



SOCIAL WORK PRACTICES AT PRERANA'S NIGHT CARE CENTER

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BACKGROUND

During one of the red-light area outreach visits in January 2020, the social workers observed that an approximately 2 year old girl Sakhi¹ was wandering in the red light area (RLA) without any adult supervision. Upon the first observation, the social worker asked others in the area about her mother but nobody knew of the mother's whereabouts. The outreach worker went with her to the brothel (Sakhi showed them the way) where her mother lived, but could not find her mother there and the other women took charge of her. When the social worker spotted her without any adult supervision again, they along with Sakhi searched for her mother extensively in the RLA. The team finally located her mother Simran (name changed) and during the conversation introduced her to Prerana's Night Care Center (NCC) program. The women standing next to her also encouraged her and shared that their children too attend Prerana's NCC.

Simran used to stay with her parents and work as a domestic help in Telangana. 11 years ago she met a woman in her village who lured her with the promise of a better paying job in Mumbai. This woman brought Simran to Mumbai and sold her into the sex trade in the Vashi-Turbhe RLA. Simran was kept under captivity (often referred to as a caged brothel) for 4 years where she faced physical and sexual violence at the hands of the brothel keeper. Simran had heard about Kamathipura from other women in the brothel. One day, her aadmi convinced her to run away with him and as she did run away to Kamathipura; he sold her to a brothel keeper in Kamathipura RLA. Simran shared with the social worker from Prerana that she subsequently got married to a regular customer but doesn't have documentary proof of her marriage. She gave birth to two children. The man she got married to whom she addresses as her aadmi* lived off her earnings, physically abused her and sent a part of her earnings to his family in the village.

After a continuous follow up by the Prerana Team on 23rd January 2020, Simran agreed to enrol her 2 year old daughter Sakhi in NCC. The team informed Simran that as per the NCC protocol, Sakhi's general health check-up would be done in the Local Municipal Hospital which would include - blood test, Mantoux test (for tuberculosis) etc., and sought her consent for the same. The social worker from Prerana gave Simran an orientation to the purpose of the check-up and the subsequent follow-up that would be undertaken by Prerana in case the child needed any treatment and medical aid. Sakhi was also given an age-appropriate orientation on the proposed visit to the hospital and the medical examination. Simran was unable to accompany Sakhi for her medical examination as she was exhausted from soliciting and attending to customers all night and would rest during the day. The time for the check-up at the hospital was in the morning. Therefore the social worker accompanied Sakhi to the hospital. All her test reports were found normal.

{1} Names have been changed to protect identity

PRERANA'S INTERVENTIONS

Initially, Sakhi found it difficult to adjust to the NCC and would miss her mother and younger brother. She would say, '*mujhe babu (young child) ko dekhna hai*'. During the first week when Simran would leave Sakhi at the NCC, she would cry and ask her to come soon the next morning. Sakhi also had difficulties in adjusting to the food served in the NCC. She wasn't very fond of fruits except bananas and didn't have the taste developed for breakfast items such as 'poha' or 'upma'. The NCC staff closely worked with her and helped her indulge in the eating experience. The staff assisted Sakhi in passing the plates, water glasses and spoons and let her observe other children eat and had conversation with the children about the advantages of eating different fruits and vegetables. Eventually, hearing other children's response to the importance of eating a variety of food and seeing them enjoy a wide range of foods encouraged her to try out new flavours and food items. Since the environment at the NCC was new to her, she took time to understand the rules of the NCC and get involved in the activities conducted at the center. Sakhi would sit in a corner and the staff tried to involve her but gave her the space to feel comfortable to participate at her pace. At the same time, the staff would reinforce the rules by mentioning them such as "*This activity is for all, we would like all the children to participate*" and "*No one can hurt, bite or kick anyone*". The staff would also offer her a choice by asking her, "*Do you want to sleep now or after 5 minutes?*", "*Would you like to colour the book with red, blue and orange or some other colours*". etc. These conversations help children feel they are in control.

THE NIGHT CARE CENTER PROTOCOL

With years of experience, the NCC team anticipates a set of possible adjustment situations when a child is enrolled. The child is with a new caregiver, and in an entirely new environment. If the child gets time to get used to the idea before going to NCC for the first time, the transition is likely to be smoother. The social worker is aware that starting slowly is the key to ease the transition and therefore, plans accordingly with the NCC team to help the child adjust. She also works with the parent closely throughout the transition. Some of the techniques adopted by caregivers at the NCC to make the child comfortable are:

- *Schedule short parental visits to start a child - to - child and child - to - caregiver interaction*
- *Be supportive and empathize with the child*
- *Help the child to get adjusted with the food, friends and activities at their own pace*
- *Closely work with the parent (mother) to understand the child and their needs. For example: any favourite toy, sleep timings, food allergies, habits etc.*
- *Encourage mothers to spend time with the child*
- *Help mothers develop a healthy drop - off routine which includes hugging the child, assuring the child that she will be back soon for the pick up, watching the child participate in the ongoing activity and then leaving.*
- *Encourage mothers to be on time to pick up the child to build the trust*

- Allow mothers to stay at the NCC overnight with the child, if needed
- Restrain the mothers from sending someone else (without prior formal introduction to the NCC staff) to pick the child up instead of coming themselves. This is for security reasons as these children are highly vulnerable to getting trafficked.

A CHILD PROTECTION ISSUE

On 13th February 2020 when Sakhi came to NCC, the supervisor observed that there were injuries (bruises) on her body. The team allowed her to settle in a comfortable space and tried to ensure that she didn't feel pressured or scared. Once she settled, the team asked her about the injuries and she shared that her mother had beaten her up. The team provided her with immediate First-Aid. The social worker was being empathetic and sensitive and helped Sakhi understand that they were there for her and the abuse was not her fault. The social worker also reached out to Simran to understand what had led to this behaviour. Initially, Simran denied hitting Sakhi and said she had fallen off the stairs. Upon further probing, she admitted her fault and shared that her second child was very young (5 months) and that she was frustrated with sleepless nights. Due to this, she was short on patience and hit Sakhi. Having witnessed and heard the challenges faced by women, the team considered there is a strong possibility that this incident with Sakhi was a result of anger displacement. They informed Simran that as per protocol they will have to inform the Child Welfare Committee (CWC) about this incident and present both her and Sakhi to the Committee.

DID YOU KNOW?

Article 19 of the United Nations Convention on the Rights of the Child (UNCRC 1989) highlights the Right to Protection of a child from Abuse or Neglect and states, "States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child."

Since the NCC is registered as an Open Shelter under the Juvenile Justice (Care and Protection of Children) Act, 2015, it is required to inform the Child Welfare Committee in case of such incidents. On 14th February, the incident was reported to the CWC wherein Simran shared that she wasn't able to look after Sakhi due to her younger child's responsibility. To this, the CWC member suggested enrolling Sakhi to a Children's Home for a short term. However, Simran was not ready for the same and she wanted Sakhi to continue staying in the NCC.

They also discussed with Simran the need to take care of her children and informed her that beating her child will not be condoned.

The social worker closely worked with Simran addressing her parenting style and started discussing positive behavioural parenting skills with her. For her mental well-being, Simran was also referred to the counsellor. The social worker and the counsellor helped Simran to understand and practise nurturing skills in order for Sakhi to experience a strong and secure attachment with her mother. The Team helped Simran to effectively understand how a strong and secure emotional bond between Sakhi, her younger brother and their mother is critical for their physical, social, and emotional development, including their ability to form trusting relationships and to exhibit positive behaviours. She was helped to understand the importance of practicing certain habits such as being available for the child; providing consistent support to build feelings of trust and safety; being supportive and empathetic by actively listening and responding instead of reacting; comforting the child if he/she/they is upset; not resorting to physical violence with the child, not to displace frustration or anger on the child; seeking help for herself if required; being involved and interested in their child's activities and staying aware of the child's interests and friends.

PRERANA'S INTERVENTIONS THROUGH THE PANDEMIC

Eventually, Sakhi adjusted well to the NCC. She began to enjoy staying there and participated in all the activities that were conducted. She was regular at the center till 21st March 2020, after which the COVID-19 induced lockdown was announced. The red-light area was completely barricaded by the police and no customers were allowed to enter the brothels for the next 4 months. The NCC was shut during this period due to which Sakhi had to stay with her mother and younger brother in the brothel. The social worker frequently visited them during community outreach and interacted telephonically to ensure Sakhi's safety. During the period of lockdown and beyond till December 2020, Simran was supported with ration kits and age appropriate foods for both her children. The NCC started functioning as a 24X7 Open Center September 2020 onwards as the mothers expressed COVID related safety concerns for their children while they were in brothels and moving around in the RLA.

During an outreach visit in January 2021, the social worker spotted Sakhi standing with Simran when she was soliciting. Sakhi looked very thin and pale. Upon discussion, Simran shared that the brothel keeper had been harassing her for rent and also did not want to take on the responsibility of child care and the brothel manager wasn't letting Sakhi stay inside the brothel. She also added that it had become very difficult for her to take care of both children. Looking at Sakhi's condition the team immediately suggested to Simran to get Sakhi re-enrolled into the NCC. She was re-enrolled in the NCC on 7th January, 2021.

When the team checked her weight, (which is the procedure followed for all children at the time of admission to the NCC) it was found to be 8.3kg, that was low for her age. Due to the temporary closure of the NCC owing to the lockdown, children lost regular access to nutritious meals and the team observed weight loss among many children including Sakhi when they returned to the NCC. Sakhi, like all the other children, was put on a protein rich diet and was provided a daily five meal plan that included breakfast, lunch, mid-afternoon snack, evening snack and dinner, as a result of which her weight increased to 10.1 kg after a month.

Sakhi seemed to be happy during her stay at the center. Simran used to come to meet Sakhi at the center and was happy to see that Sakhi's weight had increased and she looked healthier. Simran expressed her happiness with the NCC supervisor saying "Kya khilate ho itni achi lag rahi hai". Simran started taking interest in Sakhi's daily routine at the NCC, would patiently listen to all that Sakhi shared, encouraged her to participate in all the activities, eat the meals served and follow the rules at the NCC. Sakhi grew quite participative at the NCC activities. She started taking interest in drawing and enthusiastically explaining the meaning behind her art. She was close to her younger brother and after 2 months, she had requested the Team to enrol her younger brother to the NCC so they both could stay together and be safe.

On 11th May 2021 , the social worker came to know from a few women in the area that Simran had "run away" from the area taking along her younger child. On 12th May the Team conducted a RLA visit and confirmed the news. As expected under the Juvenile Justice (Care and Protection of Children) Act, 2015, Sakhi was produced before the CWC as her parent had 'abandoned' her. The social worker prepared Sakhi for the changes that were to happen in her life. The social worker explained to Sakhi age appropriately why she was being taken to the CWC and that she might be moved to a Children's Home (CH), what will change once she moves to the CH and briefed her about the efforts that the social workers would make to trace her mother. However, the social worker was mindful of not making any unrealistic promises. On 13th May 2021 the social worker produced Sakhi in front of the CWC, and the latter was placed in a Children's Home (CH). After 2 months, Simran (Sakhi's mother) returned to the red light area and reached out to the social worker. She seemed concerned about Sakhi's wellbeing and sounded remorseful for having left Sakhi and disappearing uninformed. The team explained to her why Sakhi had to be moved to the CH and presented Simran in front of the CWC. Upon asking, she shared that she wanted Sakhi to stay in the CH, considering the COVID-19 situation. She added that once she felt capable of taking care of Sakhi, she would request for her restoration.

CONCLUSION

As of today, Sakhi is happily settled in the CH with an improvement in her health. Simran visits her frequently and also interacts with her via video calls. The NCC staff and other team members attend various trainings on child protection, child friendly procedures, standards of care and protection in services, and sensitive communication with children. The NCC protocols of making a child comfortable to its settings and simultaneously working with the mother to ensure holistic development are designed upholding various child protection policies. Over the years, the social workers have worked with children and their mothers to help ensure that their rights are safeguarded, and children have access to and participate in healthy development opportunities. The staff at NCC practises empathy, sensitivity and active listening so as to ensure that children are provided a comfortable, inclusive and creative space.

20 
Years of ATC

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