Supporting Youth Leaving Care

Current Aftercare Practices (CAP) in Gujarat

Background:
Aftercare is a continuum of care process towards social reintegration and mainstreaming, applicable to youth leaving Care on attaining adulthood. Apart from India’s ratification of the United Nations Convention of the Rights of the Child (UNCRC), national policies, laws and schemes have been formulated in India with special provisions for care and protection for out-of-home-care (OHC) children and youth leaving care or Care Leavers. The Juvenile Justice Act, 2015 and Model Rules, 2016 and the Integrated Child Protection Scheme, 2014 (ICPS) govern the provisioning of Aftercare services in Gujarat.

The Palak Mata Pita Yojana (PMPY) was launched in 1978 by State Government and most recently revised in 2017. It allows families to foster a child provided the family income is more than Rs. 27,000 (rural areas) and Rs. 36,000 per annum (urban areas). Children having age of more than six years must be enrolled in school. If the discontinuation education, the assistance of scheme will be stopped. For children going to Anganwadi and for children going to school, certificate of programme officer and Principal respectively should be submitted every year. Currently, there is no support after 18 years under PMPY.

Research Overview:
Udayan Care, with the support of Gujarat State Child Protection Society (GSCPS) and UNICEF Gujarat initiated a Current Aftercare Practices (CAP) Documentation Study in 2018 with the aim of developing evidence-based programmes for Aftercare in the State. Towards this, Udayan Care partnered with GSCPS, UNICEF Delhi, UNICEF State chapter in Gujarat and Deepak Foundation. The study was conducted in 4 Districts of Gujarat that are Surat, Rajkot, Banas Kantha and Vadodara.

- The nature of challenges and opportunities faced by Care Leavers
- The extent of existing Aftercare interventions
- The gaps and promising practices within the Aftercare ecosystem
- Recommendations to develop a robust Aftercare programme

This study was conducted with 84 CLs and 20 PMPY beneficiaries as the primary stakeholders, and 36 government functionaries, private service providers, professionals and institutional duty-bearers as key-informants (KI) from November 2018 to March 2019. Quantitative and qualitative data was collected through:

- An indigenously developed questionnaire for Care Leavers
- In depth interviews conducted with care providers (Key Informants)
- Inception consultation with stakeholders held in December, 2018
- Secondary data through desk research, literature review and current intervention approach documentation

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**Sphere of Aftercare**

Based on Udayan Care’s several years of experience in service delivery, extensive secondary research, learnings from the pilot study, Udayan Care’s research team developed a thematic framework that governs this study. This research puts forth the 'Sphere of Aftercare' as a comprehensive ideology of rehabilitative support and services for CLs transitioning out of care. The data has been analyzed in the backdrop of the 'Sphere of Aftercare' concept. The 'Sphere of Aftercare' framework divides the scope of Aftercare support/services into eight distinct, but interdependent domains that are essential for CLs’ mainstreaming as they transition out of care. These domains are as mentioned in diagram:

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**CARE LEAVERS’ DEMOGRAPHIC PROFILE**

<table>
<thead>
<tr>
<th>Age</th>
<th>Gender</th>
<th>Aftercare Status</th>
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<tbody>
<tr>
<td>Below 18 yrs: 1 (~1%)</td>
<td>Male: 55 (65%)</td>
<td>Receivers: 55 (53%)</td>
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<tr>
<td></td>
<td>Female: 29 (35%)</td>
<td>Non-receivers: 29 (28%)</td>
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<tr>
<td>18-21 yrs: 63 (75%)</td>
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<tr>
<td>Care Status</td>
<td>Nature of Aftercare</td>
<td>Marital Status</td>
</tr>
<tr>
<td>Govt.: 23 (42%)</td>
<td>Govt.: 34 (33%)</td>
<td>Single: 78 (93%)</td>
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<tr>
<td>NGO: 28 (51%)</td>
<td>NGO: 50 (48%)</td>
<td>Married: 6 (7%)</td>
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<tr>
<th>Education</th>
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<tbody>
<tr>
<td>Primary School: 1 (~1%)</td>
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<tr>
<td>Class XII pass: 18 (~21%)</td>
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<tr>
<td>Post-Graduation&amp; Above: 4 (~5%)</td>
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<td>Class V – X: 40 (~48%)</td>
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<td>Graduation/Diploma: 20 (~24%)</td>
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**RESEARCH HIGHLIGHTS**

**LIFE IN CCI**

- Average age of admission to CCI = approx. 10 years
- 30% CLs were still living in the CCI post 18 years under their formal Aftercare programme
- 42% CLs reported being placed in more than one CCI
- 58% were not consulted in their individual care planning including rehabilitation planning
- 24% CLs reported that they were unable to continue their education as per their wishes even during their childhood
- 81% CLs never attended a financial literacy training, or one-on-one consultation with a caregiver, staff, mentor or expert
- 70% CLs had never received one-on-one career guidance nor attended any career-development workshop
- 67% CLs never received legal literacy training
- 92% CLs have a bank account

**SKILL DEVELOPMENT IN CCI**

- Skills Development Index identified under 3 broad categories: Independent Living Skills, Interpersonal Skills, Job-readiness & Vocational Skills
- 32% CLs from Govt. CCIs had ‘unsatisfactory’ Skill Development Index score vis-à-vis 10% CLs from NGO CCIs
- A majority of CLs had a ‘neutral’ Index score, and the proportion who had ‘satisfactory’ Index score was comparable for CLs from Govt. CCI & NGO CCI
- 63% CLs fell in the ‘unsatisfactory’ range of the Independent Living Skill Index (household management, nutrition, disaster management etc.)
- Skills acquired during childhood (Skill Development in Childhood Index) was found to have a moderate correlation with life in the present

The extent of skills acquired during childhood in a CCI was found to be moderately correlated with almost all spheres of Aftercare

Under the aftercare scheme, till date only two youths have received financial support in Vadodara. As such we get 7 – 8 children from different institutions who need aftercare services. But only two youths; a girl and a boy have received the benefits because at times there are problems with regard to documents required to avail the benefits.” Key Informant, PO-IC, Vadodara

**ACADEMICS AND CAREER**

- 49% CLs reported not completing their higher secondary education (up to Class XII), with a higher male skew
- A higher proportion of CLs from NGO CCIs were able to complete higher education as compared to CLs from Govt. CCIs
- While education was the focus for female CLs, the focus among male CLs was on employment
- A significantly larger proportion of non-receivers voiced the need for vocational/technical and job-readiness training than Aftercare receivers
- 12% CLs were neither in education, employment or training (NEET). This is lower than the national average of 27%, perhaps signifying CCI focus on education, employment and training
- 55% CLs reported their education and/or skill level were inadequate to achieve their academic and career goals
- 25% CLs reported that they were unable to manage their time between education, job and household duties to pursue their career aspirations
- 48% CLs shared that their education was discontinued against their wishes, after turning 18 years, with a male skew
- 90% CLs reported the need for assistance in completing their higher education
- 64% CLs reported the need for career counselling and assistance in job placement

“There should be some provision for further studies. Although, CLs can complete graduation by the age of 21, it is not necessary that all of them will be self-reliant by then. Sometimes they need more time to complete their study or be self-reliant.” – KI, SDO, Vadodara

**IDENTITY AND LEGAL AWARENESS**

- 95% CLs reported having an Aadhar card
- Only 26% CLs possessed Voters’ ID
- A lesser proportion of receivers had basic identity documents such as domicile certificate/proof of residence and passport as compared to non-receivers
- 80% CLs were not aware of their right to Aftercare support

“If a child has left our home then we need not to do anything for them. Our responsibility is till they live here only.” – KI, Chairperson, CWC - Banaskantha
**TRANSITIONING OUT OF CARE**

**HOUSING**

- Only 2 out of 33 districts have dedicated Aftercare facilities in the 5 capitals. Both these facilities are for male CLs.
- 36% CLs were living in housing that was supported by their CCI/Aftercare programme or Government.
- 64% lived without any housing support from any CCI/Aftercare programme, of which 1 male CL also reported living in a shelter for homeless.
- 63% CLs reported the need for assistance in finding adequate housing.
- 50% CLs reported the need for better physical healthcare amenities.

Many even at 18-19 years are not ready for an independent life, they are not mature. Every child has a different growth process, psychological, physical etc., and we have to keep that in mind. So care giving is an on-going process I feel, it should be continuous process. - KL, CCI Superintendent

**MENTAL HEALTH**

- 58% CLs reported facing recurring emotional distress.
- Almost 1 in every 5 CL reported multiple symptoms of psychological disorders, with a marginal female skew.
- No significant differences were observed between receivers and non-recipients suggesting all Care Leavers experienced incidents of psychological disorders.
- Only 18% CLs sought assistance from professionals for mental health concerns. 60% CLs sought assistance from non-professionals such as friends or mentors.
- Only 5% CLs had health insurance.
- 18% reported that either they did not have anyone who could provide care during illnesses or if they did they could not rely on them for more than a few days.
- 37% reported that averting monetary crisis had taken precedence over pursuing their goals.
- The proportion of youth reporting inability to continue their education almost doubled during the transition from childhood to adulthood.
- 27% CLs reported the need for professional mental health interventions.

"In the end, everyone has to get rehabilitated in the society, stay with the society and have to adjust in the community. As much as possible CLs should not be kept in hostels, but in any society within a community setting. This will help them to get connected with the community, and within 3 years they could stand on their own feet within the society." - KL, DCP, Vadodara

**FINANCIAL SECURITY**

- Only 51% CLs reported independent sources of income by means of salaried jobs, daily wage labour or internships.
- 65% males reported having their own sources of income vis-à-vis 24% females even though a greater proportion of females had acquired secondary or higher education.
- 39% CLs reported that their income/allowance was unable to cover their cost of living. 15% CLs do not have funds available to them in case of illness.
- 62% CLs reported the need for training/guidance to achieve financial independence.
- 45% CLs wanted the current financial support of Rs. 2000 under ICPS to be increased to 5000.

"In Surat, those CLs who do not have a place to stay after 18 years are allowed to live in the organization till the age of 22 years. So as of now, the question of lodging under Aftercare doesn’t arise. But when CLs want to pursue some special course or wish to get married, only then we worry about their accommodation." – KL, SDO, Surat

**SOCIAL INTEGRATION**

- 1 in every 5 CL reported that they were unable to maintain meaningful or long-lasting relationships with CCI staff, caregivers and other children.
- Almost 40% were unable to do so even with their mentors after exiting the CCI.
- 39% of both males and females were unable to maintain relationships with either of the parents, wherever applicable.
- Almost 87% reported difficulties in maintaining romantic relationships or considered such relationships to be “not applicable” to them. 66% shared that they did not have any formal or informal group or alumni association for peer support. 70% reported that they would like to contribute and benefit from such a youth collective.
- 51% CLs voiced the need for guidance or counselling to improve the quality of their relationships.
- 49% thought that Aftercare services should be provided in-person through a physical facility/office.

"The main challenge to overcome is the indifference, and even fear, of the society towards CLs, as they don’t come from normal family structure. So, to get accepted without being confronted by society and stigmatized should be an important component of Aftercare. The main objective of aftercare should be moving from the institution into the society." – KL, SDO, Vadodara
Research Insights: PMPY Beneficiaries

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<thead>
<tr>
<th>Age</th>
<th>Gender</th>
<th>Marital Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 18 years</td>
<td>Male: 8 (40%)</td>
<td>Single: 17 (85%)</td>
</tr>
<tr>
<td>Above 18 years</td>
<td>Female: 12 (60%)</td>
<td>Married: 3 (15%)</td>
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<tr>
<th>Education</th>
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<tbody>
<tr>
<td>Primary School: 0 (~0%)</td>
<td>Class XII passed: 10 (~50%)</td>
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<tr>
<td>Class V – X: 6 (~30%)</td>
<td>Graduation/Diploma: 4 (~20%)</td>
</tr>
</tbody>
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- Average age of entry to PMPY – 9 years
- 60% of PMPY beneficiaries were not consulted by their caregivers/guardians regarding their future plans
- 1 out of 4 PMPY beneficiaries had ‘unsatisfactory’ Skill Development Index
- 50% PMPY beneficiaries had completed Class XII with only 3 completing under-graduation
- 10% PMPY beneficiaries reported that their education was discontinued against their wishes in adulthood
- 40% thought their education and/or skill level were inadequate to achieve their academic and career goals
- 95% PMPY beneficiaries reported ‘unsatisfactory’ in the Independent Living Skill Index
- 70% PMPY beneficiaries reported ‘unsatisfactory’ in the Aftercare Quality Index, a composite score of all 8 domains of the Aftercare Sphere

Discussion Points

1. Integrating the focus on Aftercare in the GSCPS mandate as a distinct mainstreaming and reintegration process
2. Ensuring Pre-Aftercare training and planning in every CCI towards preparing for life
3. Extending PMPY beyond 18 years and widening support to complete Sphere of Aftercare
4. Gender neutral approach to education and career interventions for Aftercare as well as PMPY young adults
5. Strengthening the existing District Aftercare Committees and undertaking assessment studies across State to document successes and challenges

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