Formative Study on Parenting

Report of Findings

unicef

KANTAR PUBLIC
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<th>Abbreviation</th>
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<tr>
<td>ASHAs</td>
<td>Accredited Social Health Activists</td>
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<tr>
<td>AWCs</td>
<td>Anganwadi Centers</td>
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<td>AWWs</td>
<td>Anganwadi Worker</td>
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<td>FLWs</td>
<td>Front Line Workers</td>
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<td>ICDS</td>
<td>Integrated Child Development Services</td>
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<td>MCP</td>
<td>Mother and Child Protection</td>
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<td>TV</td>
<td>Television</td>
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<td>UNICEF</td>
<td>United Nations Children's Fund</td>
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<td>MIL</td>
<td>Mother-in-Law</td>
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<td>M</td>
<td>Moderator</td>
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<td>R</td>
<td>Respondent</td>
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Executive Summary

Section 1 – Introduction

Given the criticality of positive parenting in the early childhood and the absence of any major study focusing on parenting in the country, this study was crucial in examining how raising children (both boys and girls) is understood among different stakeholders and what sources of parenting support exists for parents. The study explored the current beliefs, roles and behaviour of parents, extended family members and influencers in caregiving; different parenting style followed; impact of gender of caregiver and the child on caregiving style; and identified prevailing support system on caregiving.

The study deployed qualitative methods of data collection using various Participatory Techniques to extract information on various aspects of parenting from primary and secondary caregivers and from children. In-depth Interviews (IDIs), Focus Group Discussions (FGDs) and ethnographic activities viz. observations are the methods used in this study. The respondent groups for the study included parents (both mothers and fathers) of male and female children in the age up to 3 years and between 3 to 6 years, grandparents (both grandmothers and grandfathers) of children up to the age of 6 years, children in the age of 8 to 10 years, the service providers such as ASHAs, AWWs, and ICDS Supervisors, and key village level influencers such as PRI members, village Sarpanch, & tribal chief/community head. To understand the influence of gender of both caregiver and child in providing caregiving, discussions were conducted separately with parents and grandparents of male and female children. This approach helped in comparing the caregiving pattern of male and female caregivers with respect to male and female children.

The study was conducted in five states- Rajasthan, Maharashtra, Madhya Pradesh, Chhattisgarh & Odisha. The districts were selected based on the methodology worked out to ensure proper representation of the Urban and Rural representation and also the SC, ST and Muslim representation at the rural level. Another consideration was to include districts that are UNICEF programming districts and/or aspirational districts in the states.

A total of 250 activities were conducted across the five study states i.e. 50 activities per state. In each state – 8 Home Observations were conducted along with 8 FGDs with children of 8 to 10 years of age, 8 FGDs each with parents (mothers and fathers) of children up to 3 years, parents (mothers and fathers) of children between the ages of 3 to 6 years, and grandparents (grandmothers and grandfathers) with grandchildren in the age up to 6 years. Four In-Depth-Interviews were conducted with key influencers and two IDIs each were conducted with service providers in each of the five study states. The Home Observations were conducted in households of children up to the age of 6 years and the average duration the observers spent the time in the household was closer to five hours. The FGDs had an average participation of 8 respondents.
Section 2 – Caregiving Practices

The primary childcare practices for a child up to 3 years of age such as bathing, feeding, putting the child to sleep were mostly done by mothers who were supported by grandmothers. Fathers and grandfathers of both 0-3-year-old and 4-6-year-old children, take the child outdoor as they go out to market. Feeding the child is one key activity where along with female caregivers the male caregivers (fathers and grandfathers) reported being involved, though the involvement is lesser and sporadic. Grandparents spend exclusive time with their grandchildren telling stories, reciting poems or singing lullabies. Their key role however is to supervise the child. The female caregivers engage children by singing songs or talking when they bath, feed/breastfeed their children below 3 years of age. Caregivers also reported that they generally put the child to sleep by gently rocking the child or the cradle. The caregivers mostly play with the child below 3 years by making funny sounds and funny faces, snapping fingers, whistling, and taking them in the lap. It is pertinent to note that the gender of the child and parents play a role when it comes to playing with child of 0-3 years of age. While only mothers of female children of 0-3 years reported to play with them, only fathers of male children of 0-3 years reported playing with them, not their mothers.

The major chunk of activities conducted by caregivers with 4-6-year-old children, remain more or less the same as those conducted with 0-3-year-old children. The addition in the childcare practices involves activities like – making the child ready for AWC or school which is majorly the mother’s responsibility; picking and dropping the child to and from the AWC or school, which is mostly taken care by the grandparents. Children’s television viewing was mostly with fathers and grandfathers while mothers reported not viewing television with their child. Fathers and grandparents, especially grandfathers, reported spending time with children exclusively for story-telling and reciting poems/songs while mothers reported involving story-telling and singing when feeding the child or putting the child to sleep. Additionally, fathers and grandfathers reported that they spent time helping the child in doing homework/studies from AWC – which involves exercises like colouring, matching shapes, identifying body parts, animals, fruits and vegetables, etc. Similar to what was reported in case of children below 3 years of age, the male caregivers take the older children of both gender outdoor and grandfathers talk to the child and buy them sweets during such outings.

As far as support received in childcare is concerned, the care of younger children (0-3 years) is mostly done by mothers with the support of grandmothers. Fathers reported to be more hands-on with 4-6-year-old children and reported low involvement with 0-3-year-old children. As compared to rural areas, fathers in urban areas were found to help and support in child care activities more. Grandmothers reported to be most engaged with 0-3-year-old children, helping mothers with massaging, complimentary feeding and watching/supervising the child. Grandfathers were found to be more involved with 4-6 year-old children.

On a typical non-school day children reported to be highly involved in household chores which were taken up voluntarily or instructed. Muslim male children’s involvement in household chores were less prevalent, however
a deviance was reported in Rajasthan state where they get involved in shepherding goats and as helper in restaurants. Completion of homework that too voluntarily, was another major component in the life of children on a non-school day. Any free time on a holiday is spent watching television or playing with siblings or friends. The female children reported gender discrimination on doing household chores as their male siblings don’t do any work and rather go out to play.

The toys children below 3 years of age play with were similar for both gender. However gender difference was observed for the elder children (aged 4-6 years). While only few parents could mention toys 4-6-year-old female children use to play with, most parents could tell the toys and games male children of the same age group play with.

The topics of value education primarily revolved around teaching good manners – how to greet elders, not to use abusive language, how to eat properly, avoid bad company and getting involved in fights. Though the major topics of value education were reported to be similar for male and female children across age groups, some gender differences were observed wherein mothers imposed time restrictions on female children and asked them to watch their clothes, be polite to people, obey elders and sit properly. Similarly, grandparents advised female children to walk slowly in front of elders and keep their eyes down, while fathers instructed them to engage in household chores.

Most children (aged 8-10 years) reported that both their parents, and in some cases even grandparents interact with them regarding how they should take care of themselves. The manner in which this communication happens is either by giving a set of physical boundaries or by instructing them regarding prevention from accidents. It was found that advice given to children is limited to their physical well-being, except for one case in which susceptibility to sexual threats were discussed with few female children in Madhya Pradesh (Rural ST), wherein they were taught about safe and unsafe touch by their school teacher.

The felt need and ways of disciplining children were discussed using open ended questions and vignettes. It was found that incidences of disciplining children at home or school or community are very inconsistent. No defined limits were made, leading to multiple and recurring occasions of disciplining. Physical aggression along with violence was widely used as a method of disciplining children. Violence has been normalised as a way of disciplining children and is accepted across respondent groups. It is pertinent to note that children not only accepted but even rationalised ‘violent disciplining’ inflicted upon them. Female children reported that while they used to get disciplined for not completing household chores, their male siblings who mostly refuse to do the chores getaway from any disciplining. Physical punishment was reported to be used to stop the undesirable behaviour in children and used as primary means of disciplining. It was found that there is little or no separation between physical violence and reported disciplining methods adopted by parents and grandparents – which range anywhere between inflicting pain to restricting movement of children.
Children (aged 8-10 years) reported to get affected by disciplining in various ways. The reported approach children adopt to normalize the usage of prevalent disciplining methods is either laughing or feeling embarrassed. Some children rationalized the impact, saying that they would be guilty of making a mistake and would never knowingly repeat them in the future. Some children mentioned that they would act out – run away, deny eating food or going to school or engaging in HH chores, isolating themselves, etc. in extreme rebellion. Overall, children reported that they would feel bad, would be in pain and resort to crying.

According to mothers, disciplining leads to short term effects in the children. They do recognise that behavioural problems in later stages of life would be a long-term consequence. As an empirical observation during the discussion, it was found that while some mothers used discipline to control children, others aimed to correct, not control the children. As per fathers, the impact of disciplining on children would be limited to, either they would cry or they would get frightened. Some fathers however perceived that repeated physical punishment would make the children stubborn and they would get habituated to the offence. Meanwhile most grandparents reported that the child will understand his/her fault once he/she is disciplined. On an overall basis it was found that there is lack of awareness regarding positive disciplining measures among parents and grandparents.

As far as acceptability of different forms of violence is concerned, it was found that there are no defined limits of physical violence used for disciplining children. A certain undefined extent is considered acceptable by all members in the family since corrective behaviour is led by the family as a whole.

Using physical violence as a method of disciplining children was reported to be acceptable to a certain extent by most of the target groups. The acceptable extent was defined by actions like – slapping with hands, beating with sticks, hitting with an object, pinching; and avoiding acts of burning, pushing, shaking and beating with implements (rods, belts).

Caregivers and children denied prevalence of violence in the household initially. But on further probing, it was found that most children have witnessed their fathers hitting their mothers. The same was validated by parents and grandparents. The factors triggering violence in the household ranges from marital conflict to alcohol consumption to food not ready/served.

As far as the impact of violence at home on the children is concerned, children reported to feel agitated upon witnessing violence at home. Some female children mentioned that they would blame themselves for the violence in the household and isolate themselves from their parents out of fear. Children of both gender perceived that they might end up doing the same thing they currently witness when they grow up. Most children felt that they are scared and don’t wish to be exposed to any violent and abusive act at the household. The caregivers reported that children would cry, become timid and withdrawn as a result of witnessing violence at home. Most grandparents however felt that the child would get conditioned and repeat the same actions in
future which is exactly what children had reported as an impact of they being exposed to violence in the household.

When the respondents were probed about the influencers who can prevent the reported acts of violence and abuse at home, most of them perceived that elder members in the family can prevent the same. For any sort of violence and abuse identified at the community level, caregivers felt that Sarpanch and local leaders can intervene to tackle the situation. Caregivers are unaware about any redressal mechanisms available at various levels to report and address violence and abuse against children.

**Section 3 – Children’s relationship with family members**

Participatory Techniques were used to understand the **association children (aged 8-10 years) make with their family members** and who do they depend upon to deal with various day to day situations. It was found that children and their siblings mostly approach their mothers followed by grandmothers in situations which are mostly confined within the premises of the household such as wanting meals, wanting to watch TV, getting permission for playing, not feeling well, etc. Children depend on both parents for other activities such as wanting help in studies or wanting to eat something special.

While **activities children (aged 8-10 years) like to do with their family members** were homogeneous and overlapped with the reported associations, dislikes were different from the associations children made with their family members, across genders and demographics. Most male and female children reported that they don’t like getting scolded by their mothers and getting beaten by their fathers. Some male and female children reported that they don’t like to do household chores or work in farms, with their family members. In addition to this, few children mentioned that they disapprove certain habits (drinking alcohol and eating **gutka**) of their fathers and elder brothers, because of which they don’t like interacting with them.

**Section 4 – Existing parenting support for caregivers**

To seek **information and support on topics related to parenting**, parents and grandparents reported to reach out to multiple sources. While most mothers approached their mothers in-law to gain easy and fast knowledge on how to raise their children, what to feed them, etc.; fathers on the other hand felt that more than their own mothers, doctors act as credible sources of information – especially in situations involving severe health issues. In contrast to this, some fathers mentioned that advice on parenting and child care was a personal matter to the family and hence they suggested that it should be discussed within family itself and not amongst neighbors and friends. Additionally, it was also found that caregivers seek external support for health related issues from FLWs, who broadly guide them regarding the same.

The **awareness level regarding prevalent schemes and services** pertaining to parenting and childcare, among parents and grandparents, was primarily limited to knowledge around immunization, usage of MCP card and
institutionalized delivery. There were a few exceptions wherein caregivers mentioned names along with details of schemes like - Ladli Yojana (Ladli Laksmi Yojna), Matru Yojana (Pradhan Mantri Matru Vandana Yojana), M-Mitra, Sukanya (Sukanya Samriddhi Yojana), and Janani Suraksha Yojana. Some fathers and grandparents were found to be aware of services such as – health camps, provision of supplementary food and, provision of free education, uniform, and scholarships in government school.

Since the awareness level of government schemes and services was found to be low among the caregivers, most of them were interested in seeking more information regarding the same from FLWs. Parents and grandparents raised their concerns and elucidated further expectations they have from ASHA and AWW, like – enhancement in facilities and improvement in the quality of education provided at AWC, provision of evening classes in the AWC, more involvement and interaction with FLWs by increasing frequency of home visits. Grandfathers particularly suggested that FLWs should at least be graduates so that they can teach English at the AWC.

Section 5 – Pre-school education

Children were positively disposed about their experience related to pre-school education. Most of them reported to have attended AWC and the associations they made with the same revolved around getting food and getting engaged in fun activities like – playing, singing, dancing, listening to and reciting poems. In a few cases children gave negative feedback with respect to their experience at AWC, mostly because of operational issues like – irregularity in sessions held at AWC, and location of AWC either far away from home or near a wine factory. Even though most children enjoyed their engagement with the AWW because of her involvement in the various activities conducted, few others had negative perceptions about her as she used physical violence to discipline children.

The involvement of parents and grandparents in children’s pre-school education was found to be very limited, only up to the extent of escorting children to the AWC – which again is predominantly done by the grandfathers, followed by the fathers. Parents reported sporadic discussions with the AWW; mothers discussed about health issues while fathers reported discussing child’s growth, learning abilities and nutrition. Grandparents mentioned about interactions with the children directly regarding the activities they performed throughout the day at the AWC.

Parents and grandparents were found to be in favour of enrolling children in AWC, and they majorly perceived that the same can be done as and when the child’s age reaches between 2 to 6 years. The perception of caregivers regarding pre-school education was supplemented by the reported benefits of pre-school education. Most parents and grandparents mentioned that the provision of basic education and free food encourages them to send their children to the AWC. Some other benefits which were charted out include – children’s ability to
develop interest in studies, get acquainted to school environment, learn discipline, develop good habits, manage time, and adjust well with peers.

Apart from the benefits, some caregivers reported to face challenges in sending their child to the AWC because of the huge distance between their homes and the AWC. On the other hand, some parents don’t prefer sending their children to the AWC because either they find it unsafe for their kids due to the AWW’s carelessness, or because they don’t trust the quality of food being provided there. Few fathers and grandparents also complained about inadequate facilities and no provision of feedback in the AWC, which act as deterrents in sending the children there.

On an overall basis, parents and grandparents reported to prefer AWC over private pre-schools mostly because of the free basic education provided at the AWC. Though the thought process of some grandparents revolved around the notion that private pre-schools provide better education and are more reliable as compared to the AWC, but since the decision of choice of pre-school education for children was found to depend upon financial and economic conditions of the family, their grandchildren had been attending sessions at the AWC.

Section 5- Insights & learnings

- A child’s cognitive ability and physical development should be aided by:
  - Suggesting parents creative ways to incorporate toys and recreation – for 4-6-year-old children
  - Teaching parents care taking practices for children – starting from stimulation to nurturing and overall development of child – for 0-3-year-old children
- There should be emphasis on ways of constructive recreation with children, because parents reported low incidence of other practices besides taking care of basic needs of child.
- Creative ways to incorporate toys and recreation to aid a child’s cognitive ability and physical development should be suggested.
- Discussions around risks to a child’s well-being and ways to mitigate them can be facilitated at household, community, and school level; along with guidance on how to carry such discussions, as currently rather than discussing and advising children, caregivers impose instructions on children.
- There is a need to restructure the current trend of “violent disciplining” by educating caregivers and influencers on how to differentiate between violence and disciplining, such that they realize the impact of violence on a child’s physical and psychological well-being and shift towards positive methods of disciplining.
- There is a need for emphasis on early education and its impact on a child’s cognitive development. Engagement of FLWs with parents on the child’s progress can be improved upon by encouraging FLWs to initiate the interactions with caretakers.
There is a need for setting clear benchmarks for good parenting practices, ways to access this information, and creation of interactive platforms.

Currently caregivers associate parenting predominantly with two key aspects – nutrition and health, hence, initiatives are required to educate them so that they consider and correct their practices and beliefs on other aspects of parenting which are currently side-lined or neglected.
SECTION: 1. INTRODUCTION
1. Introduction

1.1 Background of the Study

Parents, key caregivers, and families have the influencing power to determine a child’s chances for survival and development. The early years provide a critical window of opportunity and at the same time present the risk of vulnerability when neglected. Early experiences either enhance or diminish innate potential, laying either a strong or a fragile platform on which all further development and learning of the person, the body and the mind is built. The longer children spend in adverse environments, the more pervasive and resistant to recovery are the effects. A lack of positive relationships, inadequate supervision and involvement with children are strongly associated with children’s increased risk for behavioural and emotional problems.

Given the criticality of positive parenting in the early childhood and the recent findings of UNICEF on the limited understanding of parents with regards to parenting, a study is needed to be able to find evidence on what positive parenting practices interventions are needed. Also, since Early Child Development is one of the two main beams of the New Country Programme and since UNICEF can play a major role in influencing government policies and programmes that enhance knowledge and competencies of the parents, it is important to rethink the role of parenting and family support programmes as the key strategies to improving the well-being of the children.

1.2 Objectives

The principal objective of the formative study is to examine how raising children (both boys and girls) is understood among different stakeholders and what sources of parenting support exists for parents.

The specific objectives are:

- To assess the current beliefs, roles and behaviour of parents, extended family members, neighbours and influencers in caregiving.
- To understand the different parenting styles followed and to assess if gender responsive caregiving is present in parenting style followed.
- To explore if the caregiver’s gender or the child’s gender impacts caregiving styles followed.
- To assess the beliefs and behaviour of key influencers in the village towards caregiving and the gender norms emerging from those beliefs.
- To identify the potential sources of support to parents, caregivers, and duty-bearers with responsibilities towards children.
- To explore the opportunities, platforms, and service providers available to promote adequate parenting practices and addressing gender stereotypes.

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1 Engaging families in the early childhood developmental story, A national project conducted on behalf of the Ministerial council for education, Childhood development and youth affairs
1.3 Research Design and Target Group

The study deployed qualitative methods of data collection to assess the current beliefs, practices and behaviours of parents, extended family members and influencers regarding early child care and development. It had also assessed the various parenting/caregiving styles followed and the impact of gender of the caregiver and the child on parenting practices. In-depth Interviews (IDIs), Focus Group Discussions (FGDs) and ethnographic activities viz. observations were conducted.

The target group for the study included:

- Male and female Children aged 8-10 years
- Mothers and fathers of male and female children aged 0-3 years
- Mothers and fathers of male and female children aged 4-6 years
- Grandmothers and grandfathers of male and female grandchildren aged 0-6 years
- Service Providers (AWWs, and ASHAs)
- ICDS Supervisors
- Other Key Influencers (PRI member, village sarpanch, & tribal chief/community head)

1.4 Geographical Coverage and Sample Size Distribution

Five states are covered in the formative study- Rajasthan, Maharashtra, Madhya Pradesh, Chhattisgarh & Odisha. The following districts were covered in the above-mentioned states.

<table>
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<tr>
<th>State</th>
<th>Rajasthan</th>
<th>Maharashtra</th>
<th>Madhya Pradesh</th>
<th>Chhattisgarh</th>
<th>Odisha</th>
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<td>Districts</td>
<td>Udaipur</td>
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The districts are purposively selected based on the methodology worked out to ensure proper representation of the Urban, Rural SC, Rural ST and Rural Muslim communities living in those states and also given consideration to include districts that are UNICEF programming districts and/or aspirational districts. The programming districts and/or aspirational districts proposed by UNICEF state offices were considered to identify one district where population based criteria could be applied to select the respondent groups. This has ensured including at least one district in the study that is UNICEF programming and/or aspirational district. The population of the respondent groups within the districts has been a key factor considered for the district selection as well as allotting the respondent groups for the districts as this is vital in understanding the typical practices and knowledge of the said groups.
The following activities were carried out in the formative research across the five states:

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<th>Activity</th>
<th>Tool</th>
<th>Target Group</th>
<th>Overall Activities</th>
<th>Per state activities</th>
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<tr>
<td>Observation via</td>
<td>Observation Tool</td>
<td>Families of children (male &amp; female) aged 0-6 years</td>
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<td>8</td>
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<td>Immersions</td>
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<td>Male and female children in the age group of 8-10 years</td>
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<td>Parents of children in the age group of 0-3 years</td>
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<td>Parents of children in the age group of 4-6 years</td>
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A total of 250 activities were carried out across the five states. The urban and rural (SC, ST & Muslim) demographics were covered in the study to understand demographic specific practices and knowledge regarding parenting.

1.5 This Report

This report details the findings of the formative research in five sections. The first section details the study methodology and coverage of the study. The second section starts with detailing the day to day caregiving practices reported by caregivers and also children’s narration of their daily life. The section further covers the values imparted by parents, toys used by children, parental advice on safety and security, and disciplining methods adopted and prevalence of violence at household level. The third section details children’s relationship with family members. The fourth section details the existing parenting support system available for the caregivers. The last section provides recommendations that are based on the findings from the study.
Any variations in findings, in terms of gender of caregivers (parents and grandparents), gender and age groups (0-3 years and 4-6 years) of children, demographic groups (urban, rural SC, rural ST, rural muslim) and geography are specifically mentioned in this report.
SECTION: 2. CAREGIVING PRACTICES
2. Caregiving Practices

2.1 A typical day in the life of parents and grandparents

The nuances of interactions between children and their caregivers – parents and grandparents, were explored. The caregivers were asked about their direct and indirect involvement in their children’s lives throughout the day. It was found that well-being in general/care taking practices for children, is led by mothers and supported by mothers-in-law. Grandparents reported that the maximum time they spend with the children is during the mornings and evenings, when mothers are busy with other household chores.

2.1.1 Parents and grandparents of 0-3-year-old children

The daily activities conducted by the caregivers with 0-3-year-old children involved major childcare practices like – waking up the child, bathing, massaging, feeding, and putting the child to sleep. Mothers and grandmothers are mostly involved in these childcare activities, while fathers and grandfathers reported that they roam around with the children and take the child to the market when they go. Feeding is one activity where both fathers and grandfathers reported being involved, though lesser involvement, along with the mothers and grandmothers. Additionally, grandparents highlighted that they spend time talking to the child, narrating stories/reciting poems/singing lullabies to them and supervising them while the children are engaged amongst themselves.

M: What do you do for or with the child throughout the day?
R: We take them for a tour around in the morning and we feed them breakfast. In the evening we take care of them. They remain with us more than their parents.
M: What else you do?
R: We play with them. We tell them good stories. We give them good moral values. Don’t do like this or that. They listen to us because they remain with us most of the time. Most of the time they are with their grandparents.
M: What else you do for them after waking up?
R: We give them bath also with us.

-GRANDFATHERS, CHHATTISGARH, URBAN

M: ok. So how much time you do oil massage to your baby?
R: 20 mins
M: When you brush their teeth, how much time you generally take to complete brushing?
R: 5 mins. To brush their teeth and cleaning their mouth.
M: How much time, you make them play?
R: 2 hours
M: 2 hours? The food which feed them, how much time you take for that? Like you prepare and feed them.
R: 1 hour. Because we roam them here and there and then feed them. So it takes 1 hour.
M: How much time children take to get into sleep?
R: 1 hour or little more than that.

-MOTHERS, ODISHA, RURAL ST
Most caregivers reported that they engage in playing with the children. While mothers only reported to play with their 0-3-year-old girls, fathers mentioned that they only play with their 0-3-year-old boys.

The caregivers were probed further about the activities they do during the occasions of they spend their time with children. Key childcare practices such as bathing, massaging, breastfeeding/feeding the child were accompanied by singing songs or talk with children. Caregivers reported that they generally put the child to sleep by gently rocking the child or the cradle. Caregivers reported that playing with the child involves activities like – making funny sounds and funny faces, snapping fingers, whistling, and taking them in the lap. Grandparents’ involvement in playing with the child is mostly about encouraging the child to play and to supervise the child to keep him/her form any danger while playing.

2.1.2 Parents and grandparents of 4-6-year-old children

The major chunk of activities conducted by caregivers with 4-6-year-old children, remain more or less the same as those conducted with 0-3-year-old children; except for massaging and breastfeeding the children. The addition in the childcare practices involves activities like – making the child ready for AWC or school which is majorly the mother’s responsibility; picking and dropping the child to and from the AWC or school, which is mostly taken care by the grandparents. Children’s television viewing was most with fathers and grandparents while mothers reported not viewing television with their child. Fathers and grandparents, especially grandfathers, reported spending time with children exclusively for story-telling and reciting poems/songs while mothers reported involving story-telling and singing when feeding the child or putting the child to sleep. Additionally, fathers and grandfathers reported that they spent time helping the child in doing homework/studies from AWC – which involves exercises like colouring, matching shapes, identifying body parts, fruits and vegetables, etc. A sample from Odisha (Rural ST), depicting such exercises has been annexed in Annexure-1. Caregivers mentioned that though they don’t directly play with the children, but they supervise them while the children play amongst themselves. Only fathers and grandfathers reported taking the children of both genders outdoor. Grandfathers reported that they interact with the child and buy sweets for the child during such outings.

M: How much time do you spend with the kids in one day?
R: 1 or 2 hours a day. We go early in the morning and then return back by 5 p.m. We have only 2 hours to spend with them from 5 p.m.
R: Sometimes we will spend the time with the kid till 10 p.m. The kid will study also.
R: If the kid doesn’t sleep, then we spend time with them.
R: If they sleep during morning time then they won’t sleep in the night soon.
-FATHERS, ODISHA, RURAL ST

M: Ok! What do you do while massaging them?
R: We pat on their bodies by doing bhumiseka.
M: Bhumiseka!!! What does it mean?
R: We give them warm patting seeking heat from the earth.
M: Do you take top soil in your hands?
R: No no, we seek the warmth from earth from a distance. By doing the kids become physically strong.
-GRANDMOTHERS, ODISHA, RURAL ST
2.2 Support received in childcare on a daily basis

Mothers are primarily responsible for childcare of 0-3-year-old children, with help from the mother-in-law (MIL). Increased role of in-laws, older children in the house and spouse were reported in care of 4-6-year-old children.

Fathers reported to be more hands-on with 4-6-year-old children and reported low involvement with 0-3-year-old children. It was also found that fathers in urban areas reported to help and support in childcare activities, more than rural areas.

Among both the grandparents, grandmothers reported to be most engaged with 0-3-year-old children, helping mothers with massaging, top-feeding and watching/supervising the child. Similarly, Grandfathers were found to be more involved with 4-6 year-old children.

2.3 A typical non-school day in life of children

Both male and female children in the age group of 8 to 10 years were asked about their routine on a holiday/non-school day to understand their engagement and interaction with other family members. Throughout the day, children of both gender reported to be highly involved in household chores, like – washing clothes, kneading floor, cleaning the house, doing the dishes, fetching water, bringing things from market, helping mothers in cooking, serving food, etc. Completion of such tasks were either taken up voluntarily by the children, or they were instructed to do so, mostly by their mothers.

M: What do you do on holidays?
R: We fill the water for our homes.
M: You guys do that every day or in Sundays only?
R: We do that in alternative days.
M: Other than you who fills the water? Everyone fills the water?
R: The boys of our house.
M: Who tells you to do that?
R: Our mothers.

-MALE CHILDREN, RAJASTHAN, RURAL SC

M: What do you do on a holiday?
R: We work.
M: What work do you do?
R: We wash everyone’s clothes.

-MALE CHILDREN, CHHATTISGARH, RURAL ST
Incidences of involvement in household chores were less prevalent among male children in Urban and Rural Muslim demographics, except for male children in Rajasthan (Rural Muslim) who were engaged in shepherding goats and working in restaurants.

Apart from completion of household chores, most children of both genders mentioned voluntary completion of homework on a holiday. Few of them are also instructed to attend tuitions and classes in Madrasa by their mothers. Only Male children in Maharashtra (Rural Muslim) reported to read story books apart from their school course books on a holiday.

Most of the male and female children reported that as and when children find time, they either watch TV (mostly in urban areas) or play with their siblings and friends. Getting engaged in recreational activities like – going out with parents in the evening, visiting uncle’s place and spending time with grandparents; were highlighted by very few children in Chhattisgarh and Rajasthan (Urban) and Maharashtra (Rural ST). When probed about children’s TV viewing habits, it was found that children mostly like to watch cartoons, like – Doraemon, Shinchan, Motu-Patlu – this was more visible in urban areas because very limited incidence of TV viewing was reported by children in rural areas.
Female children in Maharashtra mentioned that while they help their mothers with the household chores, their brothers don’t do so, rather they go out to play or ride bicycle. (Rural SC)

2.4 Toys children usually play with
Caregivers mentioned that 0-3-year-old children usually play within the household premises with objects like – kitchen utensils, rattle toys, bat-ball, balloons, flowers, soft toys, dolls (mentioned only in case of girl children), mud, rattle toys, plastic animal/vehicle toys, remote control toys, tricycle, etc. No major differences in toys 0-3-year-old children play with, were reported basis the child’s gender.

Gender difference was observed in case of 4-6-year-old children, where only a few mothers and grandfathers talked about toys with which 4-6-year-old female children like to play with, while others only highlighted the toys and games played by 4-6-year-old male children. This primarily included – riding bicycle, playing ludo, carom, marbles, gilli-danda, etc. Parents (both fathers and mothers) across states and grandmothers in Odisha and Chhattisgarh highlighted mobile phone as toy with which both 0-3-year-old and 4-6-year-old children like to play with.

2.5 Values imparted by parents and grandparents
Advises given to children by their caregivers were found to be generic, and were most commonly passed on to the children via instructions or by showing examples – for both 0-3-year-old and 4-6-year-old children. The topics of value education primarily revolved around teaching good manners – how to greet elders, not to use abusive language, how to eat properly, avoid bad company and getting involved in fights. Though the major topics of value education were reported to be similar for male and female children across age groups, some gender differences were observed wherein mothers imposed time restrictions on 4-6-year-old female children and asked them to watch their clothes, be polite to people, obey elders and sit properly. Similarly, grandparents advised 4-6-year-old female children to walk slowly in front of elders and keep their eyes down, while fathers instructed them to engage in household chores. It was found that in case of 0-3-year old male and female children, the primary topic of value education was to instruct them regarding not leaving the household premises for playing.
Most grandfathers and some fathers were also involved in imparting religious education to the children of all age groups and gender.

2.6 Safety and security of children

Threats to a child’s safety and precautions undertaken were explored as both caregivers and the children were asked about the topics of discussion revolving around children’s self-protection. It was found that parents and grandparents interact with children from their early age regarding how they should take care of themselves. This was done either by communicating a set of physical boundaries or by instructing them regarding prevention from accidents.

While most parents and grandparents mentioned threats like – danger from water bodies, hot objects, wild animals (leopards and snakes), road accidents, abduction, sharp objects, electrical appliances, insects, dogs, etc. few fathers in Maharashtra (Rural Muslim) and Chhattisgarh (Urban) reported that diseases and mental injuries can act as threats to both male and female children of all ages, respectively. Most fathers and some grandparents even considered witnessing physical violence at home is a form of threat for the children of both gender and age groups. Mothers in Maharashtra (Urban and Rural SC) highlighted that female children also face threat of rapes. Some grandparents felt that missing immunization sessions and watching inappropriate things on television pose as threats for their grandchildren, while only a few grandfathers in Maharashtra (Rural Muslim) recognised that girl children can face sexual abuse or violence.
Children of both genders reported receiving many instructions about how to keep themselves safe. These parental advisories can be categorised into two- about physical boundaries and about prevention from accidents. The parental advice on physical boundaries includes - not engaging with strangers or an intoxicated people, returning home directly after school gets over, avoid going alone outside especially when it gets dark, not getting involved in fights while playing, and avoid going near water bodies/wells. Parental instructions regarding prevention from accidents included- crossing the road safely, being safe while playing by not running on the stairs/peeping down from roof top/playing with stones and in the mud or with sharp objects, staying away from animals and insects, and not touching electrical appliances or sockets. Gender difference was observed in Madhya Pradesh (Rural SC), where only female children were instructed to not go to someone else’s place for playing. Boys in Odisha reported that parents advised them not to eat stale food.

M: There are danger lurking all around our small children. Can you tell me about other dangers?
R: The water heaters are very dangerous. Table fans where they push their fingers in, cooking oven, also dogs in the neighbourhood.
-FATHERS, MADHYA PRADESH, RURAL ST

M: In the village what are the things that are harmful to the child?
R: Lot of things like Tapti River.
R: We are scared that if our child playing around the river.
R: Or if you play at the roadside.
R: With the animals.
R: Look our house is having four floors we have to take care that she should not be running on the stairs.
R: If he doesn’t pull out of the bed.
-MOTHERS, MADHYA PRADESH, RURAL MUSLIM

M: Tell me what all has your mother told you?
R: She told me that don’t take anything from the person who is drunk, smokes or who doesn’t do anything. They are bad people.
M: What else did she tell you?
R: She told me to be safe from hot objects.
-FEMALE CHILDREN, RAJASTHAN, RURAL SC

M: We all know that we need to stay alert, and protect ourselves. Can you all tell me what all can trouble us?
R: Bus, cars, trains.
R: Sir Knife, Sword, Fire
M: What else?
R: Lightening.
M: Has anyone ever discussed with you all before on this?
R: Yes, sir our parents.
M: What all have they told you?
R: That sir, don’t fight with any one, don’t steal anything,
M: What else?
R: Don’t touch any one’s belongings.
M: What else?
R: Don’t go anywhere without seeking permission.
-MALE CHILDREN, CHATTISGARH, RURAL MUSLIM
It was found that advice given to children is limited to their physical well-being, except for one case in which susceptibility to sexual threats were discussed with few female children at school level. In Madhya Pradesh (Rural ST), few female children were taught about *safe and unsafe touch* by their school teacher, who had also advised them to pinch the person who tries to touch them.

Parents and grandparents reported that implications of the above mentioned threats would majorly lead to physical injuries, thus harming the children. It was found that to mitigate the threats and danger to children’s well-being, caregivers develop self-regulatory skills by teaching them events that are predictable and their implications for self-protection. Parents and grandparents also reported to protect their children by monitoring their whereabouts and activities to prevent them from physical harm. Grandparents reported to supervise the children while they are engaged in activities among themselves, such that they are protected from physical injuries.

On further probing it was found that grandmothers are entrusted the most with the care of children in the absence of primary caregiver of the household. Any family member like aunts, uncles, elder siblings can take

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*M: What else you tell your kids?*
*R: Not going on road, should not go out of the school.*
*R: If we are at home then we should take care of our house, don’t give anyone anything if asked and keeping doors closed. If someone comes then we warn our children not to go out, if someone new comes in the society then we should tell our parents and not anyone*
*R: There is a risk of vehicle, people drive vehicles fast and kids don’t have the judgment of vehicles. Usually people don’t see whether there are kids on road or not, they just dash you and leave.*

- **MOTHERS, MAHARSHTRA, RURAL MUSLIM**

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*M: How do you ensure that the child remains safe from the mentioned threats and dangers?*
*R: We just tell them to stay away from these things.*
*R: That this is a cat and dog, it will bite not to go near it*
*R: Even water. When the child goes out and play, then also we take care*
*R: We see that there should not be any such thing lying down which will be harmful for them.*

- **GRANDFATHERS, RAJASTHAN, RURAL ST**

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*M: What advice do you give to your children about how they will not face danger situations, like you had said before you advise them not to go out what else you advise them?*
*R: I advise them to wear shoes in rainy season, if you remain bare feet you can get cold etc.*
*R: The dangers which is for age 3 year girl it’s same to age 4 and age 5 girl child! So what you advise them?*
*R: We advise them not to go to fire, your hand will be injured by burn, not to go to water reservoirs, because you might fall in water as they do not know swimming, there might be snakes, frogs. They might bite you. We say like this.*

- **FATHER, MADHYA PRADESH, RURAL SC**

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*M: Tell me has anyone told you how to defend yourself if someone disturbs you?*
*R: Yes, teacher told us.*
*M: What did she say?*
*R: She said if someone comes close to you then hit him or pinch him.*

- **FEMALE CHILDREN, MP, RURAL ST**
care of the child in the absence of the child’s mother and grandmother. Some grandparents mentioned that they trust their neighbours to watch over their grandchildren in absence of all family members.

2.7 Disciplining children in the household
Felt need and ways of disciplining children were discussed using open ended questions and vignettes with all the respondent groups. It was found that incidences of disciplining children at home or school or community are very inconsistent. No defined limits were made, leading to multiple and recurring occasions of disciplining. Physical aggression along with violence was widely used as a method of disciplining children, and is accepted across respondent groups.

2.7.1 Occasions on which children (8-10 years of age) reported to be disciplined at home
Most male and female children in the age group of 8 to 10 years reported the following occasions of getting disciplined at home:

- Disobeying parents and not completing the assigned tasks
- Not willing to study or not completing homework
- Fighting with siblings
- Being naughty and damaging things at home – jumping on sofa, breaking cycle, drawing on walls, riding the cycle in mud, breaking precious things like lipsticks, tearing notebooks in anger, etc.
- Refusing to do HH chores or not taking them up voluntarily
- Playing or watching TV for too long

There were specific disciplining occasions reported by children of both genders. Female children mentioned that they get disciplined while interfering in between their parents’ fights [Maharashtra (Rural SC)], for scoring less marks and for leaving hair open [Chhattisgarh (Rural Muslim)] and for making frequent unnecessary demands/losing money/refusing to eat food [Chhattisgarh (Rural ST & Rural Muslim)]. The male children reported that they get disciplined if they refuse to work in fields and in hotels [Rajasthan (Rural SC & Rural Muslim)] and for disrespecting elders and abusing [Maharashtra (Rural Muslim)].

Gender biasness in disciplining was reported regarding household chores. Some female children in Maharashtra (Rural SC) and Rajasthan (Rural ST) reported that they would be disciplined for not completing household chores, while their male siblings who mostly refuse to do the chores get away from any disciplining.
2.7.2 Occasions on which children reported to be disciplined outside the home

Outside the home, most male and female children reported to get disciplined at school and in the community. In school the major occasions that lead to disciplining are – not completing homework, long periods of absence, picking fights with someone, making noise in class, not greeting teachers, not paying attention in class, not being well groomed: untidy nails/uniform, cheating in exams, and engaging in acts of theft. The children reported that they get disciplines in their community if they pick up fights in public, irritating elders in the community, damaging someone’s belongings, playing around insects and reptiles like snakes.
2.7.3 Occasions on which parents and grandparents reported to discipline children

The caregivers reported that they discipline children aged till 6 years at home when they misbehave or disobey elders. It was found that corrective behaviour (punishment, reinforcement) is led by family as a whole.

The primary occasions during which parents and grandparents reported to discipline children at home include:

- Throwing away things in the house
- Not sleeping on time
- Peeing outside the toilet
- Acting stubborn/adamant and making unnecessary demands like – going to the washroom, demanding money
- Throwing food
- Making noise through plate or other utensils
- Irritating elders while they are engaged in some work
- Fighting with siblings
- Refusing to go to school
- Watching TV for too long

Similarly, the caregivers mentioned that children are disciplined outside the home when they tease animals, pick up fights with other children, use foul language, interact with strangers, play in dirty water or with mud, and make their surroundings dirty.

2.7.4 Ways by which parents and grandparents reported to discipline children at home

It was found that there is little or no separation between physical violence and reported disciplining methods – which range anywhere between inflicting pain to restricting movement of children.
Physical punishment was reported to be used to stop the undesirable behaviour in children of both age groups and used as primary means of disciplining.

<table>
<thead>
<tr>
<th>Verbal Abuse</th>
<th>Verbal Intimidation</th>
<th>Emotional Abuse</th>
<th>Physical Violence</th>
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<tr>
<td>Parents</td>
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<tr>
<td>• Shouting</td>
<td>• Creating fear using reference of</td>
<td>• Restricting movement - sending</td>
<td>• Beating with stick</td>
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<tr>
<td>• Scolding</td>
<td>complaining to principals, etc.</td>
<td>child outside home, keeping children</td>
<td>• Hitting with whatever comes handy</td>
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<tr>
<td>• Abusing</td>
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<td>at a high place</td>
<td>• Tying a child to the bed (Mothers)</td>
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<td></td>
<td></td>
<td>• Criticising</td>
<td>• Tying legs to chair (Fathers)</td>
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<tr>
<td>Grandparents</td>
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</tr>
<tr>
<td>• Shouting</td>
<td>• Creating Fear</td>
<td>• Denying food</td>
<td>• Slapping, twisting ears</td>
</tr>
<tr>
<td>• Scolding</td>
<td></td>
<td></td>
<td>• Beating with sticks</td>
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<tr>
<td>• Abusing</td>
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<td>• Tying the child with rope/chain</td>
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Violence has been normalised as a way of disciplining children, and is accepted across target groups – be it parents, grandparents or children themselves.

- **FATHERS, MADHYA PRADESH, RURAL ST**

M: What about scolding and slapping the child?
R: It's also not right, it too possess some problem in future. As they grow old they become stubborn and immune to all the scolding. The essence of scolding is lost altogether.

- **GRANDFATHERS, RAJASTHAN, RURAL ST**

M: What are the other ways utilized to discipline children?
R: Yes, we might also tell them like if you don’t listen to us then we will tie up your hands.
R: Yes, we can tie them
R: if their hands are tied up then they are not able to do anything.

- **GRANDFATHERS, MAHARASHTRA, RURAL MUSLIM**

M: The child did not listen to the grandmother and continuously kept on throwing food out of the plate. The grandmother gets angry and comes out of the kitchen. What will happen next?
R: Grandmother would beat her up. She would say I have made food for you and you are throwing it away she would abuse her.
R: Chhinal Raand (you prostitute) why are you throwing the meal? I have made the food with so many efforts and you are throwing it away.
R: She would use abusive language once and later she would feel bad about it.
R: Grandfather would beat grandmother up, why did you beat her up.

M: Now tell me for a 6-year-old girl till what kind of punishment is okay?
R: You can hit a child only till her body marks come, there should not be any body marks on her body, cannot go this extent.
R: Some they show weapons also
M: Which kind of weapon sir?
R: Knife, just to scare them if you don’t do this we will hit you.

- **GRANDFATHERS, MP, RURAL ST**
2.7.5 Ways by which children reported to be disciplined

Children in the age group of 8 to 10 years reiterated similar methods of disciplining which were reported by parents and grandparents – ranging from verbal abuse to physical violence as listed below.

<table>
<thead>
<tr>
<th>Verbal Abuse</th>
<th>Verbal Intimidation</th>
<th>Emotional Abuse</th>
<th>Physical Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Shouting</td>
<td>• Threatening:</td>
<td>• Denying food</td>
<td>• Slapping,</td>
</tr>
<tr>
<td>• Scolding</td>
<td>complaining</td>
<td>[Female children</td>
<td>thrashing,</td>
</tr>
<tr>
<td>• Abusing</td>
<td>to father.</td>
<td>– Maharashtra (Rural SC)]</td>
<td>twisting ears</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Locking in room</td>
<td>• Beating with objects –</td>
</tr>
<tr>
<td></td>
<td></td>
<td>[Female children – MP (Rural ST)]</td>
<td>sticks, <em>tempa</em>, pipe, slippers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Directing to do HH chores</td>
<td>• Tying hands and legs with</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>rope/chain [Male children –</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>MP (Urban &amp; Rural ST)]</td>
</tr>
</tbody>
</table>

**AT HOME**

- Shouting
- Scolding
- Abusing
- Threatening: complaining to father.
- Complaining to Principal
- Giving extra homework
- Directing to squat holding ears with head between their knees
- Directing to do sit-ups
- Isolating – directing to sit on the floor/stand outside the class while raising hands or holding ears
- Directing to clean the classroom
- Tearing notebook
- Beating with sticks, pipes, scales
- Throwing dusters
- Directing to stand outside under sunlight
- Not permitting to play outside
- Slapping

Most children of both genders mentioned that they either approach or are approached by their elder siblings, grandparents, uncles and aunts after they’re disciplined at home.

Some male and female children in urban areas of Chhattisgarh and Rajasthan, and male children in Rajasthan (Rural ST) reported to approach their parents in cases of disciplining at school or community. Other female children in Rajasthan (Rural Muslim) and Chhattisgarh (Rural ST), and male children in Rural Muslim areas of
Madhya Pradesh and Maharashtra, rationalized disciplining at school and didn’t feel the need to approach anyone.

M: Now Rahim goes to school and he was watching some kids playing cricket outside window, what do teacher do?
R: She would beat with stick or hands.
R: In school it is normal to get beat.
R: Whoever is clever will not get beating.
M: With what do you get hit?
R: Stick and hands.

-MALE CHILDREN, RAJASTHAN, RURAL ST

M: But many times we leave the house without informing anyone, then what will happen?
R: Will get beatings.
R: They hang us on top and they chain us and tell us to stay at home and study.
M: They chain you and tell to study?
R: Yes they say stay here only now and eat here only.
M: Do they beat in your school?
R: Yes.
R: In our Madarsa they bend us and beat with the pipe.
M: What happens?
R: They make us lie on the bench and hold our hands and legs and beat us with the pipe.
R: They keep beating till they are not tired.
M: The Hafeez beats you till he is not tired?
R: Yes.

-MALE CHILDREN, MP, URBAN

M: How do your parents beat you?
R: Hands or with stick.
R: Stick.
M: What do you call it?
R: CHADI [cane]
M: What else does she do?
R: She says bad words.
M: Which bad words will she use for you then; can you name some bad words?
R: EK DEU KA THAPPAD.
R: KHUP SHANI BANLI KAA.
R: JAST SHEFARLI KAA.
M: What does that mean?
R: Are you very smart?
M: Ok, you said that your brother won’t wash clothes & utensils so will he get beating from your mother?
R: Brother will go and fly kites.
M: If your brother is not washing clothes or utensils then he also gets beating?
R: No.
R: If he beats other boy then only he will get beating.

-FEMALE CHILDREN, MAHARASHTRA, RURAL SC
2.7.6 Ways in which children reported to get affected by disciplining

Both male and female children normalized the usage of prevalent disciplining methods, by either laughing or feeling embarrassed. Some female children rationalized the impact, saying that they would be guilty of making a mistake and would never knowingly repeat them in the future. Some male children mentioned that they would act out – run away, deny to eat food or go to school or engage in household chores, isolate themselves, lie, etc. in extreme rebellion. Overall, both male and female children reported that they would feel bad, would be in pain and resort to crying.

2.7.7 Ways in which parents and grandparents feel children are impacted by disciplining

It was found that there is increased use of harsh discipline and less of supportive parenting from the caregivers, which in turn affects the child’s behaviour and expected to cause problems.

Most mothers believed that disciplining leads to short term effects in the 4-6-year-old male and female children – such as crying and being sad; and long-term consequences were considered to be behavioural problems in later stages of life. As an empirical observation during the discussion, it was found that while some mothers used discipline to control children, others aimed to correct not control the children.

Fathers on the other hand highlighted that 4-6-year-old male and female children would either cry or get frightened upon disciplining. Some fathers perceived that repeated physical punishment would make the male
children stubborn and they would get habituated to the offence. Few fathers also believed that making the children understand their mistake and talking to them would help once they are disciplined.

Most grandparents reported that the child will understand his/her fault once he/she is disciplined. Many specified that usually children are not impacted by any of the disciplining methods used, as they forget in some time and get involved in some other activity.

On an overall basis it was found that there is lack of knowledge and awareness regarding positive disciplining measures.

### 2.7.8 Acceptability of different forms of violence

The incidence of thirty-three different forms of violence and abuse were discussed with all the respondent groups to understand their acceptance – whether or not they feel it is okay to inflict a particular form of violence on children. These thirty-three forms of violence have been broadly categorized during analysis, as listed below:
It was found that there are no defined limits of physical violence used for disciplining children, but a certain undefined extent is considered okay to be done by all members in the family since corrective behaviour is led by the family as a whole. The degree of acceptability of the four categories of violence across the respondent groups have been depicted below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Physical Violence</th>
<th>Verbal Abuse</th>
<th>Emotional Abuse</th>
<th>Witnessing Physical Violence/ Verbal Abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female Children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male Children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mothers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fathers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grandmothers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grandfathers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Legend: Okay to inflict | Okay to inflict up to a certain extent | Not okay to inflict

When caregivers and children were asked that whether witnessing physical violence or verbal abuse at home or outside the home, is okay for children or not, most of them denied. The only exception was in case of Chhattisgarh (Urban), where female children reported that they have witnessed a lot of violence in their families and hence it was okay for them to get verbally and psychologically punished. Hence, there was a difference in the reported perception and actual behaviour being practiced.

It was reported that using physical violence as a method of disciplining children was okay to a certain extent by most of the target groups. The acceptable extent was defined by actions like – slapping with hands, beating with sticks, hitting with an object, pinching; and avoiding acts of burning, pushing, shaking and beating with implements (rods, belts).

Female children, fathers, and grandparents said that it was okay to verbally abuse children up to a certain extent, which is confined to actions of shouting on the child, blaming them and criticising them. It is pertinent to note that most mothers and male children perceived that along with shouting, blaming and criticising, calling hurtful names and subjecting the children to bad language are also accepted forms of disciplining.
Caregivers perceived that it is somewhat okay to use emotional abuse as a method of disciplining children – confining it to actions of restricting movement, denying food, ignoring, and neglecting the child, creating fear, comparing, and sending the child away from home (especially sending out male children of the house). Though both male and female children reported to have been abused emotionally while punished, major contradiction in perceiving emotional abuse was reported by male and female children. Male children considered that is not at all okay to emotionally abuse children for disciplining them, whereas female children felt that it is completely okay to do the same. A reported deviance was with female children in Chhattisgarh (Rural Muslim) who considered use of any form of violence and abuse as a means of disciplining to be unacceptable, though they reported to have faced psychological, verbal, and physical punishments.

2.8 Prevalence of violence in the household
Caregivers and children though denied prevalence of violence in the household initially, when probed further, it was found that most children have witnessed their fathers hitting their mothers; and the same was validated by parents and grandparents.

2.8.1 Factors leading to violence at home
All target groups were probed about the factors that trigger violence at home. Effective use of vignettes to initiate the conversation around violence at home has brought out the following information from all target groups for the study.

<table>
<thead>
<tr>
<th>CHILDREN</th>
<th>MOTHERS</th>
<th>FATHERS</th>
<th>GRANDPARENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Level</td>
<td>Individual Level</td>
<td>Individual Level</td>
<td>Individual Level</td>
</tr>
<tr>
<td>• Misbehaving</td>
<td>• When respondents don’t do HH chores properly</td>
<td>• When fathers come home late and mothers are upset</td>
<td>• The parents can have fights because of any trivial issue ranging from not doing HH chores to the wife being asleep when the husband comes back home.</td>
</tr>
<tr>
<td>• Fighting with siblings</td>
<td>• When mothers beat child, father asks not to beat child</td>
<td>• When respondents drink alcohol, potential fights can happen</td>
<td></td>
</tr>
<tr>
<td>• Not taking up HH chores voluntarily</td>
<td>• When food is not served on time</td>
<td>• When they return home after a long day, and food is not prepared by the mother</td>
<td></td>
</tr>
<tr>
<td>• Refusing going to school and studying</td>
<td>• When they take more time to get ready before going somewhere</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Refusing to work in hotel or shepherding goats</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Negligence towards younger siblings</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAMILY LEVEL – MOTHER RELATIONSHIP</th>
<th>FAMILY LEVEL – MOTHER RELATIONSHIP</th>
<th>FAMILY LEVEL – MOTHER RELATIONSHIP</th>
<th>FAMILY LEVEL – MOTHER RELATIONSHIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>• When mother abuses and beats the child</td>
<td>• When husband and wife doubt each other’s loyalties</td>
<td>• When fathers and mothers argue and/or quarrel</td>
<td>• When husband and wife doubts each other’s loyalty</td>
</tr>
<tr>
<td>• Not preparing food properly and/or timely</td>
<td>• Quarrel between mother in law and</td>
<td>• When the food is not packed in the tiffin</td>
<td>• Polygamy can lead to feuds in the</td>
</tr>
</tbody>
</table>
### Family level – Father
- Father is in a drunk state
- Fathers return home late in the night
- Fathers don’t complete the chores given by mothers
- Unemployment
- Money lost in gambling

### Community
- Consumption of alcohol by male members in family
- When father comes late from work
- Financial problems
- Poverty

### Community
- Alcohol consumption by male members
- Unemployment

---

**M:** Does your father hit mother when he is drunk?
**R:** Yes.
**M:** When your father comes drunk, what are the reasons behind those fights?
**R:** Actually he uses abusive words.
**R:** Suppose she had done something. Actually he is unconscious after he drinks and he is not to his mind, so when he asks for something and that is not available he directly starts abusing our mother.

- **MALE CHILDREN, MAHARASHTRA, URBAN**

**M:** Tell me why do your parents fight at home?
**R:** If father comes home and he is drunk, mother fights with her because mother asks for money from father.
**M:** What else causes fights at home?
**R:** When I and my brother do something naughty, then they scold and fight.

- **FEMALE CHILDREN, ODISHA, RURAL ST**

---

2.8.2 Ways in which children reported to get affected by violence in home

- Children reported to feel agitated upon witnessing violence at home. The also mentioned that they would try to stop fights.
- Some female children mentioned that they would blame themselves for the violence in the household and isolate themselves from their parents out of fear. They perceived that they might end up doing the same thing when they grow up.
- A few male children reported that they would feel anger towards their father to the extent that they will threaten them – by hitting their father with stones, start living away from home.
- Most children felt that they are scared and don’t wish to be exposed to any violent and abusive act at the household.

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**Formative Study on Parenting – Report**
Few male children in Odisha (Rural ST) perceived that upon witnessing violence at home, they will not be able to open up and share their feelings with anyone.

**M:** How do you feel when you get scolded?

**R:** We cry and we feel bad.

**R:** We feel a lot of pain, we are not able to talk to anyone.

**R:** Yes, we don’t feel like talking to anyone after getting scolded and beaten.

---

**M:** How do you feel when father thrashes mother?

**R:** We feel bad.

**M:** What exactly do you feel?

**R:** We feel odd from inside.

**R:** We feel stressed.

**R:** We feel afraid.

**R:** We shiver.

**R:** I don’t feel nice. I feel very bad.

**R:** I feel like saying bad things about father.

**R:** I don’t feel like talking to him.

**R:** They hit us if we intervene.

**M:** They hit you if you intervene?

**R:** They hit us by mistake.

**R:** They throw something at one another and we come in between.

**R:** Sometimes they throw phone at each other.

**R:** Sometimes they throw stick, stone at each other.

---

**M:** When all these things happen, there is fight between parents. What affect did it have on children?

**R:** Children will do the same things as their parents do when they become older.

**M:** How do you feel?

**R:** We feel Bad (Chorus).

**R:** I don’t feel like talking to anyone.

---

2.8.3 Ways in which parents and grandparents feel children are impacted by violence in home

Across target groups, caregivers reported that children would cry, become timid and withdrawn as a result of witnessing violence at home. Most grandparents felt that the child would get conditioned and repeat the same actions in future which is exactly what children of 8 to 10 years of age had reported as an impact of them being exposed to violence in the household.

When the parents and grandparents were probed about the influencers who can prevent the reported acts of violence and abuse at home, most of them reported that elder members in the family can intervene and prevent the same. For any sort of violence and abuse identified at the community level, caregivers felt that Sarpanch and local leaders can intervene to tackle the situation.
Even after enough probing, it was found that parents and grandparents are not aware about existence and availability of redressal mechanisms to report violence and abuse against children at the block, district, and state level. Thus, knowledge of any formal or informal institutions tackling violence and abuse against children doesn’t exist beyond village level, among the target groups.

M: Are there any important people who stop the fight in the village?
R: Yes, sarpanch is there.
R: Ward member and Mukhia are also there.

-MOTHERS, ODISHA, RURAL SC

M: Ok. Does your village have any parenting system; is there any supportive unit in your village to teach the parents?
R: No
M: Does someone give any support in your village?
R: No.
M: At the block level do you have someone?
R: No we don’t have anyone.
M: Is there someone at the district level?
R: No I don’t have an idea about it.
M: Don’t know, Ok. Is there someone at the state level?
R: No, as we don’t know about district level only then how can we say about state level.

-GRANDFATHERS, MAHARASHTRA, RURAL ST

M: And if you get to know that any child is being abused, beaten at home, his father drinks and beats him or anything like that, then is there any organization or officers or help centres or NGO where people can go?
R: We don’t know anything about this.
R: And even if people go and tell, they will say you mind your own business.

-FATHERS, RAJASTHAN, RURAL SC

M: Is there any private committee/NGO which would put restriction on child violence? Do people come to village to teach you something?
R: No.
M: If any problem happens to children due to violence, do people come from district level or block level?
R: No.
M: Have you ever visited someone to talk about such things? Or do you know of someone who has?
R: No. We don’t have knowledge regarding this

-MOTHERS, ODISHA, RURAL MUSLIM
SECTION: 3. CHILDREN’S RELATIONSHIP WITH FAMILY MEMBERS
3. Children’s relationship with family members

3.1 Associations children make with their family members
Both male and female children between the age group of 8 to 10 years were asked to mention words/phrases which they associated their family members with. Below chart details out the associations children have made with their key family members:

Similar associations were reiterated in a participatory activity conducted with the children, which involved them to drop chits in various cups, symbolising different family members. Different chits depicted different activities which are part of the daily schedule of children. This activity helped in understanding the family members who the child and his/her sibling approach throughout the day for various enlisted activities. The quantitative representation of results of the same has been annexed in Annexure-1 and Annexure-2. It was found that for activities which are mostly confined within the premises of the household, like – wanting meals, wanting to watch TV, getting permission for playing, not feeling well, etc. children and their siblings mostly approach their mothers followed by grandmothers and also elder siblings in some cases. For other activities like – wanting help in studies or wanting to eat something special, children and their siblings approach both their parents. When it comes to siblings fight or someone bulling in the school the male and female children reach out mostly to their fathers and mothers respectively. When it comes to scolding from teacher both male and female children approach their fathers first.
3.2 Activities children like and dislike to do with their family members

In order to understand the level of involvement of different family members in children's daily life both male and female children (8-10 years of age) were asked about the things they like to do with their family members. Upon questioning, it was found that while activities children like to do with their family members were homogeneous and overlapped with the reported associations, dislikes were distinct and pronounced across genders and demographics. Most male and female children reported that they don’t like getting scolded by their mothers and getting beaten by their fathers. Female children in Madhya Pradesh (Rural ST and Rural Muslim) along with male children in Maharashtra (Rural ST) mentioned that they don’t like to do various household chores with their mothers. Similarly, female children in Maharashtra (Rural SC) highlighted that they don’t like to work in farms with their grandmothers, wherein they are required to pick cotton.
Further, few female children in Madhya Pradesh (Rural SC) and in Rajasthan (Urban) highlighted that they don’t like to study with their grandmothers and their fathers, respectively.

Apart from the above mentioned findings, the following were reported specific to gender of children and geography:

- Male children in Maharashtra (Urban) don’t like to play with their fathers because they feel shy to do so
- Male children in Maharashtra (Rural SC and Urban) don’t like to interact with or be in the presence of their fathers after fathers come home drunk
- Female children in Madhya Pradesh (Rural SC) and Chhattisgarh (Rural SC) don’t prefer to sleep with their fathers.

In case of elder siblings, most children mentioned that while they like to irritate them on certain instances, but they are not fond of engaging in fights with them. Male children in Maharashtra (Rural ST) reported that they don’t like to bathe with their elder sisters, and those in Maharashtra (Rural SC) said that they don’t like their elder brothers, because they eat gutka and verbally abuse them.
SECTION: 4. EXISTING PARENTING SUPPORT FOR CAREGIVERS
4. Existing parenting support for caregivers

Discussions regarding awareness pertaining to existing parenting support available were conducted with the parents and grandparents.

4.1 Prevalent sources of information for parents and grandparents of 0-3-year olds

Parents and grandparents were probed to find out whom they reach out to for support and information related to parenting. Below are the major sources of information as reported by them, along with the reasons for approaching them:

<table>
<thead>
<tr>
<th>Sources of Information</th>
<th>Reasons for approaching the reported sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>To understand about food and care taking practices</td>
<td>To gain knowledge about overall health of the child</td>
</tr>
<tr>
<td></td>
<td>To take their opinion during serious illness of the child</td>
</tr>
<tr>
<td></td>
<td>To know about general childcare and parenting practices</td>
</tr>
</tbody>
</table>

While most mothers felt that the most credible source of information for them is their mothers-in-law as they can gain easy knowledge from them on how to raise children; fathers perceived the same, except in severe health issues where they prefer to consult the doctors. Some mothers in Chhattisgarh (Rural SC and Rural Muslim) reported that they prefer to consult shamans over conventional health care practitioners when it comes to the health or illness of children. In Rajasthan (Rural Muslim) and Odisha (Rural Muslim), some fathers mentioned that advice on parenting and child care was a personal matter to the family and hence they suggested that it should be discussed within family itself and not amongst neighbours and friends.

On an overall basis, it was found that external support is only sought for health related issues and FLWs are consulted first, and on their reference doctors are approached. Thus, broadly FLWs guide and support parents on matters pertaining to health and limited advice are provided on other nuances of childcare practices.
4.2 Reported awareness of parenting schemes and services by parents and grandparents

When parents and grandparents were explicitly asked about prevalent services and schemes related to parenting and childcare, they reported awareness of multiple resources they can reach out to for childcare – but it was found that the concept of childcare was itself limited to a child’s physical health and not remotely related to cognitive growth or psychological growth.

The various schemes and services mentioned by caregivers are listed below. Further, the reported understanding of the schemes have been triangulated with the actual details and included in sub-section 4.3.

<table>
<thead>
<tr>
<th>MOTHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Across states and demographics, mothers mentioned immunization, usage of MCP card and provision of institutional delivery as parenting services available to them.</td>
</tr>
<tr>
<td>• In Maharashtra (Rural SC), some mothers were found to be aware about the Sukanya scheme.</td>
</tr>
<tr>
<td>• Mothers in Madhya Pradesh (Urban) mentioned about M-Mitra service on mobile phones via which doctor provides them information, thus making it credible. Additionally, few of them talked about Ladli Yojana and Matru Yojana.</td>
</tr>
<tr>
<td>• In Chhattisgarh, mothers across demographics talked about Mehtaari Express, which is similar to provision of free ambulance during delivery mentioned by mothers in Odisha (Urban).</td>
</tr>
</tbody>
</table>

**Institutional Delivery and Provision of free ambulance during delivery (Mehtaari Express)**

| M: What are the government schemes available in your area? |
| R: We have healthy food items, financial help of Rs. 1400 for pregnancy delivery in hospital, Ambulance facility, free medicine, free check-up. |
| M: What are the government provisions for children from 0-3 years old? |
| R: Food items like Eggs, Sattu, sugar, groundnut oil laddo. |
| **MOTHERS, ODISHA, URBAN** |

| M: What are the services which pregnant women get? |
| R: There is Mehtaari Express in Chhattisgarh. It is for pregnant women. |
| R: In this sewa if we call at 108, then we are given ambulance at time of the delivery. |
| M: Is there anything else which is provided? |
| R: Food is also available for us. |
| **MOTHERS, CHHATTISGARH, URBAN** |

| M: Do you get any other service or support for pregnant ladies? |
| R: For hospital delivery they give Rs.1400 to pregnant women. |
| **MOTHERS, CHHATTISGARH, RURAL ST** |
M-Mitra Service

M: Which NGO?
R: M-mitra
R: Yes. They call us on Monday.
M: Ok they call you on Monday.
R: All have different timing of calling. They call every one of us at different timings.
R: I always get call at 10 am.
M: Do they call you today?
R: Yes.
M: Ok. M-mitra. So whose NGO is this? Who run this NGO?
R: Doctor comes in the NGO and they call us that bath your baby in this way etc. they give us all information.
R: Yes they tell us everything and they give us all information like what should be given for eating to child, which thing create infection etc. everything they tell us.
R: They tell us in a very good way.
R: They call till the time when child becomes 5 year old.
R: And we are not able to attend the call due to any reason then we give them a miss call and they call us back again.
R: This MMitra is collaborated with Anganwadi, we only have to register there.

-MOTHERS, MADHYA PRADESH, URBAN

Ladli Yojana and Matru Yojana

M: What else in Anganwadi? Related to parental care, is there any other scheme?
R: These schemes are started as soon as a woman is pregnant.
R: Ladli yojana, matru yojana.
M: What is incorporated in Ladli yojana?
R: In Ladli yojana having a daughter is compulsory then only it is applicable.
R: If there are two children and both are girls then also it is there.
R: Then we have to put a certificate for both of them.
R: They are applicable on both of their names.
M: Please someone explain me what happens in Ladli yojana?
R: When the daughter will be 24...
R: 21.
R: They get 3 lakh 20,000.
R: It starts from 6th standard and then we keep on getting a little.
R: Government has made a rule that the women who is giving birth during her first delivery to a daughter will be given 12k Rupees and 4k Rupees.
R: There is a condition if you undergo operation then 12k or 16k I'm not sure.
R: If normal delivery occurs then 6k Rupees are given.

-MOTHERS, MADHYA PRADESH, URBAN

Sukanya Scheme and MCP Card

M: We become parents when we have kids, do you have any scheme or policy that helps parents to raise kids?
R: Aanganwadi SUKANYA scheme is there.
R: SUKANYA scheme.
R: It is in government hospital.
R: We have vaccination card too.
R: It is for children of 1st month to 1.5 years.
R: No, it is from 3rd month.
R: Even it is for pregnant women.
R: Yes, from pregnancy to 3 years.
M: Do we have any benefits with vaccination for parents?
R: It is protection for small kids.

-MOTEHS, MAHARSHTRA, RURAL SC
**FATHERS**

- Most fathers mentioned about MCP card, but were unable to provide details about the same.
- Some respondents were found to be aware of services such as – health camps and provision of supplementary food being provided from AWC.
- In Chhattisgarh (Rural Muslim), few fathers of 0-3-year-old girls talked about financial supports provided for institutional delivery.
- Just like mothers in Maharashtra (Rural SC), fathers of 4-6-year-old children in Maharashtra (Rural ST) mentioned about Sukanya scheme.

**GRANDPARENTS**

- Grandmothers were found to be much more aware than grandfathers on services such as:
  - MCP Card
  - Immunization
  - Financial support and free provision of institutional delivery
  - Provision of free education, uniform, and scholarships in government school
- In Odisha (Rural SC), few grandmothers talked about availability of Mamta card.
- There was an exception in case of Chhattisgarh (Rural Muslim and Rural SC), where few grandfathers mentioned details of Janani Suraksha Yojana along with other caretaking practices provided to pregnant women at the AWC.
4.3 Reported understanding of schemes vs. actual details

Respondent’s reported understanding of the mentioned schemes have been triangulated with the actual details of the respective schemes. The findings are listed below:

<table>
<thead>
<tr>
<th>Name of Scheme</th>
<th>Respondent’s understanding of the scheme</th>
<th>Actual details of schemes</th>
<th>Triangulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ladli</td>
<td>The respondents are aware that the scheme is for girl child. A few respondents mentioned that it is like insurance. A few details like when the instalments begin and the time (when the child is 21 year old) they become eligible to receive the rest of the money is also known to them.</td>
<td>Under the mentioned (Ladli Laksmi Yojana) scheme a girl child is entitled to the following benefits: The child registered under the scheme is entitled to receive National Saving Certificates for the first five years amounting to Rs. 6000/-. The second instalment is received when the child gets an admission in class 6th. This is equal to Rs. 2000/-. The third instalment is equal to Rs. 4000/- that the girl child receives on getting an admission in class 9th. Another instalment of rupees 7500 is given at the time of admission to class 11th. For admission in class 12th the child is entitled to receive an amount of Rs. 200 per month. Lastly, an amount of rupees 1 lakh is given on the completion of 21 years of her age.</td>
<td>The parents are well aware about the scheme named Ladli. Most of them who reported about the same have an overall idea of what the scheme is about but the respondents might not be able to describe the minute details of the scheme. (like how much money they are entitled to at each stage or what are the stages)</td>
</tr>
<tr>
<td>M-Mitra</td>
<td>The respondents mentioned that they receive a call weekly on a particular time slot. It was said that through the call they are informed about child care practices. They got registered for the same through Anganwadi.</td>
<td><strong>M-Mitra</strong> is a voice call service that is developed to provide information on preventive care of children to decrease maternal and infant mortality rate. They call the women who are pregnant or have infants at a particular time slot of their choice weekly or twice a week. The messages are customized according to</td>
<td>The knowledge of the parents is found to be in line with the details of the scheme.</td>
</tr>
<tr>
<td><strong>Sukanya</strong></td>
<td>In case, the call is missed due to any reason they receive a call on giving a missed call on the number provided to them. It has been reported that a person receives these calls till the child is 5 years old.</td>
<td>their gestational age or the age of the child.</td>
<td></td>
</tr>
<tr>
<td>---</td>
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<td></td>
</tr>
<tr>
<td><strong>Mehtari</strong></td>
<td>The respondents are aware of the fact that it is like a systematic investment where the money invested can be utilized for the child’s education.</td>
<td>Under the scheme named Sukanya Samriddhi Yojana, the child’s parent or the legal guardian can open an account on the name of the child and deposit a monthly or a lump sum amount yearly. The current rate of interest is 8.5%. One can open an account only for a child who is younger than 10 years. It matures in 15 years and also provides tax benefits for the parents. It encourages parents of girl child to invest in the child’s future.</td>
<td></td>
</tr>
<tr>
<td><strong>Janani Suraksha Yojana</strong></td>
<td>It was reported that one can call an ambulance for expectant mothers by dialling 102. A few respondents mentioned 108 which is the number of Mehtari service.</td>
<td>The respondents are aware of the overall objective of the scheme but might not be able to provide the minute details of the scheme.</td>
<td></td>
</tr>
<tr>
<td><strong>Institutional delivery</strong></td>
<td>The respondents are aware of the overall objective of the scheme but might not be able to provide the minute details of the scheme.</td>
<td>The respondents are aware of the overall objective of the scheme but might not be able to provide the minute details of the scheme.</td>
<td></td>
</tr>
<tr>
<td><strong>MCP card</strong></td>
<td>The participants mentioned about the money they receive on institutional delivery. The exact amount was not known to most of them who mentioned about the scheme.</td>
<td>Many respondents are aware of the cash entitlement that they receive on institutional delivery. But most of them were not found to be aware of the fact that this falls under Janani Suraksha Yojana.</td>
<td></td>
</tr>
<tr>
<td><strong>Janani Suraksha Yojana</strong></td>
<td>The respondents are aware of the overall objective of the scheme but might not be able to provide the minute details of the scheme.</td>
<td>Many respondents are aware of the cash entitlement that they receive on institutional delivery. But most of them were not found to be aware of the fact that this falls under Janani Suraksha Yojana.</td>
<td></td>
</tr>
<tr>
<td><strong>Mehtari</strong></td>
<td>Under the scheme named Janani Suraksha Yojana, the woman who has institutional delivery will get Rs. 6000. This amount is given to them in three instalments. The first two instalments are of Rs. 1500 given to the pregnant women, and then 90 days after the delivery of the child. Last instalment of Rs. 3000 is given to them after the child is 6 months old.</td>
<td>Many respondents are aware of the cash entitlement that they receive on institutional delivery. But most of them were not found to be aware of the fact that this falls under Janani Suraksha Yojana.</td>
<td></td>
</tr>
<tr>
<td><strong>MCP card</strong></td>
<td>The participants considered MCP card to be a service provided by the AWC. It is mentioned that it is useful for vaccination of the child.</td>
<td>The MCP card is a tool for the parents and families to understand and follow practices to achieve good health of pregnant women, mothers of infants and their children. The card illustrates the different types of services they can access for their well-being. The card consists of some key services delivered to the mothers and their children during ANC, INC and PNC. Apart from immunisation it also constitute of the aspects like safe motherhood, monitoring the growth of the child, taking care of the</td>
<td></td>
</tr>
<tr>
<td><strong>Janani Suraksha Yojana</strong></td>
<td>The respondents are aware of the cash entitlement that they receive on institutional delivery. But most of them were not found to be aware of the fact that this falls under Janani Suraksha Yojana.</td>
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<td></td>
</tr>
</tbody>
</table>
**4.4 Reported expectations from ASHA and AWW by parents and grandparents**

Upon discussions with the caregivers, it was found that most parents and grandparents were satisfied with the support and services provided by FLWs across states and demographics. However, parents and grandparents raised their concerns and elucidated out further expectations they have from ASHA and AWW, which varied across states and target groups, as mentioned below:

<table>
<thead>
<tr>
<th>MOTHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• In Rajasthan (Urban), it was found that few mothers were interested in seeking more information regarding schemes and services from FLWs.</td>
</tr>
<tr>
<td>• Few mothers in Chhattisgarh (Rural ST) reported that they wish there is enhancement in facilities and improvement in the quality of education provided at AWC, for children’s overall learning and development.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FATHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Across states and demographics, most fathers wanted knowledge pertaining to Government schemes for children and guidance in availing benefits from the same.</td>
</tr>
<tr>
<td>• Many fathers also highlighted that they wish to receive advice and guidance from ASHAs so that they can take better care of the children.</td>
</tr>
<tr>
<td>• It was suggested by few fathers that evening classes should be held in the AWC and the hours of engagement should be increased to three hours in a day; while others mentioned that the AWW should conduct home visits every week.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GRANDPARENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Most grandparents shared the similar opinion with parents, regarding provision of more information about beneficial Government schemes by the FLWs.</td>
</tr>
<tr>
<td>• It was felt by many grandparents that FLWs should increase their frequency of household visits.</td>
</tr>
<tr>
<td>• While grandfathers in Madhya Pradesh (Urban) suggested that FLWs should be educated – having a minimum of graduation degree with them, grandmothers in Chhattisgarh (Rural SC) felt that the anganwadi worker should teach English in the AWC.</td>
</tr>
<tr>
<td>• Grandmothers in urban areas of Rajasthan and Maharashtra wanted more involvement of FLWs as they expect them to guide the women regarding health issues, and tell them about available employment opportunities, respectively.</td>
</tr>
</tbody>
</table>
SECTION: 5. PRE-SCHOOL EDUCATION
5. **Pre-School Education**

Discussions around awareness and perceptions with respect to pre-school education were conducted with the caregivers and the children.

5.1 **Involvement of parents and grandparents in children’s pre-school education**

Caregivers of 0-3-year-old children didn’t report any interaction or involvement in children’s pre-school education from their side. However they reported that the AWW and other FLWs approach them or the family to discuss the benefits of pre-school education.

Most mothers of 4-6-year-old children reported that they have no or very limited interaction with the AWW regarding the child’s progress during the sessions held at AWC. The conversations they usually have with them revolve mostly around health issues of the children. It was found that fathers of 4-6-year-old children occasionally dropped or picked up their children to and from the AWC, thus having little interaction with the AWW – which generally involved discussions about the child’s growth, learning abilities and nutrition. Even the involvement of grandparents in 4-6-year-old children’s pre-school education is limited to dropping off and picking them up from the AWC, though on a more frequent basis as compared to the fathers. Some grandparents even mentioned that they speak to the child about his/her day at the AWC while they escort the child back home from the anganwadi session.

5.2 **Reported benefits of pre-school education by parents and grandparents**

Caregivers were inquired about their perception regarding pre-school education and the ideal age at which children should be sent to AWC. While most mothers reported that between the age of 3 to 6 years a child should be enrolled in AWC, fathers felt that 2.5 to 6 years is the best time to do so and grandparents perceived that 2 to 5 years is the ideal age to enrol a child in AWC. Some parents even mentioned that a child can be enrolled in the AWC as he or she starts to speak and walk and can leave the AWC once he/she attains the school going age. Grandparents in Odisha (Urban) though reported that children are enrolled in the AWC at the age of 2.5 to 3 years, they perceived that the same should be done at a much younger age.

The perceived benefits of sending children to AWC for pre-school education mostly revolved around the fact that children get basic education – they learn how to read and write and are also well-fed. Parents and grandparents also felt that upon attending sessions at AWC, children get acquainted to school environment, they start developing interest in studies. In addition to this, caregivers also mentioned that children usually enjoy their stay at the AWC as they get to play games and get toys, sing songs, dance and interact with other children. Some parents even believed that sending the child to AWC would make the children learn to live away from home, learn discipline, develop good habits, and even learn to adjust well with their peers and manage their time well.
Few mothers in Rajasthan (Urban) and parents in Maharashtra (Rural Muslim) reported that parents get more time to complete their work once their children go to the AWC – which acts a benefit for them.

5.3 Reported drawbacks and challenges of pre-school education by parents and grandparents

While many caregivers reported that they don’t face any challenge or barrier in sending their child to the AWC, there were some exceptions who reported to face certain challenges. These challenges were faced by caregivers of 4-6-year-old children, as well as by caregivers of 0-3-year-old children who reported low willingness to send their child to the AWC because of the following reasons:

- Most grandfathers and few mothers in Odisha (Rural ST) and Rajasthan (Rural Muslim) mentioned that they face difficulties in escorting their children to the AWC, as it is not near their homes.
- Parents in Maharashtra (Rural SC) and Odisha (Rural Muslim), found it unsafe to send their children to AWC as they felt that carelessness of anganwadi worker can result in children straying away from the AWC unattended.
- Few fathers in Madhya Pradesh (Rural Muslim) complained about bad quality of food provided in AWC, while few fathers in Maharashtra (Rural SC) were unhappy due to no provision of feedback.
- Grandparents in Madhya Pradesh (Urban) and Maharashtra (Urban) reported that inadequate facilities like – lack of adequate equipment, AWW-children ratio, etc. act as deterrents in sending children to AWC.
5.4 Comparison between AWC and private pre-schools

It was found that the decision of choice of pre-school education for children depended on factors such as financial and economic conditions of the family. Most parents and grandparents reported to prefer AWC over private pre-schools mostly because of the free basic education provided at the AWC.

Grandparents reported that if given an option, they would choose private pre-schools over AWC because of the general notion that private pre-schools provide better education and are more reliable.

5.5 Children’s perception regarding pre-school education

Both male and female children (8-10 years of age) were asked about their pre-school education experience – be it AWC or private pre-schools.

5.5.1 Attendance

Most children reported to have attended sessions at AWC except for male and female children in Rajasthan, who were not exposed to any form of pre-school education. Few children reported to have attended convents for pre-school education in Maharashtra (Rural SC).

5.5.2 Associations made with AWC

Most male and female children associated AWC with getting food and engaging in activities like – playing, singing, dancing, listening to and reciting poems. Some male and female children in Odisha (Rural ST, Rural Muslim), Chhattisgarh (Rural ST) and Madhya Pradesh (Rural ST, Rural Muslim, Urban) reported to like the food provided – halwa, kheer-poori, rice, eggs, milk, laddoo. It was found that most children were positively predisposed about AWCS mostly because of the associations they made with the AWC.

M: What do you get to learn in AWC?
R: We got to learn things like ABCD, A for Apple, C for Cat and all.
M: What are the positives and negatives? Tell me about it.
R: They teach us everything in a very proper manner.
M: What else is good/bad about it?
R: They serve us good food.
R: They even teach us songs.
R: They teach us poems.

-MALE CHILDREN, MAHARASHTRA, URBAN

M: Do you all like Anganwadi?
R: Yes (in chorus)
M: Why?
R: We get eggs, rice, dal from there.

-FEMALE CHILDREN, ODISHA, RURAL ST
In a few cases, some children mentioned certain dislikes with respect to the AWC, which are listed below:

- Female children in Chhattisgarh (Rural Muslim) complained about irregularity in the sessions held at the AWC.
- Male children in Maharashtra (Urban) were distressed because a wine factory was located in close vicinity of the AWC.
- Both male and female children in Rajasthan (Rural SC) mentioned that the AWC was not situated in close proximity to their homes.

5.5.3 Associations children made with anganwadi worker

Most children were fond of the AWW, especially because she used to teach them and let the children participate in activities like playing, singing songs, dancing, etc. Few male children in Madhya Pradesh (Rural ST), Maharashtra (Rural Muslim) reported that they disliked the AWW as she used to beat them with sticks.
SECTION: 6. INSIGHTS & LEARNING
6. Insights and learning

6.1 Caregiving Practices
Childcare practices revolving around a typical day in lives of respondents inclusive of value education imparted, keeping child’s safety in check to disciplining them have been included below.

**DAILY ROUTINE**

- Parents of 0-3 as well as 4-6-year-old children reported low incidence of other practices besides taking care of basic needs of child.
- Role of grandparents was found to be mostly limited to supervising a 0-3-year-old grandchild’s activities with interactions happening when the grandchild is engaged in different activities.
- In case of 4-6-year-old grandchildren, grandfathers reported interacting with the children while escorting them to the AWC.
- Completion of household chores was perceived to be the principal task by the children of 8-10 years of age – either taken up voluntarily or instructed.

There should be emphasis on ways of constructive recreation with children besides daily chores.

**RECREATION**

- No major difference in preference of toys on basis of gender and age group of child (0-3 years and 4-6 years) was reported by caregivers.
- It was found that parents and grandparents gave low emphasis to type of toys children of both age groups (0-3 years and 4-6 years) play with.
- Further, caregivers have low awareness regarding care taking and nurturing of children – childcare practices was limited to physical well-being of children.

A child’s cognitive ability and physical development should be aided by:
- suggesting creative ways to incorporate toys and recreation
- teaching them care taking practices for children – starting from stimulation to nurturing and overall development of child.
SAFETY AND SECURITY

• Rather than discussing and advising children, caregivers imposed instructions on them which were found to be generic (respecting elders, not talking to strangers, etc.). Therefore, value education provided to children and discussions around ensuring safety and security of children, overlapped with each other.
• No communication regarding susceptibility to psycho-sexual risks or ways of mitigating them was highlighted by children.

Discussions around risks to a child’s well-being and ways to mitigate them can be facilitated at household, community, and school level; along with guidance on how to carry such discussions.

DISCIPLINING AND VIOLENCE

• Basis the discussions with children, it was found that both inside and outside the household, incidences of disciplining children are very inconsistent.
• Increased use of harsh discipline and less of supportive parenting has been found via discussions with parents and grandparents.
• Use of violence as a method of disciplining is normalized across target groups – practiced by caregivers and rationalized and accepted by children.
• As a result of disciplining, most male children reported to express rage and passive aggression, while female children reported to become more timid and afraid.

There is a need to restructure the current trend of “violent disciplining” by educating caregivers and influencers on how to differentiate between violence and disciplining, such that they realize the impact of violence on a child’s physical and psychological well-being and shift towards positive methods of disciplining.
6.2 Existing Parenting Support
Availability of existing sources of information for matters pertaining to childcare, and awareness regarding prevalent services and schemes related to parenting have been included below.

**PARENTING SUPPORT**

- Parents reported to seek information about how to raise their children from peer group, immediate family and in case of issues pertaining to health and availing benefits of Government schemes, FLWs – but overall low reported awareness of formal institutions.
- Awareness regarding prevalent schemes and services pertaining to parenting/childcare have been highlighted by some caregivers.
- Both parents and grandparents wish to seek more information from FLWs regarding parenting and Government schemes which can be beneficial to them in any way.

There is a need for settings clear benchmarks for good parenting practices, ways to access this information, and creation of interactive platforms.

6.3 Pre-School Education
Perception on a child’s pre-school education and involvement of caregivers in the same has been included below

**PRE-SCHOOL EDUCATION**

- Most children were positively pre-disposed about the AWCs and the AWW.
- Very little or no involvement of mothers was reported in child’s pre-school education.
- Decision of choice of education was found to depend on financial and economic conditions of the family.
- Most grandparents reported that FLWs approach family members to discuss the benefits of pre-school education.

There is a need for emphasis on early education and its impact on a child’s cognitive development. Engagement of FLWs with parents on the child’s progress can be improved upon by encouraging FLWs to initiate the interactions with caretakers.

Currently caregivers associate parenting predominantly with two key aspects – nutrition and health, hence, initiatives are required to educate them so that they consider and correct their practices and beliefs on other aspects of parenting which are currently side-lined or neglected.
Annexure 1 – AWC Exercise Book
Annexure 2 – Family members children reach out to for the following activities

| Family Member                  | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female 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Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Female | Male | Final result: 

- **Activity 1**: You want your meals such as breakfast, lunch, and dinner
- **Activity 2**: You want to eat special food like biscuit, chips, or sweets
- **Activity 3**: You want to watch TV
- **Activity 4**: You want permission to play
- **Activity 5**: You want to hear a story
- **Activity 6**: You want someone to sing songs for you
- **Activity 7**: You want someone to play with you
- **Activity 8**: You want to go to your friend’s house
- **Activity 9**: You want help in studies
- **Activity 10**: You are scared

The table above shows the distribution of responses across different family members and genders.
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| k. If you are not feeling well |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| l. If you had a fight with your sibling |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| m. If there is someone bullying you |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| n. If you got scolding from your teacher |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
Annexure 3 – Family members children’s siblings reach out to for the following activities

<table>
<thead>
<tr>
<th>Family Member</th>
<th>Mother</th>
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<th>Elder Brother</th>
<th>Grand mother</th>
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Formative Study on Parenting – Report
<p>| | | | | | | | | | | | | | | | | | | | | | | | |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | e. Your younger sibling wants to hear a story |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | f. Your younger sibling wants someone to sing songs for him/her |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | g. Your younger sibling wants someone to play with him/her |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | h. Your younger sibling wants to go to friend’s house |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | i. Your younger sibling wants books to see/draw pictures |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | j. If your younger sibling is scared |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   | k. If your younger sibling is not feeling well |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |</p>
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<th>3. If your younger sibling wants to bath</th>
<th>4. When your younger sibling wants to go to bed at night</th>
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