



REPORT ON THE INCEPTION PROCESS OF THE CURRENT AFTERCARE PRACTICES (CAP)

APRIL 27-28, 2018. PUNE, MAHARASHTRA



Supported by:

TATA TRUSTS



make *my* trip



Table of Contents

Chapter 1 - Background.....	2
The Pune Consultation	3
Day 1: April 27, 2018	4
Day 2: April 28, 2018	8
Introduction Session	9
Session 1: Aftercare approaches in Maharashtra	9
Session 2: Presentation of the CAP research in Delhi	17
Session 3: Focus Group Discussions	19
Presentation from the groups	20
Group – I: Policy, guidelines and schemes on aftercare	20
Group - II: Aftercare Services in Practise	21
Group -III: Support for Youth leaving Care	21
Observation of Panel and Conclusion:	22
Annex 1	23
Annex 2	25



Chapter 1 - Background

Children without parental care often grow in formal or informal settings of alternative care such as foster care, children's homes, child-care institutions (CCIs) or fit facilities. Upon attaining 18 years of age they have to leave the care setting and are expected to lead an independent life of their own. This shift from care setting to independent living often throws up new transitional challenges as well as offers opportunities as they go through situational and emotional changes. Challenges arise due to the absence of a pivotal family-like ecosystem, minimal community integration and limited ownership of essential resources; while opportunities are manifestations of new circumstances that allow the young adults to explore life independently. The transition period is a delicate period, which if unsupported, may reduce scope of the opportunities available to them to locate and access safe and stable housing, pursue higher education or acquire vocational training, find steady and meaningful employment, and build strong and positive relationships with members of their social networks and be able to manage crisis and stress. (Fryar, Jordan, & DeVoght, 2017) They are more likely to experience a lack of life skills, poorer education and health outcomes, unemployment and economic hardship, homelessness, substance abuse and addictions, criminal justice involvement and incarceration, violence and abuse, teenage pregnancy, social exclusion, mental health problems and even suicide; all effectively slowing down or often denying them their full settlement in life. (Kuligowska, 2015) This is the basis of aftercare services which act as the preparatory stage for 'care leavers' leading to their full social mainstreaming. The Juvenile Justice (Care and Protection of Children) Act, 2015 prescribes for financial and non-financial aftercare support for such care leavers in the age group of 18 to 21 years, and extendable up to another two years in some cases. Yet, aftercare remains an unaddressed and low priority agenda with very less investments and budgetary support that can offer adequate aftercare services in the country. The current budget of Rs. 2,000 per care leaver under the Integrated Child Protection Scheme (ICPS) is neither adequate nor transparent in its allocation. Coupled with this, is the lack of an understanding of the real issues and the reality of care leavers on the ground.

Udayan Care firmly believes that every child who leaves an Alternative Care setting on completing 18 years of age needs to be covered under aftercare, which is the logical programmatic intervention after their upbringing in a child care institution, observation home, special home, foster care, etc. Aftercare being a right for care leavers, Udayan Care has constantly pushed for more robust aftercare mechanisms in India using the 'continuum of care' framework. Since 2014 when the Udayan Care convened the first consultation on aftercare services in Delhi, we have advocated for their rights and empowerment. Udayan Care has extended its support to children exiting out of the Udayan Care homes through two aftercare facilities that provide secure accommodation, counselling, career guidance, educational and vocational support, and help with internships and employment. More recently, with the idea of consolidating years of experience and knowledge, Udayan Care conceived the Aftercare Outreach Programme (AOP) with the vision that all care leavers should be supported after leaving the alternative care settings. In 2017, under the initiative of Current Aftercare Programme (CAP), a multi-city research with various stakeholders involved in aftercare has been initiated by Udayan Care with support from UNICEF and Tata Trusts. The research entails interviews with key-informants (KII) and the Care Leavers. State level consultations are also being organized with the intent of getting stakeholders together to gain better understanding on the ground realities and join hands in support of a robust Aftercare planning for the Care Leavers. Accordingly, the first city research on aftercare with 47 care leavers and 10 KIIs to explore the status and quality of aftercare services in the city, titled "The Situation of Aftercare Youth in Delhi, 2018" has been concluded with the funding obtained from Delhi Commission for the Protection of Child Rights (DCPCR) and the consultation in Delhi was held on December

14, 2017 in collaboration with Plan (India) International and Department of Women and Child Department (DWCD). The Care Leavers Association and Network (CLAN), Delhi chapter was launched at the 3rd Biennial International Conference held on 16th and 17th March 2018. The Delhi research and consultation also helped Udayan Care conceptualize and roll out a multi-city research and consultations on aftercare with support from UNICEF and Tata Trusts. A consultation on 'Aftercare in Karnataka' was held in the National Institute of Mental Health and Neurosciences' (NIMHANS), Bangalore on 6th April, 2018.

The Pune Consultation

As part of the CAP series, a two-day consultation was held in Pune, in collaboration with the Women and Child Department (WCD), Govt. of Maharashtra and UNICEF. The first day of the consultation saw the participation of government functionaries from Maharashtra's District Child Protection Units (DCPUs), Child Welfare Committees (CWCs), Juvenile Justice Board (JJB) and Department of Women and Child Development (DWCD); and care leavers



from Maharashtra's governmental and non-governmental aftercare organizations. On the first day, invitees participated in two separate Focus Group Discussions (FGDs), one for practitioners and one for care leavers. Day-two of the consultation facilitated the coming together of over 75 stakeholders and more importantly, it gave the city's care leavers a platform to bring their insights into the current discussion on aftercare. Prior to the consultation, a desk review was undertaken by Udayan Care on the situation of Aftercare in Maharashtra but very little information was found on the subject. Although the state had set up Aftercare Associations in each district, the standard operating procedures (SOPs) are not clearly defined. These associations consisted of aftercare hostel superintendents as members, with the mandate to develop aftercare services. However, Maharashtra Aftercare Associations were found to operate at a local hostel level, and the task of advocating to strengthen aftercare services at a regional or state level was not taken up systematically.

The promise of the central government to "set up a database of children leaving child care homes upon turning 18 every year and also create helpline numbers for those who are out of institutional care, where they can contact to seek guidance or counselling, whenever required, and can find solutions for their concerns" is still unmet¹. The website of the DWCD in Maharashtra has not been updated, and no data regarding operational aftercare organisations and their budgetary allocations, or the number of youth in need of aftercare is available. Research on current practices and approaches on aftercare in Maharashtra, and the challenges faced by different stakeholders, including care leavers themselves is either not conducted or not available in the public domain. These issues need to be discussed sequentially, and be studied scientifically. These gaps in knowledge made the consultation in the state a very important step in the CAP series, where stakeholders acknowledge the challenges and opportunities they face such that the CAP research has a buy in to produce collective solutions to strengthen aftercare programming. The consultation also ignited adequate interest in the stakeholders present to participate in the forthcoming research launched in Maharashtra. In

¹ http://www.business-standard.com/article/pti-stories/new-guidelines-on-treatment-of-juvenile-convicts-aftercare-117051500989_1.html



this way, the Pune Consultation was the next logical step after the Delhi research, Delhi Consultation and Bangalore Consultation in the CAP series.

The objectives of the consultation were as follows:

- To bring together stakeholders in Maharashtra and involve them in discussions on aftercare;
- To understand the nature of challenges faced by care leavers between the age of 18 to 25 years in Maharashtra
- To understand CAP India 2018 research process needs in Maharashtra,
- Disseminate the findings of Udayan Care's research on aftercare programmes in Delhi,
- To initiate Udayan Care's research on aftercare programmes in Maharashtra

Chapter 2 – Proceedings of the Consultation

Day 1: April 27, 2018

Day 1 of the two-day event witnessed the participation of over 20 stakeholders. Over the course of the day, three Focus Group Discussions (FGDs) were held; two with key-informants and one with care leavers. The key-informants were divided in two focus groups of 6 participants each, while 1 FGD was held with 10 care leavers.

Participants in the key-informant FGD were:

- CWC Members
- JJB Members
- DCPOs
- Superintendent of After Care Home
- Member of Maharashtra State Probation and After Care Association
- Representative from NGOs running CCI and Aftercare Programme

Whereas, the care leavers belonged to various child care institutions in Maharashtra such as Prayas, SOS Children's Villages and Government Aftercare Homes.

Points that emerged during the FGDs are briefly surmised below.

1. What are the different governmental and non-governmental aftercare services available in Maharashtra?

Non-governmental Aftercare Services: Many NGOs in Maharashtra, are working on providing aftercare. For example, Vinimay Trust has a hostel that is managed by the care leavers themselves with the help of senior support group. A few other NGOs like Prerana, SOS Children's Villages have introduced 'group homes' for care leavers' rehabilitation and social reintegration.

Government Aftercare Services: The Maharashtra government has provided aftercare hostels in all regions of Maharashtra. The DCPUs shared that there are agencies that have specialized in career development and guidance. Youth are sent to these agencies when sponsors commit

fees for these courses. However, vocational training and formal education are mutually exclusive options; a combination of both should be provided to increase care leavers' capacity.

The girls' aftercare home in Nasik provides training to be a beautician or nurse, but if they want to take up expensive courses like MBA, the government cannot finance the fee. The government does not have any provisions for education loans for care leavers, and they usually face problems in providing collateral from bank loans as they do not have assets or benefactors to act as guarantors. However, vocational courses require less fees and are sometimes accompanied with a provision for a stipend. Thus, they are easily accessible by care leavers and become preferred avenues in the absence of other options.

Regarding employment, the superintendents of aftercare homes place youth into jobs on basis of their own individual contacts. Youth who struggle to pass 10th standards are asked to fend for themselves as they may get work only within the unorganised sector. Staff do not have confidence that they fill up the Individual Care Plan to record child development. As a result, there is dire need for skill development suited for those who do not possess formal academic credentials, but can learn from basic education which may be imparted informally.

Parents are involved in the aftercare where ever possible. The CCIs try to locate the family of the child. If the parents can support the settlement process, they are asked to contribute; otherwise, the youth takes time to settle until a job or a sponsor for the right course is found. An

What are the challenges and loopholes in Maharashtra's Aftercare services?

The first challenge is to converge provisioning for aftercare from the existing schemes like, Earn and Learn, Subh Mangal Yojana, Karmavir Bhaurao Patil Yojana, Self-Employment Scheme etc.

The next challenge is to operationalize new government orders to benefit care leavers. For example, in 2018, Maharashtra Govt. has introduced 1% reservation for orphaned youth in educational institutions and government jobs. However, since, the reservation is only for those who have an orphan certificate, the benefits can be only availed upon proving that the youth has neither parent alive, and that the caste and antecedent of the parent remain unknown. Thus, this reservation does not encompass all youth who have been certified as CNCP and have spent their childhood in a CCI.

A third challenge is developing a reintegration process for care leavers. Aftercare services need to include all care leavers. When a child completes 18 years of age, and a 'rehabilitation plan' is not set in place, then there is a risk that the care leaver would again enter a vulnerable environment and many years of care and effort are lost. Hence, aftercare services are very important to maintain the continuum of care. Otherwise, the time, effort and money spent on the care and protection of the child is wasted as they are neither rehabilitated nor reintegrated into society in their adulthood. In the absence of a 'rehabilitation plan', there is no data available on what happens to care leavers once they exit the CCI. Thus, we need to have a system of follow-up with each and every care leaver that records their needs and effectiveness of any intervention provided to them. This will also require better coordination among different stakeholders.

The fourth challenge is the inadequate human resource to organise aftercare. Another reason why aftercare remains a neglected domain is due to inadequate human resource, resulting in heavy workload for both the government and NGO functionaries. JJBs are not able to work faster because pendency of cases is very high due to huge number of cases to be dealt with. The tenure of the staff is for a limited time and this breaks the continuity that case work requires. Social workers and counsellors also play an important role in this whole process, but many posts remain vacant in the government department. There are also vacant posts of DCPO and other staff. Until and unless adequate staff is hired, it's difficult to work efficiently to improve aftercare service delivery.

Fifth challenge is mainstreaming youth who fall under the Children in Conflict with Law (CCL) category. These youth often need to repeat the exams when they fail in a grade or may require de-addiction services; but finding sponsorship for them is extremely difficult. Moreover, they faces harassment from police and stigmatisation in society. Although CCL have a right that their crime records should be sealed by the police, this right is routinely violated at every police station. The need is to get back to the community the child belongs has been felt more after experiences of isolation felt by institutionalised people.

2. What are some of the problems/challenges faced by you, while working with children or in the juvenile justice system?

People who are working on alternative child care or providing aftercare services are not provided adequate training support or motivation. There is no job security for staff, and functionaries are often transferred and new staff is frequently appointed. A lot of time is lost during the initiation and orientation process of new staff, and continuity with cases, interventions and projects is not maintained. The job description of the government child care staff does not include tracking and follow-up of youth. The caregivers reported that the children while in care get into romantic relationships which sometimes increases their vulnerability to harmful situations. They often escape from the CCIs by jumping from the roof or by breaking windows, and view their institutions as jails. As a result, they require counselling on why they are in a CCI in the first place, and need to be educated about their rights and responsibilities. A care leaver shared that “as children, we do not know why we are here in a children’s home? Are we being reformed or are we being educated? There should also be a follow up structure or system after our time at the CCI.” More often than not, children are not involved in their development plans and they lack caring adults to guide them. The CCI staff such as the cooks, caretakers and social workers need to invest in long-term relationships with them so as to create a family-like atmosphere.

3. What are some new ideas or practices that could be implemented within Aftercare services?

There is a need to establish a ‘contact point’ where care leavers can come to share their problems and get the guidance. As mentioned earlier, there is no record available for the 18+ youth who have moved out of the CCI. So, this ‘contact point’ will also be helpful to remain in touch with these youths and monitor their settlement progress. This ‘contact point’ can also be expanded to provide aftercare services or referrals for counselling, medical aid, higher education, vocational training, accommodation assistance and other services. This one-stop ‘contact point’ can be managed either by the government or by NGOs, and youth care leavers can also be engaged as full-time employees. Through this ‘contact point’ proper follow-up with

care leavers can be routinized and need-based individualised assistance can be accessed by those who seek help, as well as those who don't.

There is also a need emulate Public-Private Partnership models like that of SOS Children's Village. There are many other organisations, who are interested in this kind of work, and so, the government can collaborate to build a structured system, where aftercare programming can be strengthened.

4. How can Aftercare services be strengthened for smoother and more efficient functioning?

1. Organizing care leavers: In this digital age, technologies like MIS, social media, text applications have huge potentials to streamline and strengthen systems and processes, and organise care leavers into a collective. A youth collective, such as CLAN, can help to build good relationships with each other, and provide safe spaces to youth without feeling restricted or supervised by anyone. This will also develop the agency and self-esteem of care leavers and prepare them for independent life. Through technology and data management systems, registration for aftercare services and a follow-up mechanism can be instituted.
2. Offering de-addiction facility: A High Court's Judge suggested that government homes should be turned into deaddiction centres as they are empty and government is spending so much on their maintenance already. A DWCD staff member who works for CCL youth shared that mostly single parents get into addiction and then take to crime. There is urgent requirement to set up a centre for de-addiction in every district as this service is not available for free in Maharashtra. The fee of Rs. 6000 that is

Additional Insights from FGDs

- The superintendents of aftercare homes do not have a resource directory or a referral mechanism. Option for care leavers are explored through individual contacts of the current staff.
- If the parents or family of the care leaver can support the settlement process, they are asked to contribute as it reduces the time taken to achieve independence.
- There is need to have skill development suited for those who are illiterate, but may benefit from basic education that is imparted informally.
- For those who have mental health needs, focused rehabilitation planning based on their overall wellbeing should be planned.
- Children in Conflict with Law (CCL) need additional help to complete their education or require de-addiction services. However, raising funds or findings sponsors for this group is not easy.
- Moreover, CCL face harassment from police, and sometimes from their extended community. As a result, they require regular counselling and concerted efforts to reintegrate them



required for admission into a de-addiction centre needs to be provided for through a scheme.

3. Aftercare Welfare Board: This board can be established with the government's support that monitors and evaluates the aftercare programmes run by other organisations. This board should also supervise the availability of funds and how to utilize the money for the welfare and benefit of care leavers.

5. What should be done to ensure the rehabilitation and social reintegration of care leavers?

Preparation for independent living should begin at an earlier age of 14-16 years before a child leaves the CCI. Living skills such as household management, cooking, independent travelling, conflict resolution, etc. also need to be provided to survive in the society. During this time, there is also a need to provide moral and emotional support. Individualised aftercare 'release plan' should be developed early on keeping the aspirations and skill-level of each child in mind. To make them socially and economically independent, the staff of the CCI need to take support from mentors and well-wishers who can provide updated skills and training based on a demand from the market such that care leavers can obtain meaningful jobs or even start their own enterprises.

Home visits are an important part of rehabilitation. A care under care reported that she had a Fixed deposit in her name. When the case worker went to her home in the village to check with the bank, she found out that this child had inherited agriculture property as well. This has led to the young adults properly reinstating her self with the help of the aftercare case workers.

There is also an immediate need to develop guidelines for the nature and quality of aftercare services. Similarly, SOPs for aftercare services providers also need to be developed and widely disseminated for capacity building of service providers.

Finally, care leavers are often stigmatized as they join the mainstream society. So, there is a dire need to raise awareness and exposure of both the care leavers and their immediate communities so a process to bring about ideological change in the society is initiated.

Day 2: April 28, 2018

On the second day, more than 75 participants attended the consultation held at Hotel Shree Panchratna, Pune, which was aimed at bringing all stakeholders together to a consultative process that discusses the challenges of aftercare programming in Maharashtra.

Participants belonged to the various government bodies working in the field of child protection and juvenile justice, such as the CWC, JJB, DCPU, WCD, SCPCR, etc., representatives from many civil-society organisation and NGOs involved in child care, professionals, practitioners, researchers, scholars and experts from the field. The consultations also hosted over 15 care leavers belonging to various CCIs throughout Maharashtra.

Introduction Session

Dr. Kiran Modi, Managing Trustee, Udayan Care welcomed all the delegates including the government functionaries, CCI representatives, researchers, academics and above all, youth themselves. She introduced the activities continually undertaken by Udayan Care in terms of care and protection, rehabilitation, networking, research, and advocacy on child rights concerns. Dr. Modi also thanked UNICEF and Tata Trusts for their understanding of the urgent need to invest in the process of aftercare, and extended her gratitude to Mr. Rakesh Prajapati and his team for their tireless effort in organising this consultation.

Dr. Shivani Bhardwaj, Senior Consultant, Udayan Care, provided the genesis of the consultation, focusing on the need to deliver effective aftercare services in India.

The consultation began with an introduction of all the participants. The participation of multiple stakeholders proved that aftercare was a critical concern for many who have been associated with the field child protection. **Ms. Alpa Vora, Child Protection Specialist, UNICEF**, wittingly stated that the collective experience in the room amounts to more than 500 years.

The introductions served to break the ice between all participants and set the tone for the rest of the consultation which saw a great degree of enthusiasm, participation, collaboration and acceptance from all. Given the varied specialisation and interest of the stakeholders, it was clarified that the consultation would discuss aftercare of all children under state care, whether they are Children in Need of Care and Protection (CNCP) or Children in Conflict with Law (CCL) or children from foster care or group foster care. Dr. Bhardwaj further urged that the discussion should have a special focus on issues faced by young women care leavers. The CAP research process aims to document the contemporary scenario of aftercare services in Maharashtra, and to generate information and suggestions on aftercare issues at the level of policy as well as its implementation. Therefore, the focus of the consultation was on discussing different aspects of 'aftercare' and the challenges pertaining to it. Dr. Modi concluded with the hope that this consultation and the research in the city would carry the voices from the state to inform the national policy-making at the centre. She ended with the need to develop an informal network of professionals, who could provide Support for Youth Leaving Care ('SYLC') for their smooth, silk-like transition to independent living. and a Care Leavers Association and Network (CLAN), stating that individual work of organisations means much but collectivization of care leavers themselves through CLAN is needed and SYLC should extend all their support to them.

Session 1: Aftercare approaches in Maharashtra

This panel discussion was centred on discussing "Challenges and Opportunities for Care Leavers and Aftercare Service Providers in Rural and Urban Maharashtra." Moderated by Ms. Alpa Vohra, UNICEF, she provided the background of the session by throwing light on the vulnerability of care leavers after attaining the age of 18. Setting the context of aftercare in the state, she said that both formal and non-formal processes exist in the state, leading to different approaches in aftercare practice. She iterated that 'care' and 'aftercare' include psycho-social support for overall development of young adults and so, requires a layered capacity development programme. The speakers at this session were:

Session Chair: Mr. Ravi Patil, Director, Women and Child Department Government of Maharashtra

Panelists:

- Ms. Kashina Kareem, representative of Prerana, a Mumbai-based NGO
- Dr. Sunil Lawate, Ph.D. scholar, and mentor
- Mr. Thyagarajan, representative of Vinimay Trust
- Dr. Kiran Modi, Founder and Managing Trustee, Udayan Care

Each speaker shared the model of aftercare prevailing in their organisation and/or in practice. The discussion was steered by the moderator, with each speaker sharing two successful things about their contribution to aftercare services, and concluding with how current practices should evolve to visualise a better future for youth who age out of the State's care system.

Ms. Kashina Kareem (Project Manager, Anti-trafficking Centre, Prerana)

Ms. Kashina shared that Prerana has organised two rounds of consultations to bring together 25 NGOs on aftercare in the state and have raised concerns about the current aftercare services and its implementation. She informed the gathering that, in practice, aftercare is usually not planned in consultation with the child, and in most cases the young adults opt for options that involve least changes. For example, they choose to live near their CCIs or pursue short-term vocational courses to spend maximum time with friends. The institutionalised youth, thus, does not learn to thrive in the competitive scenario that exists outside the institution. As an organisation, Prerana believes that all adults face some or the other difficulties; and their struggle through difficult circumstances is a rite of passage to survival. The case workers at Prerana work on the unique skill set of each youth to enable them to lead an independent life. However, at Prerana, the practice is not to take on the responsibility of all youth under its organisational 'aftercare' plans. It only provides aftercare in extreme cases of vulnerabilities, or those who come into the JJ system very late in life. The aftercare plan for each youth is developed to lead an independent life in consultation with the youth from the time they reach the age of 14 years.

Prerana offers aftercare support through a group-home model that is found to be very suitable as a transitional point that makes their reintegration into the society easier. The group-home model was initiated in 2002. Moreover, adult women are also referred to Prerana, which assists them in finding a place to stay and paying the rent. Currently two group aftercare homes are being maintained with the view to make care leavers live in a self-sustaining manner. Ms. Kashina also shared an interesting outcome of their group-home model - adult women who have stayed in CCIs go on to hire flats and sublet it to other female care leavers who have just turned 18.

At a sequel interview, Dr. Priti Patkar, Executive Secretary at Prerana, shared that “from the age of 17 years, the girls in Prerana homes are told that it is their right and decision to come back to them with queries or in times of need; and that Prerana is always there to support them. Thus, we feel that there is no need for aftercare or tracking, unless it is a call from the youth themselves. Thus, aftercare is essentially a non-residential service that may lead them to opportunities, while allowing them to create their own community setup. “

Thus, the state of Maharashtra has some unique practices and developments pertaining to aftercare, such as:

1. CCI and aftercare organisations encourage youth to have health insurance and have the sense to pay its premium regularly. They provide shelter and monitoring the youth to live within norms of an administration, while providing functional skills and training to care leavers to become independent adults.
2. In March, 2018, a BJP MLA endorsed an association of all orphans. However, any association led by a political or a religious group can prove to have motivations that need to be monitored.
3. Although NGOs do not have a formal collective, they meet regularly to facilitate collaborative work. Such a collective has great potential by delineating existing resources and networks, and then pooling them in to develop robust referral services in all domains and available to all care

Although each organization has its own its practice, Prerana’s experience has shown that after 18 years only some youth need hand holding till 21 years, if proper preparation for independent living is undertaken at an earlier age. Since, each organization has a limited resource base, it can only rely on referrals of existing services. Although many care leavers are resilient and are able to develop their own support systems, they hold their CCIs and caregivers responsible for any shortcomings. More often than not, staff in organizations get to hear that “the NGO could have helped me more”; but in reality, it is their prevailing organizational policy to invest limited resources to service the most vulnerable.

Mr. P. Thyagarajan: Vinimay Trust, Mumbai

A committed group of ‘scientific officers’ or trustees oversee the working of Vinimay Trust, with a host of volunteers not only running the organisation, but also managing it. Their aftercare hostel is managed and maintained by a group of volunteers and run by the youth who get a period of three years to stay and pursue their careers after turning 18 years of age. Since the past 35 years of its functioning, 350 youth have transitioned from Vinimay Trust mentorship. A close coordination between the managing committee, group of committed volunteers who, in turn, work with small groups of care leavers to develop independent-living skills has shown results. However, the focus is on earning a living and saving a portion of it, rather than on education. They learn to obtain legal documents, understand and operate bank accounts and continually develop interpersonal skills. This helps them to learn life-skills to get adjusted in the society.

Initiating discourse on a neglected topic, Mr. Thyagarajan informed that most care leavers have not been exposed to concepts like, ‘life goals’, ‘aspirations’, or ‘career plans’, while in CCIs. Once they are introduced to this concept, they are able to internalise the goals, which drives them to achieve targets. However, when children grow up in CCIs, many stages of such learnings are amiss. Given care leavers unique situation, they are more likely to face situations of inadequate income, poor housing conditions, etc. They may stay at places where their rooms do not have a fan or piped water or independent toilet facilities. Thus, a greater extent



of resilience must be developed while in care. Therefore, interpersonal skills, conflict management and negotiation skills, and other soft skills need to be brushed along with the functional skills of learning to survive outside an institutional setting. Due to this ideology, Mr. Thyagarajan informed that 70% youth who come out Vinay Trust's mentorship are able to steer their life.

Mr. Ravi Patil (Deputy Commissioner, Women and Child Development, Government of the State of Maharashtra)

Mr. Patil began by reiterating the fact that despite knowing the extent of care leavers' vulnerabilities, very less work has been done to address the issues they face after leaving the alternative care environment they lived in. He further said that 'rehabilitation' as an end product might not be possible immediately after the attainment of the age eighteen but the process can be initiated. Mr. Patil informed that there are 7 aftercare homes in Maharashtra that cater to 120-130 male youth. According to government statistics, there were 21,000 children in different CCIs of Maharashtra and every year 5,000 to 6,000 young adults are released from state's care. From 300 organisation this year, 190 care leavers have been released and recommended for aftercare support.

Mr. Patil further emphasized that the most vulnerable 'Children in Need of Care and Protection' (CNCP) need to be identified and kept under state institutional support, while focused efforts of family and community strengthening need to be undertaken. However, Mr. Patil was critical of merely identifying children with families and releasing these children to significantly lower the number of children in institutions this year, without due process of evaluation of the family's capacity and/or vulnerabilities. Furthermore, there is no central record-keeping of what happens to restored children or those young adults who age out of their CCI after turning 18 years of age. The failure of proper implementation of aftercare rules as laid down in the JJ Act has led to severe outfalls in the system. Although, the government has been working on de-institutionalisation, there is a dire need to train staff to identify vulnerabilities of children and their families, and be able to strengthen their skills to develop their capacity.

Mr. Patil provided insight into the management of the aftercare hostels in Maharashtra. He noted that given the absence of guidelines and SOPs, the condition of aftercare facilities depends on the will and initiative of the leadership present in the hostel. The better the superintendent, the better the condition of the home! Motivated and invested superintendents have been able to provide care leavers with necessary vocational skill training, assistance for higher education, options for employment, etc. The important role of the Probation Officers and other staff were also highlighted in terms of keeping track of where the youth goes after leaving care or aftercare. However, Mr. Patil informed that a shortage of manpower is causing most of these positions to remain vacant, and other staff is overburdened with multiple portfolios. As result, the outcomes are unmet and any progress is sub-par.

Case Vignette

An orphan living in a CCI of Maharashtra had a Rs. 5 lakh fixed deposit in her name. The CWC further explored the bank details of the deposit and found that her family has an agricultural land that she can inherit. In this manner, home visits can inform more about each care leaver and assist in developing an individualised rehabilitation plan for all.



Despite the establishment of autonomous, district-level 'Aftercare Associations' of all staff members, they have been unable to raise pertinent resources or address the known aftercare gaps.

Mr. Patil cited the example of the Majhi Sainik Welfare Board that has an effective 'aftercare' model for its members. Since the aim is to not segregate children from their family, they address family-based needs as well. Moreover, they believe that care leavers should be able to share their emotional, financial or any other problem with a caring adult. Thus, there should be such a mechanism in every district; a youth guidance centre can be established in keeping the effective practices of the Majhi Sainik Welfare Board in mind.

At a sequel interview, Mr. Patil spoke of the Maharashtra Government's initiative for orphaned care leavers. This year, a 1% reservation in admissions to educational institutes and jobs to orphan who have no parents and caste has been introduced. Although such an affirmative action is facilitative and proves the government's interest in care leavers' issues, it is also indicative of the limitations on aftercare provision to only those who are "true" orphans. Care leavers who may have families, yet face many hurdles are systemically left out of this approach. Furthermore, Mr. Patil informed that in 2016, the CWC reviewed the case files of all children in all the homes in Maharashtra, and sent back children with families to their homes. As a result, the strength of children in institutions decreased

Regarding the government funding available for aftercare, Mr. Patil said that despite the ICPS allocation Rs. 2,000 per child, Maharashtra government has allocated an increased amount of Rs. 5,000 per child per month for aftercare. Apart from this, a children's fund of Rs. 55 lakhs is availed for use during medical emergencies, and Rs. 5 lakhs is kept aside as marriage fund. Plus, there is also an option to access 10% budget from the Chief Minister's fund on need basis. However, the ICPS-sanctioned funds have not been utilised as the central Ministry of Women and Child Department has not yet set any rules or guidelines for its disbursement.

Dr. Sunil Kumar Lawate, Retd. Professor (Writer and Social Activist)

Dr. Lawate adopted a different approach to view the current aftercare programmes in Maharashtra. He said that aftercare services should be made mandatory and institutional in nature to make its provision uniform to all. In his opinion, the many challenges manifest as current systems fail to build resilience in the youth, and so care leavers lack the motivation to succeed in life due to a complete absence of psychosocial support. The existing state machinery has not been able to respond to aftercare needs adequately. The vacancy of the government positions in the DCPO and aftercare hostel are resulting in poor life outcomes for the young adults. Moreover, the role of the aftercare association of hostel staff has not evolved to make aftercare a dynamic practice. To address these problems at a policy-level, minimum standards of aftercare services should be specified in the Juvenile Justice (Care and Protection) Act. Dr. Lawate believes that the JJ Act has made the scheme suggestive rather than mandatory. Details of implementation mechanisms and process, responsibilities, nature of services and finances that are to be provided must be laid out plainly.



Caregivers' opinion on Tracking of Care Leavers.

Firstly, the job description of the government child care staff does not include tracking care leavers.

The caregivers reported that the children while in care get into romantic relationships; and often escape from the CCI by jumping from the roof or by breaking windows. They view their institution as jails. However, when children get abandoned they need to be housed somewhere.

Therefore, we do need institutions that should be reformed by making the staff take on the role of a being the caring community the child requires. The cooks and the caretakers need to be trained such as the children develop informal relationships with them as caregivers.

Maharashtra's aftercare programming has a long history. The state has set up aftercare hostels as a formal aftercare response. However, such a response does not provide a holistic support structure to the youth while they stay in the hostels. Moreover, there are no women's hostels at present. Dr. Lawate said, "When I was 10 years old, I stayed in the state systems and have first-hand experience as a child of the state. There, I had no support systems of relatives to learn from or assistance to obtain formal education. I was educating myself, while working side-by-side. Later I faced many problems as I was unable to obtain a migration certificate; no one was willing to give me a bank guarantee, or provide me a bona fide certificate."

According to Dr. Lawate, some necessary changes are required in the JJ Act, Rules and Guidelines. For example, it should clearly specify what a child care organization is, and what an aftercare organization is. More importantly, the relationship between the two organizations needs to be specified to maintain the continuum of care, especially in the case when the youth shifts from one organization to another. The duties and procedures of staff in an aftercare facility, and the role and functions of staff who

manage aftercare services should be as detailed as those mentioned for the care of children under the age of 18 years. The mechanisms of the aftercare organizations should be clarified with its structure, modality, training, supervision and monitoring systems. Its financial base should be specified as well. A nodal agency needs to monitor and regulate the CCIs who need to develop plans in consultation with each child, starting at an earlier age of 14. This plan should be followed up until the youth turns 25 years old.

Dr. Lawate emphasised that a child in state care is the child of the state therefore the state should be a parent like guardian to the child for as long as the person under state care wants to relate with the parent ministry. He advocates for an aftercare scheme with specific finance outlay for a period of 15 to 18 years for a long-term convergence programme that covers aftercare services for a

"The costs of running an aftercare institution can be calculated by analysing current expenditure of aftercare homes, non-institutional expenses like education, food, housing, transport, communication, health and settlement expenses that include education/skilling, health/ caring, job search expenses, work expenses, and marriage or resettlement into a household can be provided through a monthly as well as a onetime Oallowance."

- Dr. Lawate

generation of OHC youth population. This population requires different services, institutional and non-institutional, that get serviced through a coordinated programme. The aftercare programme should cater to the needs of housing, education, health, training, placement, job preparedness, entrepreneurship, loans or other financial assistance. What is required is to make a change in the JJ Act which clearly stipulates that an institutionalised child shall be looked after till the age of 25, by the Ministry of women and Child as the parent to ensure maximum continuity and stability. Towards this, the parent ministry should develop a convergence of programmes with other ministries and departments and an inter-department coordination should be facilitated as a matter of effective execution of a scheme that derives expertise and budgets from Social Welfare Ministry, Ministry of Youth, Ministry on Enterprise, the HRD ministry and the Skill Development department.

On a different note, Dr. Lawate also estimates that there are at least 5,000 children in Maharashtra, who need aftercare. This number can become a base for the fund allocation in the absence of actual data on how many care leavers need to be provisioned under a formal scheme. The DCPU can manage the financial allocations as mentioned in the JJ Act, but with a detailed process for aftercare organisations and care leavers to access this fund. This fund should be realistic in nature, on the basis of actual costs of independent living, cost of education, cost of exam entrance fees, cost of setting up an enterprise, cost of buying equipment like laptops, phones and/or automobiles, cost of joining work, cost of marriage and child rearing, medical costs, etc.

Dr. Kiran Modi (Founder and Managing Trustee, Udayan Care)

Aftercare has till date remained a good subject of discussion amongst various stakeholders; however, not much work has been done on the same. Only a handfuls of organisations have been able to contribute effectively.

Dr. Modi further shared that over 31 million children in India are vulnerable, and those living in different forms of alternative care, referred to as out-of-home-care (OHC) children. Most spend their childhood in child care institutions (CCIs) or foster care or other forms of alternative care because they have been separated from their biological and/or extended families due to various reasons. Dr. Modi mentioned that Udayan Care has been organising and participating in various national and international conferences and one major issue that had invariably been discussed was the issue of lack of enough attention to the aftercare programming. Dr. Modi also shared Udayan Care's emphasis on aftercare as the key pillar for service delivery to all young persons in Alternative Care. She cited the JJ Act 2015 and Rules of 2016 that now have made provisions for a more supportive legislative policy and a schematic framework to move forward. She mentioned that now strategies, action plans and commitments to make aftercare actually work on the ground is required and in order to do this, evidence as well as participation of care leavers is a must. Dr. Modi emphasized on the fact that the young persons may have diverse voices and experiences but they are all united in their personal journeys since they face similar challenges. She quoted the HHC² theory of change, which mentions four essential components to bring about change: Political Will; Evidence & knowhow; Civil Society Participation and the last and the most important, Resources.

² The Health and Human Capital Theory



It is important to give a family-like feeling in aftercare as much as in a CCI. There should be more discussion on how to make the aftercare services schematic in nature. The urgency of the issue and need for empirical data to advocate with the government and other stakeholders resulted in Udayan Care's Aftercare Outreach Programme. There is a need to share the knowledge between various organisations, so that every youth in need of aftercare services benefits from the system. It is our responsibility to bring out a solution from the chaos and make everything right.

Open Floor Discussions

- There is a need for a robust aftercare program in the state of Maharashtra. This need was agreed upon by all stakeholders and it came out repeatedly in different phases of discussion during the consultation.
- Aftercare is an opportunity where care leavers can learn to assimilate themselves with the larger society and move towards mainstreaming.
- Aftercare should not be seen in a vacuum or as a separate program outside the ambit of CCI.
- The whole idea behind aftercare is to help the care leavers reintegrate into the society and therefore the preparation for aftercare needs to start as early as possible when they are still under the care of CCI.
- Policies must be made flexible because the needs of every youth is different and there needs to be a case by case handling in order to develop individualised case specific plans. The emphasis on the robustness of the individual care plan (ICP) needs to be understood by care providers when the child is admitted to the institution. The process of planning should start from the beginning itself and not after the child leaves the institution. It should be done as an ongoing process. Starting the plan from the beginning after the child leaves the CCI after attaining eighteen years of age lengthens and complicates their rehabilitation process.
- There is a need to look at youth as assets and not as liabilities.
- There is a need to make proper provision in the JJ Laws and strengthen the role of government functionaries for aftercare. This can be done by filling in the vacancies and making the District Probation and Aftercare Association more proactive in nature.
- There needs to be more clarity amongst all stakeholders on the existing laws, rules and policy at State level in respect of aftercare and SOPs should be developed for govt. officials to guide the interventions towards a planned and fruitful aftercare programming.
- Resources should not be considered as a hurdle or a limitation while delivering quality services and new trends such as Corporate Social Responsibility (CSR) should be utilised to the maximum to benefit the youth.
- The allocated budget for implementing of the aftercare services should also be increased.
- All youth should have their identity documents with them and this need to be ensured by service providers. This helps facilitate youth avail benefits under different schemes available at State level.
- There is a need to also focus on intangible aspects of care such as emotional well-being of youth because researches have shown that care leavers are often prone to emotional



vulnerability as they start to live independently. The Udayan Care and SOS model of providing such services was mentioned as a good practice in addressing the issue.

- Long term integration needs to balance the duration of support during aftercare with the need for youth to not wanting to be associated with an organisation and wanting to move on with their life. But we also need to factor situations when they tend to come back in times of need and support. At least the discussion needs to be initiated on the need to develop a mechanism about this and the need to keep the window always open for them.
- There is a need to develop local solutions. For example, instead of calling it 'tracking' it can be named something like '*sneh bandhan vista*' and link Aadhar cards with digital tracking of the youth as they do not have a permanent address.
- Whenever youth live in an institutional setting, they can be trained in soft skills that can be provided to them within the premises. These soft skills are absolutely required to survive in today's society.
- The process of rehabilitation should be needs based through a one to one planning process.
- More clarity is needed on the provision of 1% reservation for such children.
- The youth can form their own network and empower each other.
- The conditions of the staff working in different positions in aftercare program also need to be considered. These staffs are primarily responsible for looking after the implementation of aftercare services but a significant portion of them are overburdened with work and are not trained properly. Similarly, they also feel that their job needs to be stable to develop a long term bond with the care leavers. Staff recruitment is not being done and many positions are vacant. The system of contracting services has begun in the state and these jobs are being captured by politically strong candidates who take on contracts by the dint of their muscle power. All these issues need to be looked into.
- Currently the understanding of aftercare services is seen predominantly in the context of 'aftercare' homes and does not extend beyond that.
- Stakeholders could barely make specific suggestion regarding girl youth care leavers.

The session was summed up by **Ms Alpa Vora**, Child Protection Specialist, **UNICEF, Maharashtra**, who upheld the need of a strong aftercare program that combines the civil society and the government experience. She mentioned that the movement has already started through a consultative process that has begun in Mumbai with consultations that have taken place earlier. The state of Maharashtra needs a scheme on aftercare that is designed in the context of current age realities which can cater to a process of a decade in the life of a young person. She concluded by saying that our own son/daughter would need that much time to set short term and long term goals to get through different stages of learning and application work and to get to a stage where s/he can make a contribution to the social system. An aftercare approach cannot be standardized and it should be made flexible to incorporate different circumstances as well as combinations of approaches to suit the case specificity of both the care leaver and the care giver. She also mentioned that the offer of aftercare has to be open to all, some may take up the process to complete it but another may leave the process midway.

Session 2: Presentation of the CAP research in Delhi

Ms. Rini Bhargava, Advocacy-Coordinator at Udayan Care, began this session by presenting the objectives of the CAP research as the following:

- ✓ Understand the nature of challenges faced by care leavers in the domains of accommodation, education, physical and mental health, employment, financial management, legal literacy and social relationships

- ✓ Establish relationship between life in child care institutions and nature of challenges and opportunities faced by care leavers as young adults
- ✓ Document the emerging and promising aftercare interventions with focus on their relevance, effectiveness and innovation
- ✓ Ascertain the average number of children who exit child care institutions in targeted area every year on completing 18 years of age
- ✓ Recommend measures for interventions that will bring about qualitative improvement and robustness in aftercare activities

Ms. Bhargava briefly shared the methodology employed and the processes followed for the research in Delhi. An indigenous questionnaire was prepared by a team of researchers, statisticians, domain experts, lawyers and practitioners. This questionnaire was designed to gather empirical data, pertaining to challenges faced by care leavers, in the domains of mental and physical health, housing status, education, skills and employment opportunities, financial and legal literacy. Along with this, standardized tools – the WHO Quality of Life Scale (1995), Flourishing Scale (Diener, et al., 2009), and the Satisfaction with Life Scale (Diener, et al., 2008) – were also administered to the care leavers to establish concurrent validity of the indigenous tool and obtain further data in these positive psychology domains. Additionally, interviews with key-informants such as practitioners from government-run and NGO-run CCIs, CWC, JJB and DCPU members, were also conducted to understand the context of care leavers' situation, and the problems faced by them in the currently available aftercare programmes. The study in Delhi revealed that there is an urgent need to better organize aftercare programmes and improve the quality of support and services as mandated by the JJ Act, 2015.

The care leavers interviewed for this study belonged to both governmental and non-governmental CCIs in the National Capital Territory of Delhi; and between the ages of 17 and 29 years of age. 65% of the sample fell between the age group of 18-21 years of age which is the prescribed age bracket for aftercare services under the JJ Act, 2015. Out of the total sample of 47 care leavers, 40% of the youth had not received aftercare support. However, it was found that those who received aftercare had similar quality of life when compared to those who did not receive any form of aftercare. This suggests that the current aftercare provisions are not adequate to improve the conditions of care leavers; and their relevance, effectiveness and efficiency must be re-evaluated keeping the objectives of aftercare programmes in mind.

The study found that 60% of care leavers were still living in accommodations provided by their CCIs or Aftercare programmes. Moreover, 85% of all females who were interviewed, lived in an institutional setting even after attaining adulthood. This is in direct contradiction to the trend of deinstitutionalization all over the world. Moreover, residential services raise concerns of privacy, cleanliness, safety and security; and usually, fail to live up to adequate standards of housing.

Next, the study found that 43% of the interviewed care leavers had experienced some form of mental or emotional stress over the past one year. Family issues, unemployment and domestic violence/abuse were some of the root causes of this stress. It was also found that the females scored significantly lower than males in the Psychology domain of the WHO Quality of Life scale; suggesting that female care leavers experienced poorer psychological health than their male counterparts. There is an urgent need to further research this phenomenon and develop gender-specific strategies to address care leavers' mental wellbeing.

The study also revealed that care leavers lacked adult mentors. Factors responsible for poor social bonding of care leavers include frequent breakdowns in the continuum of care, severed attachments as one moves out of their CCI, and lack of trained and caring staff during CCI stay. The effects of unhealthy relationships, especially for girls, have also been reiterated by key-informants like social workers and caregivers in CCIs. Many of them reported frequent problems of teenage pregnancy, domestic abuse and further victimization of this vulnerable population.

Compounding on to problems faced in the domains of mental and physical health, accommodation and interpersonal relationships, achieving financial stability also remained a major challenge for care leavers. 45% of the care leavers did not have their own sources of income and relied solely on aftercare programmes, friends and family, and individual donors. Key-informants such as Ms. Anjina Rajagopal, Chief Functionary of Sai Kripa – a children's home in Delhi - reported that they spend about Rs. 10,000 per month for aftercare services to one care leaver. Although other aftercare facilities were not so forthcoming about their budgets and expenditure, all key-informants believed that the amount of Rs. 2,000/month ordained by the ICPS for aftercare of one young adult is grossly inadequate.

Regarding employment, 47% reported that they had not come across any suitable employment opportunity since they've left their CCIs; 62% believed that their current education and/or skill level was not enough to achieve their career or academic goals. Keeping the individuality of each young adult in mind, Mr. Sanjoy Roy, Trustee of Salaam Baalak Trust insists that exposure to arts, sports and entrepreneurship must be encouraged as viable career options for care leavers. Given the limited opportunities for care leavers, those who are not academically inclined have minimal opportunities to progress.

Through the discourse during the focus group discussions, interviews with key-informants and mostly importantly with care leavers, for the Delhi research, this study in its entirety has revealed a gender disparity relating to aftercare support. Although it was found that more girls receive aftercare services than boys, these services tend to be residential or institutional in nature. Rather than developing the agency of care leavers to live independently, residential services increase their dependency on other individuals or organizations for livelihood. Given the Indian context, this stems from the need of providing added safety and security to young women; however, an inadvertent effect of this approach leads poor personality development and lack of interpersonal skills. Verifying this assumption, the results showed that girls scored lower than boys on the *Social, Independence and Overall domains of the Quality of Life Scale*. Increasing interactions with the opposite sex from an early age, spreading awareness about gender roles and training in democratic skills may be introduced to counter these effects.

Ms Bhargava further informed that as a key-outcome of the study a **Care Leavers' Association and Network (CLAN)** was launched in Delhi on the 17th of March, 2018. CLAN is a youth-led, independent group of care leavers that represents, supports and advocates on behalf of all care leavers in Delhi. CLAN acts as a platform for raising resources, advocating for policy and social change, and providing informational and emotional support to care leavers. Presently, CLAN's activities of outreach have been initiated by self-motivated, voluntary alumni from NGOs and government-run CCIs in Delhi, like Prayas, Don Bosco, Deepalaya, Bal Sahyog, Udayan Care and Alipore Boys' Home. The Delhi research has also led to formation of SYLC – 'Support for Youth Leaving Care' – a group of like-minded people from the civil society and experts, professionals and practitioners from the field of child rights and child protection, to

join hands as a collective that supports and informs the activities of CLAN. SYLC provides resources, structural, informational and advisory support to CLAN as and when needed.

Session 3: Focus Group Discussions

The third session of the day was a group discussion between different stakeholders. The participants along with the guest were divided into three groups for three different group discussions.

Topics for group discussion were elaborated by **Mr. Rakesh Prajapati, CAP team member, Maharashtra, Udayan Care** under three headings as given below:

- 1) Policy, guidelines and schemes on aftercare
- 2) Aftercare Services in Practise
- 3) Support for Youth leaving Care

Presentation from the Groups

1) Group – I: Policy, guidelines and schemes on aftercare

The core argument emerged for converging existing government policies and supporting the care leavers so that they can access the benefits under already existing several welfare schemes, by different ministries. The points made by the group are explained below:

- **Aftercare as a legal right:** Any proposed scheme for care leavers needs to be based within the principle of human rights and be obligatory in nature rather than optional. It must also consider the right of every youth to ensure social justice, livelihood, equality and development. These rights could be right to housing with safety and security, safe transport, and affirmative action for education, jobs and social bonding.
- **Gender equality and aftercare:** There is a need to move beyond marriage as an option for rehabilitation of girl care leaver. The breakdown of such relationships makes them homeless again and this time around they have more burden and responsibility of children that they need to provide for as well. The issue of gender divide in aftercare requires special attention.
- **Define mainstreaming:** According to the group it is important to explain the meaning of mainstreaming. This includes removing the stigma of living in an institutional care from the care leavers, becoming a responsible citizen, having the skills to fit into a social paradigm with education and training, etc.
- **Need for a comprehensive aftercare scheme** that is backed by a policy to give girls and boys equal access to aftercare and providing the care leavers with the exposure to non-quantifiable life skills through paid internships or traineeships is an important strategy towards mainstreaming. Several care leaver's struggle to find appropriate jobs even after completing employable trainings. It is especially because they do not have work experience before entering the job market. Aligning such youth with the Government Departments for internships or job training can be useful for them.
- **Aftercare as a need based service:** The minimum standard for services under aftercare program should be drafted on the basis of a robust care plan that guides the entire journey of transition from "care" to 'aftercare' and then towards an independent living. Such plans must include both pre and post 'aftercare' stages into its ambit, ensuring that each care leaver is self-sufficient before leaving 'aftercare.'
- **Peer Mentoring:** Promoting a peer network by using different social networking sites could be effective in maintaining contact with all the care leavers.

2) Group - II: Aftercare Services in Practise

While discussing aftercare services in the state of Maharashtra, the group discussed certain challenges and opportunities as mentioned below:

- **Increase scholarships and sponsorships:** The youth within the aftercare program need more sponsorships and scholarships to complete their education and training. For example, maximum girls have the only options of taking up nursing or beauty grooming courses.
- **Involve community to get involved in care and aftercare:** Community level awareness about the issue is the need of the hour. The care leavers are supposed to reintegrate within the mainstream society and having an institutional background always attaches a stigma to them. Making the community aware about the condition of the care leavers can reduce this stigma. Similarly, the issues related to aftercare and care leavers are not known among the large section of society and therefore generating awareness might reduce this gap.
- **Convergence between NGOS to organise long term CSR support:** NGOs can create a support group for care leavers tapping the resources and seeking partnership with CSR for substituting the scarcity of funding for aftercare.
- **Clarification of who can avail the 1% reservation in jobs and education:** Currently, a youth who doesn't belong to any caste and is certified to have neither parent is eligible to receive the 1% reservation for jobs and education in Maharashtra.

3) Group -III: Support for Youth leaving Care

The third group discussed about the need and process of supporting the youth leaving care by forming a Care Leavers Association and Network (CLAN). The topic was new to all the participants and got a mixed response from the participants. Some of the participants, especially the care leavers, showed their interest and willingness towards formation of such network in Maharashtra. Most of them felt that it would be a great channel to address their emotional needs after they move out of care. Some of the government official felt that there is need to have separate CLAN network for both boys and girls but the care leavers along with few NGOs felt that this will significantly reduce the purpose of forming this network. Some core suggestions which emerged from the discussion for forming a CLAN are explained below:

- **Sensitise staff of CCI and aftercare facilities:** First of all, the staff working within the ambit of aftercare needs to be sensitized about the importance of aftercare services and how crucial their role is not just to provide one service but link it to network of services available in a geographic vicinity.
- A **resource directory** is also essential for the staff for enhancing their efficiency in implementing aftercare services for the youth.
- **The Individual Care Plan is the basis of the right to care and continuum of care:** Each care lever must have individual plan while in care.
- **Specify how CLAN will be resourced:** Private and public partnership can be used as viable options to support the formation of CLAN in Maharashtra. The State government can be approached to grant them a legal status and monetary allocations, while additional necessary funding can be managed from the support of any likeminded CSR.
- **Who would house CLAN in Maharashtra?** A dedicated government department or an NGO can be made responsible for maintaining a CLAN network by coordinating with all the CCIs and 'aftercare' hostel within Maharashtra. It needs to maintain all the details of the care leavers and organise frequent meeting with them. This will result in having a larger network of care leavers. It can be further utilised as a support system to every care leaver in need.
- **CLAN needs to be legally recognised:** Identifying already existing informal networks of the care leavers and registering them under the law. This will provide a legal status to CLAN



network and eventually every district could have a CLAN that can be as part of the JJ systems.

- **Making CLAN to be a gateway for all aftercare activity:** CLAN can be involved in several aspects related to aftercare, such as:
 - Undertaking needs assessment of care leavers
 - Regular meetings to be conducted in aftercare organisations/hostels and group homes
 - Conducting trainings with care leavers
 - Financial as well as emotional support
 - Preparing community engagement, social bonding and marriage plans
 - Providing legal support
 - Becoming Peer mentors
 - Being a collective voice of all the care leavers
 - Providing recommendations to state government on care leavers' rights

Observation of Panel and Conclusion:

The Panel Consisted of Mr Ravi Patil, Director, Women and Child Department, Government of Maharashtra; Dr. Sunil Kumar Lawate, Retd. Professor; Ms. Vasundhara Bapat, Member Child Rights Commission of Maharashtra; Ms. Alpa Vora, UNICEF, Maharashtra and Dr Kiran Modi, Udayan Care

Ms. Vasundhara Bapat said that the CCIs lack emotional touch and the care leavers face acute isolation when they leave the institution. The rules need to be flexible to allow the youth to come back to their homes for festival occasions and difficult times. She also proposed a district level aftercare counselling and guidance centre which could also provide legal support. She said that she will like to open such a centre in her own constituency of Sholapur. She committed her personal support as well pledged the support of her political party to the issue of aftercare. She suggested that there should be a district level autonomous body on aftercare that consist of young adults, NGOs and government representatives. This body can track progress of skill development and social bonding of care leavers based on the Individual Care Plan. The tracking can begin this year itself so that data can be placed for fitting into the scheme. She mentioned that the transition plan should converge with the care plan and aftercare plan. Periodic review of all care plans need to be made. This has to be linked to the tracking services which should ensure that every child under the care of the state can enrol themselves to be tracked for support for a ten-year period.

Dr. Kiran Modi emphasised that research needs to be conducted in every district to compile a resource directory which should become like a referral service through an aftercare help line. She shared details of the Innovative Bed, Breakfast and Care scheme (BBC), which was suggested during a focus group discussion in Delhi.

Conclusion: Ms. Alpa Vora, Child Protection Specialist, UNICEF concluded that that this consultative process had been a consolidation of a string of events and consultations on the issue of care and aftercare. The deliberations were rich with experiences shared by the experts as well as the stakeholders. All issues centred on professionalising the rights based approach towards aftercare. This process needs to be inclusive of those who get left behind, the girls, the disabled, children in conflict with law and those who cannot attain higher education. The state has come up with two ways forward, i.e., the 1% reservation and the openness to a creative comprehensive aftercare scheme. The NGOs have put forth a number of informal aftercare practices that need to be included in the new comprehensive aftercare schemes along with the solutions that have been provided by the participants of the workshop.

Mr. Rakesh Prajapati informed all the participants that the research with KIs and Care leavers will commence full-fledged for Maharashtra after this consultation. He thanked all the participants and requested them for support during the data collection phase of the CAP research.

Annex 1

Day 1: April 27, 2018

Hotel Panchratna, Pune, Maharashtra

Focus Group Discussions on aftercare in Maharashtra, as part of Udayan Care research, “Current Aftercare Practice” (CAP) India 2018

PROGRAMME SCHEDULE

9:30am – 10:00am	Registration
10:00am – 10:15am	– Welcome and sharing the purpose of the Focus Group Discussions by Dr. Kiran Modi, Managing Trustee, Udayan Care and Mr. Rakesh Prajapati, Research Officer, AOP, Udayan Care
10:15am – 10:30am	– Introduction of the participants by Dr. Shivani Bhardwaj, Research Supervisor, AOP, Udayan Care
10:30am – 11:30am	2 FGD on challenges and opportunities for Care Leavers in the state to capture existing Aftercare services in rural and urban Maharashtra Chair: Mr. Rakesh Prajapati, Dr. Shivani Bhardwaj and Ms. Rini Bhargava, Coordinator-Advocacy, Udayan Care Discussants: (1) Practitioners and caregivers and (2) care leavers
11:30am – 11:45am	Tea Break
11:45am – 12:45pm	– Presentation that arose from different discussions by each of the three groups
12:45pm – 1:00pm	Clarification on the key learning by Mr. Rakesh Prajapati
1:00pm – 2:00pm	Lunch
2:00pm – 3:00pm	Group discussion continued
3:00pm – 3:15pm	Tea break
3:15pm – 4:15pm	Recommendations, conclusion and vote of thanks by Dr. Kiran Modi



Day 2: April 27, 2018

Hotel Panchratna, Pune, Maharashtra

Consultation on Aftercare Practices in Maharashtra as part of Udayan Care research “Current Aftercare Practice” (CAP) India 2018

PROGRAMME SCHEDULE

9.30 – 10 Am	Registration
10- 10 15 Am	Welcome by Ms. Alpa Vohra, Child Protection Specialist, UNICEF, Maharashtra Inauguration by Shri Ravi Patil, Deputy Commissioner, Women and Child Development, Maharashtra Purpose of the consultation by Dr. Kiran Modi, Managing Trustee, Udayan Care
10.15 – 10.30 Am	Introduction of the participants – Dr. Shivani Bhardwaj, Research Supervisor, Udayan Care
10.30 – 11 30 Am	Panel discussion on challenges and opportunities for Care Leavers in the state in context of challenge faced by existing Aftercare services in rural and urban Maharashtra Chair: Ms. Alpa Vohra, Child Protection Specialist, UNICEF, Maharashtra Discussants: Shri Ravi Patil, Deputy Commissioner, Women and Child Development, Maharashtra Ms. Kashina Kareem, Project Manager, Anti-trafficking Centre, Prerana Mr. Thyagarajan Trustee and Volunteer, Vinimay Trust, Mumbai Dr. Lawate, Writer and Social Activist in Child Rights, Kolhapur
11.30 – 11.45 Am	Tea Break
11.45- 12 45 Pm	The CAP research report of Delhi: Learning from the process so far presentation discussion by Ms. Rini Bhargava, Coordinator-Advocacy, Udayan Care
12-45 – 1 pm	Topics for group discussion by Rajesh Prajapati, Research Officer, Udayan Care 1) Policy agenda and advocacy 2) Improving Aftercare services 3) Improving care leaver support system and their association in Maharashtra
1- 2 Pm	Lunch
2- 3 Pm	Group discussion
3- 3 15 Pm	Tea break
3 15 – 4 15 pm	Presentation from the groups followed by discussion on the important findings and recommendations.
4 15- 4.40 pm	Group activity on commitment building
4.40- 5pm	Conclusion and vote of thanks by Alpa Vora, Child Protection Specialist, UNICEF, Maharashtra



Annex 2

Participant list

Name of the participant	Designation and Organization
Surekha Dalvi	Asstt. Village Director
Ms. Roxana Kalyanwala	Bharatiya Samaj Seva Kendra
Priyadarshani U. Chorage	Chairperson CWC, Kolhapur
Mrunali Shambhag	Coordinator, Bal Anand, Mumbai
Vijay Johare	Coordinator, Prayas, Mumbai
Vijay Dohiphode	CWC Member
Jaya D. Kardekar	CWC member/Progressive Friends Circle
Karuna Mahantare	DCPO, Akola
Yogesh Mulkawar	DCPO, Jalgaon
Nitin Thorat	DCPO, Solapur
Yogendra N. Khandare	DCPU, Akola
Shri R. S. Patil	Deputy Commissioner, (Child Development) Women and Child Development Maharashtra State Pune
Madhavi Mhatre	Director, Bal Anand, Mumbai
Vijay K. Sarate	Director, Narayanchandra Trust
Smita Apte	Director, Pankh Organisation, pune
Ganesh B. Kanawade	District Child Protection Officer, Nashik
Ashwini Kamble	DWCD, Pune
Dr. Samata D. Tumvad	Ex. CWC, Nanded
Ms. Shalini Dabholkar	Founder and Principal Consultant, SOCIOCATALYST
Smita D. Shinde	Government After care Home, Yerwada Pune
Chandrakant Gojegave	Government Aftercare
Suryakant G. Patil	Government Aftercare Home
Nagnath B. Hake	Government Aftercare Home
Shubham Kharat	Government Aftercare Home, Yerwada
Ajay Dahanke	Government Boys Aftercare
Suvarna Patil	ICPS, Pune
V. B. Shete	JB Member, Kolhapur
Shrihari Ayeti	M.S.P.A.C Association, Pune
Mahendra N. Sambhus	M.S.P.A.C Association, Pune
Shri Kute	Maharashtra State Probation and aftercare association pune
Ms. Swarada Bapat	Member MSCPCR
Joby Edathattil	Miracle Foundation, India
S. L. Ayeli	MSPA&C Assn. Pune
Keshav Dhende	Nirankar Sikshan Prasarak Mandal
R.S. Jawale	P.O and Superintendent of Government After care Hostel, Yerwada Pune
Patkar Jyoti Raghunath	Parivartan Mahila Sanstha
Ms. Savitri Gupta	Ph.D Student, IIT Bombay, Powai
Aditya Charegaokar	Ph.D. Scholar, TISS, Mumbai
Vikas R. Kadam	Prayas, Mumbai
Ms. Kashina Karim	Prerna, Mumbai

Name of the participant	Designation and Organization
Aaheli	Prerna, Mumbai
Dhananjay T. Karambe	Probation Office, WCD, Nagpur
Bhagyashri Gursale	Program Coordinator, Udayan Care-USF, Pune
Smt Manisha Biraris	Programme Manager MSCPS pune
Shekhar Ghorgure	Pune
Ajay V. Raut	Pune
Khatal Somnath	Pune
Mr. Zaid Sayed	RCJJ, TISS
Milind Bidwai	Salam Balak Trust
Nalini Dhende	Seva Ashram, Pune
Vijay S. Baviskar	Social Worker, RCJJ, TISS
Ashok Ghadge	SOS - Executive Director
Soni Rakshe	SOS Children's Village, Pune
Aarti Deshmane	SOS Children's Village, Pune
Shraddha Tate	SOS Children's Village, Pune
Prajakta Kotwal	SOS Childrens Village, Pune
Simran Kamthe	SOS Childrens Village, Pune
Sampda Kotwal	SOS Childrens Village, Pune
Sanjay Kadam	Sperintendent of After care Hostel, Chembur, Mumbai
Shri Bhikaji G. Katkar	Sperintendent, Government After care Hostel Kolhapur
Pratima Kamble	Sr. Education Coordinator, Miracle Foundation, India
Vasanti Betjan	Sr. Manager, Justice and Care
Rajeshri S. Deokar	Sr. Project Officer, BSSK Pune
Geetarani	Student, TISS, Mumbai
Mr. Santosh Gaikwad	Superintendent of Balgram Panhala, Kolhapur
Geeta R. Jain	Superintendent, Sant. Grociya Ashram, Vasai
Thyagrajan P.	Trustee and Volunteer, Vinimay Trust, Mumbai
Ms. Rini Bhargava	Advocacy Coordinator, Udayan Care, Delhi
Dr. Kiran Modi	Managing Trustee, Udayan Care, Delhi
Dr Shivani Bhardwaj	Senior Consultant, Udayan Care, Delhi
Mr. Ankit Keshri	Research Associate, Udayan Care, Mumbai
Mr. Rakesh Prajapati	Research Officer, Udayan Care, Mumbai
Ms. Alpa Vora	Unicef, Mumbai
Mr. Vikas Sawant	Unicef, Mumbai
Mr. Paunikar	Unicef, Mumbai
Suchita Patil	WCD, Pune
Prof. Sunil Kumar Lawate	Writer and Social Activist in Child Rights, Kolhapur



