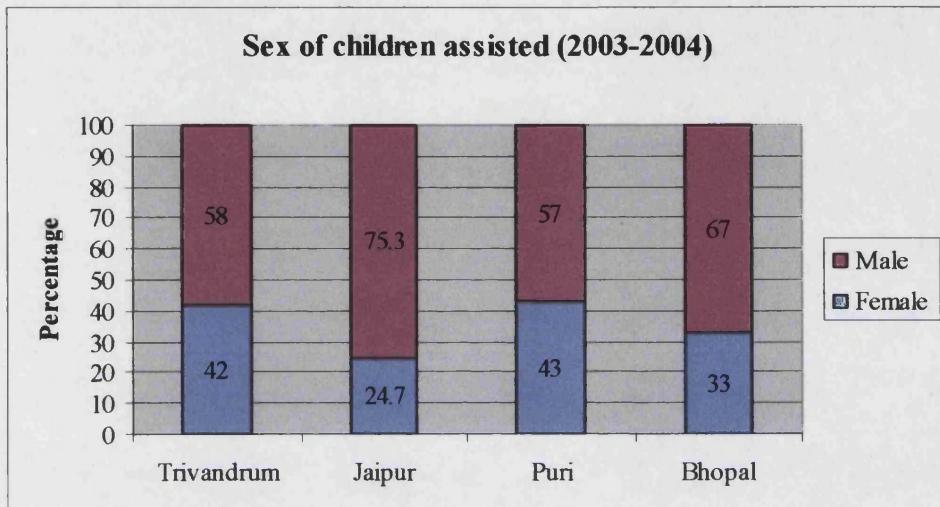
Figure 5.7:Sex of children assisted

Source: CIF, ChildNET

The above graph indicates that CHILDLINE Puri assists a higher percentage of girls

(43%) followed by Trivandrum (43%), Bhopal (33%) and then Jaipur (24.7%).

In terms of ranking the helpline's ability to reach out to girl children therefore Puri

ranked highest, followed by Trivandrum, then Bhopal and finally Jaipur. It is

important to note that Trivandrum, Puri and Bhopal have woman frontline workers

whereas Jaipur is an all male team.

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The place of stay of the children assisted by the helpline : The place of stay of the

child is an indicator that I have used to measure the existing support available to the

child. As outlined in the methodology chapter, I have used this as an indicator of

whether a marginalised child with the assumption that children without family

support are more vulnerable. The support system in term of those with whom the

child lives with is outlined in the graph below:

Place of stay of children assisted (2003-2004)

	Trivandrum	Jaipur	Puri	Bhopal
Not available	7.1	14.3	9.0	10.9
Child lives with relatives	2.5	0.4	2.4	3.0
Child lives with family	80.2	72.9	75.7	71.0
Child lives with employer	1.2	0.8	3.0	2.5
Child lives in NGO shelter	1.5	0.8	0.9	0.6
Child lives in govt home	0.3			
Child lives with friends		5.3	3.0	4.0
Child lives alone	7.3	5.5	6.0	8.0
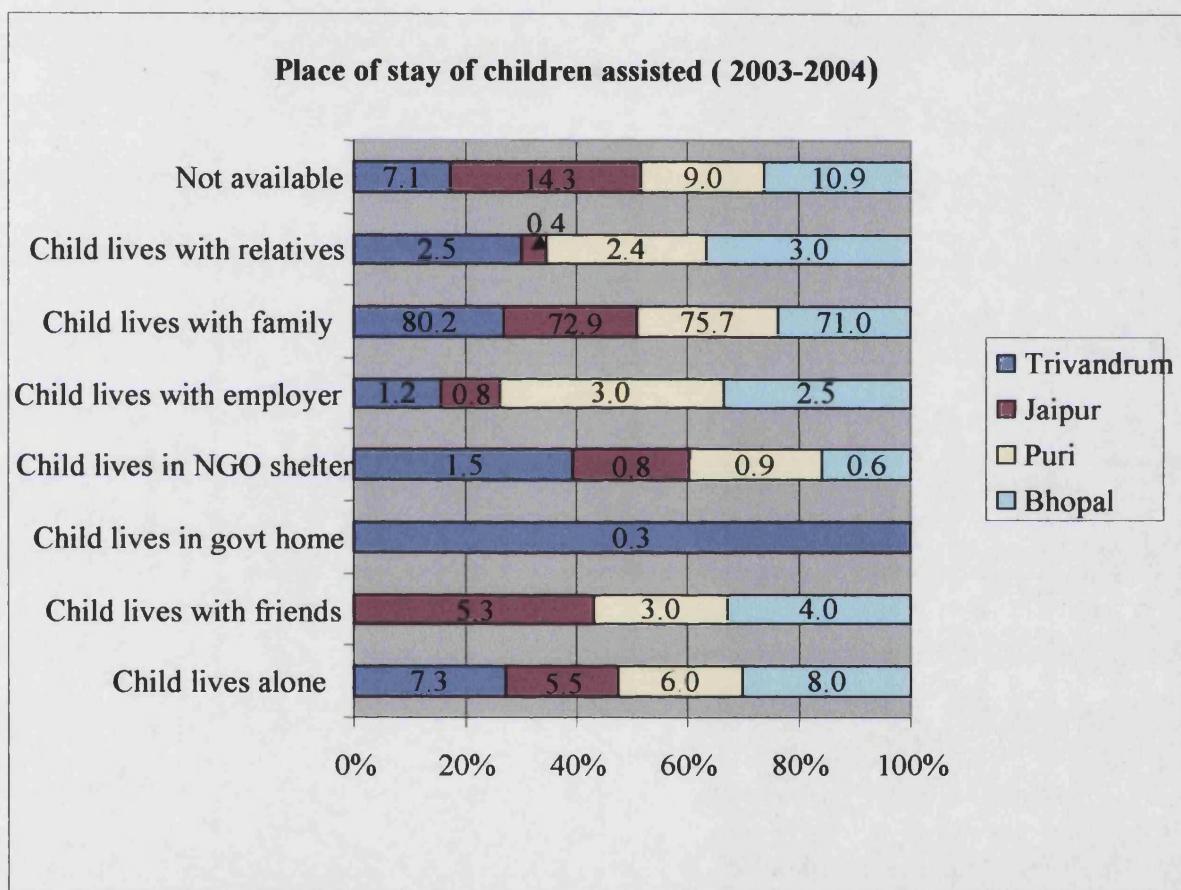
Figure 5.8: Place of stay of children assisted

(Numbers in bracket indicate city percentage) **Source:CIF, ChildNET**

Based on the data, CHILDLINE Bhopal (14.06%) assisted the highest percentage of

children living without family support followed by Puri (12.09%), Jaipur (10.96%)

and Trivandrum (10.3%). In terms of ranking the helpline's ability to reach out to

children without family support Bhopal ranks highest, followed by Puri then Jaipur

and then Trivandrum.

The educational background of the children assisted by the helpline: I have also

outlined the educational status of the children assisted as an indicator of evaluating

the helpline reaching out to marginalised children, with the assumption that children

out of the school system are more vulnerable. The educational background of the

children assisted is outlined in the graph below:
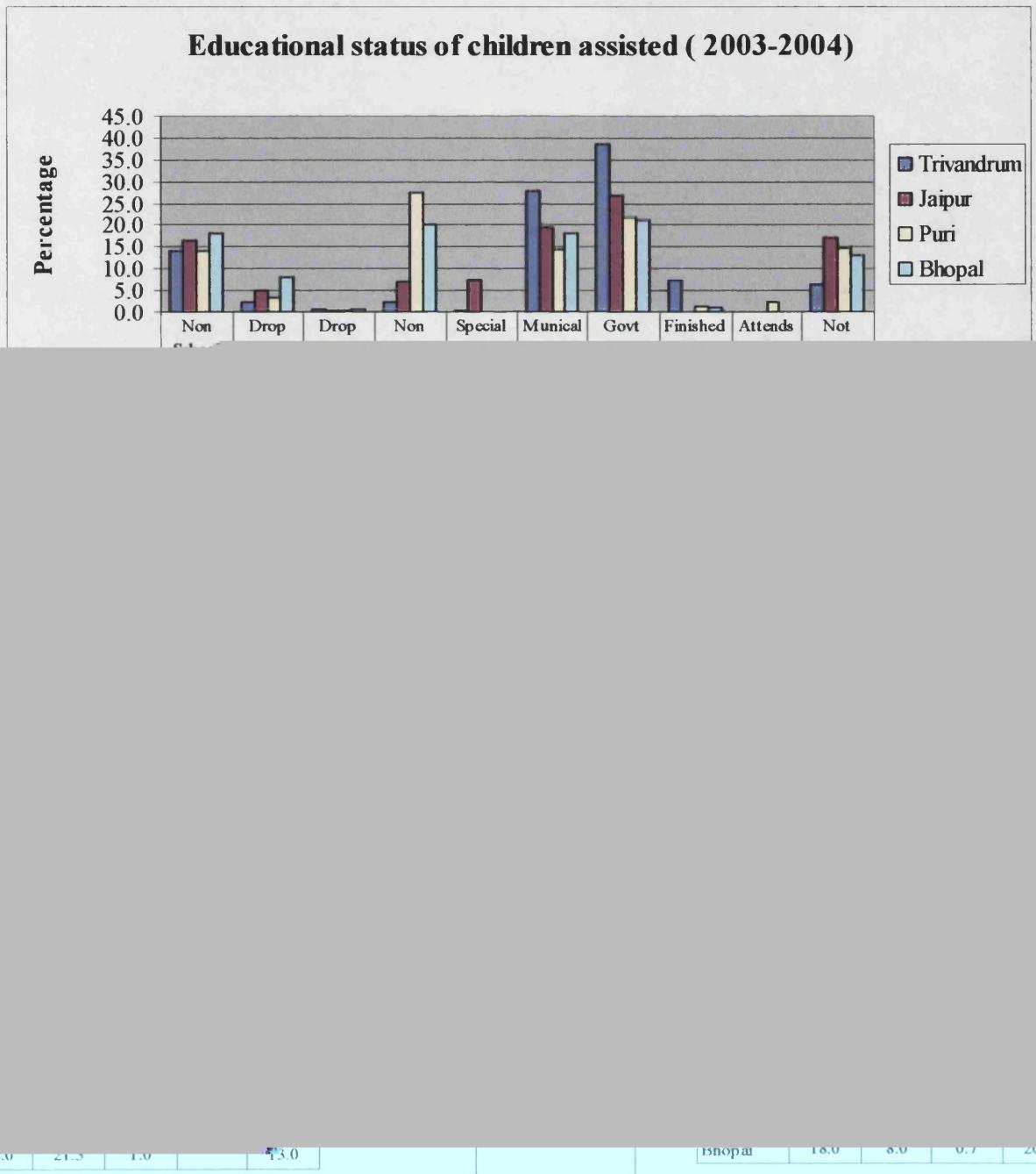
Educational status of children assisted (2003-2004)

Figure 5.9: Educational b

Source: C

Based on the data from the graph, I o

(c) The number of calls for emotional support   received by the helplines:

Calls for ES&G (2001-2005)

Year	2001	2002	2003	2004
Triv	1081	886	404	239
Jaipu	548	784	711	488
Puri	85	101	50	63
Bhopa	1826	111	65	60
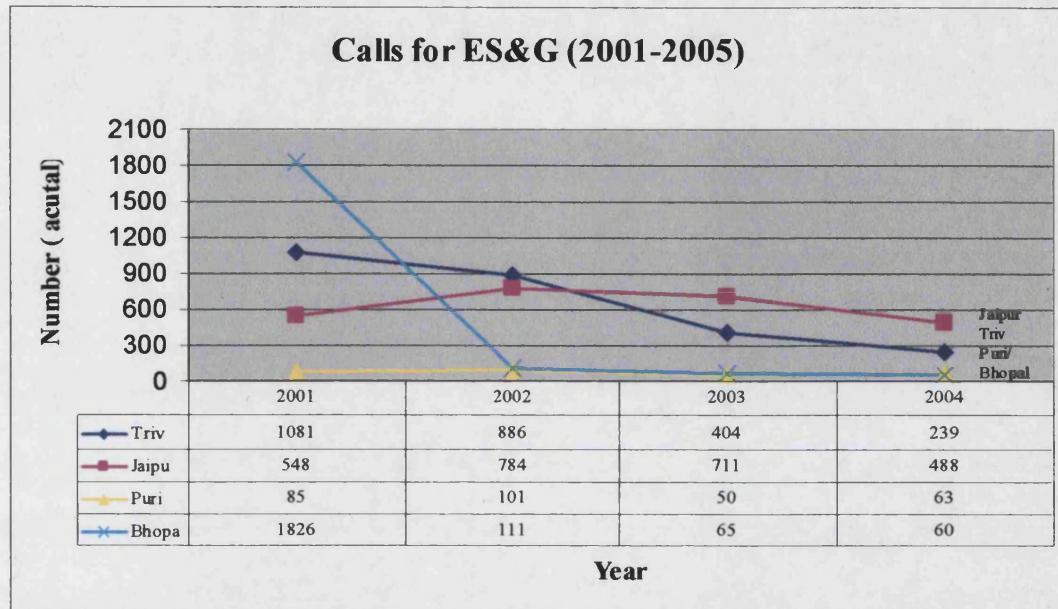
Figure 5.10: Calls for Emotional Support and Guidance

Source: CIF

The calls for emotional support and guidance include calls from children to chat,
share experiences, talk about relationships with their family, friends, teachers,
neighbours. These calls are perceived by the helpline as confidence building calls,
which could lead to intervention calls. The above graph illustrates that in the initial
years, there had been a high number of ES&G calls and that the number of these calls
has been declining across the five years amongst all the cities. The nature of calls
that are classified under this category has been evolving. While in the initial years
chat calls were added to this category, since 2002 CIF has advised the helplines to
classify chat calls separately and to classify calls for emotional support as those from
children with relationship/school/self problems who require counselling. I have
however not included these calls in my analysis due to the ambiguity amongst the
helpline in the classification of these calls.

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(d) <u>The number of calls for Information received by the helplines</u>: These

information calls include: Enquiries about the helpline and enquiries about services
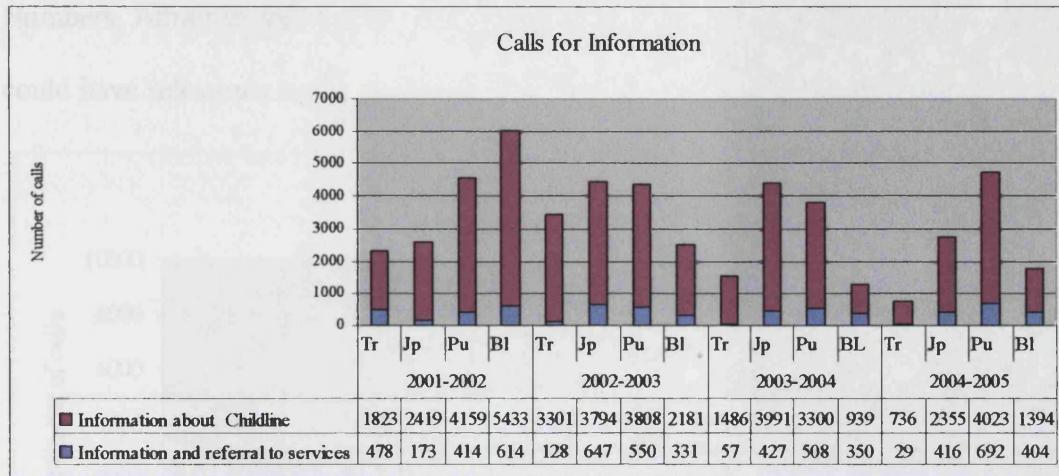
Figure 5.11: Break up of calls for information

Whilst responding to the calls for information about the helpline, the frontline worker

also asks the callers to volunteer for the service. Every helpline has a directory of

services available in the city and this information is passed onto callers seeking

information about services such as adoption services, boarding homes, trusts etc.
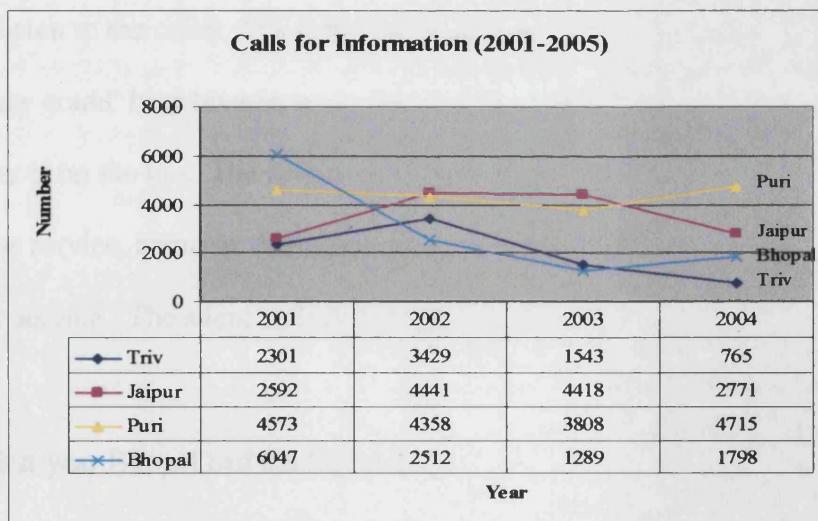
Figure 5.12: Calls for Information across 5 years

As indicated in the above graph, CHILDLINE Puri received the highest number of calls for

Information. These calls were however not considered the primary mandate of the helpline

and hence I have not included them in my analysis.

(d) The number of Miscellaneous received by the helplines: The Miscellaneous calls

classified by the helpline include: Silent calls, Follow-up calls, Blank calls, Wrong

Numbers, Administrative calls. The calls within Miscellaneous, which I found

could have relevance to the study, were- silent calls
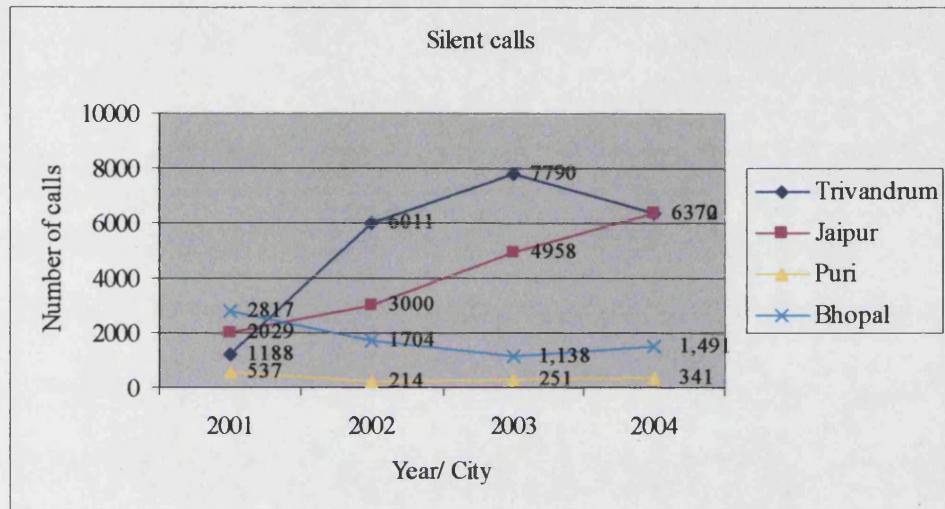
Figure 5.13: Silent calls received by the helplines

The Silent calls differ from blank calls in that it is not a technical fault of not being

able to listen to the caller. The helpline classified these calls from children/callers

when they could hear breathing on the phone or background noises that indicate that

the caller is on the line. The response of the frontline workers is to talk to the child

about the service, assuring them that they can call whenever they wish, since it is a

24-hour service. The silent callers thus indicate potential callers to the helpline.

In the first year Bhopal had the highest number of silent callers and then Bhopal and

Puri the number of silent calls have been decreasing, whereas in Jaipur and

Trivandrum the numbers of silent calls continue to be increasing. However I have not

been able to draw any conclusions about this trend.

(e) The number of children directly calling the helpline: The ChildNET data of children directly calling the helpline, excluding calls for emotional support and guidance are as follows:

	Trivandrum	Jaipur	Puri	Bhopal
Children	**(7.8%)**	**(7.9%)**	**(13.9%)**	**(16%)**
CL team member	(14.1%)	(15.9%)	(3.6%)	(6%)
Family relative	(22.5%)	(8.2%)	(39.3%)	(35%)
Allied system	(8.6%)	(14.3%)	(9.5%)	(12%)
Other NGOs	(0.3%)	(2.0%)	(2.8%)	(2.5%)
PCO owner	(0.6%)	(5.0%)	(4.0%)	(3.0%)
Concerned adult	(32.6%)	(31.2%)	(18.3%)	(17.0%)
Not available	(13.5%)	(15.5%)	(8.7%)	(8.5%)

Table 5-7: Profile of callers to the helpline (2003-2004)

Source: ChildNET, CIF, excluding ES&G

The profile of the callers to the helpline also revealed very interesting results. The number of children directly calling the helpline was the highest in Bhopal, followed by Puri and then Jaipur and Trivandrum. These children may be calling either for themselves of for another friend. However it does indicate the level of trust and confidence that the child has to directly access the service.

Another interesting observation is also that in Puri and Bhopal it was a family member that refered the highest percentage of calls to the service whereas in both Jaipur and Trivandrum it was a concerned adult. This could imply that the helpline is viewed as having a more family centred approach in Puri and Bhopal as compared to Jaipur and Trivandrum.

(f) <u>Discussion on comparison between helplines regarding the nature of calls</u>: Based on the analysis of the above statistics, I have compared the four helpline in relations to the primary objective of the helpline that is responding to the calls from marginalised groups of children, as indicated below. I have rated all the four helplines as in the Low to Medium range.

Criteria	Ranking	Comment
Number of calls received	Jaipur- Bhopal-Puri- Trivandrum	Number of intervention calls received by the helpline
Profile of child assisted • Age distribution	Puri- Bhopal- Jaipur- Trivandrum	Children below 10
• Sex distribution	Puri- Trivandrum- Bhopal- Jaipur	Girls
• Family support	Bhopal- Puri- Jaipur- Trivandrum	Children without fly support
• Educational Status	Bhopal- Puri- Jaipur- Trivandrum	Children outside the system
Time distribution of calls	Bhopal- Puri- Jaipur- Trivandrum	Calls after working hours

5.2.2   Objective 2: The training workshops with allied systems

The second objective of the helpline was to conduct training workshops with the allied systems such as the police, doctors, juvenile justice board members to sensitise them on the rights of the child and develop avenues of collaboration. I have analysed this outcome of the helplines by: examining the number of workshops organised, regularity of organising the workshops, the nature of training and identifying the avenues of collaboration that have evolved with the allied systems.

The National Initiative for Child Protection (NICP) was launched by the Ministry of Social Justice and Empowerment, Government of India in June 2000 through the CIF. The aim of the campaign was to sensitise allied system personnel in the city on child rights which would lead to more accessible services to children, the development of specialised services, greater resources to children's services and an attitudinal change amongst the allied systems(Billimoria and Pinto 2000, pp 3).

The strategy for implementing NICP was to conduct a senior level meeting of all allied system personnel and then appoint nodal officers in each system that would co-ordinate with CHILDLINE in arranging the sensitisations workshops. Each city was allocated Rs 20,000 annually to conduct these workshops with the allied systems. In this subsection, I outline the data I have collected to evaluate the helpline's training programmes with the allied systems. The key allied systems identified for the sensitisation workshops included: the police, doctors, juvenile justice personnel, teachers, telecommunication department, the labour department, and media, elected representatives.

In this subsection, I review the number of workshops organised and the team members and children's perspectives of working relations with the allied systems.

(a)**CHILDLINE, Trivandrum** organised the following training workshops with allied systems since the start of the NICP programme

Allied System	Number of personnel trained			
	Senior Level	Middle level*	Lower Level*	Total
Police	12	96	452	**560**
Doctors/ Nurses	19	273	636	**928**
Juvenile Justice officers	86	134	52	**272**
Schools/ teachers	24	642		**666**
Labour Department	7			**7**
Media	26	68		**94**
Elected Representatives	16	24		**40**
ICDS	12	82		**94**
NGO functionaries	39		56	**95**
Community	46			**46**

Table 5-9: NICP workshops organised by CHILDLINE Trivandrum

Source: CIF, NICP workshops from 2000-2004

- Regularity of conducting the workshops : The nodal organisation in Trivandrum conducted the trainings on a regular basis.

- Diversity of Allied Systems: The helpline had been able to train a diverse groups of allied systems within the city.

- Range of levels trained within the system : The helpline had also been able to sensitise several levels within each allied system.

- Avenues of collaboration between the allied systems : Based on the training workshops, the city had highlighted the following avenues of collaboration:

  o Nodal doctors had been identified from 2 hospitals who would see children referred by the helpline on a priority basis

  o The police support from the police had increased in follow-up of calls especially in abused and missing calls. Police began to refer calls to the helpline

  o Personnel from the Integrated Child Development Scheme were been identified as the nodal officers to coordinate the helpline activities

(b) **CHILDLINE, Jaipu**r organised the following training workshops with allied systems

Allied System	Number of personnel trained			
	Senior level	**Middle level**	**Lower level**	**Total**
Regional Transport office	3			**3**
Railway Police	5	67		**72**
City Police	5	175		**180**
Doctors	3		51	**54**
Department of Women and Child	14			**14**
Institute of Public Administration	4			**4**
Media (Radio)	31			**31**
Department of Telecommunication	12			**12**
TV Media	18			**18**
Print Media	54			**54**
Chief Judicial Magistrates	41			**41**

Table 5-10: NICP workshops organised by CHILDLINE Jaipur

Source: CIF, NICP workshop from 2000-2004

- <u>Regularity of conducting the workshops</u> : The workshops in Jaipur were organised on a very irregular basis. The training was based solely on the availability of funds and the nodal organisation was unable to mobilize any local resources for the same.

- <u>Diversity of Allied Systems :</u> The helpline was able to sensitise a range of allied systems. However given that the helpline received a large amount of medical calls, the training with the doctors appears minimal

- <u>Range of levels trained within the system:</u> The helpline focuses on sensitising senior and middle level but not lower level workers.

- <u>Avenues of collaboration between the allied systems :</u> Based on the training workshops, the city had highlighted the following avenues of collaboration:

  o Awareness amongst allied system personnel about the helpline

  o Calls from allied system personnel when they found a child in need of care and protection

(c) CHILDLINE, Puri organised the following training workshops with allied systems during the past 3 years

Allied System	Number of personnel trained			
	Senior level	Middle level	Lower level	Total
Police		25		25

- Regularity of conducting the workshops : The helpline did not conduct the workshops on a regular basis and was dependant on funds for conducting the workshops.

- Diversity of Allied Systems: The helpline had not sensitised a range of allied systems but the allied systems selected were relevant to the calls received by the helpline.

- Range of levels trained within the system : The helpline had focussed its training only on the middle levels within the allied systems.

- Avenues of collaboration between the allied systems: Based on the training workshops, the city had highlighted the following avenues of collaboration:
  - Liaising with the hospitals to have a monthly mobile check up for children in 3 slum communities
  - Co-operation from the police in calls related to trafficking of children
  - Co-operation from hospitals in subsidising treatment of children referred by the helpline
  - Awareness amongst allied system personnel about the helpline
  - Calls from allied system personnel when they found a child in need of care and protection

(d) **CHILDLINE, Bhopal** organised the following training workshops with allied systems during the past 3 years

Allied System	Number of personnel trained			
	Senior level	Middle level	Lower level	Total
Railway Police			35	35
City Police		70		70
Traffic police			79	79
Health			40	40
NGOs			50	50
Juvenile Aid Bureau	27	75	75	177
Press Information Bureau		50		50
Training of NFE Teachers			30	30
Teachers		150		150
Autorikshaw drivers			80	80

Table 5-12: NICP workshops organised by CHILDLINE Bhopal

Source: CIF, NICP workshop from 2000 -2004

- Regularity of conducting the workshops: The helpline was regular in conducting training workshops and was able to mobilise its own resources when required

- Diversity of Allied Systems: The helpline had trained a diverse group of allied systems, especially those most relevant to the calls received by the helpline

- Range of levels trained within the system: The helpline had focussed on training of lower levels within the allied systems.

- Avenues of collaboration between the allied systems: Based on the training workshops, the city highlighted the following avenues of collaboration:
  - o Co-operation from the police in addressing issues related to missing children or repatriation by use of police wireless system, vehicles

- o Co-operation from hospitals in giving children referred by CHILDLINE bed on a priority basis

- o Co-operation from the Child Welfare Committee in involving the helpline as a partner

(e) **Discussion on evaluating the helplines training with allied systems:**

Based on the data I collected about the training workshops and my discussions with the frontline workers, I summarised the key findings from the cities as below:

Criteria	Ranking
Number of NICP workshops	Trivandrum- Bhopal- Jaipur – Puri
Regularity	Trivandrum- Bhopal – Jaipur- Puri
Diversity and relevance	Bhopal- Trivandrum- Puri- Jaipur
Levels within the allied system	Bhopal – Trivandrum- Jaipur- Puri
Avenues of collaboration	Bhopal- Trivandrum- Puri- Jaipur

5.2.3   Objective 3: Functioning of the CHILDLINE Advisory Board

The third objective of the helpline was to influence state policy makers to allocate more resources for children's issues.

The CHILDLINE Advisory Board (CAB) in each city is chaired by the State Secretary, Women and Child Welfare Department and has representatives from the police, health system, education, labour, telecommunication, and media. They are expected to meet thrice a year. The Ministry of Social Justice and Empowerment has issued a circular to the state governments to play an active part on the CAB.

The key objectives of the CAB include: monitoring the quality of service provided by the helpline by reviewing calls received and response strategies; ensuring that there is co-ordination between government departments and NGOs in responding to calls, taking measures to ensure that there are adequate services for children, planning training strategies as part of the NICP and suggesting measure to address problems and issues faced by the helpline.

I have evaluated this objective of the helpline by: reviewing the number of meetings organised by the helpline with policy makers ; identifying the issues discussed at the meeting and analysing the outcomes of the CAB based on the perspectives of the directors of the helpline. In each city helpline, I observed that the decisions taken by the CAB could be classified into three groups: those relating to awareness about the service, those relating to training of the allied systems and those relating to new services/resources for children. In my analysis, I was most interested in understanding the nature of decisions in this last group.

(a) **Trivandrum**: The activities of the CHILDLINE Advisory Board in Trivandrum

are summarised below:

- Number of Meetings: 16 meetings in 4 years

- Nature of decisions taken: The nature of the decisions taken by the CAB were

Issue	Decisions implemented
Awareness	Telecom GM issued a certificate showing that 1098 is a free call service 1098 is included in the telephone directory Consent to paste stickers in rail premises -Letters sent to BSNL, Escotel BPL, Airtel to make the 1098 call free from mobiles - Department of Education to include 1098 in school publicity material
Training	Consent for NICP workshop and appointment of nodal officers in each department and agreement to include CHILDLINE and CRC in training curriculum of police
New services /resources	-Officials identified as the nodal officers to assist frontline workers and Anganwadis will be the contact centres at the Integrated Child Care Centres - Circular requesting orphanages to accommodate children referred from the helpline - Circular issued to all Police Stations to have a copy of the CRC and Juvenile Justice Act - A subcommittee has been instituted to study the intensity of child labour - Registration of a Corpus fund - The frontline workers with an identify card are permitted to enter the platform

Table 5-14: Nature of CAB decision in Trivandrum

The CAB in Trivandrum had taken a number of decisions with regards to new

services and resources for children. These included: designation of special officers

working with the Integrated Child Development Scheme (ICDS) to be involved in

follow-up of child protection concerns in their area; measures to refer children to

(b) **Jaipur**: The activities of the CHILDLINE Advisory Board in Jaipur are summarised below:

- Number of meetings : 7 meetings in four years

- Nature of decisions taken: The type of decisions taken by the CAB in Jaipur are outlined below:

Issue	Decisions implemented
Awareness	-Information about CL being printed on water/electricity Bills from Dec' 03 - CL 1098 been printed on notebooks for children studying in Janshala schools
Training	- NICP training schedule was finalised
New services/resources	None to report

Table 5-15: Nature of CAB decisions in Jaipur

The city helpline and the CIF representative for the city were unable to identify any decision taken by the CAB that resulted in new services/resources for children at the city level.

The director of the nodal organisation pointed out CAB in Jaipur has over 100 members from various government departments. As a result, it had become unmanageable for so many people to meet at the same time. On the previous occasions when the CAB met, the senior officials did not attend but delegated other personnel from the department to attend the meeting. As a result, decisions could not be taken. The director of the collaborative organisation and the frontline workers were of the opinion that the nodal organisation needs to be more proactive in following up with the government departments.

(c) **Pur**i: The activities of the CHILDLINE Advisory Board in Puri are summarised below:

- Number of meetings : 2 meetings over 4 years

- Nature of decisions taken: The type of decisions taken by the CAB in Puri are outlined below:

Issue	Decisions implemented
Awareness	- CL 1098 as a toll free call included in all telephone bills in Puri
Training	NICP Training workshop and appointment of nodal officers
New services/resources	None to report

Table 5-16: Nature of CAB decisions in Puri

The city helpline and the CIF representative were unable to identify any decision taken at the CAB that resulted in new services/resources for children in Puri.

When the helpline in Puri was being set up, CIF was unable to identify an academic organisation to perform the role of the nodal organisation. As a result for a year, there was no nodal organisation. Subsequently an NGO was identified to perform the role of the nodal organisation as it had experience in training and research and documentation. The director of the nodal organisation and the director of the collaborative organisation explain that it has been difficult to organise the CAB meetings as the state has been constantly addressing disaster management work due to the cyclones that hit the State in 2000 and 2002. They explained that the state machinery has not been functioning effectively and hence it has been difficult to organize the CAB meetings on a regular basis.

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(d) **Bhopal**: The activities of the CHILDLINE Advisory Board in Bhopal are summarised below:

- Number of meetings: 8 over 4 years

- Nature of issues discussed

Issue	Decisions implemented
Awareness	Experience sharing of how CAB members can make their department aware about 1098
Training	Consent for NICP training workshops and appointment of nodal officers
New services/resources	Repatriation of children Setting up of the special police unit for children Provision of Shelter home for girls Mobile van Registration of CHILDLINE Corpus Fund

Table 5-17: Nature of CAB decisions in Bhopal

The city helpline and the CIF representative had identified some significant decisions taken at the CAB that have resulted in new services/resources for children in Bhopal. These decisions included travel concessions for children going back home, the setting up of the special police unit, space to start a shelter home for girls from the local authorities, a mobile van from the health department to assist in medical

(e) Discussion on the evaluation of the helplines regarding the CAB

Based on the data I collected about the functioning of the CAB and my discussions with the directors and the frontline workers, I summarised the key findings from the cities as below:

Criteria	Ranking
Number of CAB meetings	Trivandrum- Bhopal- Jaipur – Puri
Nature of decisions taken	Trivandrum/Bhopal – Jaipur/ Puri
Overall Ranking	Trivandrum/Bhopal- Jaipur- Puri

Table 5-18: Evaluation of the functioning of the CAB

I have ranked the effectiveness of the helplines as follows

- *Regularity of CAB meetings*: In this regards, Trivandrum ranks highest as it had organised 4 meetings each year on an average followed by Bhopal (on an average 2 meetings per year), Jaipur (less than 2 meetings a year) and Puri (less then one meeting a year)

- *Nature of decisions taken*: With reference to the nature of decisions taken, as I have highlighted the decisions to generate more resources for children are relevant. The helplines in both Trivandrum and Bhopal have been able to use the CAB meetings to generate significant new resources/services for children and hence I rank both of them first followed by Jaipur and Puri (that have not reported any new services/resources due to the CAB efforts)

Based on these criteria, overall I have ranked Trivandrum and Bhopal first, followed by Jaipur (as meetings are more frequent) and then Puri. In Chapter 7, I shall elaborate on the role of children's participation in the achievement of these outcomes of the CAB in each city.

5.3   Comparison of the level of participation and service outcomes

In this section, I look at a comparison between the four helpline. While analysing the evidence I have collected based on the level of participation and the outcomes of the service, I made the following conclusions:

Level of Children's Participation (Ranking of cities starting with highest)	Level of service outcomes (Ranking of cities starting with highest)
Planning *Bhopal/Jaipur- Trivandrum- Puri*	Reaching out to marginalised groups of children *Bhopal – Puri- Jaipur- Trivandrum*
Organisational structure *Bhopal/Jaipur/Puri/Trivandrum*	Training of Allied system personnel under NICP *Bhopal-Trivandrum- Puri- Jaipur*
Individual decision making *Bhopal – Puri- Jaipur- Trivandrum*	Functioning of the CHLDLINE Advisory Board *Trivandrum/Bhopal- Jaipur- Puri*
Monitoring and Evaluation *Bhopal – Puri/ Jaipur- Trivandrum*	

Table 5-19: Comparison between level of participation and service outcomes

Based on my analysis in the previous chapters, I have evaluated the level of children's participation and the level of effectiveness of the helpline and have drawn the following conclusions:

The Level of Participation at the helpline: Regarding the overall level of children's participation, I have taken into account the ongoing activities of the helpline namely the participation of children in individual decision making, monitoring and

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evaluation and organisational structure. Based on these aspects, I have ranked Bhopal as highest, followed by Puri, Jaipur and Trivandrum

Regarding *the level of the effectiveness of the helpline*, I have looked at the primary and secondary objectives of the helpline. In terms of the **primary objective** of the helpline in responding to the needs of marginalised groups of children in the city my evaluation revealed that

- Based on the number of calls, Jaipur could be categorised in the high bracket whereas Bhopal and Puri in the moderate bracket and Trivandrum in the low bracket.

- In terms of the distribution of calls in reaching out to marginalised groups of children, I have ranked Bhopal as highest followed by Puri , Jaipur and Trivandrum.

Whilst reviewing the high percentage of medical calls to the helpline in Jaipur, the team explained that they often organised medical camps for children for vaccinations and health check ups and provided first aid on these occasions which accounted for a high percentage of medical calls and particularly for first aid. The CIF team explained that they had noticed this and would shortly initiate a process to get the team to refer children to a hospital or to involve children in spreading messages about health in the community. I have given an overall rating to the helplines based on their ability to reach out to marginalised groups of children.

The overall rating of the primary objective of the helpline is therefore: Bhopal, Puri, Jaipur and Trivandrum.

With regards to the secondary objectives of training with allied systems, in terms of numbers of personnel trained, Trivandrum ranked highest followed by Bhopal, Jaipur and Puri. However in terms of relevance of training programmes to the calls by children and the avenues of collaboration with the allied systems, Bhopal ranks highest followed by Trivandrum and then Puri and Jaipur. I have therefore used this latter evaluation to rank the cities in their efforts to train personnel from the allied systems.

In terms of the helplines ability to generate more resources for children in the city, based on the nature of decisions that have been taken and their relevance to the calls for children, I have ranked Bhopal highest followed by Jaipur and then Puri.

Based on this evaluation, the organisations with higher levels of participation had better outcomes in terms of responding to calls from marginalised groups of children. However in terms of training workshops or in addressing issues with the local authorities, I did not observe any relationship with the level of children's participation.

I shall discuss the explanations regarding the outcomes of the helplines in Chapter 7 and examine the role of children's participation in affecting these outcomes. In the following chapter however I discuss some of the factors that could be responsible for the variations in the level of children's participation across the four helplines.

6 Capacity, Best Interests & Management Style

: Factors affecting children's participation

In the previous chapter, I highlighted the variations in the level of children's participation in the helpline across the four cities. I was also keen to understand what accounted for this variation and hence my second research question aimed to examine the factors/processes/ attitudes that encouraged or discouraged child participatory practices. The literature that I reviewed outlined factors that influence the level of children's participation in a project, namely: perceptions to children's capacity and best interests, organisational culture of the organisation, profile of the frontline workers, training inputs and sharing of best practices and resources available to the organisation. In this chapter, I attempt to analyse how some of these factors could influence the level of children's participation at the helpline.

In the first section of this chapter, I outline the similarities between the helplines in the profile of the frontline workers, training inputs and resources available. In the second section, I focus on children's capacity– as how the frontline workers and children understand these concepts and implement it. In the third section, I analyse how the best interest of the child is perceived by the frontline workers and children. In the fourth section, I describe the management style in the partner organisations operating the helpline. In the final section, I summarise my main observations and findings regarding the factors that influenced the level of children's participation in the four helplines.

6.1 Similarities in factors related to children's participation

In the four cities, I looked at several factors that could influence the level of children's participation. The table below summarizes the key observations regarding the factors that influenced the level of children's participation.

		Trivandrum	Jaipur	Puri	Bhopal
Children's perception about the relevance of the project to them		Very relevant	Very relevant	Very relevant	Very relevant
Profile of frontline workers/ skills	Age:	22 to 40	21- 30	21-30	21-30
	Gender:	1 Female	No Female	2 Female	3 Female
	Education:	Graduates	SSC	Graduates	Graduates
Training inputs		Similar	Similar	Similar	Similar
Resources	Financial	Similar	Similar	Similar	Similar
	Human	Similar	Similar	Similar	Similar
	Additional	* Vehicle * Staff	* Vehicle * Staff	* Staff	* Staff

Table 6-1: Factors influencing the level of children's participation

Children's perception about the need for the project: As I had highlighted in Chapter 4, in all my discussions with children in the cities, they felt that the service was essential to children and should expand to other cities in India, thus confirming the relevance of the helpline. The children did list several limitations of the project but felt a phone service was necessary for them to call whenever they needed

Profile of the frontline workers: The key aspects of the profile of the frontline workers are listed below:

- *Age:* In all the cities, the front line workers were between the age groups of 21-30 with the average age being 25. Only Trivandrum had a slightly older profile of team members.

- *Gender*: All the teams with the exception of Jaipur, had at least one female frontline worker. The team in Jaipur however had the option of drawing upon female staff in other projects when required.

- *Education*: Most of teams had a combination of frontline workers who had just completed their Higher Secondary School education, a few that were in vocational training and a few graduates. The team in Puri had the highest number of graduates.

- *Previous work experience*: The frontline workers in all the four cities had a similar work profile. This included – a co-ordinator (with a Master in Social work), about 2-3 workers with approximately 2 years of experience with children and the remaining frontline workers with less that one year experience. In each city there were at least 4 members who had been with the helpline, since its inception.

Training inputs: The training inputs differed at the time of starting the service, as explained in the previous chapter. However over the past four years of the service, all the frontline workers have been exposed to similar training inputs provided by CIF. Additionally, representatives of CIF had visited each of the four cities at least twice during the four years to provide training inputs and monitor the quality of service.

Resources (financial and human): The resources available to the frontline workers differed across the four cities. While the resourced provided by CIF to the cities were similar, the local organisation also mobilised additional resources. In Trivandrum and Bhopal the staff from other projects were also involved in the projects. Trivandrum and Jaipur had built up the best the most infrastructure (access to vehicles etc) followed by Bhopal and then Puri, which had the least amount of resources. The pattern of distribution of resources however did not show any direct relationship with the pattern of the level of children's participation in the four helplines.

In the next sections I therefore focus on how the three aspects of capacity, best interest and organisational culture could have influenced the level of children's participation in the four helplines.

6.2 Analysing the Capacity of children

> " *State Parties shall respect the responsibilities, rights and duties of parents or, where applicable, the members of the extended family or community as provided for by local custom, legal guardians or other persons legally responsible for the child, to provide, **in a manner consistent with the evolving capacities of the child**, appropriate guidance in the exercise by the child of the rights recognised in the present Convention"*
>
> - Article 5, UN CRC

As discussed in Chapter 2, the literature highlighted that the understanding of children's capacity was critical to the implementation of children's participation. In order to understand the interrelationship between the concept of capacity and children's participation, I analysed the vignette responses, focus group discussions

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and my observations at the helpline centres. In this section, I outline my key observations regarding how the frontline workers understood capacity of children across the four cities. I also describe the children's comments about capacity and then look at the differences in perceptions between children and the frontline workers regarding children's capacity.

6.2.1   Understanding frontline workers perceptions to children's capacity

In this subsection, I look at how the frontline workers across the four cities understood and assessed children's capacity during their work at the child helpline. This section contains responses from the frontline workers during the focus group discussions. As explained in the methodology chapter, the quotes that I have used of the frontline workers represent the most dominant views that emerged from the focus group discussion. The two key questions that I asked the frontline workers during the focus group discussions regarding children's capacity were- firstly, did they think children had capacity to make decisions regarding their lives and secondly if so, how did they assess the nature and level of this capacity of the child.

(a)   **Do children have any capacity?**   : In the focus group discussions, the frontline workers explained the extent of capacity they thought children possessed. I have outlined their perceptions below:

Trivandrum: In Trivandrum, the frontline workers perceived capacity as the ability to cope with problems.

> *"Children call CHILDLINE because they cannot cope with their problems on their own"*
>
> -Frontline worker, Trivandrum

The frontline workers in Trivandrum seemed to think that children had very little capacity. Additionally, they thought this true of mostly all children, though they did feel that after 16 years, children start to develop more capacity. Many team members referred to children as being "innocent" and "victims of circumstances".

Jaipur : In Jaipur, the frontline workers looked at capacity as the ability to solve problems.

> *"Street children are very 'challu'.. they can easily make fools out of us.*
> *.. sometimes these children have the capacity to solve their problem, yet*
> *they call us"*
>
> - Frontline worker, Jaipur

While these frontline workers believed that all children had capacity, some also felt that this capacity was 'misplaced' in that children were using it to their disadvantage. They distinguished between children living on the streets and those with families. They perceived children living on the street with having much more capacity than those living with families. However they had a negative connotation to capacity, as a corrupting influence.

Puri: The frontline workers in Puri perceived children's capacity as the ability to withstand pressure from the adult world.

> *"In today's society, especially under the influence of the media,*
> *children's capacities are becoming vulnerable and they need*
> *protection"*
>
> - Frontline worker, Puri

In Puri, the frontline workers were of the opinion that childhood was a special time requiring that children receive care and protection . They were also of the opinion that the factors undermining children's capacity were external influences such as the media and globalisation.

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Bhopal : The team members in Bhopal felt that the talents and skills of children in responding to various situations was indicative of their capacity.

> " *Each child calling the helpline is different actually.. some have more capacity than others, in some situations*"
>
> -Frontline worker, Bhopal

In Bhopal, the frontline workers viewed all children as having capacity. They had an understanding that capacity was flexible and dependent on an individual child's situation.

The frontline workers across the four cities thus had differing perceptions of capacities of children. This understanding affected the way the frontline workers interacted with children and the children's level of participation. I analyse this further in the subsequent section..

(b)   How the frontline workers assessed children's capacity?   : The frontline workers also discussed the process by which they assessed the child's capacity. I have highlighted the main themes raised by the frontline workers in each of the cities.

Trivandrum: The frontline workers assessed children's capacity based largely on the age and gender of the child. The frontline workers shared a consensus that children required more protection till the age of 14, after which they should be given more freedom. They also felt that girls had a weaker capacity than boys and hence required additional support.

Jaipur: In Jaipur, the frontline workers assessed a child's capacity based on the problems of the child as well as his/her family economic situation and gender. In

their view street children had the most capacity, followed by children in residential homes and lastly by children living in slum communities. They tended to stress on the family's economic condition as being the primary criteria around which they decided the capacity of the child. Thus in their opinion children who lacked the economic support of their families had a greater capacity

Puri: Most frontline workers in Puri based their assessment of a child's capacity entirely on the nature of the problem faced by the child. They had formulated a ranking of problems i.e. from the least difficult problems to the most difficult ones. They also had decided on a threshold according to their perception of the level of problems that children would be able to cope with.

> *"Children can cope with medical and shelter problems easily, but when it comes to sexual abuse, then they require much more of our support."*
>
> - Frontline worker, Puri

Some frontline workers also explained that they took into account non verbal signs from children such as the child's physical appearance, expressions of the child to make interpretations about their capacity.

Bhopal: In Bhopal, the frontline workers explained that they try to assess the child's capacity by looking at the child and his/her situation. They expressed that they took into consideration the individual child's capacity, the age of the child, gender, life circumstances and the problem faced by the child, in assessing the child's capacity.

> *"It's difficult to talk about children's capacity in the air. It depends on many factors and when we interact with the child"*
>
> Frontline worker, Bhopal

6.2.2   <u>Understanding children's perceptions of capacity</u>

In my discussions with children, I was keen to understand how they understood the concept of capacity with special reference to the role they felt they could play in finding solutions to problems and the importance of age as an indicator for competence. Some of the responses that I got from children included:

(a) The role children felt they could play in interventions: I have highlighted the dominant perceptions of children according to their life situation

Street children: Some of the responses I got from children on the street are outlined below:

> *"We cannot go directly to the hospital, if we are ill because the doctors refuse to treat us. They tell us that we are dirty and keep coming back even for small problems. We therefore have to call CHILDLINE to help us"*
>
> <div align="right">Boy, 13 years, living on street Trivandrum(FCT2)</div>

> *"The police think we are all thieves. They don't believe us if we tell them that we are collecting bottles from the station. We need to call uncle/didi if the police come to catch us"*
>
> <div align="right">Boy 8, living on the street, Jaipur(ICJ1)</div>

> *"We are not allowed to sleep on the railway station or the beach... otherwise the police harass us. We need to call CHILDLINE to arrange shelter for us, especially if we are ill"*
>
> <div align="right">Girl, 15 living on the street, Puri (ICP3)</div>

> *"No one will give us any loan to buy a home or start a business.. since we don't have an address. We need uncle/didi to help us get us a loan"*
>
> <div align="right">Boy 11 living on the street, Bhopal(ICB1)</div>

Children on the street thus perceived that the system discriminated against them which they perceived as being unfair. They all expressed that it was the way people around them looked and perceived them, that resulted in their discrimination. Most of the street children expressed that they had the necessary skills to live adult lives, but they lacked resources as people did not believe in them.

Children in residential homes: Some of the responses that I got from children in

institutions were:

> *"My parents knew I was working with them (the employers) as a*
> *domestic worker. I failed my exams and could not study anymore. They*
> *(employers) gave me food, clothes but used to beat me. I could not run*
> *away as I did not know where to go. I could not tell my parents about*
> *this. I spoke about my problem to Mausi (the vegetable vendor), who*
> *said she could call someone who will help me. "*
>
> Girl, 16 years, in a residential home, Jaipur(FCJ8)

> *"I do not want to go back home as my step mother is very cruel to me. I*
> *will never go back home and I will find a job in Mumbai"*
>
> Boy, 11, living in a residential home,Trivandrum(ICT11)

> *"I decided to stay in the shelter and not go home.. because if I go home*
> *my father will ill- treat me"*
>
> Girl, 17, living in a residential home, Jaipur(ICJ11)

> *"We children cannot change our parents/elders. We can only try to be*
> *better or run away"*
>
> Boy, 10 years living in a residential home, Bhopal(ICB9)

The children in residential homes felt that they had the capacity to make individual

changes, in the sense of reacting and coping with situations , but could not change

situations.. They did perceive that they had choices that they could make though

these were restricted because of lack of information and that as children, they could

not retaliate against parental and adult control.

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Children in slum communities: Some of the responses from children living in slum communities included:

> *"I called CHILDLINE as I am unable to study maths in school. My teacher and parents constantly scold me, so I wanted to know how I can study better"*
>
> Boy, 15 years in a slum community, Trivandrum(ICT7)

> *"If we study well, listen to our parents.. then we can be successful"*
>
> Boy, 12 years in a slum community, Jaipur(ICJ7)

> *"We need to study well, so that we can get good jobs...then we will not face any problems"*
>
> Boy, 11 years in slum community, Puri(ICP6)

> *"I want to learn computers and become an engineer, then I will have lots of money and will take care of my family"*
>
> Boy, 12 years in slum community, Bhopal(ICB5)

Most of the children in slum communities felt that the power to bring about change was within them, if they had access to skills, education, resources. They felt that they would break the cycle of poverty through education. The three groups of children thus had different perceptions of the capacity of children.

(b) **Importance of age as in indicator for capacity:** When I asked children as to how would they judge the capacities of different children, the responses I got from children included:

Street children and children in residential homes: Street children and children in residential homes did not feel that age was important. They listed the following aspects that affect their ability to access services

- disability,

- physical looks (height, weight)

- length of time on the street

Children in slum communities: The children in slum communities felt that age of

the child was very important and they defined being a child till about 16 – 18 years.

In addition to age they felt that education and money affected their capacity.

6.2.3 Analysis of comments regarding children's capacities

Based on my focus group discussions with the frontline workers and children as

outlined above, I have summarised the key differences amongst frontline workers

perception of children's capacity as outlined below:

	Trivandrum	**Jaipur**	**Puri**	**Bhopal**
Capacity	No/little capacity	Misplaced capacity (Manipulative)	Misplaced capacity (Misguided)	Variations amongst children Situation specific
Primary Assessment of capacity criteria	Age of the child Gender of the child	Family economic situation of the child	Problem of the child Gender/external features	Age, Gender Life situation and Problem of the child

Table 6-2: Perception of frontline workers to children's capacity

The key conclusions that I was able to draw from the evidence were:

Frontline workers perceptions of children's capacity: Most of the frontline workers

in Trivandrum perceived all children to lack capacity. In Jaipur and Puri, the

frontline workers believed that some children did possess capacity. The children that

did possess this capacity however were looked upon as 'manipulative' by the

frontline workers in Jaipur and as 'misguided' by the frontline workers in Puri. These

frontline workers thus looked upon capacity as attributes that they did not expect

from children in 'normal' circumstances. The frontline workers in Bhopal perceived

all children to have capacity, which they perceived as the resourcefulness of children.

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Frontline workers assessment of children's capacity: The frontline workers across the cities seemed to have different standards of assessment. In Trivandrum, the frontline workers largely used age and gender as their assessment criteria; in Jaipur the frontline workers used the child economic situation to assess capacity; in Puri, it was the child's problem and gender that frontline workers took into consideration whiles accessing capacity; and in Bhopal the frontline workers looked at the child's experiences (life situation) in addition to the other factors. The assessment criteria of the frontline workers included:

- *Age:* The frontline workers in Trivandrum felt that children above the age of 15 years had more capacity

- *Gender:* Some of the frontline worker in all the cities listed gender as a criterion to be taken into account whilst planning intervention. Girl children required more support and that a female worker should be allocated to the case, so that girl would be comfortable.

- *Family situation*: Many of the frontline workers in Jaipur listed the family economic situation/caste as a criteria for the assessing the capacity of the child. Children from higher economic classes /castes were considered to have lesser capacity than children from lower economic classes/castes whom they perceived as being more resilient.

- *The problem of the child:* Many of the frontline workers in Puri and Bhopal stated that they would take into account the seriousness of the problem whilst making an assessment of the child's capacity and providing support. The frontline workers in Puri rated serious problems as being sexual abuse, physical abuse/violence, emotional support and guidance; implying children did not have capacity to solve these problems. The frontline workers in

Bhopal stated that they ranked the seriousness of the problem based on the individual's child's capacity.

- *The life situation of the child* : Most of the frontline workers in Bhopal felt that the child's capacity was linked to some aspects of their life situation. In most of the focus group discussions, the frontline workers ranked street children as having the most capacity, followed by children in families who were working and lastly children in families who attended schools.

Children's perception of their capacity: With the exception of children living on the streets, almost all children felt that they were unable to directly confront adults who were abusing or exploiting them. These were adults such as employers/family/relatives etc as they were older to them. For example in the case regarding sexual abuse, the majority of children felt that adults would not believe them and hence running away was the only solution. The children (especially street children and children in residential homes) who called for medical help, shelter, repatriation stated that they have had very negative experiences with the hospitals, police, government homes and hence called the helpline to assist them. The children in slum communities had often been referred to the helpline by a teacher/shopkeeper/neighbour who had noticed a concern for the child and that these children were not aware of who could help them. The stories of these children accessing the helpline revealed to me that these children did not perceive that they lacked information but rather that they lacked the power to deal with adults that resulted in their vulnerability.

Based on my discussions with the frontline workers, I perceived that the frontline workers were not really assessing the child's capacity based on the skills expected at a certain age, but rather their (frontline workers) perceptions of what they thought were the best interests for the child. In the next section, I therefore focus on this aspect.

6.3 Analysing Children's best interests

"In all actions concerning children, whether undertaken by public, private, social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interest of the child shall be a primary consideration"

Article 3 (1), UNCRC

As I have discussed in Chapter 2, the central importance of the best interest principle within the CRC framework does not mean that its interpretation or application is in anyway straightforward or uncomplicated. The mostly commonly voiced criticism of the principle is that it is open ended or indeterminate and fails to provide decision makers with criteria that should be used to evaluate options. As Mnookin argues that 'what is best for any child or even children in general is speculative and requires highly individualised choices (Mnookin 1983, pp8). Another criticism is that the best interest principle could be used to enable cultural considerations to be brought into the child rights debate and will subsequently devalue the basic consensus that the Convention reflects. As explained in this section, I observed that across the four cities, the frontline workers differed about their understanding of how they arrived at the child's best interests. In this section, I therefore focus on analysing how this understanding affects the level of children's participation. I also look at the

differences between the best interests as perceived by children and frontline line workers and attempt to understand its implications.

6.3.1 Understanding how frontline workers arrive at the child' best interests

In this subsection, I look at the evidence I collected through the vignettes and the focus group discussions with the frontline workers, across the four cities to understand how they arrived at the best interests of the child. I have outlined my key observations across the four cities below:

(a)**Defining children's best interests: Responses of frontline workers to the vignettes:** Based on the vignettes, I gave to the frontline workers, the dominant response of the frontline workers were:

	Anita		Antao	
	What is the best interest?	**Why ?**	**What is the best interest?**	**Why ?**
TRIVANDRUM	The girl is removed from the home	Children should not work	The uncle is removed from the house and punished	Child abusers should be punished
JAIPUR	The girl is counselled to go back home	Family is the best environment for the child	Getting the boy to talk about the abuse	No child should be abused
PURI	The girl is reunited with her family, the parents are counselled	It is illegal for a child to be in domestic work	Antao is safe and the uncle is punished	It is Antaos right to be safe and the uncle has committed an offence
BHOPAL	Anita is safe and protected	Because it is the right of the child to be protected	Antao does not feel guilty about the abuse he underwent	Because it is his right

Table 6-3: Frontline workers response to vignettes: best interests of the child

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I now highlight some of the dominant responses from the frontline workers in each of the four cities

Trivandrum: With regard to the vignettes, the frontline workers were very clear about the best interest and intervention for the child who was physically abused. However with regards to the sexual abuse of the child, the frontline workers thought it was important that the boy was allowed to talk about it. Some of their responses regarding the physical abuse case included:

> *"We will collect the girl's address from the employer and talk to her parents. Then we will contact the police and bring then child to the shelter home and do some medical check up. We will tell the girl to stay in some shelter home and join any vocational training course"*
>
> - Frontline worker Trivandrum

The frontline workers felt strongly that it was not proper that the girl should work and though it may be that the family is poor, it is better that she learns some vocational training to help her earn for the future. They suggested that she could learn embroidery.

With regard to the sexual abuse case, the frontline workers had the following opinion:

> *"We will contact the parents to get more possible information, like if he is quiet at home, any special event, any visitor. After Antao tells us that his uncle is abusing him, we must tell the uncle about the legal and moral consequences of his actions and he should be removed from the house"*
>
> - Frontline worker Trivandrum

The frontline workers did feel the need to know more information about how Antao felt though they were of the opinion that this information could be sought from the parents.

Jaipur: With regard to the physical abuse vignette, the frontline workers felt that since the girl did not leave home because of abuse, she should go back home. They felt that in Indian society and particularly in Rajasthan, early marriages are common and the parents of the girl need to be counselled about this. Some of the responses included:

> "The CHILDLINE team member will counsel the girl's parents. If they still want to marry her, then they should be explained about the law regarding child marriage and that they would be putting their daughter in danger and risk by doing so"
>
> - Frontline worker, Jaipur

The frontline workers felt that even though the organisation does run a shelter, it is primarily for children who are orphans or are abandoned or have very abusive family environments. However they did believe that family was the best place for a child to grow up.

With regards to the sexual abuse vignette, the response of the frontline workers included:

> "We will instil confidence in the boy that we will speak to his uncle and will counsel his uncle to stop the abuse. We will assure the boy that in the future, his uncle will not abuse him. We can confront the uncle, when the boy begins to trust us"
>
> - Frontline worker, Jaipur

The frontline workers did feel the boy needed to speak about the abuse and their role was to give confidence to the child to do so.

Puri: With regards to the physical abuse vignette, the frontline workers stressed that the parents needed to make adjustments if the child is to go back home. Their response included:

> *"I will go to her house and counsel her parents that she is not yet matured, so should not marry anyone. If her parents are not ready to accept this, I will rescue the girl and arrange for her to stay in a Women's Shelter"*
>
> - Frontline worker, Puri

The frontline workers did feel that they would counsel the girl that it is illegal for her to work and that the employer should be punished as well. With regards to the sexual abuse case, the frontline workers felt that it was important that Antao was safe and protected.

> *" We assure Antao that we are with him and that his uncle will not abuse or threaten him. After getting Antao's confidence, we will inform the police station and lodge an FIR against the uncle"*
>
> - Frontline worker, Puri

The frontline workers felt that it was the child's right to be safe from abuse and that the uncle had violated this right. The helpline should therefore ensure that the uncle is punished and that the boy is able to deal with the abuse, by referring him to a child guidance clinic if necessary.

Bhopal: With regards to the physical abuse vignette, the response of the frontline workers included:

> *"It is clear that Anita is from a poor family and due to lack of money her parents have sent her to the employer's house. I will ask her if she has been beaten and if the employer has been giving her proper food, about where she sleeps and if they send her to school. I will then question Anita's employer about her condition. Based on Anita's decision, I will take the help of a lady police constable and lodge an FIR against her employer. Then I will counsel Abita and ask for her address and try to call her parents to tell them that Anita does not wish to marry"*
>
> - Frontline worker, Bhopal

The frontline workers appeared to be flexible about what was the best interest for the child and outlined further information that would be required to make this decision which included talking to the child.

With reference to the child sexual abuse vignette, the frontline workers commented:

> " *When we go to Antao's school, we will ask him his name, about his family, if he is worried about something, is someone hitting him, is anyone treating him wrongly, where does he stay, does he stay in the house, who is it etc. We will tell Antao that he should not be guilty of what happened and that it is not his fault and that his parents love him very much. If the parents are ready to launch an FIR against the uncle, then I will help them do it. I will regularly follow-up* "

> – Frontline worker, Bhopal

In this case, the frontline workers focussed their intervention on the child and at enabling him to cope and address issues regarding the abuse.

Discussion from the vignette responses: Based on the responses of the vignettes across the four cities, there was a marked difference amongst the frontline workers across the cities on how they would react to the situations. In Trivandrum the best interests were defined very narrowly whereas in Bhopal the best interests were broader. In Jaipur and Puri as well, the frontline workers had decided the best interests though there was some scope for the team to change their minds. In Bhopal, the frontline workers were open to many more options since they did not hold predetermined ideas of what was the best interest for the child.

(b) Basis for arriving at best interests: Focus group discussions with frontline workers: In the focus group discussion, I discussed how the frontline workers arrived at the best interests of the child. The responses that I got from them are discussed below:

Trivandrum: In my focus group discussions with the frontline workers, they appeared to have strong moral positions on what was the best interest for a child. For example, most of them reflected the sentiments in the quotes below:

> *"It is essential that the child is safe and protected and receives the love of a family, so we must make sure that our interventions work toward this"*
>
> - Frontline worker, Trivandrum

> *"It is wrong for the child to work, when they should be studying and playing"*
>
> - Frontline worker, Trivandrum

When I asked the frontline worker about the basis on which they had arrived at the best interests, they said it was values of the organisation and on the guidelines provided by the helpline nationally.

> *"We decide what's best for the child to grow and develop into mature adults. We take the advice of our director if we come across any case we are not sure what to do"*
>
> - Frontline worker, Trivandrum

They also explained that they had a set of guidelines that outlined responses to the types of calls received and this formed a part of their documentation.

Jaipur : In my focus group discussions with the frontline workers, it I asked them about how they arrived at what was the best solution to the child's situation. The dominant responses I received are quoted below:

> *" What is best for the child depends on the society where the child is being brought up. We must try to ensure that we are able to teach them (children) how to integrate into society ,so that they can be members of society who are valued"*
>
> - Frontline worker, Jaipur

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When I asked the frontline workers as to the basis for their arriving at the best

interests, they said society has certain values and this forms the basis for arriving at

the best interests. As child marriage is common in Rajasthan, we have to understand

why the parents are behaving in that way. The frontline workers were largely of the

opinion that sometimes we criticise local cultures without understanding why these

practices exist. They stressed that children should be taught the values of their

society and then will lean to appreciate them. The team also mentioned about

scarcity of resources that determined their interventions.

> *" It's not possible to always get the best education, best health care for the child, best shelter facilities for children with disability, as we don't have such resources"*
>
> — Frontline worker, Jaipur

> *" It could be that what is best for the child in Mumbai or London is not the same for a child in Jaipur"*
>
> — Frontline worker, Jaipur

Puri: In my focus group discussions with the frontline workers in Puri, I asked

them about how they arrived at what was the best solution to the child's situation.

The dominant responses I received are quoted below:

> *"It is extremely important that we meet the best interests as determined by the law. We need to determine the best interest of the child along with the police and the Child Welfare Committees"*
>
> Frontline worker, Puri

The frontline workers felt that the best interests of the child were generally fixed and

that this was reflected largely in the laws of the country. They therefore stressed the

need to involve the police and juvenile justice system in most interventions. The

team however did feel that it was important to listen to the child and we should try to

change attitudes in society in accordance with the law. The frontline workers also spoke about scarce resources as limiting interventions.

"To meet the best interests of the child, we have to make sure that children are aware of their rights and have to give them information about their rights of survival, protection, participation and development"

- Frontline worker, Puri

Bhopal: In my focus group discussions with the frontline workers, I asked them about how they arrived at what was the best solution to the child's situation. The dominant responses I received are quoted below:

"We decide the child's bests interests based on several factors such as the child's needs, legal rights and practical considerations. For example even though legally, no child should work, if that is the child's wish and the employer is willing to take care of the child, then we would support the child to be in that employment"

- Frontline worker, Bhopal

"It is important that we try to create a child friendly atmosphere so that the child is able to talk to us freely about what he/she thinks. We also have to work at changing how people think about street children"

- Frontline worker, Bhopal

The frontline workers thus seemed to have a flexible approach while determining the child's best interests. They mentioned that the solution to a child's problem has to be based on the child's needs and the rights of the child.

The majority of frontline workers in all the cities defined the best interest of the child as the ideal intervention that could be applied to all children with similar problems. In my focus group discussions, I noticed certain differences amongst the frontline workers across the cities. In **Trivandrum**, frontline workers had strong moral positions about the best interests of the child which was evident in their emotion of "doing the right thing for the child", that many of them spoke about. The frontline workers seemed to have felt that the child's problems were the inability of individual

families to cope with situations and hence needed additional skills and resources. In **Jaipur**, the frontline workers based the best interests of children on the norms they believed that society was based upon. The frontline workers thus seemed to think of problems as a result of devaluation of local culture. They did look at solutions with children adjusting or learning to adapt to the culture. The frontline workers in **Puri**, arrived at the best interests of children based on society's legal norms and their belief that the helpline should strive towards implementing these to protect the rights of children. The solution to problems was in spreading awareness about rights amongst children and others in society. In **Bhopal**, the front line workers based the best interest of the child to a great extent on what the child expressed as their need. They looked at solutions to the problems emerging from both the child as well as the rights of the child.

The sources of the best interest were largely cultural considerations, policy requirements and scarcity of resources. For example:

o Cultural considerations: The frontline workers in Jaipur spoke about how culturally girl children are expected to marry at an early age.

o Policy requirements: The frontline workers in Trivandrum also illustrated the fact through many examples, that the helpline policy dictates what they plan as the best interest for the child.

o Scarcity of resources: The frontline workers in Jaipur and Puri also listed lack of resources as a factor that influences the best interest of the child. For example,

since there are no proper shelter facilities available, they feel that sending the child home is better than keeping the child in an ill equipped shelter.

o <u>Justice/ Child Rights</u>: Several of the frontline workers in Puri and Bhopal mentioned that they based the best interest of the child based on his/her rights as it was the just action. In Puri, the frontline workers believed that the best interests are enshrined in the legal provisions for children. In Bhopal, the frontline workers mentioned the legal provisions as well as justice. For example in a child abuse situation within the family that the frontline workers felt that the abusive family member should be removed as it was in the child's best interest and the child's right to remain in the family setting.

6.3.2 Understanding how children understand their best interests

In this subsection, I look at how children in the four cities understood the concept of their best interests. As explained in Chapter 4, I observed street children, children in residential homes and children in slum communities differed in their understanding of what was in their best interest. In this section, I highlight some of these aspects and look at situations where children mentioned that they have a conflict with frontline workers.

(a)Responses of children to the vignettes : I have summarised the key responses that I got from children below:

	Street children	Children in Residential homes	Children in slum communities
Anita: Trivandrum	Earn, study and take care of mother, run away from home, continue working	Earn and take care of mother/father, run-away, continue working	Ask for help from the community, study, against the law
Jaipur	Take mother to hospital, remove father, run away	Earn and support mother, put father in de-addiction, run away	Earn , study , take care of mother, get married when 18
Puri	Study, earn , take care of mother, run away	Take care of mother, run away	Ask doctor to help, tell parents it is against the law
Bhopal	Earn, take care of mother, run way	Study, ask doctor to treat, tell parents against the law, run away	Ask a neighbour to help to take mother to hospital, explain that it is illegal
Antao : Trivandrum	Run away	Run away	Tell someone they trust Run away
Jaipur	Run away	Run away	Run away
Puri	Run away	Tell a trusted person	Tell a trusted person Run away
Bhopal	Run away	Run away	Run away

Table 6-4: Responses of children to the vignettes

Based on the responses to the vignettes, I observed that were similarities amongst the three groups in all the cities. With regard to the first vignette, street children across the four cities felt that the Anita should earn to take care of the mother and once the mother is well then she should run away from the home, so that the parents do not force her to marry. The children in residential homes too were largely of this opinion.

The children in slum communities however felt that the child should be able to ask someone for help to take care of the mother. Also they felt that they would be able to convince the girl's parents that she should not get married.

In the case of sexual abuse, most of the groups of children thought that running away was the only solution to the child problems as no one would believe him. Only a few groups of children thought that by telling someone, they could get assistance.

(b) Focus group discussion with children on best interests: In the focus groups, In order to understand the nature of the conflict of interests, if any, with adults, I asked children to describe situations where they felt that had been in conflict with the frontline workers. I have classified the responses I got from children into the following:

Lack of response from CHILDLINE

> *"I was caught by the police for loitering and CHILDLINE did not come to rescue me"*
>
> Boy, 14 years, on the street, Jaipur (FCJ2)

In ability of CHILDLINE to deliver required response

> *"My friend was missing and I called CHILDLINE, but CL could not help"*
>
> Boy, 13, in slum community, Trivandrum(ICT6)
>
> *" I called when my father died and spoke to CHILDLINE, but my father did not come back"*
>
> Boy, 11 years in slum community, Puri(ICP7)

> *" In the open house, I told the CHILDLINE team member that in our place we have no proper water supply.. but bhaiya said that there is nothing CHILDLINE can do about that"*
>
> Boy, 15 years in slum community, Jaipur (ICJ9)

" CHILDLINE does not have any shelter facility for us to stay at night"

> Boy, 15 years on the street, Puri (ICP2)

" My friend had called for medical treatment as he needed a heart operation and CHILDLINE did not help him"

> Boy 17 years in a slum community, Bhopal (ICB6)

" We don't have enough books for studying and uniforms. We have asked CHILDLINE to help us get this "

> Boy, 9 years, in a slum community, Bhopal (ICB4)

The helpline's manner of dealing with children

"I want to go outside from the shelter, but the CHILDLINE worker is very strict and does not allow me"

> Boy, 6 years in residential home, Trivandrum(ICT10)

"When the GRP picked up Bablu because they (police) thought he has robbed a woman on the station, we called CHILDLINE, but Bablu was still beaten up and only after four hours was released by the police"

> Girl, 13 years on the street, Jaipur (ICJ4)

"We don't have many bad habits. I like to chew gutka, so I run away from the CHILDLINE team member when he comes to the railway station, otherwise he will beat me if he sees that I have been chewing gutka"

> Boy 9 years on the street, Jaipur (FCJ1)

"In the shelter, once I had a fight with Chandni and (the CHILDLINE team member) immediately scolded me , without listening to what had happened"

> Girl, 10 years in a residential home, Jaipur(ICJ10)

"My friend called CHILDLINE as I was not feeling well and the CHILDLINE team member forced me to go to the hospital ... as I don't like going there because the doctors are all bad there. Even when I went with the CHILDLINE team member, the doctor refused to touch me and the CHIDLINE team member had to clean me first"

> Boy, 14, living on the street, Trivandrum(FCT2)

"The CHILDLINE team member insists that we do sniff glue in the shelter or on the railway station. They don't understand why we sniff glue"

Boy, 13 years, residential home, Jaipur(FCJ7)

"We want to go back home, but are not being sent home. I know my address."

Boy, 13 years residential home, Bhopal (ICB10)

Most of the children I spoke to regarding their best interests did believe that the frontline workers wanted the best for them. However they often did not understand how the strategies offered to them by the frontline workers would help them to get to that best interest. The children made a distinction between the long term best interest and the short term best interests. While children and the frontline workers generally agreed on the long term best interests, there seemed to be inadequate discussion with the children as to how the short term strategies link to the long term best interests.

6.3.3 Analysis of comments regarding the child's best interests

In my analysis on the best interests, I shall discuss the differences between children and the frontline workers in understanding and applying this concept and will look at how the understanding of best interest by the frontline workers affects the level of children's participation.

(a) Differences between children's and frontline workers understanding of the best interests: Some of the key differences that I observed were:

- The children spoke about everyday/routine situations where adults and children differed; whereas the frontline workers spoke about more exceptional cases where there was conflict between them.

- Many of the key conflicts between children and adults at the helpline were not based on the end outcome, but on the means to reach the outcome. **For example,** while I was at the helpline centre in Tirvandrum, a team member met 2 boys on the train and brought them to the helpline centre. These boys said they had left their home because their parents ill-treated them and they wanted to study. The helpline co-ordinator agreed that they would make provision for the boys to study. The frontline worker contacted several agencies offering educational cum residential services, but none were willing to accept the boys as they said they did not have the capacity. The phone receiving organisation has a shelter in an adjoining city, but the frontline workers were reluctant to send the boys there as the older boy was known to be 'difficult' in the previous shelter, he had reportedly stolen things and picked up fights with older boys .They feared that they would not be able to manage the boys in their shelter home. The frontline workers therefore decided to refer the boys to the Government home. The boys were told that they could choose if they wanted to go there or live on the street – though if they chose the street, then helpline could not help them further. The boys decided to go the Government home. I visited the Government home; two hours after the boys had been taken there. On reaching there, I found one of the boys in tears, pleading to be taken out of the 'jail'. He said that at the Government Home, they were teaching basic education which he did not need. Additionally he explained that the caretaker had beaten him for not speaking up. The frontline worker accompanying me counselled the boy to remain on the

shelter as it was better than living on the railway station and left the boys there. However after an hour, the boy was adamant that he wanted to leave and said that they would rather go back home, so the frontline worker was called back to take the children to the shelter. On the way back, the children jumped off the bus, before the frontline workers and thus the helpline lost contact with the boys. On discussing this case, the frontline workers commented that very often children don't know what is in their best interest when they make such decisions and sometimes it becomes necessary to force children to make certain choices.

o   The team acknowledges that there is a scarcity of resources, but tell the children that they have the best options and then fail to understand why the child is not making a choice. However will an acknowledgement of the lack of resources by frontline workers make a difference to the children? When I asked this question to the children, they said it definitely would make a difference. A child in Jaipur commented that it would mean that they could trust and turn to someone, whenever they needed help. In many focus group discussions, the street children did not believe that there was a lack of resources but that it was adults who did not want to spend money on children.

(b) How the best interest principle affects the level of children's participation:

The frontline workers across the four cities seemed to differ on their understanding of the best interests of the child.

o In Trivandrum, the frontline workers were already quite clear about the best interests of the child and hence did not see the need to involve the children in many decisions. This thus linked to their understanding of participation as rapport building

o In Jaipur, the frontline workers based their understanding of the best interests of the child on values of that society. They did look at these values as given and fixed. They did listen to the child, but only to get him/her to accept the frontline workers point of view thus reflecting their motivation for participation which was asking questions.

o In Puri, the front line workers perceived the child's best interests as enshrined in the laws for children. However most of them did feel that there was scope for change and that the helpline should try to gradually change some of the practices that are not in the child's interests. They did believe it important to listen to children in certain decisions.

o In Bhopal, the frontline workers felt that the best interest principle was flexible and depended on the child's needs and human right values. The frontline workers were keen to understand the needs of the child and listen actively to what they were saying.

6.4 Management styles across the helplines

The literature has highlighted that the organisational culture affects the level of children's participation. While the national helpline policy aims to integrate children's participation in all aspects of the helpline, the local organisational culture also influenced the level of children's participation. The national helpline creedo states that children's participation is central to the helpline's practice and that all children need to be listened to about all decisions that affect their lives. As elaborated upon in Chapter 3, the CIF however partners with local organisations across the country to implement the project. The CIF policy lists guidelines for the selection of organisations. The organisations thus meet minimum standards with respect to a child rights focus, financial accountability and ability to network with other organisations. The frontline workers for the helpline are appointed by the local organisation though they are trained by the CIF and are selected based on the guidelines of CHILDLINE India. The day to day management of the team is therefore supervised by the local organisation. In this section, I examine certain aspects of the local organisational culture and analyse how this affected the level of children's participation in the project.

6.4.1 The different management styles of the helplines

In this section, I elaborated upon the evidence with which I have based my findings of the management styles of the helplines mentioned in the table above:

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Trivandrum : The phone receiving organization is run by a religious order who run services for street children across India.

- Level of delegation: The director of the phone receiving centre is very concerned about the discipline of the staff. He described himself as disciplinarian and while the case interventions are delegated to the co-ordinator, the management of the team remains with the director.

- Staff management interaction: The director does not sit with the team to discuss interventions and is mostly involved in management issues such as daily rotas, timings, leave etc for the team. He has monthly meetings with the CHILDLINE team. The staff complained about the rigid manner of rules and policies of the organisations in relation to leave, drinking on the premises, receipt of salary, lack of advance payment etc and the lack of guidance they receive for case interventions.

- Networking with other organisations: The organisation does not network with many other children's organisations and does not feel the need to do so , as it has the required infrastructure to address the needs of children calling the helpline.

- Vision of senior staff to children's participation:

"As a developmental phenomenon, greater children's participation in the decision making process is a growing need. However... aping the West is not the solution. The economical- sociological-educational –cultural context is also vital in the process. In the Indian context, instead of focussing on children's rights, the focus should be on adult responsibility in providing rightful opportunity for children to be heard- their development is not undermined. Some cautions need to made. Children's participative rights and decision making choice are in a social living context. Hence all participants are to be aware of their rights as well as responsibilities for common good"

Director of organisation, Trivandrum

Jaipur: The collaborative organisation appears to have a very hierarchical structure. It has several projects on children's education as well in Jaipur city.

- Level of Delegation : The director has delegated some of the functions of case intervention as well as management of the team to the co-ordinator. The director of the organisation rarely comes of the phone receiving center to interact with the team. The frontline workers and co-ordinator expressed the need for more inputs from the director.

- Staff – management interaction: There are monthly staff meetings of the projects of the organisations. However only the co-ordinator of the helpline is able to attend these meetings. The helpline staff feels a sense of alienation from the main activities of the organisation.

- Networking with other organisations: The director of the organisation is open to networking with other organisations when there is a specific need arising in particular cases, but does not feel the need to network just for experience sharing amongst children's organisations.

- Vision of Senior staff to children' participation:

Children's participation is not very relevant or useful in a country like India, because the unit of social analysis is a family, not the child. Therefore it looks very ceremonial when we talk about children's participation to solve their problems, because they are not decision making authorities. They trust on their parents, friends and other well wishers as per Indian traditions. Social workers are responsible to put him on right track for the quality of life. However I would like to recommend knowing the children's choice at some places for making an official decision would be useful. Before ensuring child participation in a real sense, we must analyse the authority structure of the Indian social system. Must know about central role of family and role of older persons in decision making process.

Director, helpline organisation, Jaipur

Puri : The organisation which runs the phone receiving centre has a very flat structure.

- <u>Level of Delegation</u>: The director of the organisation is very involved in the day to day functioning of the helpline. Some of the frontline workers felt that he was too involved and that he needed to give more responsibilities to the team. He had daily meetings with the team and accompanied the team on interventions.

- <u>Staff – management interaction</u> : However the team appreciated the fact that he spent quality time with them, discussing case related issues as well as staff development issues. The team member are encouraged at each monthly meeting to think about logical conclusions to the calls they have handled and share their concerns about the same at the meetings.

- <u>Networking with other organisations</u>: The organisation actively looks out to meet other organisations and understand services available. It has an updated resource directory of services for children in Puri.

- <u>Vision of Senior staff to children' participation</u>: The head of the organisation had the following comment on children's participation:

    "Children's participation is very important. At RUSH, we try to ensure that we fight to realise the rights of children. We can particularly do this by taking up the cases of individual children whose rights have been violated. It is our aim to ensure that we reach a logical solution to each case with the participation of the child".

Bhopal: The organisation has a very flat structure

- Level of Delegation: The director explained that whilst on the phone each of the frontline workers is the boss and her role is to support them.

- Staff – management interaction: The Director spends times with the team every week. She attends the weekly meetings of the team very regularly so is aware of most of the calls received by the helpline. The frontline workers feel their work is appreciated and are feel confident of voicing any problems they face to the co-ordinator and director

- Networking with other organisations: The organisation is an active member (attends meeting and participates in activities/rallies) of other children's networks in the city such as the child rights forum and the campaign against child labour. The organisation believes in partnering with a range of organisations including housing and water and sanitation which is now also a focus of the organisation.

- Vision of Senior staff to children' participation:

  " Participation is a right of a child. In Aarambh we try to practically show what it means for children to have rights and don't belive in lecturing children on rights. There is definitely poverty that we need to tackle if have to work towards a just society and children's participation in how we can do this, will help in reaching there faster"

  - Director, helpline organisation, Bhopal

6.4.1 Discussion on management style and the level of children's participation

An overview of the differences in styles of management of the local organisations that I have analyzed is outlined below:

	Trivandrum	Jaipur	Puri	Bhopal
Level of delegation to helpline co-ordinator	Delegation of case follow-up; strict control of mgt. administration	Complete delegation to the co-ordinator	Little delegation to the co-ordinator	Partial delegation of case follow-up, complete delegation of administration
Staff – management interaction	Not allowed much voice	Only co-ordinator can attend meetings with directors and other project coordinators	Constant interaction with team	Director of the organisation maintains personal rapport with each team member
Networking with other organisations	Not considered important	Only when in need	Open to networking but few organisations	Actively networks with other organisations
Vision of senior staff to children's participation	Children's participation needed by talking into account the economical, social cultural and educational context	Children's participation is not very relevant and useful	Children's participation is important. Need to take up cases of violation of children's rights	Committed to work towards greater children's participation in the programme

Table 6-5: Local management styles of the helplines

The management styles of the organisations operating the helpline vary. The organisations where the frontline workers perceive better staff- management relations have higher level of children's participation as well.

6.5 Conclusions on factors affecting the level of children's participation

I have summarised my conclusions regarding the best interests, capacity and organisational culture in the table below:

City	Children's knowledge of their best Interests *	Capacity*	Management style**
Trivandrum	Children do not know	Do not have much	More Control based
Jaipur	Children do not know	Misplaced capacity	More Hierarchical
Puri	Children Know	Misguided capacity	More Over- protective
Bhopal	Children Know	Flexible capacity	More Delegation of power

*as explained by the frontline workers
** as described in the text based on the indicators

Table 6-6: Summary of factors affecting the level of children's participation

Based on my analysis, as the level of participation varied across the helplines, so also did the frontline worker's understanding of the best interests of the child; the capacity of the child and the management style of the organisation. The helplines where the frontline workers acknowledged that children had the capacity to understand and contribute towards determining their best interests had higher levels of participation. The management style of the organisation also appeared to mirror the level of children's participation.

In the next chapter I shall discuss the implications of these findings in affecting the level of children's participation.

7 Towards a better understanding of participation

: Lessons from the research

Towards the end of my field visit in a city, several children and frontline workers would ask what I had found in my research. While I would explain that in my research I was trying to understand different perceptions of children and frontline workers to their participation in the helpline, I added that I would send a summary of my interpretations and analysis to the city helpline, on completion of my writing.

In this chapter, I analyse my research findings based on my discussions with children and the frontline workers. I explore how my interpretation of the data helps towards understanding, clarifying and answering the research questions that I had outlined in the first chapter. I have analysed four key aspects in this chapter. In the first section, I analyse whether children's participation has made a difference to project outcomes. In the second section, I discuss the debate on the factors that enable and constrain children's participation by examining the implementation of children's participation at the field level. In the third section, I examine the debate as to whether children's participation is relevant, especially in the context of an industrially developing country like India. In the final section, I summarise my key conclusions.

In the next chapter, I analyse the implications of the research findings for social policy and how the understanding of children as social actors, might translate into policies and programmes for children.

7.1 The relationship between children's participation and project outcomes

In this section, I analyse the role of children's participation in contributing towards the achievement of project outcomes in the four cities. I acknowledge the limitations in the research as highlighted in Chapter 3 and especially the limitation of drawing evidence from only four case studies to draw conclusions. However my choice of a qualitative research methodology was to explore issues that could then be studied on a larger scale.

This section is divided into three parts. In the first part, I summarise the key findings regarding the evaluation of children's participation and service outcomes from my four case studies that I have elaborated upon in Chapter 5. In the second section, I look at explanations given by children, the city or CIF team to explain the level of service outcomes. In this section I analyse the role of children's participation in contributing towards these outcomes. In the third section, I summarise my main conclusions regarding the role of children's participation in decision making in the four helplines and discuss how these findings may inform the existing literature and research on the impact of children's participation in developmental projects.

7.1.1 Summary of the evaluation of participation and service effectiveness

In Chapter 5, I detailed the evidence that I used to evaluate the level of children's participation and the level of effectiveness of the service outcomes of the four helplines. A summary of the key findings as highlighted in Chapter 5 are outlined below:

		Triv	Jaipur	Puri	Bhopal
Level of Children's participation	**Planning**	2	3	1	3
	Organisational structure	2	2	2	2
	Individual Decision making	1	2	3	4
	Monitoring & Evaluation	1	2	2	3
	Overall ranking	**Bhopal , Puri, Jaipur, Trivandrum**			
Project Outcomes	**Nature of calls**	Bhopal, Puri, Jaipur, Trivandrum			
	Training	Bhopal, Trivandrum, Puri, Jaipur			
	CAB Meetings	Bhopal, Trivandrum, Jaipur, Puri			

Table 7-1: Summary of findings on children's participation and project outcomes

Notes: The number denote the scale mentioned in Chapter 3, pp 93

The main conclusions that I outlined regarding the evaluation of the level of children's participation and the service outcomes were:

- The total number of calls received by the helpline did correlate with the level of participation at the helpline (the exception being Jaipur which has recorded the highest number of calls in ChildNET)

- The organisations with higher levels of participation had a higher proportion of calls being received in the evenings (6.00 pm to 10.00 am) – when other services were closed and hence children most vulnerable

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- The organisations with higher levels of participation were assisting a higher percentage of children who had no family support

- The organisations with higher levels of participation were assisting a higher percentage of children who were not in the education system/had dropped out.

- The organisations with higher levels of children's participation had more avenues of collaboration with the allied systems, though had a fewer number of workshops.

- There was no co-relation between the level of children's participation in the helpline and access/ contact/rapport with the Government representatives and state policy makers.

I concluded in Chapter 5 that based on the findings of my research in the four cities, the helplines with greater child participatory practices have better project outcomes at the micro level i.e. providing immediate assistance to individual children, by reaching out more marginalised groups of children and having more children directly call the helpline for assistance. However, I did not observe any relationship between the level of children participation and the helpline's effectiveness at the mezzo (interaction with police, doctors) levels and at the macro (government policy) level.

In the next subsection, I shall analyse the role of children's participation in affecting these outcomes.

7.1.2 Role of children's participation in affecting project outcomes

In this section, I outline the different reasons given by the frontline workers and CIF team to explain the level of project outcomes in a city

> ### Primary objective: Responding to calls from marginalised children

Based on my discussions with the CIF team members, the frontline workers and children, some of the reasons that they gave regarding the number of calls that a city received were:

o *The number of marginalised children a in the city*: The CIF team explained that the number of marginalised children in the city could result in variation amongst the number of calls received by the 68 helplines operating across the country. In my questionnaire with the frontline workers, in all the cities, they stated that they were reaching out currently only to about 50% (or under) of all marginalised groups of children in the city. The frontline workers in all the cities agreed that there was scope to reach out to many more marginalised groups of children in the city.

o *The level of telephone infrastructure:* The frontline workers in all the four cities complained about lack of suitable telephone infrastructure in the city. This was however articulated most in Jaipur as the city had experienced the introduction of private telecom companies in the previous year, that required callers to insert a rupee coin, before dialling. There were only a few instances where the caller was able to retrieve the coin after the call was made. Several children in the cities also

mentioned that they had problems accessing 1098, due to the introduction of the new phones, which affected the toll free connectivity. This is a problem facing all cities and the CIF is taking steps towards addressing this issue.

o *Resources available to the helpline*: The CIF and frontline workers in the city stated that the resources available tend to influence the number of calls. The frontline workers and directors in all the four cities complained about a lack of resources. Though the funding for the helpline project was similar, the capacity of the helpline to draw on other resources could vary and hence I examined if there were any differences. In terms of human resources in all the cities, the frontline workers worked on some aspects of other projects of the organisation also and at times members from other projects in the organization were assigned to work with the helpline. With regards to financial resources provided by the local organisation to the helpline, the frontline workers in Jaipur and Trivandrum felt that they could access the organisation's vehicle at any time as well as the shelter facilities for children, available at the local organisation. In Bhopal and Puri however the frontline workers were unable to utilise many other facilities of the partner organisation. The level of resources however does not seem to have influenced the number of calls as Trivandrum receives the lowest number of calls amongst the four cities.

o *Level of media awareness of the service*: CIF did not have any ranking of the level of awareness amongst the cities. I however had discussions with the frontline workers on the nature of their media awareness strategies. The frontline workers in all cities stated that they had newspaper articles, giving coverage

about interesting calls received by the helpline about once in two months. In all the four cities, the helpline had networked with the local cable television operators to publicise the service. Publicity hoardings on 1098 have been displayed by all cities. There were however certain unique awareness techniques by each city. For example: Trivandrum – displayed 1098 messages on autorikshaws,; Jaipur- displayed slides on the helpline in theatres ; Puri - conducted extensive outreach during the rath yatra (an annual car festival event) and Bhopal was the first to get 1098 printed on the telephone bills which was then subsequently done in other cities as well. Thus all the cities did not vary to a great extent in their strategies for mass media awareness.

o **Level of Outreach with children:** Another factor that the national team identified as having an impact on the number of calls by children was the level of grass root awareness (outreach) conducted by the city team. The methodology and motivation for conducting outreach varied across the four teams and hence I examined this activity more closely at each of the helplines.

Trivandrum: Based on the weekly schedule of the team member, outreach was not integrated into the profile   of the team member. The majority of the field workers did not feel the need for outreach with children. They felt the need was to concentrate on mass media campaigns to reach out more effectively to children. As a result the main awareness of the service is through media – newspaper articles, TV commercials, billboards and the word of mouth spread by children who have been assisted. When I asked them about the importance of doing outreach with children, the co-ordinator explained:

It's better that we tell adults about the service so that they can call when they see a child who has a problem. In order to us to reach children who are being abused in homes, it is important that teachers, ICDS workers know about the existence of the helpline

<div align="right">Frontline worker, Trivandrum</div>

When we have our monthly Open houses, we are doing outreach with children

<div align="right">Frontline worker, Trivandrum</div>

Thus the frontline workers in Trivandrum equated the open houses with outreach and felt that telling adults about the service was more effective.

Jaipur: In Jaipur, outreach was not integrated into the profile of the frontline workers. They felt that given the strain on human resources, it was impractical to consider doing outreach. If outreach with children had to be done then it was necessary to have more people.

"The team is overburdened. There are 10 members on 3 shifts, 24 hours a day. When can they do outreach? They often have to repatriate children which take 4 to 5 days at a stretch. Can outreach, open houses, training of allied system- can 8-9 people do all these activities for a salary of Rs 2000?

<div align="right">Frontline worker Jaipur</div>

The team did feel that given the present situation, outreach activities were therefore not very feasible. The frontline workers were unable to accompany me on outreach during my field work but arranged for a support organisation to come along with me to the railway station to meet with children. The frontline workers did have a feeling that their role was to answer the phones and that they should therefore concentrate on this aspect of their role rather than on outreach.

Puri: In Puri, outreach was an integral part of the schedule of the frontline workers. The co-ordinator explained:

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"We have divided Puri into five zones and have identified the areas in each zone where there are street children and slum areas. When we do outreach we meet the PCO owners, children and local residents to tell them about the service"

<div align="right">Frontline worker, Puri</div>

During my field work I was able to accompany the frontline workers on outreach on two occasions. The outreach was conducted in a slum community in the east of the city in a location called Penthakota where the community is involved in fishing. The frontline worker was familiar with the area and chatted with the PCO owners in the area to tell them about the helpline and remind them to call if they see a child in distress. The team had also identified a teacher in the community who was their local contact in the area. The teacher explained that she has put by posters and stickers about the helpline in the school. The frontline worker also spoke to some children who were playing and asked them if they knew about the helpline. As they had not heard about it, he proceeded to explain to them and gave them a sticker of the phone number. Further, the outreach activities of the team are documented in the annual report with special section on the people met on the outreach and the highlights whilst conducting the outreach.

Bhopal: In Bhopal, outreach was a weekly task of each of the frontline workers. The frontline workers explained that it was the task of the helpline to make sure that all children in Bhopal knew about the 1098 number. They had a personal involvement in the process and spoke to children on their way home etc. The children's volunteers as explained in Chapter 5 also are involved in spreading awareness amongst children in schools and in the communities that they live.

As a frontline worker explained

"Whenever we are 'out' (of the office) we are on outreach.. we carry stickers of CHILDLINE and speak to children about the service. We

have to make sure that every child knows and is confident to call CHILDLINE"

Frontline worker, Bhopal

During my field work I accompanied a team member on outreach to the railway station. The frontline worked met with children and soon there were about 7 to 8 children who had gathered to speak to him. He asked them about their health and how their work was getting along. During the discussion, a railway police official came along and the boys thought they had to run, but the frontline worker used the opportunity to involve the police official in dialoguing with the children. The police official stated that he did not understand why the children left their homes. The frontline worker explained that it is not an easy decision for the child to leave home and invited the children to add their comments. After the police official had left, the frontline worker checked that the phones on the railway station were connecting to 1098. He also reminded the children to call whenever they wanted or saw a new boy/girl on the station.

In my analysis, the motivation of the frontline workers to do outreach appeared to be related to the perceptions on children's participation in the following manner:

- In Trivandrum, where the frontline workers did not believe that they could learn from children, they did not see the point of dialoguing with them. It was important to provide information about the service to adults who would call on the child's behalf. They thus believed that by providing this information, children would access the service.

- In Jaipur, where the frontline workers felt that they knew the best interest of the child and participation was a means to convince children about these, the team

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felt that outreach was a waste of time. They reasoned that there are few resources available, so there was no point in stretching an already expanding serviced. To these team members, participation was a means to an end and they believed that if there were no real choices that can be given to children, then therefore there was little point in conducting outreach with children and the felt that all children on the station know about the service, so would call if they needed assistance.

- In Puri, the frontline workers did acknowledge that they could learn from children, they had a good outreach plan and were motivated to spread awareness about the service amongst children.

- In Bhopal, where the frontline workers were concerned about understanding the situation of the child, the motivation to do outreach was integrated and the team felt that an evaluation indicator of the service should not be the number of calls but rather the number of children who were aware of the service. In Bhopal children were also involved in spreading awareness through role plays and songs in a more formal ways than in other cities.

In my analysis thus, the motivation to do outreach appears to be linked to the attitude of the frontline workers to participation of children. Hence I would suggest that the level of outreach affects the nature of calls to the helpline and motivation to do outreach is linked to attitudes towards children's participation at the helpline.

> **Secondary Objective: Training workshops with Allied systems**

As I have concluded in Chapter 5, with regard to the sensitisation of the allied systems, the effectiveness of the cities in conducing training workshops under the NICP programme could be ranked as: Bhopal – Trivandrum – Puri - Jaipur

The CIF team and frontline workers discussed the following issues with regards to the training workshops with Allied systems:

o *Financial resources:* CIF had launched the National Initiative for Child Protection (NICP) in 2000 and provided each city with Rs 20,000 every year to conduct workshops with allied systems. The helpline partners in the organisations have utilised this amount in all the cities, though Trivandrum and Bhopal did mention that they had to draw on other resources as well to conduct these workshops.

o *Relationship with the senior local authorities*: The helplines in Trivandrum and Bhopal said that they had good working relations with the local authorities whereas in Jaipur and Puri the co-ordinators explained that it was difficult to contact the officials as they were often on leave, or got transferred frequently or/and were not interested in children's issues.

o *Relationships with other NGOs:* With regards to networking skills with other organisations, the success of NICP does depend on the organisation's ability to network with other organisations. I however observed that none of the

organisations have been effective in networking with other NGOs working with children in the city to jointly organise any of the training workshops.

o *The role of the nodal organisation:* The nodal organisation performs a key role in liaising with the government authorities to organise the NICP workshops. In Trivandrum, Jaipur and Bhopal, an academic institute is the nodal organisation whereas in Puri, an NGO performs the role of the nodal organisation. The nodal organisations in Jaipur and Trivandrum stated that their academic status with the government enabled them to share a good relationship with the local authorities.

o *Methodology of conducting the workshops:* I have analysed the methodology of the manner in which the NICP workshop are conducted based on the following aspects:

City	Selection of Allied systems	Inputs from collaborative	Levels of Allied system trained
Trivandrum	In consultation with collaborative org	Planning, jointly at sessions	All levels
Jaipur	Independently	As resource persons	Mostly senior

conducted by the nodal organisation with little inputs from the collaborative organisation. In Puri, the workshops were looked upon as means to get acquainted with allied systems on a case by case basis. In Bhopal, the nodal and collaborative organisation conducted the workshop jointly, some without the assistance of the nodal organisation. The role of children's participation in training the allied system was not present at any stage in the training process. When I asked the collaborative and nodal organisations if they saw a role that children could play in the training workshops, the comments I received included:

> The children tell us and we tell the allied systems. The allied systems
> have limited time so have to make the most of it
>
> Frontline worker, Trivandrum

> The children will be afraid to speak openly about their problems to the
> police, so its best that we do it
>
> Frontline worker, Jaipur

> We should not endanger children by placing them in situations that may
> be harmful to them which could occur in training.
>
> Frontline worker, Puri

> Involving children may be just tokenistic by them speaking about their
> lives.
>
> Frontline worker, Bhopal

Based on the discussion above, the role of the nodal organisation seemed to be very important in organising the training workshops. Children did not appear to influence the issues discussed directly at the training workshops except through the adults conducting the training.

As highlighted in Chapter 5, I have ranked the effectiveness of the helplines in placing children's issues at the CAB in the four helplines as follows: Bhopal-Trivandrum- Jaipur- Puri. The CIF team and the frontline workers in the city had the following reasons to explain the factors that influence the functioning of the CAB:

o **Government interest** : The interest of the Local authorities was highlighted by the frontline workers as the key factor that influenced the functioning of the CAB. Trivandrum explained that it was fortunate to have a very proactive Secretary of the department of Women and Child Weflare who was keen on expanding the CHILDLINE service throughout the state of Kerala. In Bhopal, the director explained that the present secretary was more supportive that the previous and hence it was now easier to organise meetings. In Jaipur, the nodal organisation explained that the government officials were extremely busy and hence has been very difficult to organise meetings on a regular basis. In Puri the organisation stressed that given that the state had recently experienced 2 major natural disasters, the state government had not been functioning effectively and hence had been difficult to organise meetings with the concerned members.

o **Role of the nodal organisation**: The responsibility of organizing the CAB meetings like the NICP is with the nodal organisation. The interest of the nodal organisation in therefore organising these meetings was also an important factor. In Trivandrum, the nodal organisation was keen to ensure that the CAB meetings are organised on a quarterly basis. In Bhopal, there had been a change in staff at

the nodal organisation, which had resulted in a temporary delay in organising the CAB meetings. In Jaipur, the nodal organisation did not see the relevance of the CAB meetings since the top senior officials do not attend the meeting. In Puri, the nodal organisation and collaborative organization have stated that they have been trying to convince the government authorities to play a more active role in the CAB.

o *Methodology of the CAB meetings*: The methodology for conducting the CAB meetings was similar in all the cities in that they placed issues affecting the frontline workers and children before the members. In terms of decision making towards practical benefits for children taken by the CAB, Bhopal and Trivandrum appeared to have taken more concrete decisions towards improving/generating services for children in the city.

From the above discussion, I conclude that the government interest and the nodal organisation played an important role in organising the CAB meetings. Based on the data, I observed that children did not play any role in planning or implementation of the CAB meetings. The helplines did not think it was necessary to involve children during the CAB meetings and this was not observed to the policy of the CIF nationally as well. The CIF observed that it was that the open houses were forums for children to express their opinions and that by including children on the CAB necessitated the selection of certain children that could lead to several issues amongst organisations and children in the city.

7.1.3 Discussion on the impact of children's participation

Based on my analysis of evaluating children's participation and service outcomes,

the following themes struck me as being important

- o *The level of children' participation affecting the project outcomes*: Based on

  my analysis, the level of children's participation in the helpline did influence

  project outcomes. The data I collected seemed to suggest to me that that the

  organisations with higher levels of participation were able to reach out to more

  marginalised groups of children due to more effective outreach and a higher trust

  and credibility with children (as evidenced from more children directly calling

  the helpline). With regards to the secondary objectives of the helpline in terms

  of training and organising meetings with the local authorities, there was no direct

  involvement of children in these activities. The role of the nodal organization

  and the interest of the key local authority member seemed to play an important

  role in the effectiveness of the helpline in achieving these secondary objectives.

  As none of the helplines have involved children in planning or implementing

  these secondary objectives, I have not been able to see if children's involvement

  in these activities would result in greater impact.

- o *The importance of participation in establishing trust and credibility*: I have

  been unable to conduct a systematic study of the impact of the decisions on

  individual children, but the project outcomes suggest that there is strong case for

  participation to result in higher credibility of the service amongst children. In my

  discussions with the frontline workers and children, I realised that there are no

  easy solutions to several of the problems that children call the helpline – with

lack of resources, differences in short-term and long term interests, differences in strategies to achieve interests. Whilst these dilemmas are faced by all frontline workers, in my analysis, I found that a belief in participation allows children and frontline line workers to dialogue with each other. Dialogue was however only the first step. In the case of the helpline in Trivandrum and Jaipur, the frontline workers were dialoguing with children, but their motivation was either to enhance rapport with the child or to convince the child what s/he should do and in that sense had already made up their (frontline workers) mind about the outcome. In both Puri and Bhopal, I understood the importance of the frontline workers not beginning the process of dialogue with a decided outcome. For the frontline workers in these cities, participation was clearly related to decision making. In Trivandrum and Jaipur, the frontline workers used organizational and societal norms that provided a checklist of how they should intervene. In Puri and Bhopal, the frontline workers made more efforts to dialogue with the children to understand the life situation of the child and the individual needs of the child. My research suggests that participation which is flexible, based on values that respect the right of the child, and is linked to decisions results in a more credible and accessible service to children

As indicated in the Table 5-7 on the role of children calling the helpline, the percentage of children calling the helpline either for themselves or for a friend is highest in Bhopal, followed by Puri, Jaipur and Trivandrum. The number of children calling in themselves, seems to be a robust indicator of the trust that children have in the helpline .As per my discussions with children who described participation as relationship of trust and respect, this evidence suggests that

through participation (linked to decision making, having flexibility and rooted in a child rights framework), children develop a greater trust in accessing the services of the helpline. This evidence also suggests that such participatory practices do play a key role in ensuring that the helpline responds to marginalised groups of children in the city.

In my analysis, grass root outreach and awareness amongst children was of key importance in building that relationship of trust with the children, especially at a telephone helpline where the technology brings anonymity. The grass root outreach that consisted of meeting with children from marginalised groups in their own environment, taking them to the phone to demonstrate the credibility of the service, which gave children from marginalised groups, the confidence to call the number when they need help.

- **Children's participation affecting training/policy:** While the helplines such as Bhopal and Puri that did allow children the space to contribute towards individual decisions; all the four helplines were reluctant to provide a greater space to children in training and advocacy activities. The reluctance appeared to be at a practical level of 'choosing children' but also to shield children from the frustrations faced in the way policy decisions are taken. I do feel based on my discussions with children that it is important for children to understand the politics of policy making. In my discussions with children, many mentioned that it was important to see progress towards achieving outcomes and thus children could get more frustrated by excluding them from training and policy activities.

7.2   Factors affecting the level of children's participation

In the previous chapter, I examined how the understanding of competence, best interests and the organisational culture differ across the four helplines.   In this section, I discuss how these factors may affect the level of children's participation. Whilst analysing the responses of the frontline workers regarding the child's capacity and best interests, I realised that these fit into the perceptions of what was adult responsibility towards children.   A summary of these aspects is outlined below:

	Trivandrum	Jaipur	Puri	Bhopal
Perceptions on child's best interest and capacity	- Best interests decided for children - perception that children have no/little capacity	- Best interests decided by convincing children - perception that children have misplaces capacity	- Best interests decided consulting children - perception that children have misplaced capacity	- Best interests decided by dialoguing and negotiating with children - perception that children have some capacity
What is our responsibility as adults?	Responsibility to protect children according to the values of the organization	Responsibility to protect children for the preservation of culture	Responsibility to protect children for a law abiding society	Responsibility to protect children 's rights
Why are children in need of protection?	Because they are innocent and unreliable	Children lack knowledge of societal norms	Lack of laws to protect them	Lack of resources, as children not an important issue
Level of children's participation	Speaking with affection	Asking questions	Listening to children	Influencing decisions

Table 7-3: Perceptions on adult responsibilities to children

I observed that the front line workers did not acknowledge that there was a power relation between them and the children. They preferred to talk about responsibilities to children they had and that children were dependant on them. Christensen and Prout drawing parallels from the work of Bauman write that there is a difference between taking responsibility for and taking responsibility away from the Other.

> *The latter is a form of paternalistic control. Also recognising children as social actors does not justify treating children as if they were the same as adults (for example in terms of wealth, power or creative energy). It is important to remember that taking responsibility means entering a dialogue that recognises commonality but also honour difference*
>
> (Christensen and Prout 2002, pp 480)

The perceptions of why children need protection were thus interesting as they revealed the frontline workers perceptions to childhood.

In Trivandrum, the frontline workers spoke about the innocence of children. Innocence of children has been and remains one of the main ways in which difference between children and adults has been defined, idealised and represented by adults. Gittins (1998) argues that because innocence is synonymous with ignorance, therefore there is a real sense in which adults seeking to protect what they define as innocence result in prolonging dependency, ignorance and disempowerment in children(Gittins 1998, pp 172)

In Jaipur, the frontline workers spoke about street children as being unreliable and 'challu'. Reliable / reliability refers to the extent to which it can be assumed that actors can be relied upon to put the interests of all beneficiaries functioning. This fits into the traditional dichotomy of the altruistic adult and the selfish child. Some authors (Phillips 2000) argue that this does not mean child beneficiaries can be relied

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upon unchecked, rather it is better to formulate with children, systems to promote fairness.

In Puri, the frontline workers spoke about a vulnerable child as one who needed to be protected and they believed that the rights of the child were enshrined in the Indian Constitution and their role was to ensure that they were able to ensure that these rights are received by all children.

In Bhopal, the frontline workers thought that children even in their vulnerability as having the potential and being resourceful. They believed that it was lack of resources in the system as well attitudes that caused the violation of rights and hence their role was to change attitudes as well ensure greater resources for children.

To conclude, in my analysis the perceptions to the child's best interest and capacity resulted in their perceptions of what were adults responsibilities towards children and this contributed towards their approach and mindset about children's participation in the helpline. Based on my research, I explored that the frontline workers were making an assessment of children's capacity regarding their abilities. However more than assessing the child's capacity, it was the frontline workers perception of the child's best interest that determined the degree of children's participation. Thus in those cities where children were involved by frontline workers in contributing towards their best interests, the level of participation was high and the perceived best interests were age specific for some frontline workers.

In Trivandrum, the frontline workers were not convinced that children were able to articulate their best interests and did not think in necessary to involve the child in decisions. In Jaipur where the frontline workers assessed the capacity of the child based on the family economic situation of the child, believed in talking with the child, the stumbling block to promoting the child's participation in decision making was that they (front line workers) had decided what was best for the child. In Puri and Bhopal, the frontline workers used participation as a means for understanding the child situation with a belief that all children could articulate their interests in a safe environment.

With regards to the management style of the organisation influencing the level of children's participation, based on my observations, the level of children's participation does appear to mirror the management style of the organisation. I did perceive that my discussion with the frontline workers on children's participation did make many frontline workers reflect on the culture of their organisation and relationship with CIF. Children's participation could thus provide an opportunity for managements in organisations to reflect on practices and procedures of involving staff. In my research however, I have only studied a limited extent of organisational culture of the helpline partner organisation. However further research would be required to ascertain the causal linkages between the two areas of children's participation impacting on management style.

7.3 The relevance of children's participation in India

As highlighted in the introductory chapter, the debates on children's participation have largely been three fold. One that is generic to adult participation and is largely related to the attention given to appropriate techniques without addressing issues of power, control of information and other resources. The second debate is specific to children's participation and questions the competence of children to participate in decision making. Thirdly and specifically with reference to developing countries, it has been pointed out that talking about children's participation might result in the problems faced by children to be attributed to childhood and not the structure of poverty. In this section, I analyse the issues related to this third aspect of the debate on children's participation.

o __The role of the child helpline as a means of children's participation__: My experience with the helpline in India has shown that children's participation need not neglect issues related to the structures that cause poverty, but rather help in addressing them more effectively. While I have shown that each helpline has a different understanding of children's participation, I argue that greater children's participation in the helpline (if flexible and linked to decision making) would facilitate a better utilisation of services. The helpline has provided a pragmatic model of ensuring that : marginalised groups of children are reached ; the existing support structures of the police, health care systems are strengthened through training and sensitisation workshops and that there is a mechanism for children's voices to reach policy makers though the Advisory Board. While children's participation does focus on the adult- child relationship, it does not necessarily imply that this diverts attention from the power dynamics that cause

families to be poor. A more inclusive approach building from children's perspective would facilitate such a process rather than divert attention from it.

o Children's right to participation linked to meeting children needs: In my research I found the reason that children gave for participating in the project was that firstly it met an important practical need of theirs and secondly they participated because of the respect they experienced, reaching out to others. It is important for children to understand why they are participating and the aim that their participation seeks to achieve. In Bhopal, children had a high degree of awareness about this. In a developing country, like India, my experience in the child helpline has shown that it is extremely relevant to combine participatory practice in the provision of services for children. In the helpline, children call and define and identify their 'needs'. Whilst addressing the needs of these particular children, the helpline is also concerned with changing attitudes and in advocating for great access to services for all children. The helpline experience in many ways has shown that this approach is possible and practical.

o The dangers in adopting child participatory practices: It is possible for organisations to use child participatory terminology, practices without actually following the spirit of participation which is a partnership between children and adults. The danger is that children's participation as a concept is discredited and also that the organisation hides behind the cloak of children's participation to continue doing what the management is interested. It is important for organisations working with children to understand their motivation in promoting children's participation.

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7.4 Summary of conclusions

In conclusion to this section, I would like to highlight the themes that have been

raised from the above analysis

Factors affecting
 Participation

• Best interests	Children don't know	Children don't know	Children may know	Children may know

Factor	Col1	Col2	Col3	Col4
• Capacity	Children don't have	Misplaced	Misguided	Depends on decision, child
• Management Style	Control	Hierarchy	Over protective	Delegation

↓ ↓ ↓ ↓

Understanding **of Participation**	Speaking to children with affection	Asking questions	Listening	Influencing decisions

↓ ↓ ↓ ↓

Level of **Participation**	Lower	Medium	Medium- High	Higher

↓ ↓ ↓ ↓

Level of service **outcomes**	Lowest in responding to calls from marginalised children	Medium in responding to calls from marginalised children	Medium in responding to calls from marginalised children	Highest in responding to calls from marginalised children
	Higher in sensitising allied systems	Medium in sensitising allied systems	Medium in sensitising allied systems	Highest in sensitising allied systems
	Highest in advocating for children's services	Medium in advocating for children's services	Medium in advocating for children's services	Higher in advocating for children's services

Table 7-4: Revisiting the analytical framework of the research

- **Understanding of children's Participation in development projects:** There is a need to have clarity about the understanding of participation. Based on my research, I would suggest that

Participation should be linked to influencing decision making: It is important in developmental projects that participation is not merely conceptualised as building rapport and listening to children. It is useful for participation to be seen as linked to influencing decisions. While no suggestion is being made that children control decisions, there needs to honesty about the degree to which children know they can influence decisions.

Participation should be linked to flexibility: Participation should be seen as a process whereby children can influence outcomes, so it is important for people working with children to be open to changes.

Participation should be linked to rights: Participation as a right provides a framework for allowing the child to influence perceived best interests and puts children at the centre of the service.

- **Relationship between level of children's participation and project outcomes**

  Based on my research, I found that greater children's participation led to better service outcomes in terms of

  o Accessibility to marginalised groups

  o More children directly accessing the service

  o Greater credibility and trust in the service

There was however no evidence to suggest that children's participation led to greater changes in attitudes amongst allied systems or in generation of more resources at the policy level.

- **Factors affecting the level of children's participation**

  o Best interests and competence: In order to support the understanding of children's participation as influencing decision, it is also important that people working with children believe that children can contribute in articulating their best interests and have the competence and this depends on the decision and the child. It therefore advices frontline workers to be open to reassessing their frames of reference and not fall into rigid ways of thinking.

  o Management style of the organisation: The management style of the organisation seemed to mirror the level of children's participation in the project. This does suggest that organisational culture needs to be more participative in order for children's participation to be more effective.

- **Children influencing change in attitudes**

  As I had highlighted in Chapter 4, frontline worker's attitudes to children's competence had changed since their work with the helpline and several of the frontline workers reported that they began to see children as more competent. Greater interaction between children and frontline workers would facilitate this process as well as discussing the fears that frontline workers may have about child participation.

In the next chapter, I shall now look at the implications of some of the findings of my research on social policies for children.

8 Embedding participatory practice in culture

: Implications for Social Policy

In this concluding chapter, I analyse the implications that my research suggest for policies for children. During my research, in my four case studies, the frontline workers in each city differed in their understanding of children's participation and also differed in the manner in which they provided the service to children. My research findings suggested to me that an understanding of participation was linked to an overall approach of working with children. In the light of this data as well as in order to bridge the gap between my research findings and policy development, in this chapter, I analyse the literature on social policies for children and different approaches to working with children.

I have divided this chapter into six sections. In the first section, I examine the implications for services for children, if children are viewed as social actors. In the second section, I highlight the strategies for creating conditions for greater children's participation. In the third section, I review implications from the research on legal frameworks regarding age and capacity of children. In the fourth section I focus on how organisations working for children could facilitate and promote greater children's participation. In the fifth section, I reflect on the interconnectedness of children and adult lives. In the final section I highlight some of my key reflections during the research process.

8.1 Social policies for children

How do the attitudes we have about children's capacity, best interest and their participation affect the formulation of policies for children. Lorraine Fox Harding in Perspectives in Child Care Policy (1991) proposes a fourfold classification that I have outlined on the following page that highlights that social policies for children are framed with a certain perspective towards what constitutes ideal childhood. These four polarities as outlined by Harding are:

> *Laissez-faire and patriarchy: This perspective is essentially the view that power in the family should not be disturbed except in very extreme circumstances, and the role of the state should be a minimal one.*
>
> *State paternalism and child protection: Here extensive state intervention to protect and care for children is legitimated, but state intervention itself may be authoritarian and biological family bonds undervalued. Good quality substitute care is favoured when the care of the biological parents is found to be inadequate.*
>
> *The modern defence of the birth family and parents rights: This perspective is to be distinguished from laissez faire in that state intervention is legitimated, but this intervention is seen as ideally of a supportive kind, helping to defend and preserve birth families.*
>
> *Children's rights and child liberation: This perspective advocates the child as a subject, as an independent person with rights that at the extreme are similar to the rights of the adult. Children are to be freed from adult oppression by being granted a more adult status.*
>
> (Harding 1991, pp 10)

Harding however notes that this classification is not rigid. She states

> *While this four fold typology is no doubt not the only possible classification; there may be some blurring of the boundaries between categories; and other categories of view might also be argued to exist, each of these policies reflects a distinct attitude and conception to children that are translated into child care services.*
>
> (Harding 1991, pp 9)

	Attitudes to children	Adult – child relations	Services to children
Laissez faire and patriarchy	Family and parents know the best interests of the child and so decisions are made on behalf of the child. Children do not have wishes or these are not in their best interests	Bearing and rearing children produce a special bond between them and adults know what to do Adults are powerful in size, strength and social/legal structures	Minimum intervention to the parent-child bond. Legal provisions that allot children a lesser status. The concepts of possible harm and emotional abuse are excluded because of verification difficulties. This leads to a reduced public expenditure on child care
State Paternalism and Child Protection	Children are dependant, vulnerable, different from adults and their needs of nurturance and care is paramount	Parents have a duty for childcare. All injuries /disorders are evidence of neglect and abuse by parents The child did not choose his/her parents and hence state has a special duty to protect children	Emphasis on good quality childcare as judged by professionals and experts. Acts at a much lower threshold of parental mistreatment. Requires adequate state resources or would result in poor planning, decision taking and inadequate substitute care
Modern defence of birth family and parents rights	Children are in great emotional need of the parents. Their voice need not be heard as children should trust their parents	The value of the psychological/biological bonds between children and parents is the optimum context the vast majority of children. Bad parenting is linked with social deprivation and its pressures	Helping parents equals helping children. Should focus on tackling deprivation and preventive work – increase in daytime care, better financial support to families. Need to be alert to class that punishes lower classes too heavily due to middle class child care ethics
Child Rights and Child Liberation	Children are subjects, with their own view points/ wishes	Adults give regard to children's claims- hear what they say and treat them with respect as individuals	Bestows rights to work, vote, freedom of association, participation etc.

Table 8-1 : Social policy and attitudes to children

Source: Adapted from Perspectives in Child Care Policy (Harding 1991)

This comprehensive schema is useful to understand the state's role in relation to children, adults as parents, with the family as a unit, with welfare and with the state itself. In my research, I observed elements from each of these perspectives that could be found in the four cities I studied. Thus there were different ways that these organisations were implementing the same service, using children's participation.

I therefore began to analyse how services are shaped and formulated with reference to differences in approaches to working with children. I identified broadly four approaches, mentioned in the literature which includes: the need based approach; the children's interest approach; the adult obligation approach and the child rights approach.

	Need based approach	Right based approach	Adult obligation based approach	Children's interests approach
Key Idea	Children have minimum needs to be met (**protection of children)**	Rights confers dignity to the child (**voice of the child)**	Adults have obligations to children (**accountability)**	Children, collectively have the power to determine their interests **(power to change)**
Implications for services	Providing a minimum standard of service to all children	Services to be provided as per the rights of a child in laws, conventions	Services to be provided by adults who are responsible for children's welfare	Services need to offer space for children to organise themselves through clubs, parliaments etc to bring about change
Approach/ thoughts regarding participation as a right of the child	- diverts attention from providing basic services - children are dependant and need protection	- children have the right to influence decisions	- neglects the caring relationship of adults	- individualistic may exacerbate the tendency to keep adulthood and childhood separate

Table 8-2: Approaches to working with children

As I have highlighted in first chapter, I locate my research within the child's right approach. Through this research, I was better able to understand the differences in approaches and identify what I consider their misplaced fears about the child's right to participation. I have therefore briefly looked at how an understanding of

participation as a right may help towards bringing these other approaches, closer to the child rights approach.

The 'need based' approach traditionally has been seen in opposition in content and values to the 'rights based' approach. The 'adult obligation approach' and 'children interests approach' are opposed to the use of the rights terminology as only being rhetoric.

Need based approach: Conceptualising childhood in terms of needs gives priority to protecting and promoting their psychological welfare, by contrast with former times where adult priorities have centred on children's economic utility, their duties and obligations rather than their needs(Woodhead 1990, pp 60). The key elements in the traditional need based approach are that: given scarce resources some children may be left out; greater authority that comes from projecting decision making; certain groups have the technical expertise to meet children's needs. However as pointed out by several authors, the discourse on children's needs suggests that it is adults who provide for and think for children implies a deficit model of the child on two grounds. One is that there are problem children suffering from various levels of abuse and neglect. The other is that the chid is the incomplete child compared with the fully functioning, ontologically established adult. Woodhouse points out that

> *"not... that judgements about the adequacy of children's care, education and welfare are to be avoided- on the contrary. The challenge is not to shy away from developing a perspective, but to recognise the plurality of pathways to maturity within that perspective"*
>
> (Woodhead 1990, pp 73)

Recently however some authors such as Nigel Thomas have suggested the 'rehabilitation of the approach of 'children's needs (Thomas 2005, pp 27). He argues that

> *I would argue that the concept is a useful one, provided that it is regularly unpacked into its constituent parts. In particular there is value in a concept that does attempt to embrace different kinds and levels of needs, from needs related to physical survival and basic mental health to needs for access to culture and leisure. It also presents a challenge to those concerned with supporting children and families to take account of the full range of things we all need for a good life, rather than focussing on deficits in narrowly defined areas..... A needs discourse that has space within it for children and young people, individually and collectively to define their own needs can potentially be used to combat marginalisation − as can a rights discourse that allows children to state and define their own rights*

<div align="right">(Thomas 2005, pp 22, 25:26)</div>

Thus while authors are suggesting that ' needs' can be identified and addressed with children, there is still some resistance in using the rights language. It does appear the fear is largely due to a conceptualization of the rights of the child as being without values and against any common minimum standards. These I believe are not necessary in rights based approaches to children's participation as I shall discuss later in this section.

Adult responsibility approach: Onara O'Neill in Children's Rights and Children's Lives (1988) contends that if we care about children's lives, there are good reasons not to base our arguments on rights. Instead we should look to improve children's lives by identifying what obligations parents, teachers and indeed the wider community have towards children(O'Neill 1992). She claims that children's fundamental rights are best grounded by embedding them in a wider account of fundamental obligations, which can be used to justify positive rights and obligations.

She claims " Children have both less need and less capacity to exert 'pressure from below' and less potential for using the rhetoric of rights as a political instrument."

The use of obligation is to makes sure that services are delivered putting the onus onto adults as a reminder of their duty. This view is ambiguous about the role children ought to play and I believe rests on a misunderstanding of childhood and on the benefits of using the 'rights' approach.

Interest based approach : Another approach that I came across was the Interests based approach. Michael Wyness (2001) proposes the idea of children's interests as opposed to rights. The idea of children's interests takes children as the primary reference point.

> *The notion of children's interests then implies a degree of separateness*
> *from non child groups in society and the construction of channels*
> *through which this separateness can be articulated. Unlike the politics of*
> *children's needs where children are ironically absent, interests suggests*
> *agency where children are viewed as active and involved, a group or*
> *body in a position to make claims on the state at various levels*
>
> (Wyness 2001, pp 196)

He suggests interests are better than rights because it avoids the debate between children's right to welfare and their rights of self-determination as interests is quintessentially a political concept. He provides evidence to show that paradoxically children's interests often consists of pressing adults to meet their needs. The talk of interests enable children to become mobilised, encourages children to participate in and influence political structures and thus able to represent themselves and make claims in the first place. His reluctance to use the rights language appears to be that rights is individualistic and that the right to participation does not go far enough in term of influencing politics. I shall address this issue subsequently.

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Child Rights approach: The key elements of a rights based approach include:

Rights are universal, Rights come with responsibilities, Rights involve a relationship between rights holder and duty bearer, and Rights are indivisible and interdependent

> "A rights based approach to development promotes justice, equality and freedom and tackles the power issues that lie at the root of poverty ad exploitation. To achieve this, a rights based approach makes use of the standards, principles and methods of human rights, social activism and of development"

> (Theis 2004, pp 2)

The previous approaches highlight certain drawbacks in the rights based approach, especially the right of the child to participation; these include:

- The adult obligation approach raises the concern that the rights talk neglects an alternative ethical view of the work in which the affectionate, caring interdependence which ideally characterises, the parent child relationship assumes an exemplary significance. David Archard (2004) draws an analogy between rights and an insurance policy- it provides the surety of the minimum which love would provide when that emotion is lacking. In my research, children were not looking at participation as a means of cutting off relationships with adults but rather just the opposite. The children did perceive participation as an opportunity to be respected by adults.

- The need based approach raises the concern about the dependency and protection of children. This appears to be based on a fear that participation will imply that that protection of children will be harmed or children are no longer dependant on adults. As Malfrid Grude Flekkoy emphasises that all people need protection at some time or other, in different situations.

Nor is the dependency of children a reason to deny them their rights,
both because all humans are dependent upon other at least some of the
time and because negotiation of participation, based on respect, can very
well be carried out in relation to dependant persons. The need for
protection is recognised in international human rights treaties, labour
laws protect employers and workers in various ways.

(Flekkoy and Kaufman 1988, pp 65:66)

In my research, I did find that the helpline with higher levels of participation were dealing with a higher proportion of calls related to protection (missing/trafficked children; rescue; repatriation). Hence the participation of children does not appear to deflect from the protection of children as outlined in Annexure 8.

- The needs based approach also appears to perceive that participation of children might divert attention from the provision of basic needs of children. However the helpline using children's participation is focussed on providing basic services to children as well. A rights framework, with the child influencing decisions could in fact be more responsive in delivering basic social services for children. For example, in their report on measuring child poverty, Gordon et al (2003) have defined thresholds of deprivation (ranging from mild to extreme) for basic human needs in a rights paradigm. They do however agree that

.... Discussion of child rights tends to deal with particular rights rather
than rights representative of the Convention as a whole. Steps remain to
be taken to bring different indicators together to permit measures to be
taken of the numbers of children in different countries lacking access to a
number of rights or to rights in general.

(Gordon, Townsend et al. 2003, pp 3)

- The child interests approach criticizes rights as being individualistic and as not necessarily reflecting the true voice of children. This view perceives participation as a right may fragment individual children's voices and thus neglect the political mobilisation of children as a group. Based on my research in the helpline setting, I would argue that the situations of children are diverse and that their rights or interests may be dependant upon their life circumstances. Using the rights language however is advantageous as it puts a framework of accountability into place.

In my research, the four helplines subscribed to a child rights approach, though there were varying perceptions on the child's right to participate. These varying perceptions did seem to have certain elements of the traditional approaches with Trivandrum having more of the 'adult obligation approach'; Jaipur having a 'need based approach' and Puri and Bhopal having rights focus with children involved in decision making. It is important for persons working in direct interventions or in framing policies to reflect on the understanding of children's right to participation.

Based on the children that I met, in my research they did not expect to be in control of decisions, but rather feel respected whilst making those decisions in consultation with adults. The rights approach with children influencing decisions is best suited to facilitate that this involvement is accessible to all children, especially marginalised groups of children. As Gerison Lansdown notes:

> *Promoting rights is not about giving a licence to children to take complete control of their lives. A commitment to respecting children's rights does not mean abandoning their welfare: it means promoting their welfare by an adherence to the human rights standards defined by international law*

(Lansdown 2001, pp 97)

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8.2 The nature of services in a participatory environment

*Changing roles means first and foremost changing attitudes so that
adults begin to take children seriously as children to learn to listen to
what children have to say, understand the reality of their lives value the
contribution they have to make and act accordingly. This will make
development research, policy and practice a lot more complex but
ultimately more rewarding for all concerned: children adults and the
communities and societies in which they live and work. This must be the
key element in the development agenda for the next century.*

(Edwards 1996, pp 824)

How can services take into account the diversity in groups of children? In my
research, when I asked groups of children what they suggest for better services,
different groups of children had different suggestions. Children on the street felt that
there was an urgent need for more resources, facilities as well as
training/sensitisation of allied systems such as the police, doctors etc. The children in
residential organisation discussed that they require more time to play, sports and do
things they liked, help in dealing with bigger boys who beat them in the shelter. In
the government homes, many of the children were keen on going back home and felt
that there should be a special service to take children home. They felt that education
was very important. Children in slum communities recommended the need of more
clubs, groups for children to share amongst themselves and be given
information/knowledge about issues. This made me reflect on the fact that different
groups of children may make different demands on adults.

Based on the child rights perspective and my learning through this research, the
elements of significance that policy makers could therefore consider:

- *Differences in childhood*:   It is important to recognise that different groups of children will have different rights that are important to them at the time and may have different views on how to achieve them. As Ben Philips notes: Children are 'not experts on being children, they are experts on being themselves; experts on their own childhood and on childhoods like theirs'(Phillips 2000, pp 16). It is important for frontline workers to understand the diversity of childhoods.

- *Connecting the cultural and political representation of children*: As Alan Prout argues, it is important to understand the reciprocal relationship between the political representation of children and their representation in social and cultural discourse.

> *At the core of this movement is a gradual rethinking of ways of representing children, where representation can be understood in a double sense. In its cultural sense, representation refers to the socially available images and concepts that children are thought about. However representation also points to the role of children in governance, suggesting that children might be involved in processes of decision making and policy formulation. I suggest that by linking the cultural and the governance notions of childhood representations, a way out of the impasse might be found*

<p align="center">(Hallet and Prout 2003, pp 13:14)</p>

For children's voices to be heard, even when the institutional arrangements such as a helpline create a notional space for it, requires a change in the way children are seen.

- *Children as the present and not only the future:* At times policy is focussed on the better adult lives that will, it is predicted, emerge from current policies and not on the better lives that children will lead as children. It is important for policies to strike a balance between their futuristic and present focus. For example, education policies need to understand the current diversities of children's lives and be flexible and accessible to children on the street as well; strategies on child poverty need to provide a range of services for children and families who are currently in crisis as well as provide preventative measures.

- *Flexibility:* There is a need for policy makers to address issues of flexibility, institutional responsiveness and engagement, if we are to take participation, especially children participation seriously. As Alan Prout explains:

> *In this situation treating children the same may have to mean different. The point does not necessarily index an opposition to universal services and benefits, but it does require a critical reflection on the way resources are made available and flexibility in their content. Rather the demand is more responsive institutions that engage in a more creative dialogue with their users.*
>
> (Prout 2000, pp 312)

Having a flexible approach to policy makers would enable policies to adapt to the concerns identified by children.

- *Integrating services/children's spaces*: Moss and Petrie argue that services for children should be localised to ensure full participation of child political actors as well as to provide services what meet community values and needs. They emphasise integrating services for children, thus addressing the whole child. Moss and Petrie state that children's spaces can encompass a wide range of out of home settings where groups of children and young people come together, from schooling on the one hand, to lightly structured spaces for children outdoor unsupervised play on the other.

> *Children's spaces are physical environments as well as spaces for children's own agendas although not precluding adult agendas, where children are understood as fellow citizens with rights.... Children's spaces are for all children on a democratic footing across different social groups. They make space for the whole child, not the sectional child of many children children's services.*
>
> *(Moss and Petrie 2002,pp 106)*

Moss and Petrie's idea on children's spaces suggests an alternative or at least an alternative idea- to children's service which could facilitate the connection between abstract policy and realised practices. The re-conception of public provision as children's spaces means that they are less prescriptive in aim and

function, but more as creating environments of possibilities that facilitate children's voices to be heard.

- *Linking up the children's movements with other movements*: As Sarah White notes:

> *Development agencies and progressive activists thus need to address the material, social and political factors that make and keep children poor, in the context of working to foster broad- based alliances amongst the poor, which resist their fragmentation, but recognise the specific strengths and vulnerabilities associated with the differences amongst them. The way forward is to understand how culture is embedded in political economy and political economy is expressed through culture.*
>
> (White 2002, pp 734)

In building up a strong network it would be important for the children's groups to link up with other groups working on similar issues. The helpline has scope to work more effectively in this direction.

- *Development of child advocacy groups:* In my research, I observed that there is reluctance for organisations working with children to involve children in the advocacy process. As a result while young people are less able to influence these systems. As Jane Dalrymple argues if the development of advocacy services are to radically change policy and practice and challenge discourses which maintain the status of young people as a minority group, they need to be constructed from the perspective of young people and resist construction by organisations in an adult proceduralized way and have greater participation of children in advocacy efforts (Dalrymple 2005, pp 3).

- *Services in partnership with academic organisations and policy makers*: It is important for services for children to have linkages with research and advocacy components. The helpline has a model has been effective in that has brought academic, non governmental organisations and local government officials together. This facilitates greater learning and sharing of experiences.

- *Integrating child rights into the training curriculum of police, doctors, social workers:* It is also important that discussions on child rights get integrated into the curriculum of all training with police, doctors and nurses. The methodology should allow these professionals to articulate their concerns and attitudes about children's participation and have access to information on how children are currently participating in society. As Moss and Petrie highlight we need to change the image of the worker (with children) " *from technician to reflective practitioner, researcher, co-constructor of knowledge, culture and identity*" (Moss and Petrie 2002, pp 137).

- *Services to focus on outreach:* There should be conscious efforts to make children aware of the service. It should be noted that just promotional strategies that just focus on information giving need to be supplemented by methodologies that allow for dialogue with children, to enable an understanding of their fears and concerns in approaching the service.

8.3 Legal frameworks for age and capacity of children

The question about age and capacity is a practical one. David Archard argues that not all children should be denied rights to participation but not all children should be given them. Instead there should be presumption that young children cannot; whereas older children that is teenagers can exercise rights of self determination.

> *Thinking of all children as incapable is credible when the contrast is between a helpless infant and an able bodied adult. It is less so when it is a teenager who stands next to the adult.*

(Archard 2004, pp 14)

Much of the thinking in terms of competence assessment has taken place in the context of medical consent where the central elements for decision making are deemed to include: ability to understand and communicate relevant information, ability to think and choose with some degree of independence, ability to assess the potential for benefit, risk and harm and achievement of fairly stable set of values

In her book 'the evolving capacities of children; Gerison Lansdown reflects on the the most effective legal framework for respecting children right to participate in decision making according to their evolving capacities, while providing appropriate protection (Lansdown 2004). She outlines a number of possible models, each with benefits and disadvantages

o *Provision in law of fixed, prescribed age limits* : While this model provides the most straightforward and simple framework, its rigidity fails to comply with the principle of respecting the right of children to participate in decision making according to their evolving capacity, the level of risk and the degree of protection required. David Archard (pp91), argues that there are reasons to conclude that the use of a competence test would not be a preferable or fairer alternative to the use of age. Since the use of age has not been shown to be evidently arbitrary and unfair, he concludes that it remains in principle, an acceptable basis on which to distribute rights. Competence tests have limitation in that is expensive and cumbersome to administer, high risk of corruption, exploitation and abuse of power and cultural bias. Age induces stable expectations on the part of a societies citizens.

o *Removal of all age limits,* substituting a framework of individual assessment to determine competence to exercise any particular right. Alternatively the law could introduce a presumption of competence with the onus on adults to demonstrate incapacity in order to restrict a child's rights: Despite the superficial attraction of a system which allows for individual assessment, the sheer impracticality of this model militates against its adoption. Furthermore, its potential for exposing children to exploitation and abuse of their rights renders it unacceptable.

o Introduction of a model which *includes age limits but entitles a child to demonstrate competence to acquire the right at an earlier age*: While there are advantages to this model, it would be for the most part impractical due to the difficulty in assessing whether a child is competent to make a particular decision.

o *Providing age limits only for those rights* which are at risk of being abused or neglected by adult and introducing a presumption of competence in respect of other rights: This fourth model builds on the previous models and includes

   ▪ Protection from self harm or harmful social or economic factors: A fixed non-negotiable age limit such as – recruitment into the armed forces, possession of arms, alcohol and tobacco and driving a car

   ▪ Protection from exploitation or abuse: Where the absence of a fixed age exposes children to abuse or exploitation by adults, a fixed age would be imposed , irrespective of competence

   ▪ Personal decision making: Where the exercise of right impacts only on the child, the child right to exercise choices would be determined based on

competence without fixed age limits. This would apply for example with respect to adoption, placement in care. The disadvantages of such a model is that the absence of age limits may be used by some parents or professionals either explicitly or be default to deny children the opportunity to exercise rights.

As the terms exploitation, abuse and decision that impact only on the child are subjective, and hence whilst the fourth model does seem the most ideal, it would remain subjective. While the argument from arbitrariness charges that it is unfair to correlate incompetence with some particular age, there is a need for some practical guidelines to have a legal framework.

Based on the findings of my research, not all the frontline workers used age as a criterion to determine the level of the child's competence to make the decision. This observation was surprising, as the literature does highlight that it is the capacity associated with age, which generally restrict children's participation. The frontline workers assessed capacity based on only one of the following criteria: life situation or problem or family situation or gender of the child. In my analysis, it was when the frontline workers use only one criterion to judge competence that they began to start stereotyping the capacities of children.

I observed that the life situation (the context of the child's experience) gave children a specific perspective and these need to be identified by the frontline workers. Other dimensions such as gender and disability would also be useful to see how they shape the life situation of the child. The life situation of the child could guide the frontline

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workers to assess how they can best facilitate the involvement of the child in decision making. This requires an understanding that participation is linked to influence over decisions and is a process of negotiation, clarification and dialogue.

Thus, my research findings seem to suggest to me that correlating capacity with age may be the wrong starting point to base the child's right to participation, particularly as this approach leads to a judgment on the child and not the decision in question that has to made that needs to be kept in focus. Additionally a focus on age as the criteria for capacity may obscure the notion that adults decide what is best for the child. It is therefore important for frontline workers to have an open mind about the child's best interests and ensure that this best interest is based on inputs from the child.

Based on my research findings, I would suggest another way of looking at age and children's rights based on a three tier system that includes:

- o Non Negotiable/Common for all children based on age : Voting, criminal offences, sexual consent, Driving, Alcohol intake
- o Negotiable depending upon circumstance of the child based on life circumstances : Work, Setting up bank accounts/access to credit,
- o No age limits : decisions of the child related to access to health, protection, development (except those mentioned as non-negotiable and negotiable)

It would be important for a global convention to lay down the principles but up to each country to decide these age limits and review them periodically.

8.4 Implication for Organisations working with children

There is an emerging trend for child focussed agencies to each have their own participatory project. In this section, I analyse the implications of my research findings of: organisations defining their motivation to promote participation, strategies for addressing the power imbalance between adults and children and the adoption of participation practice code for NGOs.

> "The first important step was to win the case for children's participation and to see more and more young people being given the opportunity to influence decisions. The second was to make that involvement more meaningful for children. The next steps are to ensure that participation is more effective in the impact it has on decisions and on decision making processes and ultimately on participation structures and cultures"
>
> (Sinclair 2004, pp 114)

In my research however, I find that these steps are interconnected and that steps two and three mentioned above are essential elements to be integrated from the start of a project, in order to make the participation meaningful. Based on my research, some of the implications for non- governmental organisations working with children are:

- *Clarity and debate about the purpose of children's participation:* My research emphasises that it is important to have a clear understanding about the motivation to promote participation amongst children. It is important to articulate the purpose of participation so that the frontline workers constantly can review this and communicate the same to children. This clarity of purpose should not be imposed, but should be debated within the organization so that it is open to debate. This clarity should state the values upon which it is based and an understanding of the child's capacity and best interests.

- **Overcoming a binary view of children:**

What is remarkable and frustrating is how the adult constructions had become ensnared in... a simple.. dichotomy, where children are classified as either subjects or objects, competent or incompetent, reliable or unreliable, harmed by decision making or harmed by exclusion, wanting to participate or not wanting to participate. Practice then becomes founded upon certainties, the perfected (single) procedure, based on the single conception of the child.

(Trinder 1997, pp 301)

An obvious implication for professionals seeking to empower children is the need to create the condition whereby children can decide what they would prefer to do; but his becomes difficult if adults believe they already know what is best of the child (Shemmings 2000, pp 241:242). The question therefore should be not 'Can this child participate?' but rather ' How do I support this child to participate?'

- *Skills required by frontline workers to promote participation:* In my research however, I found that the skills of frontline workers across the cities were fairly similar. In Trivandrum the frontline workers felt that it was important for a worker to be able to have rapport building skills with children and having the skills of getting children to talk ; in Jaipur the frontline workers stressed the importance of dialoguing with the child (though this was to convince the child about their best interests), in Puri the frontline workers emphasised the need to listen to children and hear their point of view , in Bhopal the frontline workers outlined dialoguing, flexibility as key skills of a worker. Based on my interaction with the frontline workers, I observed that they had the skills required to build a rapport with children and it is not so much training in skills with children but dialoguing with them about their fears to children's participation that was important.

- *Drafting practice standards in Child participation*: It is important that organisations working with children have a minimum set of norms that guide their participatory work. The focus is on minimum and that these are guiding principles and do not form the content of the policy which should vary according to culture and context. These principles derived from the UN Convention on the Rights of the Child, could include :

  o Children have the right to be listened to,

  o Children should have the mechanisms and support to contribute to decisions that affect them

  o The level of their participation should take into consideration, their past experience and knowledge and insights about the situation

  o The best interests for the child should be decided after obtaining the child's views

  o All children have equal rights to participation without discrimination

  o All children have the right to be protected from manipulation, violence, abuse and exploitation

Save the Children (Theis 2004, pp 133:137) have proposed practice standards for their partners and strategies to meet each of the standards. These standards include: Transparency and honesty, Children's participation is relevant and voluntary, A child friendly enabling environment, Equality of opportunity, Staff are effective and confident, Follow-up and evaluation, Participation promotes the safety and protection of children. These are extremely useful guidelines; however it is important that each organisation sets their own standards based on guiding principles.

8.5   Viewing the interdependence of human life

In this concluding section, I examine how the notions of children as citizens and the human being/ becoming distinction furthers a better understanding of the interconnectedness of human life that provides a backdrop for the realisation of participatory environment in society. As Jeremy Roche points out

> *Participation should not be a matter of adult imposition versus child autonomy: rather a matter of acknowledging the interconnectedness of our lives. Critically once we genuinely allow children to exercise their right to speak and be heard, we might have to participate in new conversations.*

(John 1996, pp 33)

Held (1991) believes that if citizenship entails membership in the community and membership implies forms of social participation, then citizenship is above all about the involvement of people in the community in which they live. Accordingly the debate on citizenship requires us to think about the very nature of the conditions of membership and political participants.

In his article on Children as Citizens, Marc Jans (2004) explains that the literature on citizenship distinguishes between two perspectives to the concept, namely a system and life-world perspective. The system perspective interprets participation as a requirement for a well functioning society. The inputs of various actors, also of citizens can increase the creativity when looking for solutions. In the welfare state, citizens and social groups that previously did not or hardly participated are stimulated to have an input in society. From a life –world perspective, citizens feel challenged by all kinds of matters in which collective interest are at issue. The more

capacity and connection with groups and /or ideas in proportion to these challenges, the more one can behave as active citizens. Citizenship in this perspective is more like a learning process in itself than a predefined learning objective.

> *A life-world perspective on active citizenship and participation seems to open more possibilities for linking childhood and active citizenship in a meaningful way. Today children and adults are becoming' peers in the way that they both have to learn to give meaning and shape to active citizenship.*
>
> (Jans 2004, pp 31:32)

This understanding of a life world perspective requires a renewed understanding of children and society and I have found the ideas of Moss and Petrie and Nick Lee supportive towards this understanding.

Moss and Petrie (2002) develop an alternative perspective of children as the "rich child". This child is described as social and interdependent and their image of the child is strong, powerful, and competent and most of all connected to other children and adults, where children are understood as:

> *... ... fellow citizens with rights, participating members of the social groups in which they find themselves, agents of their own lives but also interdependent with others, co-constructors of knowledge, identity and culture, children who co-exist with others in society on the basis of who they are, rather than who they will become.*
>
> (Moss and Petrie 2002, pp 6)

On the other hand, Nick Lee (2001) in his book, Children and society: Growing up in an Age of Uncertainty questions the being/ becoming distinction. He argues that the single becoming of the developmental state that was long identified with children and childhood, the becoming that has been presented as clear and knowable journey with a certain end is no longer the case in an age of uncertainty. He maintains that

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adults like children are incomplete, that adults are dependant on 'extensions' and 'supplements for their power and abilities.

> *We all perform through other actors and networks. The assemblage/*
> *actor network approach to agency does not assume that agency is or can*
> *be possessed by people in independence of their surroundings.*
>
> (Lee 2001, pp 130)

The principal advantage of such an approach is that since it does not assume that agency is a simple possession, it opens agency up to empirical study and analysis. So with this approach to agency, instead of asking whether children, like adults possess agency or not, we can ask how agency is built or may be built for them by examining the extensions and supplements that are available to them. As he builds an alternative picture of growing up, he accepts that time is an important source of human variation, but only one source of variation alongside variations in the assemblages that humans, whether children or adults involve themselves in. In this view growing up is what happens as networks or assemblages of extension expand and incorporate more and more elements.

> *The more extensive one's network, the more elements included in one's*
> *assemblage, the more powerfully agentic one can be.*
>
> (Lee 2001, pp 137)

These ways of looking at children also reflect the ways we think and related with others in society. John O'Neill proposed a covenant society where people respect the principle of reciprocity (O'Neill 1994, pp 86:94). This means recognition of civic obligation to each other; that recognition in turn affords us our ideas of our own moral worth. He identifies three kinds of obligations: the *norm of reciprocity* requires that we repay people on grounds of what they have done for us in the past. The *'no stranger'* norms tells us that no one must be excluded from obligation: the old, the young, female, male are all part of the reciprocal society. And the *norm of*

reciprocity between generations requires enactment of responsibility by children to parents as well as by parents to children. This vision does away with competence as a pre-condition for participation. Then maybe children's rights to provision, protection and participation can be honoured within social relationships that recognise interdependence(Mayall 2000, pp 249) .

There does appear to be ambivalence in society today, about the role of children. The tendencies towards more autonomy and regulation do not necessarily have to rule each other out and it is important to lean how to deal with this ambivalence that is the challenge(Jans 2004, pp 34). The concept of global citizenship appears to have potential in bring about a change in the ways of child- adult relations. Oxfam (Young and Commins 2002) has defined a global citizen as someone who is aware of the wider world and has a sense of their own role as a world citizen; respects and values diversity, has an understanding of how the world works, is outraged by social injustice, participates in the community at a range of levels, is willing to act to make the world a more equitable and sustainable place and takes responsibility for their action. A curriculum for global citizenship that is participatory and linked to values has the potential to bring this vision into practice.

8.6   Reflections on the Research

This research study has been a challenging process of trying to ensure that children's views were effectively gathered, interpreted and represented. In this final section, I examine some of my reflections regarding my role as an adult researcher and highlight findings from the research that might add to theory.

8.6.1 Role of an adult researcher amongst children: I have reviewed my reflections during my focus groups and interviews with children, under the following headings:

o **Presence of adults during the focus group discussions:** The questions on the meaning of participation and on adult- child relationships were new to most of the children and hence the presence of adults during the focus groups could have influenced their responses. Whilst reflecting on the responses I received from children based on the presence of adults, I observed that this differed broadly across the three groups of children I met. During the 25 focus group discussions (FGD) with children, I had 10 group discussions without any other adult present. The adults that were present at the other 15 group discussions were either frontline workers (7 FGDs), or adults associated with the NGO in other projects (8 FGDs), with a maximum 2 other adults (beside me) in any group discussion. As outlined in my research strategy in Chapter 3, I briefed the adults present on their role to listen and allow children to speak. My observations regarding the presence of adults during the FGDs with children were that:

- With children living on the street, I had 6 FGDs without any adults present (out of a total of 12). In one of these FGDs a street youth commented that he did not want to appear to criticize the service or organisation without someone from the organisation being present. In another FGD, a youth commented that telling me about their suggestions would not make a difference unless I brought all the other adults involved: police, doctors, frontline workers to the discussion as well. Through my discussions with the children living on the street, several

youth commented that unless the adults were able to sit with them to listen to their suggestions, their problems would persist. In my focus groups where the frontline workers were present, the street youth did not appear to be intimidated and during the evaluation of the service were articulate about criticism not only about the nature of the service provided but also the characteristics of individual frontline workers such as their manner of answering the phone, frequency of meeting with them. I observed that these children and youth wanted a broad based discussion with adults. In some group discussions where children raised issues such as frontline workers not picking up the phone, delayed time in reaching them and the frontline worker/s present told the children ad young people that these would be discussed at the next Open House. The presence of the frontline workers during the discussions with street youth I felt played a positive role in making a commitment to follow-up on the issues raised, given that these youth were able to raise these issues in the presence of the frontline workers.

- With children living in residential homes, based on my experience during the pilot study where I had discussions with frontline workers present, some with care workers and some alone, I observed that the presence of the frontline workers or the care workers did affect the responses of the children and they were more reluctant to answer questions regarding the evaluation of the service. I also observed that when I met with children in residential homes on my own, I had to build rapport with the children over four to five sessions, before they were comfortable to answer questions regarding the evaluation of the service. In my main data

collection, I conducted the discussions with someone from the organisation who was familiar to them, but was not involved in the helpline operations or in the running of the residential home. This strategy I found useful to build rapport with the children as well as well as make them comfortable to answer questions regarding the evaluation of the service.

- With children living in the slum communities, I conducted 4 FGDs independently (out of a total of 7). All the focus groups with children in slum communities were largely with boys and girls together. Where the frontline workers were present during these discussions, many of the children had not met/seen the frontline worker before. In all the focus groups, these children did not have many critical comments about the functioning of the frontline workers. Whilst I had joint discussions with boys and girls in slum communities, these children were known to each other previously. However this may have affected the responses of the children and for future research, I would consider separate discussions with boys and girls.

The lessons I drew from this reflection was that it was extremely important for the adults present at the FGDs to be briefed on the importance of listening to children and accepting their responses as their experiences. In some instance the frontline workers wanted to defend their position and I had to intervene to remind the frontline worker to discuss these issues at the Open House. I also learnt that the presence of someone the children were familiar with at the organisation could be important, so that they did not think they were complaining about the organisation, but rather the

questions were an attempt to find out how things could be done better. Finally, I also observed that the presence of adults in the focus group discussions could have various implication and in my research appeared to be dependant upon the nature of the routine daily interaction between children with adults. For example, children on the street who have to confront adult attitudes on a regular basis were keen to have more adults present; children in residential homes were hesitant to share negative experiences with the people directly involved or those they were not familiar with and children in slum communities did not appear to be affected by the presence of adults.

- o **Gender of the researcher:** As highlighted previously, in my research I had more boy respondents; because of the nature of the helpline where 70% of the callers are boys and that there are more boys living independently on the streets. I therefore had a limited experience whilst conducting research with girls. In my focus group discussions with girls, especially with girls in residential homes (as compared with the focus groups with girls on the street) , I observed that the presence of someone familiar to the girls played a valuable role in building rapport with the girls (on 2 occasions this was a male assistant).

- o **Venues of meeting with children:** Based on my research, I found it useful to meet with children in surroundings that they were familiar with. On two occasions I had a focus group at the organisational premises and children did take longer to get comfortable with the setting.

o **Varying the techniques of data collection**: I found it useful to give children options whether they would like to respond in role plays, song, writing on a chart etc. I observed that children on the street were more comfortable with discussing issues, children in residential homes were more comfortable with writing responses and children in slum communities preferred role plays.

o **Language used during the research process**: During most of the focus group discussions with children (except two discussions in Trivandrum) I was able to communicate to children directly in Hindi. As there are variations in the use of words within Hindi across the cities, I checked with the frontline workers about the colloquial use of words. I found it extremely important to be able to directly communicate with children to build rapport and understand and discuss issues raised by the children.

8.6.2 Contributions to theory : The interpretation of the data and its findings have suggested the following contributions that might add to theory:

o **Children as change agents:** In my study I found that some frontline workers felt they have moved from an instrumental (participation as a means) to a transformative (participation as an end) position, since their work at the helpline, after observing the competence levels of children. This change had enabled them to view children as partners and consequently influenced the way they (frontline workers) interacted with other people, taking into account the differing capacities of individuals. This finding suggests that children were able to influence changes

in frontline workers perceptions and it also suggests that a vision of children's participation could lead to changes in a greater respect for individuals.

o **Linking participation and service outputs:** My finding that projects with higher level of participation having better service outputs also strengthens the literature highlighting the need for children's participation. Whilst this research has not focussed on participation affecting changes in the lives of children, it has shown evidence that participatory projects have better outputs in delivering the service to more marginalised groups.

o **Explaining factors that could cause a variation in the level of children's participation:** My findings on the frontline workers understanding of children's capacity, best interests and the management style of the organisation as influencing the level of participation in projects builds on the theory that participation is not so much as just providing opportunities for children to speak but rather facilitating an environment that listens and acts on what children say.

o **Augmenting the understanding of children's participation:** My findings regarding the concept of participation adds to the literature in the following ways

- Evidence that participation is better understood when linked to decision making and as a right of the child. While there are many dimensions to measuring and understanding participation, I observed that the linking of participation to decision making added value as it brought into focus the

practical benefits of listening to children before making decisions. A belief in participation a right of the child framed the participator process in a value system that respected the evolving capacity of the child and their role in contributing towards decision regarding their best interests.

- Evidence that children understand participation as a process they contribute towards and not control. In my research, children in all the discussions acknowledged that for them participation was a process whereby they could contribute their ideas, opinions and feelings regarding decisions. This finding suggests that adult fears of participation that many children do not want any advice from adults is not shared by children. The understanding of participation by children highlighted the interdependence of children and adults.

This research study has been a process of my reflections on the meaning of growing up and childhood. A key lesson that I learnt from my research was that the concept of participation required a respect for the evolving capacities of individuals and children often felt that adults lacked this respect. The new sociological approach to childhood suggests that thinking of children as 'beings' enables adults to take children seriously. In my research, however I learnt that children were also influencing changes in adults' perceptions and hence a notion of participation requires us to think of both adults and children as 'becomings'. The concept of 'becoming' can be a perpetual dimension of living and lead to a greater respect for the evolving capacity of each individual in an interdependent society.

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Annexure 1: List of Children in Focus group discussions

Code	City	Number of children	Group
FCT1	Trivandrum	12	Boys, 6-12 years, living on the street
FCT2	Trivandrum	13	Boys 12-18 years living on the street
FCT3	Trivandrum	3	Girls 12-18 years living on the street
FCT4	Trivandrum	15	Boys & Girls, 6-12 years living in slum communities
FCT5	Trivandrum	19	Boys & Girls, 12-18 years living in slum communities
FCT6	Trivandrum	14	Boys, 6-12 years living in a residential home
FCJ1	Jaipur	14	Boys, 6-12 years, living on the street
FCJ2	Jaipur	16	Boys 12-18 years living on the street
FCJ3	Jaipur	4	Girls 12-18 years living on the street
FCJ4	Jaipur	21	Boys & Girls, 12-18 years living in slum communities,
FCJ5	Jaipur	12	Boys, 6-12 years living in a residential home
FCJ6	Jaipur	16	Girls, 6-12 years living in a residential home
FCJ7	Jaipur	14	Boys, 12-18 years living in a residential home
FCJ8	Jaipur	12	Girls ,12-18 years living in a residential home
FCP1	Puri	16	Boys, 6-12 years, living on the street
FCP2	Puri	4	Girls, 12-18 years living on the street
FCP3	Puri	14	Boys, 12-18, living on the street
FCP4	Puri	16	Boys & Girls, 6-12 living in slum communities
FCP5	Puri	19	Boys & Girls, 12-18 living in slum communities
FCB1	Bhopal	15	Boys 6-12 years living on the street
FCB2	Bhopal	4	Girls 12-18 years living on the street
FCB3	Bhopal	12	Boys 12- 18 years living on the street
FCB4	Bhopal	12	Boys&Girls, 6-12 years, living in slum communities
FCB5	Bhopal	23	Boys & Girls, 12-18 living in slum communities
FCB6	Bhopal	21	Boys, 6-18 years living in residential home

Annexure 2: List of children interviewed

Code	City	Group
ICT1	Trivandrum	Boy, 7 years living on street
ICT2	Trivandrum	Boy 10 years, living on street
ICT3	Trivandrum	Girl, 14 years, living on the street
ICT4	Trivandrum	Girl 16 years, living on the street
ICT5	Trivandrum	Boy, 10 years, living in slum community
ICT6	Trivandrum	Boy, 13 years, living in slum community
ICT7	Trivandrum	Boy 15 years, living in a slum community
ICT8	Trivandrum	Girl, 15 years, living in a slum community
ICT9	Trivandrum	Girl 15 years living in a slum community
ICT10	Trivandrum	Boy 6 years, living in a residential home
ICT11	Trivandrum	Boy 11 years, living in a residential home
ICT12	Trivandrum	Boy, 17 years, living in a residential home
ICJ1	Jaipur	Boy 8 years, living on the street
ICJ2	Jaipur	Boy 11 years, living on the street
ICJ3	Jaipur	Boy 11 years, living on the street
ICJ4	Jaipur	Girl 13 years, living on the street
ICJ5	Jaipur	Girl 14 years living on the street
ICJ6	Jaipur	Girl 16 years living on the street
ICJ7	Jaipur	Boy 12 years, living in slum community
ICJ8	Jaipur	Boy 9 years living in slum community
ICJ9	Jaipur	Boy, 15 years, living in slum community
ICJ10	Jaipur	Girl, 10 years , living in a residential home
ICJ11	Jaipur	Girl, 17 years, living in a residential home
ICP1	Puri	Boy 8 years, living on the street
ICP2	Puri	Boy, 15 years, living on the street
ICP3	Puri	Girl, 15 years, living on the street
ICP4	Puri	Boy 8, living in slum community
ICP5	Puri	Boy 10, living in slum community
ICP6	Puri	Boy 11, living in slum community
ICP7	Puri	Boy 11, living in slum community
ICP8	Puri	Boy 14, living in slum community
ICP9	Puri	Boy 17, living in slum community
ICP10	Puri	Boy 17, living in slum community
ICB1	Bhopal	Boy 11 years living on the street
ICB2	Bhopal	Boy 11 years, living on the street
ICB3	Bhopal	Boy 15 years, living on the street
ICB4	Bhopal	Boy 9 years, living in slum community
ICB5	Bhopal	Boy 12 years, living in slum community
ICB6	Bhopal	Boy 17 years, living in slum community
ICB7	Bhopal	Boy, 8 years, living in a residential home
ICB8	Bhopal	Boy, 10 years, living in a residential home
ICB9	Bhopal	Boy, 10 years, living in a residential home
ICB10	Bhopal	Boy 13 years living in a residential home

Annexure 3: Questionnaire with Frontline workers

Name :

Number of years with CHILDLINE

Previous work experience

What is the aim of CHILDLINE

What are the main problems you have faced in CHILDLINE

What do you enjoy about working at CHILDLINE

At present how effective is CHILDLINE in reaching out to the following groups

- Chidlren in private schools :   0_____ 100
- Children in municipal schools   0_____ 100
- Children in state aided schools   0_____ 100
- Children on the streets   0_____ 100
- Children working in domestic work 0_____ 100
- Children in other occupations   0_____ 100
- Other groups:

The most effective way of publicising the CHIDLINE service to reach out to more

children is by:

- Printing stickers
- Advertising the service on TV
- Putting up bill boards
- Outreach with children
- School programmes

How are children involved in the CHILDLINE project in your city

Do you think the participation of children is important? Why?

Have you faced any problems/dilemmas because of children's participation. If yes,

please specify

Please give your suggestions on how CHILDLINE can reach out to more children

Annexure 4: Questionnaire to Directors of organisations

1. **Is talking about children's participation relevant and useful, especially in a developing country like India?**

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2. There were many cases that I learnt from the team members, where children were making 'wrong decisions' – girls deciding to remain on the street, children not wanting to go back home. The team members felt that the child did not have the capacity to decide their own interests and hence they needed to decide for the child. **In your opinion what would be the criteria to assess whether a child has the capacity to decide their own interests?**

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3. **Do you think children's participation in CHILDLINE, Puri is**
    a. High
    b. Moderate
    c. Low

    Could you briefly explain why you think so

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4. CHILDLINE is the first phone service for children in the country. **Since the CHILDLINE project has started in Puri , do you think there has been any change in your attitude to children's issues for example:** Strategies of intervening with children, Interacting with CHILDLINE team members, compared to team members from other projects, Dealing with the police, doctors etc, Any other changes/disappointments you feel/experience, after starting CHILDLINE

5. Please could you give me **details of training workshops with the allied systems** from the beginning, if possible – or for whenever you have the data compiled

Allied System	2000-2001		2001-2002		2002-2003		2003-2004	
	Level	Number	Level	Number	Level	Number	Level	Number
Police								
Doctors								
Juvenile Justice officers								
PCO owners								
Schools								
Media								
Transport								
Others								

Do you feel that these workshops are serving a purpose in changing attitudes?

6. Also could you please give me details about the CAB

Year	CAB meetings	
	No of meetgs	Issues that were actually implemented, if any (e.g space for childline, signing ID cards,)
2000-2001		
2001-2002		
2002-2003		
2003-2004		

Please could you give me your frank opinion about the functioning of the CAB and what is needed to make the CAB function more effective and accountable
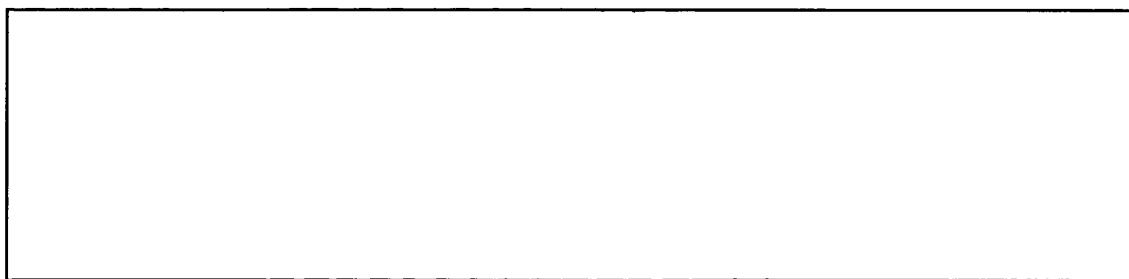
Annexure 5: Lessons from the Pilot Study

I conducted a pilot study from June 2003 to August 2003. I visited 5 cities: Varanasi, Delhi, Chennai, Kochi and Pune. I selected these cities from different parts of the country, dealing with different issues and different durations of running the helpline

- *Selection of cities*: Based on the pilot, I realised that given the variety in the level of participation, it was important to select helplines that had started the service at the same time, as CIF planning processes had also evolved over time.

- *Groups of children that I interact with:* I had begun by focus groups as convenience but found that there were differences between children living on the street, in slum communities and in residential homes. I though it important in my main field work to focus on these groups

- *Talking about participation to children*: I became more comfortable to talk about participation with children. Visuals worked well and role plays

- *Interaction with the frontline workers*: I noticed that there was a group think in the team. The co-coordinator molded the thinking of the team. There were individual variations but only slight variations in intensity

- *Development of benchmarks*: Based on my interactions with the frontline workers I was able to identify benchmarks to evaluate the level of children's participation and the service outcomes

- *Answering the research questions*:   With regard to my research questions on the level of children's participation and the service effectiveness and the factors affecting the level of participation:

Given the diversity in cities, I did not observe any correlation between the general orientation towards participation by frontline workers and the number of calls responded to by the CHIDLINE. Based on my observation and interaction

with the team, I would rate the cities in the following order from high to low participation:

Varanasi (E) ----- Kochi (S) ------Pune (W)-Delhi (N)-----------Chennai (S1)
The number of calls received by each of these helplines for the period October 2002 to September 2003 is:

	Varanasi	Cochin	Pune	Delhi	Chennai
Established in.	Mar-00	Jan-01	Mar-01	Oct-98	Apr-99
I. Intervention					
Medical	35	45	45	81	44
Shelter	18	352	41	216	555
Repatriation	182	90	32	43	338
Rescue	75	64	50	37	25
Death Related	3	0	0	13	6
Sponsorship	1	152	89	21	3
II. Missing Children	82	68	101	336	293
III. ES&G	662	2359	1315	3685	59
IV. Information	5895	8902	7597	1335	6285
Total	6953	12,038	9270	5767	7608

However with respect to the nature of calls, I did notice that the cities where I observed greater participation were receiving more calls related to abuse. These involved rescuing and rehabilitation of children engaged in domestic work, carpet industry etc.

Regarding the factors that influenced the level of participation, I found that the management style of the organisation seemed to mirror the level of children's participation at the helpline. The frontline workers perceptions to children's competence and bests interests also differed amongst the helplines and hence I would need to better understand these concepts during my field work.

Annexure 6: Case Vignettes

As given to the frontline workers	As given to children
Rajni calls CHILDLINE to say that her neighbour employs a 12 year old girl as a domestic worker and abuses her. Rajni hears the girl crying, after she has been beaten and knows that the girls is not going to school. What would you immediately tell Rajni on the phone	A 12 year old girl is working as a domestic helper in a home. Her employers beat her whenever she makes a mistake, like dropping a glass. However if the girl goes back home, she knows her parents will marry her off. What do you think the girl should do?
You visit the employers home. The employers tell you that the girl's parents from a village have sent her to work. They pay the family money every month besides looking after the girls expenses. When you see the girl, she has bruises on her arm and appears very pale. She remains quiet and only tells you her name: Anita What assessment would you make of the situation	
When you speak to Anita, she tells you that she would like to continue working because if she goes home, her parents will marry her off and this way she can also support them What action steps would you take	

A school teacher calls CHILDLINE to inform that Antao, a 8 year old boy has suddenly become very quiet and does not talk to anyone. She suspects that Antao is being sexually abused. What would you tell the teacher on the phone?	Antao an 8 year old boy is being sexually abused by his uncle at home. His parents do not know about it and his uncle had told him not to tell anyone at school or at home. What do you think that Antao should do?
You speak to the boy in his school. He is very quiet and answers only yes or now. How would you proceed	
The boy confides that his uncle is abusing him and has threatened him that if he tells anyone his parents will throw him out the house. How would you intervene	

Annexure 7: Main Coding themes used in NVIVO

SET 1: Children (Attributes: City; Age group; Place of residence; Boy/Girl)

SET 2: Frontline workers (Attributes: City, Experience, No of years with CL, Sex, Age)

(1) /Evolving Capacity

(1 1) /Evolving Capacity/age

(1 2) /Evolving Capacity/gender

(1 3) /Evolving Capacity/past experience in decision making

(1 4) /Evolving Capacity/situation of the child

(2) / Best Interests

(2 1)/ Best Interests/ age

(2 2)/ Best interests/gender

(2 3)/ Best interests/Capacity

(2 4)/ Best Interests/ situation of the child

(3) Management Style

(3 1) Management style/evidence

(4) /Participation

(4 1) /Participation/Definition

(4 2) /Participation/Motivation

(4 3) /Participation/Dilemmas

(4 4) /Participation/Advantages

(4 5)/Participation/CHILDLINE

(5) /CHILDLINE

(5 1)/CHILDLINE/Reasons calling

(5 2) /CHILDLINE/Suggestions

(5 3) /CHILDLINE/ Impact

(54) / CHILDLINE/Problems

(6) / Services

(6 1)/ Services/Problems

(6 2) /Services/Existing

(7) /ChildFrontline attitude

(7 1)/ChildFrontline attitude/nature

Annexure 8: Calls for protection across the helplines

		Trivandrum	Jaipur	Puri	Bhopal
2001-2002	Protection (%)	27.45	32.64	42.22	83.56
	Provision (%)	72.55	67.37	57.78	16.44
2002-2003	Protection (%)	23.02	28.25	44.69	84.57
	Provision (%)	76.98	71.75	55.31	15.43
2003-2004	Protection (%)	32.84	24.84	44.36	91.40
	Provision (%)	67.16	75.16	55.64	8.6
2004-2005	Protection (%)	17.69	31.46	60.91	92.95
	Provision (%)	82.31	68.54	39.09	7.05

Protection and Provision calls received by the four helplines

Source: CIF data statistics

During my discussions with frontline workers and the CIF team I asked them to classify calls they would consider as protection and those as provision. The final classification that emerged was:

Protection: Missing children, Rescue, Repatriation

Provision: Medical, Shelter, Sponsorship, Death related services

The team felt that in calls for medical, shelter or sponsorship they were linking up the child to existing facilitates. However for the calls related to missing children, rescue and repatriation, they had to mainly rely on their own initiatives and assessments to deliver the service.

Annexure 9: Number of calls received by the helplines as reported by cities

	2001-2002				2002-2003				2003-2004				2004-2005			
	Tr	Jp	Pu	Bl	Tr	Jp	Pu	Bl	Tr	Jp	Pu	BL	Tr	Jp	Pu	Bl
Intervention	**572**	**1054**	**540**	**432**	**609**	**1595**	**594**	**387**	**405**	**1779**	**505**	**496**	**605**	**1981**	**394**	**525**
Medical	92	151	298	35	90	1065	287	16	39	1128	227	19	85	1196	123	8
Shelter	170	157	11	34	213	148	30	25	171	163	21	23	119	155	21	25
Sponsorship	151	0	1	1	157	2	6	1	59	1	6	0	293	0	1	3
Death related	2	1	2	1	4	0	11	2	3	0	27	1	1	0	9	1
Repatriation	50	7	155	143	37	133	117	69	20	173	70	89	29	235	41	87
Rescue	48	151	7	15	42	105	28	22	52	99	35	4	35	158	49	12
Unclassified										60		123		4		106
Missing	59	186	66	203	66	142	115	252	61	155	119	237	43	223	150	283
ES&G	**1081**	**548**	**85**	**1826**	**909**	**830**	**112**	**248**	**606**	**722**	**72**	**67**	**239**	**488**	**63**	**62**
Information	**2301**	**2592**	**4573**	**6047**	**3025**	**3861**	**4471**	**3212**	**2188**	**4879**	**4064**	**1422**	**765**	**2771**	**4715**	**1798**
About services	478	173	414	614	116	472	420	440	72	603	584	328	29	416	692	404
About CL	1823	2419	4159	5433	2909	3389	4051	2772	2116	4276	3480	1094	736	2355	4023	1394
Miscellaneous	**14665**	**4748**	**3654**	**10221**	**16126**	**8105**	**3243**	**12542**	**19123**	**18018**	**3848**	**8797**	**22201**	**31372**	**7198**	**7563**
Silent	1188	2029	537	2817	5796	2506	261	2266	6939	4335	194	1154	6370	6372	341	1491
Others	13477	2719	3117	7404	10330	5599	2982	10276	12184	13683	3654	7643	15831	25000	6857	6072