

COVID-19 Response Impact on Girls - Making Their Voices Heard



Study in Rajasthan : A Report

August 2020

COVID-19 Response IMPACT ON GIRLS – MAKING THEIR VOICES HEARD

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Institute of Education
and Development



Centre for Unfolding
Learning Potentials



educate girls



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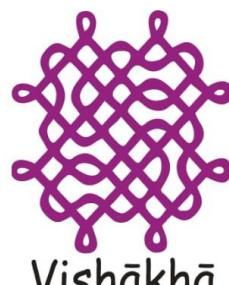
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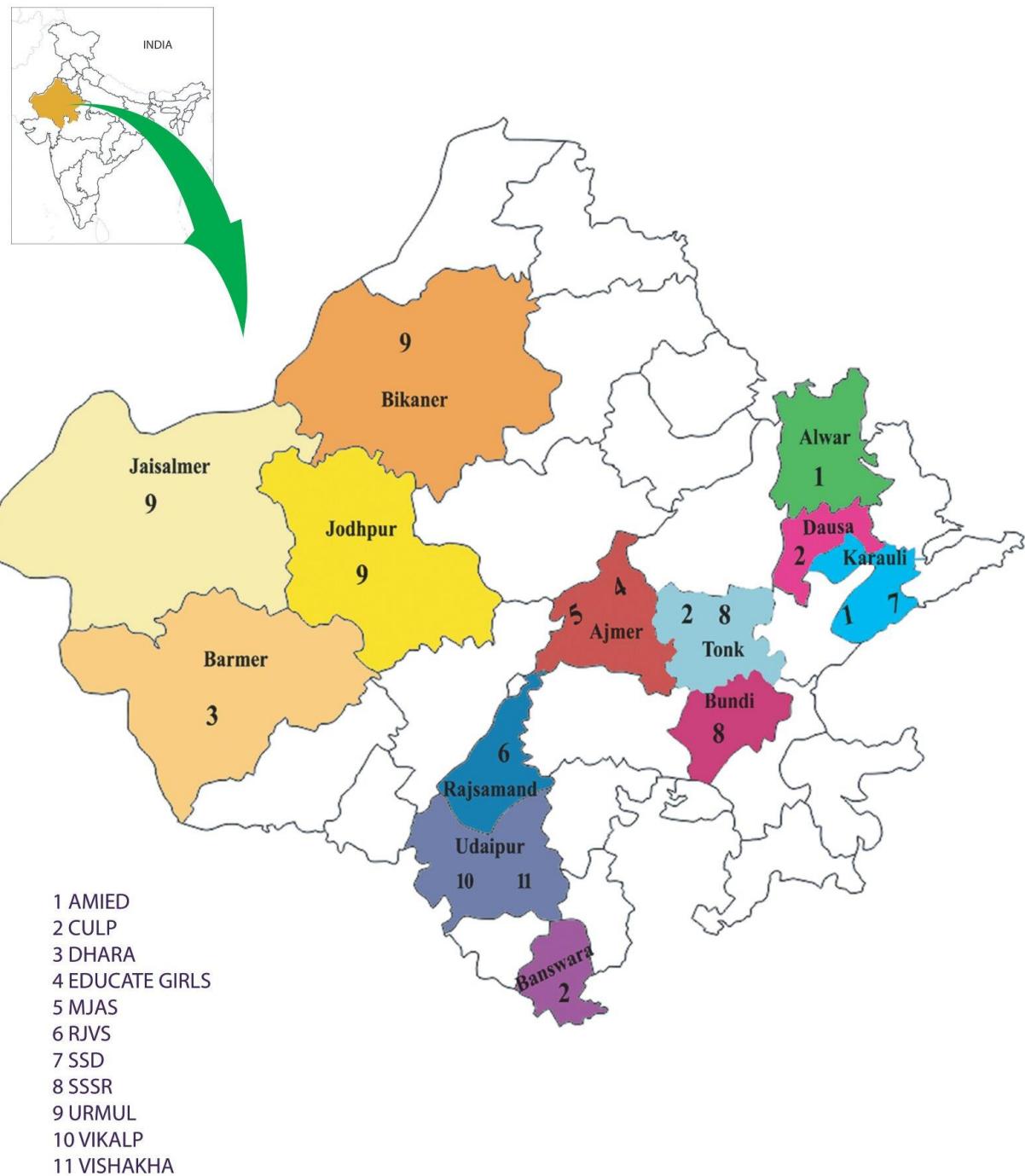


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Geographical Coverage of the Study by GNB Rajasthan Alliance Partners



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PREFACE

VOICES FROM GIRLS

*"Never doubt that a small group of thoughtful committed citizens can change the world.
Indeed, it is the only thing that ever has." - Margaret Mead*

COVID-19 has paused the entire world, something unexpected and unprecedented. The situation has been tough for everyone in the world. The countries globally are being affected, socially, economically and politically. The developing countries have been affected in manifolds. In India, the uncertainty of jobs and food insecurity among poor has created a crisis situation and pushed them into vulnerability. The impact of COVID-19 on girls and women has been adverse, specially, living in villages of the states in India. The situation has been challenging for girls as the schools are closed due to a series of COVID-19 lockdowns. Usually, the girls' enrolment ratio is recorded low in rural and sub-urban regions in India. Further, the situation brought challenges to the girls who were attending schools, now being forced to drop out of schools and pressurized towards child-marriage.

This study has been conceived and implemented to understand the impact of COVID-19 and violence on young girls in rural Rajasthan. It was a 3-month long research. 36 girls and young women participated in the online research. The research survey has been done through Google forms. The study followed participatory research methodology. There was a core research team of 4 expert researchers in the area of adolescent and youth development. 11 development organisations, which are partners of *Girls Not Brides Rajasthan Alliance*, have collaborated in this study. The study included the major geographical regions of Rajasthan state, based on socio-economic and cultural diversities.

It is encouraging to note that the rural-young girl themselves acted as researchers to measure the impact of COVID-19 on the lives of rural girls. Some of the young researchers involved in the study are associated with grassroots organisations and some belong to remote villages of Rajasthan. During the study, we have also met young girl champions in Rajasthan voicing their concerns strongly.

Another important aspect, which came out of this research, is that technology can be an enabler to enhance capabilities of young girls, to make them realize their freedom, to decide, to choose, to voice their concerns. Use of technology was the only relevant means to connect during COVID situation and surprisingly, it was seen that the young girls used digital technology to become informed and aware about everything that was necessary or they wanted to know.

The findings of this research pave way to build a strong advocacy network to raise voice for concerns of young girls, and work in collaboration to end child marriage and promote girls towards education.

The research finds that there exist immense possibilities and potential among active young girls to talk about their concerns and turn into activists. It was also analyzed that young girls, can be involved in the process as change makers. Given opportunities and platforms, the

young girls can be vocal, confident, and action-orientated, get involved in various processes of development, and understand the need for realizing the purpose of their lives. As *Amartya Sen* has rightly mentioned "*I think that so many of our abilities to do things depend on interaction with each-other*".

Each case study presented in the research report, gives us hope for future; each story brings promises that these girls would become beacon rays for young people and the society at large. Not only this, these girls will also bring changes in the lives of their mothers and grandmothers.

The girls have suggested the way forward and directions to civil societies, policy makers, researchers, practitioners, educationist and women leaders to focus and channelize the efforts in creating spaces in communities and societies for young girls and their aspirations.

The research strongly recommends that enhancing capabilities, life-skills and technological competencies of young girls will lead to more and more young women participating in the decision-making processes and realize their freedom. Building the capabilities would be investing for a better, just and democratic society.

This qualitative study is an outcome of dedication and hard work of young girl participants, young researchers, fieldworkers of partner organisations. On behalf of *Girls Not Brides Rajasthan Alliance*, I express heartfelt thanks to the entire research team for bringing out an important research document within a brief span of time.

My well-deserved sincere thanks and appreciation to the study core team led by *Ms. Indira Pancholi* and *Dr. Om Prakash Kulhari* with the valuable contribution of *Mr. Yogesh Vaishnav* and *Mr. Bharat* for their technical inputs and *Mr. Sudhir Upadhyay* for data management, analysis and report development.

I acknowledge the contribution of Steering Committee of *Girls Not Brides Rajasthan Alliance* for their regular support.

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Look forward to see the young voices being translated into policy and action, towards betterment.

Arvind Ojha

Chair, *Girls Not Brides Rajasthan Alliance*

ACKNOWLEDGEMENTS

This report is an outcome of collective work in which a large number of people contributed significantly. Groups of adolescent Girls, peer leaders (aged 15 to 19 years) and Young women (aged 20 to 25 years) were the respondents in the study. They collected the data for the study.

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Besides this primary group of contributors, we wish to record our gratitude and special thanks to:

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- We also acknowledge to members of other networks who invited *Girls Not Brides* members to share the issues concerned to the study target group in the state and national level online consultations.

Lastly but not least, we are happy to acknowledge the support extended by *Girls Not Brides* secretariat and staff namely, viz. *Shipra Jha*, *Divya Mukand* and *Bimal Kumar Jha* and grateful for them for providing financial support for this study.

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(Study Core Group)

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ABBREVIATIONS, ACRONYMS AND VERNACULAR TERMS

Abbreviation & Acronym	Description
Aata-Saata	Exchange of girls in marriage
Adolescent Girls	: Girls aged 15 to 19 years included in the study sample
AMIED	: <i>Alwar Mewat Institute of Education and Development</i> , a partner NGO of <i>GNB Rajasthan Alliance</i> , working two districts (<i>Alwar</i> and <i>Karauli</i>) of <i>Rajasthan</i> .
ANM	Auxiliary Nursing Midwifery, one at <i>Gram Panchayat</i> level
ASHA	: Accredited Social Health Activist at village level
B.Ed	: Bachelor of Education, a pre-service graduation degree to become school teacher.
Bhopal and Jhaad-Funk	: Faith healer, some indigenous tribal / rural people believe in divine power of faith / traditional healers to cure mental or physical disabilities, either in conjunction with orthodox medical care or in place of it which is called Jhaad-Funk.
B.Tech	: Bachelor of Technology, an Engineering graduation degree
BSTC	: Basic School Teachers' Certificate, a pre-service certification course to become primary school teacher.
CEDAW	: Convention on Elimination of All forms of Discrimination against Women.
Childline(s)	: 1098 is a toll-free telephone helpline service established by the MWCD of Government of India which offers help and advice to children experiencing problems, especially physical or sexual abuse. This is operated by a non-profit NGO called Childline India Foundation in India.
COVID-19	: Corona virus pandemic outbreak in 2019, a global crisis for human race.
CSO(s)	: Civil Society Organization(s).
CULP	: <i>Centre for Unfolding Learning Potentials</i> , a partner NGO of <i>GNB Rajasthan Alliance</i> , working five districts of <i>Rajasthan</i> , viz. <i>Jaipur, Dausa, Tonk, Banswara</i> and <i>Pratapgarh</i> .
CWC	: Child Welfare Committee.
DCPC	: District Child Protection Committee.
Dhara Sanstha	: A partner NGO of <i>GNB Rajasthan Alliance</i> , working western part (mainly <i>Barmer</i> district) of <i>Rajasthan</i>
Educate Girls	: A Global Foundation, a partner NGO of <i>GNB Rajasthan Alliance</i> , working several districts of <i>Rajasthan</i> .
FGD(s)	: Focus Group Discussion(s), organized with representatives of different sections of the society for current study
Garima Helpline	: An initiative of the Government to empower women and it aims to help women register complaints of sexual harassment or gender-based exploitation. Women can call or text on the round-the-clock helpline 1090 or 7891091111 or write to garima.helpline@gmail.com.
GBV	: Gender-Based Violence
GDP	: Gross Domestic Product
Google Form(s)	: An online questionnaire was developed to elicit responses of the adolescent girls and young women for the study.
GNB	: Girls Not Brides, a global network for ending early child and forced marriage

GNB Rajasthan Alliance	: It is a state level alliance of CSOs in Rajasthan, established as a national partnership with <i>GNB Global</i> .
Gauna / Muklawa	: A ceremonial social event organized for sending the earlier married girl to her In-Laws (husbands) house especially in rural areas of Rajasthan.
GP(s)	: <i>Gram Panchayat(s)</i> , is / are Local Self-Governance Body (ies) constituted by elected village community members for a cluster of villages, 2 to 5 villages in each GP. This is a constitutional body for rural development.
Holi	: A popular ancient Indian festival, known as a “festival of spring, colours, of love” and it signifies <i>victory of good over evil / immoral</i> .
ILO	: International Labour Organization
IPC	: Indian Penal Code is a criminal code that covers all laws related to criminal offence established by the Constitution of India. It deals with punishments for those who misuse the power and violate the rights.
Jagriti	: Awareness / Sensitization
Jhola Chhaap doctor	: A Quack / a fraudulent or ignorant pretender to medical skill. a person who pretends, professionally or publicly, to skill, knowledge, or qualifications he or she does not possess; pretends to treat ailing people through illegal practice without having any formal medical training.
Kacchi Basti	: A slum habitation habitated by poor people in urban area having poor public amenities.
Kishori Manch(s)	: <i>Adolescent Girls' Forum(s)</i> / Collective(s), a common platform for peer learning and creating enabling social environment for establishing identity and dignity of girls and women in the community.
Lock-down	: Restrictions imposed by the Government on mobility of the people for a certain time to protect the people from spread of <i>Corona virus</i> .
Melas	: Fairs for creative and cultural activities
MJAS	: <i>Mahila Jan Adhikar Samiti</i> a partner NGO of <i>GNB Rajasthan Alliance</i> , working in Ajmer district of Rajasthan
MLA	: Member of Legislative Assembly
Mukhiya(s)	: Village community leader(s), has influence on the particular social group.
MWCD	: Ministry of Woman and Child Development
Nata-Pratha	: A social tradition which allows men and women to live with the person of their choice.
Natak	: Role play / theatre, a mode / way is used to communicate messages among masses on particular issue of public awareness
NCPCR	: <i>National Commission for Protection of Children's Rights</i> , a constitutional body formed by the Central Government of India under the <i>Protection of Child Rights Act 2005</i> .
NCW	: <i>National Commission for Women</i> , is a national statutory body constituted by Central Government of India for protection of women's rights in India.
NDTV	: A National News Channel in India
NFHS-4	: <i>National Family Health Survey</i> conducted in 2015-16
NEP 2020	: <i>National Education Policy 2020</i>
NGO(s)	: Non-Government Organization(s) registered under different laws of the country as legal entity (ies).

NITI Ayog	: <i>National Institution for Transforming India Commission</i> , is a policy think tank of the <i>Government of India</i> , is a policy think tank of the Government of India established with the aim to achieve SDGs with cooperative federalism by fostering the involvement of State Governments of India in the economic policy-making process using a bottom-up approach.
NSO	: <i>National Statistical Office</i>
NSS	: <i>National Sample Survey</i>
Nukkad Natak	: A Street theatre is a form of theatrical performance and presentation in outdoor public spaces without a specific paying audience
Partner NGOs	: 11 local NGOs as partners of <i>GNB Rajasthan Alliance</i> involved in the study.
Peer leaders	: Adolescent girls aged 15 to 19 years playing the role of leaders in their <i>adolescent girls' forums</i> included in the study sample.
PFI	: <i>Population Foundation of India</i> , an International NGO supporting programs of three local NGOs (partners of <i>GNB Rajasthan</i>) for empowering adolescents in three districts of <i>Rajasthan</i> .
POCSO Act	: <i>Protection of Children from Sexual Offences Act</i> , a law passed by <i>Indian Parliament</i> in 2012.
Poshan Abhiyan	: India's flagship programme to improve nutritional outcomes for children, adolescents, pregnant women and lactating mothers by leveraging technology, a targeted approach and multi-ministerial convergence in mission mode with the vision to ensure attainment of malnutrition free India by 2022.
PRI(s)	: <i>Panchayat Raj Institution(s)</i> , local Self-governance Bodies of elected members at different level such as Gram Panchayat, Panchayat Samiti and District levels for rural development
PWDVA	: <i>Protection of Women from Domestic Violence Act 2005</i> .
Rista	: Relationship.
RJVS	: <i>Rajsamand Jan Vikas Samiti</i> , a partner NGO of <i>GNB Rajasthan Alliance</i> , working in <i>Rajsamand</i> district of <i>Rajasthan</i> .
Roti	: A bread, also known as <i>Chapatti</i> , especially a flat round cooked from flour (also known as 'Atta' of cereals (millets, maze, wheat etc) mix with water into a dough on a griddle in Indian homes.
JSA Rajasthan	: <i>Jan Swasthya Abhiyan Rajasthan</i> , a state chapter of People's Health Movement.
RSCPCR	: <i>Rajasthan State Commission for Protection of Children's Rights</i> , is a state level autonomous body constituted by the state government of <i>Rajasthan</i> .
RtE Act 2009	: <i>Right to Education Act</i> was passed by <i>Indian Parliament 2009</i> which is being implemented to ensure quality education to all children since 2010.
Sarpanch(es)	: Elected Head (Chairperson) of GP(s), one person in each GP.
SSD	: Society for Sustainable Development, a partner NGO of <i>GNB Rajasthan Alliance</i> , working <i>Karauli</i> district of <i>Rajasthan</i>
SPSs	: Social Protection Schemes as legal entitlements for the people of vulnerable groups.
SRHR	: Sexual and Reproductive Health Rights.
SSSR	: <i>Shiv Shiksha Samiti Ranoli</i> , a partner NGO of <i>GNB Rajasthan Alliance</i> , working in <i>Tonk</i> and <i>Bundi</i> districts of <i>Rajasthan</i> .
Tol	Times of India, a daily newspaper, many news related to the study target group published in it were used as references in appropriate sections of the report.

UNFPA	: <i>United Nations Population Fund</i> , is a UN agency aimed at improving reproductive and maternal health, supports the government for empowering adolescents.
UNICEF	: <i>United Nations Children's Fund</i> , a UN agency supporting the government for development of children and women.
Ward Panch(es)	: An elected village community member(s), each of member represents a small population of a village community.
Women Helpline	: 1091 is a toll-free telephone helpline service established by the MWCD of Government of India to help women in distress.
Urmul Trust	: A partner NGO of <i>GNB Rajasthan Alliance</i> , working in western part (<i>Thar desert</i>) of Rajasthan.
VAW	Violence Against Women
Vikalp Sansthan	: A partner NGO of <i>GNB Rajasthan Alliance</i> , working in Southern part of Rajasthan.
Vishakha	: A partner NGO of <i>GNB Rajasthan Alliance</i> , working in <i>Udaipur</i> and <i>Jaipur</i> districts of <i>Rajasthan</i> .
Vulnerable	: The term used in the context of study target group, viz. girls and women at risk of discrimination; early and forced marriage, early pregnancy & child bearing; abuse (physical and mental); low income; deprivation of education; malnutrition and poor health condition; poor participation in decision-making process at family & community level due to patriarchal society. They have denied to meet their special needs. The vulnerability arises due to the gender-biased social norms which prohibit them to develop full potential in their lives.
Young Women	: Women aged 20 to 25 years were part of adolescent forums during their adolescent age and currently working with the partner NGOs in different capacities have been included in study sample and also worked as young researchers / investigators for collecting field data for the study.

EXECUTIVE SUMMARY

Several recent reports of surveys and research studies clearly pointed out towards suspension of various essential services, impact on earnings, education and health and increase of social pressures and violence, across the societies due to COVID-19 pandemic. The organizations involved in the research and implementation of the projects with girls and women on the ground in Rajasthan provided similar indications from their field of work. But adequate data to understand the ground realities of the impact on the various aspects of life of women and girls caused due to pandemic and lockdown were not available. Therefore, it was required to know in depth about the impact of the pandemic and subsequent lockdown on the lives of vulnerable girls and women and to subsequently advocate for better access of services for them.

The present study by *Girls not Brides (GNB) Rajasthan Alliance* is an attempt to understand the impact of COVID-19 on the lives of girls particularly in the age group of 15-19 years that are part of an identified group of girls or an active member of *Girl's Forum* and had some capability to lead the peer group and are vulnerable to child marriage and abuse. Simultaneously, it was important for girls and young women to understand the roots of violence and control over their lives by actively involving them in this study process. Their involvement was necessary to strengthen the leadership of girls and young women (aged 20 to 25) that are associated with activities of the *GNB Rajasthan Alliance* organizations.

The study sample consists of Young women aged 20-25 years (N=50); Girls who lead the adolescent forums aged 15-19 years (N=87); Girls as members of adolescent forums established by the *Civil Society Organizations (CSOs)* at village level aged 15-19 years (N=251) constituted total 388 respondents.

The survey cum descriptive research method was used for the present study as a planned inquiry through oriented investigators (called '*Young Researchers*') for gathering information through standard formats related to the present phenomena of COVID-19 pandemic and subsequent lockdowns in phases in terms of conditions, practices, beliefs, processes, relationships, emergent needs or trends in social issues of health, education and life-style changes. The methodology was discussed internally and descriptive survey research was planned for gathering information about prevailing situations for the purpose of description and interpretation to arrive at emergent issues, needs and recommendations.

The draft survey and interview formats / tools were piloted in the field and finalized after receiving feedback from the select investigators and research coordinators and expert validation by member organizations of the *Girls Not Brides Rajasthan State Partnership*. The survey was conducted by 11 participating organizations in their respective project areas covering 13 districts, which included socio-geographical diversities in the entire state of Rajasthan.

Apart from collecting data in formats, case studies of 32 adolescent girls and young women were documented by the Young Researchers of participating organizations amongst respondents through enquiry interviews by using semi-structured questionnaire. The deliberations from online consultations with different key stakeholders were further analyzed and used to validate the findings from the data and provide qualitative inputs to overall findings.

Reports by governments, international organisations, CSOs, and philanthropic organisations across the world on the varied impact of the COVID-19 pandemic could have and has had on different populations were reviewed to build the context of the study. The desk review of almost 120 such available documents and recent research reports, articles (in print and electronic media) on the subject were further analyzed for the information and 45 select references relevant in context of the present study have been quoted to support our narratives in the presented report.

The study was focused on assessing the impact of COVID-19 on the various dimensions of the lives of girls / young women. Working with them through this research process, they felt important and empowered. They also felt that they finally got a space to talk about and reflect on their own lives and situations during the lockdown. Therefore, this study did not remain just a research, but became a way for organizations to increase the involvement of girls in their work and also to look at a direction for the future of the organizations. In this way the participatory format of the process was strengthened.

The Study report has been organized into six chapters. The first two chapters are related to the Context and Rationale, and Study Design and Methodology, the next two chapters are related to Data Analysis and Results. The last two chapters contain Key Findings and Conclusions, and Suggested Actions for Way Forward. The *Chapter-3* contains five sections on different aspects of the study.

The major findings that emerge from the study and based on the results of the data gathered using all the three tools are summarized as follows:

- The lock-down badly hit daily wage earners and they were left no option but to rely on the assistance of government, NGOs etc. for food and essential commodities. This has various long-term effects like lesser number of girls in school and education, more girls bearing the major burden of household work, less spending on nutritional requirements.
- Girls / young women are out of work, and they are out of school too. Their plans have been disrupted and they face an uncertain future, due to loss of money and schooling.
- Out-of-School girls are over-burdened at home and forced to get married, resulting in increased chances of early pregnancy and exposure to violent behavior.
- Girls felt the prominent impact of the COVID-19 on education. Their aspirations are associated with their education and they feel that this is their last hope to a better life

and liberation from dependence. 67% of the girls in the study felt that their education will be impacted and may get discontinued in the long-term.

- A majority of the girls do not have phones, therefore, do not have access to information, online education and also do not have access to any services or helplines.
- 44% girls have commented on the home environment and mutual relations, sometimes, conflicting situation within family. This could be due to their neglect by their families or abuse they faced during the period in question.
- A majority of girls know where to complain about violence against women, but they do not know how to go about it and what the process is for the same. Hence, they are apprehensive to approach the appropriate authorities. Even if they approach the authorities, they feel uncertain of any action to address violence.
- Although, the impact of the lockdown on girls' health was not severe but may face problems if the situation prolongs. The percentage of impacted girls may include their past health issues and seasonal ailments for which they could not get proper treatment during this crisis situation and lockdown due to lack of health facilities within their reach.
- Private spaces for of girls are not getting any importance. On the contrary, their privacy is shrinking and their dignity is hurt. Non-availability of sanitary material is a major issue.
- Girls are not finding spaces to communicate and interact with friends, which has led to feeling of loneliness and isolation. This has further led to narrowing of spaces for resolution of conflict and girls are facing violence without any recourse.
- 47% girls have gone through loneliness, anxiety and depression. 34% girls have gone through feeling of dependence and vulnerability. If the data from the case studies is matched with the survey, then the adverse impacts of COVID-19 on mental health are clearly visible.
- Almost all girls and young women felt extreme vulnerability to meet their basic needs since their deprivation from all basic services related to quality education, health check-ups and treatment, SRHR, dignity, family economy and work opportunities is quite visible and these have gone bad to worse in COVID-19 times.
- Specific demands raised by girls to meet the basic life needs have implications for the organizations working / intend to work with/ for them in terms of program design and effective implementation of projects related to girls and women. Similarly, their demands for access to entitlements from the government need specific policy reformation.

In the light of the findings and as a strategy of resilience, we need to think of not one or two, but multiple solutions, at multiple levels, and by using a variety of ways. It is necessary for us to design a program adopting the convergence model approach for various policies and programmes with line departments of the government in the state. We will also have to do long-term advocacy on the demands of girls which have come out during the study.

- We need to think about connecting girls with and through technology, providing technical training, and access to gadgets.
- For the well-being and over-all development of girls, there should be a demand for a ‘minimum package’ for girls. Organizations need to think how everyone can work together for the girls’ well-being and the common good.
- In future the leadership of girls will gain more importance. Therefore, steps also need to be taken to instill in them the ability to think and act scientifically and logically. It is pertinent that organizations should work towards enhancing and strengthening the leadership of girls for them to understand the roots of violence and prevent it and take control over their own lives.
- The needs of adolescent girls and women related to Sexual and Reproductive Health and Education have to be prioritized by both the government and the social sector organizations while preparing programs and projects.
- To cope with the situation like COVID-19 in future, there is an emerging need to strengthen / equip girls / young women with specific life skills which may be helpful for them to become socially and financially empowered which will help them in participating in the decision-making process at the family and community level.
- There is need to develop specific collaborative and innovative projects/programs with time-bound action plan based on the study findings and actions suggested for future interventions to bring long term impact on the lives of girls and women by *GNB Rajasthan Alliance* partners.
- There are still a large number of girls found out-of-schools, and there are chances that this number will increase significantly as borne out by the study that more than 50% of school going girls will be deprived of access to education in this crisis situation, particularly if it prolongs for next few years, and unless timely / immediate actions are taken by both government and organizations engaged with girls to address their learning needs.

The outcome of the report is expected to lead the organizations to revisit the situation and their existing interventions, articulating the same in the context of the present time and envisage new and innovative programs on the issues concerned with girls and young women through convergence and collaborations, networking and advocacy with the organizations and government at state and national level. Accordingly, both the organizations and government should make adequate resources available for future interventions.

CHAPTER-1

CONTEXT AND RATIONALE OF THE STUDY

Girls Not Brides – The Global Partnership to End Child Marriage is having membership of more than 1400 civil society organizations from over 100 countries based throughout Africa, Asia, the Middle East, Europe and the Americas. It is committed to ending child marriage and enabling girls to fulfil their potential. The members share the conviction that every girl has the right to lead a life of her choosing and that, by ending child marriage, we can achieve a safer, healthier and more prosperous future for all.

Girls Not Brides (GNB) Rajasthan Alliance is one of the members of this Global Partnership since December, 2018. *GNB Rajasthan Alliance* is network of 29 CSOs and many individuals as members working in all the 33 districts of the state (holistically covering five administrative divisions) cover the geographical and social diversity of the state.

The COVID-19 pandemic has destabilized the world and led to not just an unprecedented global health crisis but also an economic and political one. Needless to say, GNB's efforts and programmes the world over are also confronted with these turbulent happenings. Even in the initial phase of the pandemic, a number of negative cumulative effects on women as a social group were being anticipated. Now, a good half year into the crises, various reports have confirmed these concerns.

This is the broad context in which this study has been formulated and executed. It interrogates the ways in which the pandemic has affected the lives of young girls associated with the member organisations of *GNB Rajasthan Alliance* and chalks out a strategy to best address the emerging issues. These girls and women have been drivers of change with regard to gender in their specific local settings and hence their perceptions about how they negotiate the issues they face have been most insightful. The study has investigated different aspects such as economy, work, nutrition and health and violence against women covering under overall well-being of young girls.

Gender and COVID-19: Impact in India

India was one of the many countries to declare a total lockdown in the face of concerns regarding the spread of COVID-19 worldwide. The countrywide lockdown was rolled out in early March and continued till May 4. Various versions of lockdown continue to be put in place in several parts of the country depending on the situation of the virus spread. The effects of this lockdown are far reaching. It has severely impacted the economic condition of the already low-income communities, led to large scale reverse migration of populations, and resulted in large scale unemployment. As per the data of *National Statistical Office*¹, in context of economic crisis India is facing its worst economic contraction on record. India's April-June 2020 quarter GDP contracted by a massive 23.9 per cent year-on-year, the first GDP

¹ <https://www.firstpost.com/business/amid-covid-19-crisis-indias-gdp-contracts-by-23-9-in-april-june-quarter-8772011.html>

contraction in more than 40 years. Inequality is set to deepen and this will also manifest in increasing gender inequality.

The impact is severe on the poor, many of whom are left with no option other than to wait for the government or other organizations to help them out in this critical situation.

In a short span of time, the pandemic has changed the way the world works, in terms of education, work, travel, health infrastructures, businesses and jobs. What we have also seen in this pandemic is the deepening of pre-existing inequalities, further pushing out the already marginalized. The divide in social structures across the world is at its most exposed in decades. In all of this, it is pertinent to see and respond to the kind of changes this has led to for vulnerable populations across the world.

Women and girls are among the most marginalized and have faced discrimination on the basis of gender for centuries. Many organizations, governments, and individuals have worked to advance the rights of women and girls. According to a policy brief by the UN on the impact of COVID-19 on women, even the limited gains made in the past decades for gender equality are at risk of being rolled back². Girls and women are the most affected in every emergency due to restrictions on their civic rights: mobility, reception, bargaining strength and decision-making. The COVID-19 crises present a similar picture.

The pandemic has put increased strain on health services, led to economic crisis in families and communities, restricted movement and led to a suspension of many services. In this situation, there has been an increase in violence against women throughout the world³. It is not enough to say 'Stay home, stay safe', as evidence suggests that homes are one of the most dangerous places for women and girls due to the high intensity and occurrence of domestic violence. In India too, the reported cases have gone up during the lockdown⁴. According to the *UN Women Policy* brief on 'COVID-19 and Ending Violence Against Women and Girls', "*Women and girls at this time may not be able to reach networks and organizations that provide support and recognize abuse (e.g. women's rights networks, teachers, health workers, faith leaders, community development officers). Also, given the existing gender digital divide, women and girls in many countries, especially those who face multiple forms of discrimination, may not have access to a mobile phone, computer, or internet to access services or be able to safely use these at home as they may be closely monitored by the perpetrator and other family members*".

As reported by different media outlets, domestic violence during COVID-19 lockdown emerges as serious concern in India⁵. Instances of gender-based violence in homes has

²UN Women Report (April 2020), link: <https://asiapacific.unwomen.org/en/digital-library/publications/2020/04/policy-brief-the-impact-of-covid-19-on-women>

³ <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>

⁴ <https://niti.gov.in/making-homes-safer-women-during-covid-19>

⁵ <https://www.hindustantimes.com/india-news/domestic-violence-during-covid-19-lockdown-emerges-as-serious-concern/story-mMRq3NnnFvOehgLOOPpe8J.html>

significantly gone up⁶. According to a study, domestic violence complaints in India went up in districts with strictest lockdown rules⁷.

It is also noted that some states have reported a decline in complaints while others have reported a spike in the calls received by helplines. This indicates that the incidence of domestic violence during the lockdown depends upon the ability of victims to make complaints while they share domestic spaces with perpetrators. The problem of unreported cases is also compounded by the fact that the Covid-19 crises has put a number of women's support services under strain.

The first signs of the problem appeared from the data provided by the *National Commission for Women* (NCW) in mid-April 2020 which suggested an almost 100% rise in domestic violence during the lockdown⁸. Out of the 2,043 complaints the NCW received in June 2020, 30% were related to the 'Right to live with dignity'⁹. About 86% women who experienced violence never sought help, and 77% of victims did not even mention the incidence(s) to anyone (The Hindu, 22 June, 2020)¹⁰.

Under these conditions, incidents of child marriage are also on the rise. Since the lockdown, at least 92,203 interventions were made by Childline, a Nodal Agency of the *Union Ministry of Women and Child Development* (MWCD), *Government of India*. These reveal several cases of child marriage during the lockdown. The government says that nearly 35% of total calls were related to child marriage and protection from abuse and violence. Around 97% of the calls for child marriage involved minors (age 18 years and below) and about 91% of the calls involved girls. Among girls, 39% were between 11 to 15 years of age, and 60% were aged between 16 and 18 years (Tol 27 June, 2020)¹¹.

With regard to women's healthcare, UNFPA (April 2020) reports that women were more likely to skip crucial medical check-ups for fear of contracting the virus. Not visiting the medical centre, women's access to and continuous use of contraception is hampered. According to UNFPA, 47 million women in 114 low-income and middle-income countries may not be able to access contraceptives. This could result in 7 million unintended pregnancies. The report states that if the pandemic lasts 6 months, it will result in 31 million cases of gender-based violence¹². Four months have passed since the report was released and the pandemic is nowhere near over.

⁶ <https://www.deccanherald.com/national/north-and-central/domestic-abuse-cases-rise-as-covid-19-lockdown-turns-into-captivity-for-many-women-819653.html>

⁷ A Study published in the US National Bureau of Economic Research on June 21, 2020.

⁸ <https://www.deccanherald.com/specials/insight/coronavirus-crisis-no-lockdown-for-domestic-violence-829941.html>

⁹ <https://www.thehindu.com/news/national/ncw-received-2043-complaints-of-crimes-against-women-in-june-highest-in-8-months/article31978603.ece>

¹⁰ <https://www.thehindu.com/data/data-domestic-violence-complaints-at-a-10-year-high-during-covid-19-lockdown/article31885001.ece>

¹¹ <https://timesofindia.indiatimes.com/india/govt-intervened-to-stop-over-5584-child-marriage-during-coronavirus-induced-lockdown/articleshow/76661071.cms>

¹² <https://www.unfpa.org/featured-publication/costing-three-transformative-results>

According to ILO: “across the world, women and girls perform 76.2% of the total amount of unpaid care work, 3.2 times more than men. Globally, unpaid care work is most intensive for girls and women living in middle-income countries, those married and of adult age, those with lower educational achievement, resident of rural areas, and those with children under school age¹³. As will be seen in the report, most respondents have said that their duties for household and care work have gone up immensely post-lockdown. In cases where girls and women were studying, or working outside the house, their lives have overturned due to schools and workplaces being closed, putting the pressure of domestic responsibilities on them. Girls are unable to find time to study because of this increased responsibility, which has impacted their future plans, and also placed mental pressure on them, leading to frustration.

This can be seen in the press release issued by the *National Commission for Protection of Child Rights*. ‘Policy Brief: The impact of COVID-19 on Children’ issued by UNICEF on April 15, 2020, describes how the pandemic is affecting the schooling of girls, their learning and their survival and mental and physical health.

The needs of girls and women relating to sexual and reproductive health have also been deprioritized. In a country like India, where a woman’s autonomy over her body is influenced by social, cultural and political factors, it has always been difficult to deal with issues of sexuality, reproduction and menstruation openly and in the mainstream. With all these factors at play, the situation of lockdown took these further away from the mainstream and there was little or no provision for women and girls to get the most basic thing, which is access to sanitary pads and other basic needs.

Impact in Rajasthan

Rajasthan, an erstwhile princely state, is the largest state of India which shares 10.4% of total area of the country and is located on the western side of the country, shares its borders with Pakistan to its north-west side. As per the NSO Report (2017-18)¹⁴, Rajasthan has recorded the lowest literacy rate of 57.6% for women in the country, making it the state most unfit for education of girls. ... The report finds that 43.7% of women in the age group of five and above have never had any formal education or enrolled themselves in any educational institution.

Data indicators from Rajasthan reflect that the crime cases against women in the state saw a surge of over 100% in May 2020 as compared to beginning of the year when the average jump was around 25%. The biggest jump was seen in domestic violence cases which nearly doubled in a month from April to May 2020 (Tol, 30 June 2020)¹⁵. The data points to a worrying situation in different categories: a 38% rise in dowry deaths, a 43% escalation in abetment to

¹³ https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_633135.pdf

¹⁴ <https://timesofindia.indiatimes.com/city/jaipur/rajasthan-is-the-worst-performer-in-literacy-of-girls-nso-report/articleshow/78006119.cms>

¹⁵ <https://timesofindia.indiatimes.com/city/jaipur/crime-against-women-sees-over-100-jump-in-may/articleshow/76699494.cms>

suicide, a 147% in domestic violence cases (498-A), a 99% rise in rape cases, a 131% rise in abduction cases and a 137% rise in cases of ‘sexual harassment in public spaces’. This clearly shows a high-risk situation for women and girls during and post-lockdown.

In these strained times, it is desirable for women to work towards building capacities and solidarities of newer kinds as well as strengthening older capabilities. The internet, for instance, has asserted our dependence towards it by proving to be the only link between us and fellow humans during various lockdown situations. It is a new frontier to be harnessed like never before in these times.

COVID-19 and the lockdown also present us with an opportunity to review and fine-tune the strategies we have used in the past to evolve supportive structures for girls. This is a testing time for our past work in that we can see the ways in which girls have been able to understand the challenges they face. In order to chalk out a strategy to help women in a long term, it is necessary to assess the reality at the ground level.

This is the background that informed the decisions to formulate this study about girls in rural/semi-urban Rajasthan to understand the impacts the pandemic and lockdown continue to have on their autonomy. The women were identified to nurture and strengthen their leadership abilities. Partners in this study were selected based on criteria developed jointly by the steering committee of GNB Rajasthan. The eleven members of Rajasthan chapter of the alliance were chosen based on their geographical presence in the state and their interest to take to the study in their respective operational areas. A total of 13 districts out of 33 were covered having representation of almost all the geographical diversity of the state.

CHPATER–2

STUDY OBJECTIVES, DESIGN AND METHODOLOGY

Several recent reports point towards an increase in violence, suspension of various essential services, impact on earnings and education and increase of social pressures. The organizations involved in the research and implementation of the projects with girls and women on the ground in Rajasthan provided similar information from their field of work. It was felt important to know in depth the impact of the pandemic and subsequent lockdown on the lives of vulnerable girls and women and to subsequently advocate for better services and a better future for them.

The study entailed the content-scrutiny and analysis of the relevant available documents and secondary sources, viz., recent studies, survey reports, research articles, print and social media, and government notifications. The desk study involved screening, reviewing and reflecting on relevant data and information culled out to assess the impact of emergent situation on aspects of development of adolescent girls and young women. The relevant findings and results were elicited which could help to understand and provide valid support in discussions on the basis of the analysis of the collected data of the present study conducted with study target group (15 to 25 years) in Rajasthan.

The present study by *Girls Not Brides Rajasthan Alliance* is an attempt to understand the impact of COVID-19 on the lives of girls particularly in the age group of 15-19 years that are part of an identified group of girls or an active member of Girl's Forum and had some capability to lead the peer group and are vulnerable to child marriage and abuse. Simultaneously it was important for girls and young women to understand the roots of violence and control over their lives by actively involving them in this study process.

The Specific study objectives are as follows:

- To understand the impacts of the pandemic and lockdown on lives and autonomy of girls and young women.
- To elicit the perceptions and aspirations of adolescent girls and the demands they would like to present to the government and CSOs to work for the well-being and protection of their rights.
- To study the role played by girl-leaders during the pandemic and lockdown on issues of safety, prevention of violence and early and forced marriage and their future needs and interventions required keeping in view the dangers and risks they faced under the present circumstances.

Study Sample: In compliance with the set objectives, the design of the study was unique in its approach. The study sample consists of young women and adolescent girls ($N = 388$), comprising of following age-groups:

1. Girls as members of adolescent forums established by the Civil Society Organization (CSO) partners at village level aged 15-19 years ($N=251$).

2. Girls who lead the adolescent forums aged 15-19 years (N=87). These forums have been formulated by the NGOs associated with the study.
3. Young women aged 20-25 years coming from the same social backgrounds are selected for the study (N=50).

The study sample included the adolescent girls and women as respondents with whom the *GNB Rajasthan Alliance* partners are working in different socio-geographical settings of the state of Rajasthan. Each of the 11 partners (*ref. Annex-7*) were asked to select 35 respondents from all the three categories from their respective work area. Investigators for primary data collection were young women who were beneficiaries and working currently with partners as volunteers, peer leaders or field staff members. The total study sample consist of 388 adolescent girls and young women as respondents for quantitative data.

The respondents all belong to rural or peri-urban areas¹⁶, fall in the low-income bracket and are in schools / taking trainings / working. These are women and girls who have negotiated a lot with their families and communities to be able to do what they are doing and it was considered that they would be able to provide an insightful look into their own lives and the lives of girls around them in the times of the pandemic.

Study Research tools: Three types of study tools were developed and used to collect both quantitative and qualitative primary data from the field which were as follows:

1. Structured *Questionnaire* (N=388) combining closed and open-ended questions and field notes of researchers for qualitative as well as quantitative data. (*ref. Annex-1*).
2. Case studies of selected respondents, particularly for qualitative data. A framework (*ref. Annex-2*) for documentation of the case studies was provided to the field researchers which included mainly semi-structured and open-ended questions. Total 32 case studies (*ref. Annex-4*) were captured through intensive interviews with the selected respondents, keeping at least 3-4 respondents from each of three categories mentioned above by each of the 11 partners.
3. Online consultations with different key stakeholders.

The first tool '*Questionnaire*' was meant to collect first hand quantitative data from the field, whereas the other two tools were used for gathering qualitative data which were based on the analysis of the quantitative data. The quantitative data were further validated by Case Studies and online consultations with a deeper probe in certain responses.

In addition to the above tools, the field observations done by the young researchers while conducting the survey were noted down in their field diaries which were further shared to help the study coordination committee to understand the prevailing field conditions and limitations / constraints of data collection.

Methodology: The research study was undertaken by the *GNB Rajasthan Alliance*, which had also formulated the proposal and research design. A 4-member core group was set-up by the Steering Committee of the *GNB Rajasthan Alliance*. The core team members scanned the available documents and recent research reports, articles (in print and electronic media) on the subject and analysed the information and data to build the context of the present study. Reports by governments, international organisations, CSOs, and philanthropic organisations

¹⁶ Peri-urban areas means the areas adjacent to the cities or towns.

across the world on the varied impact the COVID-19 pandemic could have and has had on different populations were taken into consideration to build the context of the study

A concept note was prepared on the study background, objectives, design and activities to be done with a proposed timeline to accomplishing the study. The responsibility was shouldered by the Core Group to coordinate the study, prepare a thorough plan with shared responsibility and a timeline acceptable to all the partners. The core group kept organizing periodic consultation meets on issues that emerged from time to time. Finally, 11 partners of the *GNB Rajasthan Alliance* consented to be part of the study.

The entire process was participatory and democratic; partner organizations and young researchers participated equally in the process. It was an attempt to conceptualize an alternative model to the ‘top-down’ approach to research. The research also took into account the observations of the investigators that provide an insight into the processes as the researcher and also the respondent as they hail from the same background and were respondents as well.

The survey cum descriptive research method was used for the present study as a planned inquiry through 36 trained investigators, called '*Young Researchers*' (ref. Annex-5) mentored by Field Coordinators of the partner organizations (ref. Annex.-6) for gathering information using standard formats related to the present phenomena of COVID-19 pandemic and subsequent lockdowns in phases in terms of conditions, practices, beliefs, processes, relationships, emergent needs or trends in social issues of health, education and life-style changes. The methodology was discussed internally and descriptive survey research was planned for gathering of information about prevailing situations for the purpose of description and interpretation to arrive at emergent issues, needs and recommendations. A guideline was also prepared for the young researchers on the correct use of the questionnaire in field.

The draft survey and interview formats / tools were developed which were further piloted in the field and finalized after receiving feedback from the select investigators and research coordinators and expert validation of partner organizations. The selected investigators were trained through zoom meets with them. A strategy was evolved to have continuous communication with investigators and a timeline was agreed with them for collecting primary data in an online questionnaire (google format). A team consisting of 3 persons examined the case studies (semi-structured interview formats) prepared and sent by the participating organizations. Subsequently, the report writing work was accomplished by core group members.

Geographical Coverage: The survey was conducted by 11 participating organizations in their respective project areas covering 13 districts (ref. Annex-3) that represented different socio-geographical settings in the entire state. These districts were selected based on their coverage of the State and also on the engagement with communities and girls on the ground.

Study Report Presentation: The Study report has been organized into six chapters. The first two chapters are related to the Context and Rationale, and Study Design and Methodology, the next two chapters are related to Data Analysis and Results. The last two chapters contain Key Findings and Conclusions, and Suggested Actions for Way Forward. The *Chapter-3* contains five sections on different aspects of the study.

The references scanned / reviewed and quoted from secondary sources and exhibits used for data presentation of the primary sources in the report are summarized as follows:

1. Number of documents reviewed from secondary sources (approx.) : 120
2. Number of references of the documents quoted in the report (*as quoted in footnote*) : 45
3. Number of Exhibits used for presentation of data from primary sources : 23

In addition to this, the report contains **Seven Annexures** for sharing the relevant documents and support information used for the study. The details of the abbreviations and acronyms used in the report have been given in the beginning of the report just after preface and acknowledgments.

Study Limitations: Research coordinators and investigators used all protective measures and adopted *GNB Child Safeguarding Policy* while visiting different places and interacting with the respondents. Some specific limitations observed were as follows:

1. The biggest limitation to the survey was the COVID-19 pandemic and associated restrictions on movement. This was mitigated through allocating those field areas for research to investigators that were easily accessible to them and close to their places of residence.
2. Since the surveys had to be done at home, some of the respondents were afraid that their parents might overhear and therefore could not elaborate on their responses to some of the questions. This was to some extent mitigated by the researchers persuading the parents to allow girls to talk to them in a separate quiet room, and allow them more than an hour's time. This became possible in most cases, but not in all. In as many places as was possible respondents were interviewed outside their house.
3. In several responses, incomplete information / data were reviewed and had to be deleted during consolidation and analysis of the data.
4. Online orientation of field coordinators and investigators had some limitations since they were not used to virtual training; this affected their understanding of the purpose of some of the questions they needed to ask respondents. This might have affected the quality of some of the data, though it was tried that this be mitigated through open channels of communication.

The whole process and methodology were a great collaborative - learning process. The process itself has been very empowering not only to respondent-girls but also to organisations. Everybody enjoyed the whole process.

CHAPTER-3

COVID-19 IMPACT ON GIRLS: MAKING THEIR VOICES HEARD

This chapter tries to capture profiles of the girls and women who formed part of this study. It describes who the respondents are, their age group, their marital status and their vulnerabilities with regard to education, work, earnings, violence, health, child, early and forced marriage and their aspirations. This has been explained separately in the sections below, though it is to be maintained that all sections are cross-cutting and each aspect influences the other.

SECTION-1. INFORMATION RELATED TO THE RESPONDENTS

The respondents were selected from the field areas of the 11 organizations participating in the study. These organizations work in different areas of Rajasthan and cover 13 districts (*ref. Map on page 5*) Out of a total of 388 respondents, 13% were from the 20-25 age group and rest were adolescents aged between 15 to 19 years. Out of the group of adolescents, 22% were adolescent leaders and 65% were members from adolescent collectives, all part of the participating organisations.

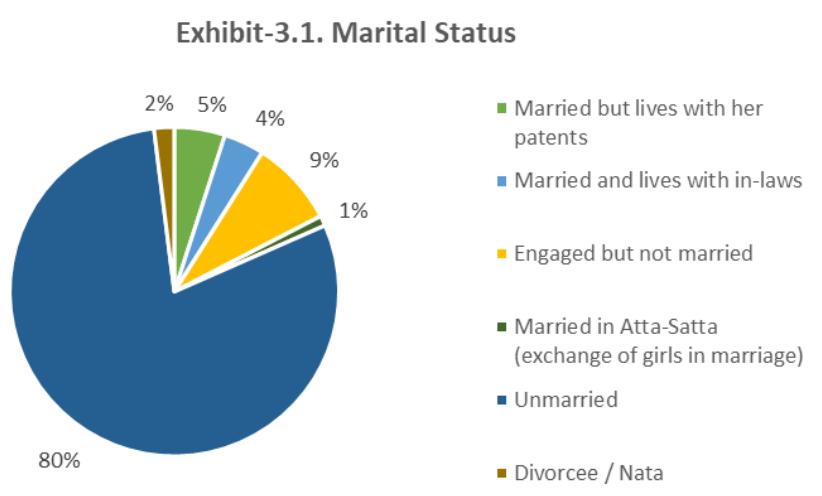
a) Family Type: Out of total respondents, 80% girls belong to the nuclear families, whereas the rest 20% belong to the joint families. 25% nuclear families and 24% joint families were headed by women.

b) Earning Members: Out of total earning members 36% are females and 64% are males. In 46% families, females are not an earning member whereas in 3% families, males do not earn. In 52% families both males and females are earning for their families.

c) Marital Status: As the study involves mostly adolescent girls, it is seen that 80% girls are unmarried.

Out of 80% unmarried girls, 92% of them are members of adolescent collectives in the age group of 15-19 years.

It is significant to note that remaining 20% girls (aged 15-19 including both the adolescent collectives & non-collectives) are married but majority of them live with parents, only 6% live with their in-laws,



the challenging fact emerged that 34% of the total respondent girls are engaged and their marriages can be performed in near future or may be after the restrictions under lockdown

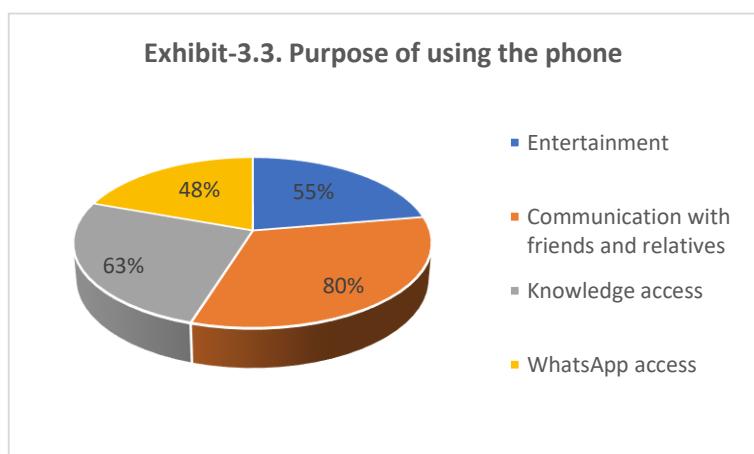
are completely lifted. It means these girls are susceptible to early marriage. 4% girls in this category married through *Atta-Satta* system. There are 9% girls in the age group of 15-17 years who are married but live with their parents.

d) Educational Status: 86% respondents are in the education system, with a majority of them studying in class 9 or 10. 14% of the respondents are school dropouts and help in household chores, or work outside to earn for themselves and the family. They are not in education due to the other responsibilities on them, and also due to social norms that discourage education for girls. Various studies have shown that children are taken out of the education system due to the need of the families for more working hands as there is not enough money at home. In the study it is seen

Exhibit-3.2. Level of education in which respondents are continuing their study		
Educational level	Number of responses	%
Class 8 or less	27	8%
Class 9 and 10	131	40%
Class 11 & 12	107	33%
Graduation	47	14%
Post-graduation	7	2%
Professional courses (B.Ed, Polytechnic diploma, B.Tech, BSTC)	7	2%
Total	326	100%

that 17% of the girls who are studying, are also earning through part-time jobs so that they are able to support themselves and, in some cases, their family members. The details are seen in the table below:

e) Access to Technology: In terms of technology, women and girls are way behind. In a world where the push is more and more towards digital, only 26% of the respondents' own phones and 74% do not. Out of 26% of respondents having phone, only 72% of them have Smartphones while only 67% have internet. This is reflective of the status of the country. According to data collected by the National Sample Survey on education, it is seen that only 27% of the households in India have some member with access to the internet. Out of the girls who did have phones, some did not have any money to get it recharged, so it served no purpose for them. Bilqis says, "*My father was not earning anymore, so there was no money to recharge my phone*".



Among the girls who do not have phones, 69% use either their father's, brother's or husband's phone. Access to phones, which is an essential today, is missing from the lives of these girls. This means not only lack of communication with their family and friends, but lack of access to

also from information and services. It is seen from the uses of the phone by girls that 63% use them to access knowledge. Below is a chart specifying the uses girls put the phones to, as recorded in the study.

In cases that women access phones of other family members, there is fear of surveillance and in many cases, it is seen that girls are unable to speak to anyone without a family member present. *Roshni* says, “*Amongst the girls in the village, a lot of them do not have phones. The families give phones to boys, not to girls*”.

An article in Live Mint (2015) states, “*In Rajasthan’s Garariya village in Barmer district, the panchayat has called the mobile phone a social evil and banned its use by Muslim women*”. It further mentions, “*Access to information and devices or tools that could bring communication and information in the hands of women scares many men. It is yet another barrier that Indian women must fight. This is not just a matter of owning a mobile device but a matter of freedom and empowerment, which society feels should only be the priority or privilege of males*¹⁷”.

SECTION-2. IMPACT OF THE PANDEMIC ON THE LIVES OF GIRLS AND WOMEN

This section explores the various ways in which the Covid-19 pandemic impacted the lives of women and girls at various levels. It is seen that globally people have lost their jobs where there are hardly any new ones available, there is lack of food and nutrition and the lower income populations with meagre savings and mounting debt have been the worst hit. In these unprecedented times, it has been a challenge for governments and social sector organisations to be able to provide relief to the people. As is evident from the respondents’ profile above that all of them fall into the category of this vulnerable population, therefore, experiencing the worst impact of the pandemic.

a) Economy and Work: The respondents for the study are mostly from rural and low-income backgrounds. They rely on cattle rearing, agriculture, daily wage labour, or any other low-income job such as owning confectionary shops, tea shops or vending fruits and vegetables. 67% of the respondent’s families earned (before lockdown) less than INR 10,000 a month, which is lower than USD 150 a month. The families have an average of about 5 persons, making the per capita income extremely low. In such a situation, losing jobs led to an acute crisis for the entire family. Out of the total number of earning members, 64% are male and 36% are female. Most of the workers are in the unorganized sector, with their work being undervalued, and offering no benefit or security. According to the *Deloitte* report ‘Empowering Women and Girls in India¹⁸’ for the Fourth Industrial Revolution, 95% or 195 million women are employed in the unorganized sector or are in unpaid work. These are the

¹⁷<https://www.livemint.com/Opinion/DwiRdnamLz6pAKAEZhKaeL/Mobile-phones-empower-women.html>

¹⁸https://www2.deloitte.com/content/dam/Deloitte/in/Documents/about-deloitte/UNGCNI_black_final%20v6%20web%20high%20res.pdf

people who lose their jobs first in any case of emergency/crises. In the present report, out of 88% respondents who agreed to the pandemic having impacted work, 11% said that women in their household lost jobs, 32% said that women had to close shop due to the lockdown, and 12% said that women are working, but without pay. For men, these numbers are 18%, 61% and 17% respectively.

Chanda's mother is a domestic worker and father is a daily wage earner, both belong to the unorganised sector. Both of them lost their jobs in March as the lockdown started. Even though they had worked the entire month, they did not get their salary. They had nowhere to complain. Their situation was so bad that their neighbours had to give them food so they could survive. After some time, they approached a local MLA and somehow got ration for 10 days. Chanda says, "It was so humiliating for us to see that the MLA sent people to our house to check if we were hiding food supplies". They had taken loan some months back to build their house and the moneylenders were troubling them for repayment, but somehow, they managed to get a few days extension by promising to pay a higher interest rate. Her father managed to find some limited work in August, but her mother could not get any work.

It is seen that people are getting less work and less wage for the same amount of work. So even though their wages are cut, they have no option but to continue working, because the choice is between less wages and no work, which is not an option for them. There are some instances, in which women and children are also working on very low wages and those engaged in education, have had to take on minimum wage work.

Madina (aged 16 years) lives in a 6-member household. Her father and elder brother are daily wage workers, while *Madina* and her two siblings are studying. Her father does not keep well, due to which her brother is the principal earner in the house. Since the lockdown, their earnings have completely stopped. She says that when they would sit down to eat, they felt so bad that they could not eat at all. She says, "*All our conversations focused around getting the next meal. We received some rations from the government which helped us to some extent. We were not even able to borrow money from anyone because everybody was in trouble.*"

Many respondents echo *Madina*'s story. 89% of the respondents said that the pandemic impacted their financial situation for the worse. They said that due to lack of money, they had to face many problems, not least of which was lack of food supplies. The stark examples of struggle for food have been part of a major concern worldwide. According to a UN policy brief on 'Impact of COVID-19 on Food security and Nutrition', the 'food security of 135 million people was categorised as crisis level or worse', and that 'the number could nearly double before the end of the year due to the impacts of Covid-19' and, 'more than 2 billion small producers, farm labourers, rural workers, and their families, who represent a large proportion of the moderately and severely food insecure, may be disproportionately affected by economic shock'¹⁹.

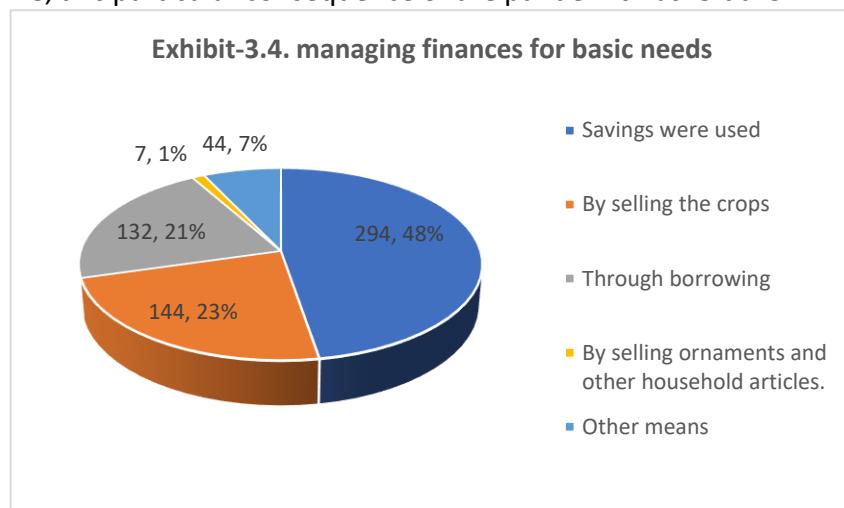
These financial and nutritional crises will have a direct impact on children, young girls, pregnant women and ailing persons in families. This is not a short-term effect. Among the

¹⁹ <https://unsdg.un.org/resources/policy-brief-impact-covid-19-food-security-and-nutrition>

respondents, 39% doubt they or their parents will be able to find new employment or start their business anytime soon. 30% think that it will take them over 4 months to get any employment opportunity, even when India is in the phase of lifting many of the COVID restrictions and lockdown.

b) Management of Finances to Meet the Family Needs: It is clear that the people are experiencing massive financial crises. Since the study includes populations in majorly rural areas counted as low-income, this particular consequence of the pandemic has left them with little or no options.

According to the study, 48% people have had to fall back on their savings. Some of these savings have been of girls and women who were working part time to save for their education or training to get into a job. With these savings being used



up, it is no longer possible for them to do what they wanted to with it. It also puts them in a more vulnerable position not only financially, but via this, puts them also on the back-foot for making their own decisions.

The Exhibit-3.4 shows how people managed their finances during this time.

Some people had to sell their assets- like cattle, jewellery, cycle, vending trolleys, agricultural equipment, etc – to make enough money to survive. These were their sources of long-term income and having had to sell them, they have had to jeopardise their future income.

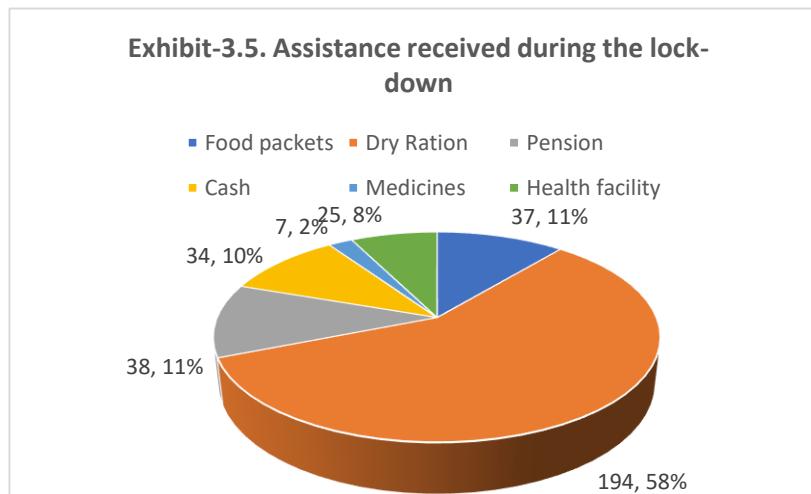
Pooja Meena says, "My mother and father run the household through daily wage work and agriculture. With the work having stopped, we were relying on agricultural produce, but since we only grow wheat, we got rotis, but did not have money to buy vegetables, spices, tea, milk, or anything at all. We could not even buy food for the animals and had to sell them. My father had taken loan for agriculture, but could not repay it, therefore got a very small amount when he took loan again. In our family of 6, all of us started working and gathering fodder for the animals from the forest. We would then sell this to other people in the village and earn some money from there to run our house. We would work day and night and our months just went by like that."

Though the survey shows that only 1% people have had to sell assets to get money, some families that were already in debt, had to borrow more money, due to which they have plunged deeper into the vicious debt cycle. According to the World Bank, the Covid-19 pandemic could push 49 million people into extreme poverty in 2020²⁰.

²⁰ <https://blogs.worldbank.org/voices/covid-19-will-hit-poor-hardest-heres-what-we-can-do-about-it>

c) Assistance Received: As is evident in the data collected from the field, the situation required assistance and intervention from government agencies and organisations working on the ground. According to the study, only 56% of the respondents received any kind of support. Below is a graph highlighting the different ways in which people got support.

As the lock down was announced government, NGOs and individuals extended their help to



the economically weaker sections by providing cooked food packets and dry ration for almost one month. Other relief items like medicines, pension and health facilities were provided exclusively by the local administration. The families (79%) received maximum assistance from the government, 31% from NGOs and 26% from individual donors, whereas 5% received assistance from their other family members. Some families got assistance from more than one source.

d) Overall Impact on Girls and their Families: As is evidenced above, a majority of respondents come from low income backgrounds engaged in informal work, so the worsening economic condition affected many things- work stopped, people did not have enough to eat, girls faced increased burden of work, but since there was not enough nutrition, it affected their health.

Manju's story reflects the complications of this situation. Her family's financial situation was not good. Due to lack of money, she and her brother started working from the age of 13-14 onwards. This put their education at risk. The lockdown affected their family acutely. She says, *"People were dying of hunger, and because they were ashamed to tell anyone that their rations were over, they were committing suicide. We thought that we have to make do with what we have and we started using less rations, like using the milk of the goat nearby instead of purchasing cow milk. I fell sick during this time, but did not have money to buy medicines. I had stones in my kidney, because of which I was suffering from vomiting and diarrhea daily. I was so sick that I could not get out of bed. There was no one at home except my brother. Everyone was afraid to help due to the fear of the pandemic going on. We had little money, which also got over."* It has also caused a strain on all her relations as no one visited her when she was in the hospital and her parents were away. *"My mother somehow came back from the village with a lot of difficulty to take care of me. Due to this, my brother's wedding was postponed from May to June, as I was the only one to work in the house."*

The most severe impact of the pandemic was on the economic condition of the families as 72% of the respondents have said. The next and equally important impact was on education, their own and that of their children (57%). It is important to note that not only did the lockdown

impact their economy, but also their psychological status, as stated by 33% respondents. This was due to the loss of income, fear of the disease and safety of the family.

Add this to *Manju's* story and we realize that we cannot see these impacts in silos. Many girls in the study have said that due to the lack of income and resources there was a lot of tension in their homes. They could see and hear a lot of arguing, shouting and violence in their neighborhoods. A lot of girls have said that the environment in their house is getting worse day by day and the tension of survival and the future is looming on everyone's minds. Santosh says, "*There is only one cause of all of this – lack of money*".

There was a lack of stability and indecisiveness due to lack of information and opportunity, and the constant threat of the virus which forced people to live in constant fear. There was another side to this, which was less prominent; one which deepened existing biases and inequalities. *Aafreen* says, "*We saw in the news that the Muslim community was being blamed for spreading corona in the world and in India. This made us very angry. People around us also started discriminating against us because we are Muslim and our condition became worse*".

A lot of the girls had different plans for themselves, which were greatly affected. Vaishali was preparing to be a dancer and had to go for auditions; girls like *Mamta*, *Kanchan* and *Sapna* are all national football players and they had to go for selections for the Indian football team; *Manju* had paid her fees for coaching to clear the exam for getting into the police, whereas *Suman* had prepared to take admission to complete 10th class through open schooling and *Pooja Meena* was preparing for college. A lot of girls were doing courses for teaching, beautician, nursing etc. All of them feel that their fees had gone down the drain and there is a very slight chance that they might get these opportunities again, especially because it will be very difficult to revive their financial condition. 67% of the respondents feel that their education will be severely impacted in the long run and 54% feel that they will have increased pressure of household chores, disrupting their future plans.

Along with all this, girls feel that their families are bent on crushing their dreams and getting rid of them. 18-year-old *Sumitra* had fallen sick with fever and body ache and when it became unbearable, she asked her parents to take her to the hospital. Her parents refused to take her saying that they did not have money. Two days later, she saw them gifting a smart phone worth INR 8000 (USD109) to her brother and this broke her heart.

Mehar Bano says, "*We live at our maternal grandmother's house with our mother, who is now single. Our grandmother started locking the door of the kitchen so that we don't take any food. One day, it became too much for us when she snatched the 'rotis' out of our hands during dinner and took them away. Then she started beating my mother and threw us and our stuff out of the house. We had to leave her house the next day to go and live in a rented house*".

A lot of girls faced the pressure of marriage or '*gauna*' in their villages, though many also resisted and somehow negotiated their way out of the situation. *Arti* did not want to get married, but her younger brother wanted her to get married and go way to another house because he did not like her living in her mother's house anymore. During the lockdown, she started working in a shop to earn INR 3000 (USD 41) a month, because of which her brother and mother stopped taunting her.

Overall, 60% of the respondents felt that the pandemic will impact their future and 32% were unsure about what impact it would have.

The girls did feel and went through all of the above mentioned and more, and looking at how they spent their time, gives us a bigger window to look into their daily lives. The two questions, both multiple choices, asked to girls can be put side by side to see a correlation.

Exhibit-3.6. Feelings of Girls and their engagement during COVID-19 lockdown	
Girls did during the lockdown	Girls engaged in
<ol style="list-style-type: none"> 1. Interesting things which gave happiness (63%) 2. The works, that brought boredom (24%) 3. Things, which brought sorrow (11%) 4. Things, which made them worried (15%) 5. Time pass activities (87%) 	<ul style="list-style-type: none"> • Studying for some days (46%) • Helping in household chores (78%) • Maintaining cleanliness (68%) • Doing rest (30%) • Entertainment and interesting things (26%) • Work in field and cattle rearing (40%) • Working in family business (12%)

In the above questions, it is noted that 87% girls said that they engaged in time-pass activities. This is not a good or bad statement. It is a generic statement. Considering these statements with the case studies done with girls, there is a high likelihood that this would involve ‘helping in household chores’ and ‘maintaining cleanliness’ and ‘working in the family businesses’. Clearly for the rest, entertainment and interesting activities for girls is least priority. This also shows that girls had to face double burden of work.

The data also indicate that measures taken to combat COVID-19 have pushed girls and women into ‘roles which are mundane and mechanical, based on the societal roles assigned to women’, which they were trying to break by continuously working towards their dreams. Investigator Mary says, “*I found that the girls who were very active earlier, were extremely quiet and sad. It seems that her spark was gone and she was also disinterested in joining us for the survey. During the course of the survey, she slowly opened up and by the end of which she was ecstatic, because she felt that this survey helped her focus on herself again.*”

It is also heartening to see that 63% did interesting things which made them happy. This means that even in these tough times, girls are trying to stay happy and motivated. A lot of girls have also mentioned that this was a time when their entire family could be together, eat together and be able to talk, which they were not finding time to do otherwise. Some would cook together, and Bilqis says that this was a time where her entire family was happy and they had chat and play, which maintained a good atmosphere at home. They also enjoyed spending time with elders and listening to their stories.

SECTION-3. IMPACT ON GIRLS HEALTH & HYGIENE

The issue of health is related to the well-being of people in society. We need to look at all the aspects of life holistically in order to understand the concept of well-being. It is seen that whenever the society goes through turbulent times and there is an emergency, like the pandemic in this case, it is the vulnerable people who are the first and worst affected. Therefore, in this time of the Covid-19 pandemic, it is these adolescent girls who are vulnerable and who have felt the impact of the pandemic severely. In this section, the issues of health are looked at holistically in terms of medical health, mental health, menstrual health and hygiene, and sexual and reproductive health.

A study on adolescent health indicated that 53% of adolescent girls in India²¹ are already anaemic; 80% are thin, short, or obese; 31% suffer from vitamin B12 deficiency, and 37% have folate deficiency. Nutritional and dietary inadequacies and restrictions during a pandemic put these already malnourished girls at higher risk of developing or increasing micronutrient deficiencies and other forms of under-nutrition, compromising their immune system and ability to fight off illnesses.

As per the NFHS-4 (2015-16)²² in Rajasthan, 25.4% of women (aged 20 to 49 years) got married before age of 18 years and 6.3% women aged 15 to 19 years were already mothers or pregnant. 46.8% of non-pregnant women and 46.6% of pregnant women (aged 15 to 49 years) were anaemic which put them at risk of health problems, and there are chances that the situation will become worse during and after the pandemic.

The *Poshan Abhiyan* launched by the Government of India in 2018²³ to address the malnutrition among children, girls and women has also been affected due to the lockdown which put the target population at risk of increased malnutrition. The suspension of outreach activities for immunization, the mother and child healthcare services, have also taken a hit in Rajasthan during the lockdown and the restrictions have led to a halt in the registration of new pregnancies. This has impeded the distribution of iron and folic acid tablets to pregnant women and adolescent girls. Health activists and *JSA Rajasthan* urged the state government to launch door-to-door immunization and healthcare services to address malnutrition among

²¹ A Report of Nutrition International (June 2020), link: <https://www.nutritionintl.org/2020/06/covid-19-will-worsen-the-already-abysmal-state-of-nutrition-among-women/>

²² NFHS-4 (2015-16) Data for Rajasthan, link: http://rchiips.org/nfhs/pdf/NFHS4/RJ_FactSheet.pdf

²³ <https://health.economictimes.indiatimes.com/news/industry/children-and-women-must-be-the-priority-to-beat-back-covid-19/76255390>

children, girls and women²⁴. In another study, PFI and (May 2020)²⁵ and few others²⁶ assessed the impact of COVID-19 on the mental and menstrual health of adolescent girls in Rajasthan.

The data from this shows that 78% of adolescent girls faced problem in procuring and have had zero access to the sanitary napkins; 23% of respondents listed schools as a reliable source of information on COVID-19 while 84% said that TV was the main source which helped them tackle issues of mental and emotional well-being, while 37% of respondents admitted using WhatsApp as a source of information. 45% of adolescents sought help from a mental health resource; 33% of adolescent girls in Rajasthan witnessed an increase in tension and fights at home; 22% of adolescents felt depressed during lockdown. Their many feelings of anxiety/depression could be traced to economic uncertainty, the inability to move outside and socialize, non-completion of their studies, worrying about work, and fear of the virus itself. The issues of health and the unavailability of sanitary materials can push up the school dropout rates. This could further impact the young girls psychologically as well as lead to physical health issues. Data emerging from the study is discussed in the relevant points below to better understand the situation.

a) Impact on Girls' Physical Health: Iron deficiency and anaemia, weakness, fainting, stomach-ache, headache, body ache, excessive bleeding during menstruation, irregular menstruation, less bleeding during menstruation, short menstrual period, etc. are common issues that adolescent girls are facing as can also be seen in the study. According to NFHS-4 data, the rate of malnutrition and anaemia in adolescent girls in Rajasthan is very high. Therefore, they are given iron, vitamin supplements, weight tracking is done, regular health check-ups are done twice a year in schools, and they are linked with programmes for nutrition. This is an essential and necessary service provided to them. In general, however, these issues are not given any importance by the girls' families and even by health workers. They are mostly told that this happens with all girls and that she will have to bear it while it takes its time to become fine in a few years. Apart from poverty, this has a gender angle as well. It is seen that families spend the least on girls and only access health services when the girl is extremely sick and unable to get out of bed.

Arti says, “*There are three members in my house and there is so much tension between us that we do not even talk to each other. My condition was getting worse by the day. I felt alone, weak and started*

²⁴An article in the Hindu (March 2020), link: <https://www.thehindu.com/news/national/other-states/coronavirus-health-activists-in-rajasthan-demand-door-to-door-care/article31211444.ece>

²⁵ A PFI Study on Mental Health (May 2020), link: <https://swachhindia.ndtv.com/new-study-assess-the-impact-of-covid-19-on-the-mental-health-of-adolescents-in-bihar-uttar-pradesh-and-rajasthan-48287/>

²⁶ An article in Hindustan Times (August 2020), link: <https://www.hindustantimes.com/jaipur/menstrual-health-of-adolescent-girls-in-rajasthan-took-a-hit-during-lockdown-survey/story-7JO47d2Y0SGyloXEc4EbIM.html>

feeling faint. My weight was reducing constantly. One day, I was unable to get out of bed. Then my family called a local compounder and I was put on drips in the house itself.

Mamta Meena had fever due to which her weight reduced drastically and she suffered total hair loss but her family refused to take her to the hospital. They instead called a ‘bhopa’ (priest-singers of the local deity and occultists that are invited to village homes in times of misfortune and sickness) to perform some rites. It seemed like it would be difficult for her to survive.

Nisha Gurjar says, “*I was so sick that I had to be taken to a hospital in another village to be treated. My father was very irritable with me due to this and I was afraid to even tell him that I was sick anymore.*” Rekha, another girl, took her two friends to the health centre for checkup and getting the medicine needed to ease menstrual pain as they were experiencing extreme pain and dizziness. Nisha feels that if the hospitals are nearby and it does not take money to get treated, more girls will be able to reach health services themselves. But Manju, who had to get an operation for stones, says that she was very troubled by the misbehavior and carelessness of the health workers.

Some more questions were put to the girls as a part of the survey to have a deeper understand of the impact on the health of girls and women. It is interesting to note that only 20% girls said that the lockdown had an adverse impact on their health, while others say they did not face any issues. Looking at the context and content of the above stories, this seems like a small number. But if we look at the data, we also see that 74% girls and women say that they will seek immediate medical help when the lockdown is lifted and the pandemic situation get better. This contrasting data stems from the perception that is deeply rooted in the community, where ‘ill health’ for girls is termed such only when there is serious illness, such as high fever and inability to get out of bed, as described in the case stories above.

Out of the girls who agreed that their health was impacted, 69% needed health facilities in their vicinity whereas 31% did not feel like going to see a doctor. Out of the 69% who needed helath facilities, 36% could not go to the hospitals/health centres, 27% faced difficulty in reaching a health centre or hospital. . Out of those who did reach the hospitals/helath centres, 43% reported that they were not attended properly by the staff, who refused to pay attention to them. The 54% of the respondent girls who could not go to the hospital, faced difficulty in purchasing medicines.

It seems that the impact of the lockdown on girls’ health may include their past health issues and seasonal ailments. But 36% could not get the medical facility and 27% faced difficulty in getting these essential services is significant. The reason may be the poverty- induced low investment on girls, no care for girls from the family members or preference of home remedies during this time due to the fear of contracting COVID-19. It is also important to note that the 43% who tried to get the medical facilities were not treated or attended well by the medical staff at the health centres / hospitals. It is a serious concern that even during such a

health emergency in the country, the medical facilities were denied and ill persons were poorly treated.

This shows that on one side, girls/women have not gained complete confidence in the health system to access it, and on the other side, their experience with the system has also not been better. In the case of COVID, the absence of special care from the hospital or lack of proper care indicates a serious problem. It remains to be seen why health services, which come under essential services, were performing poorly.

b) Menstruation and Related Issues - Effect on Women & Girls' Health and Hygiene: There are various taboos around menstruation in society. In India, most women have to hide the fact that they are menstruating. Even the mention of it is not allowed in most families and communities. In a lot of social settings, it is seen that menstruating women are not allowed to go into the kitchen, sources of water and places of worship. These practices that are ingrained in the system come from the thinking that while menstruating, women are impure and the menstrual blood is dirty and unclean. In this time, they are expected to stay alone and aloof. Most practices around it are based on purity and pollution, and of course fertility. Since there have been various campaigns around this issue, a slight change is seen in the perception, awareness and communication around it. Girls have themselves started raising their voice about it.

But the pandemic and lockdown has created a lot of issues for girls and women. *Mona says, "I was not able to get sanitary napkins during my menstruation period due to school and market closures and complete restriction on mobility, and this caused problems for me. Before the lockdown, the government had made provision for us to get pads from 'Anganwadi' centres and schools, which completely stopped in this time."*

Many girls say that they had to use cloth to maintain menstrual hygiene and this was very inconvenient for them. The first problem was the lack of old cloths in the home which they could use. If there was more than one woman in the house, then this problem became even bigger. The second issue was the washing of the used cloth. In most homes, there is no running water, due to which, women had to fetch water from the community tap, hand pump or well. Since all family members were present in the house at all times, girls faced trouble finding spaces to change regularly. The washing area in most homes is also outside and not enclosed. In front of male members washing blood-soaked cloths was almost impossible and unacceptable in homes. Therefore, on the one hand, girls and women had to hide the used clothes and on the other, dry the washed, stained cloth in a shaded, covered spot, where the men of the house could not see it.

Girls had heard such stories from their elders, but had never faced it. During the lockdown, facing these issues not only caused problems with their physical health and hygiene, but also their psychological state of being was troubled with feelings of shame, anger, and irritation

towards the situation, among others. 29% girls reported that menstrual management was a big issue for them.

The data obtained from the case studies on this issue is further supported by the following responses:

- 23 out of 30 girls reported that they could not get pads from market.
- 13 out of 30 girls said they had to use cloth due to non-availability of pads. This led to a chafing of their thighs and constant burning sensation. Painkillers for menstruation related abdominal pains were also not available.
- 11 out of 30 girls said they felt ashamed because there was no place to change their pad or a private place in the house. The clothes used were difficult to wash, change and dry.
- 21 in 30 girls said that not getting a pad brought fear and fear of illness in their mind.

It can be clearly seen that the privacy of girls is not of any importance in the families and privacy is shrinking, leading to a loss of dignity. Not only is the non-availability of napkins a major issue, but girls also do not have enough underwear and soap for washing.

During the interviews many respondents indicated that SRHR related information was not available to them. It is important and essential that the information on contraception and pregnancy related issues reaches the girls and women timely. It is essential to especially reach out to those girls and women who are being pressured to get married, have got married and are being sent to their in-laws' house, or in cases where the husband came to her house and tried to establish sexual relations with her. These issues troubled many girls.

It is seen that at a systemic level, menstruation was not seen as an important aspect to be addressed during the lockdown. The effect this has had on girls is not known at the macro level, but the stories and data collected from the respondents paints a troubling picture of the situation and provides a glimpse into the difficulties this has caused.

c) Impact on Girls' Mental Health: There are no two ways about the fact that during the lockdown, girls' mental and psychological state has been adversely affected. While conducting the fieldwork for the study and data collection, girls were using words like mental pressure, lack of interest, loneliness, tension, sadness, irritation, sadness, not being able to get out of bed, depression, and the suicidal feeling, in almost every conversation.

"Relationships are changing at home. Even normal conversations have started to take an angry turn due to which there is pressure and tension"- study respondent.

The girls did not have complete information about Covid-19 and what they should expect, which put them in a continuous state of anxiety, fear, and uncertainty. Some of them did not feel like eating, drinking or doing anything with their time. They were experiencing hopelessness and disappointment and felt that their lives had come to a halt. Almost all the

girls said that this study gave them some happiness, because it allowed and probed them to think about themselves and also think of solutions to their situations.

The data related to the mental health and well-being of the adolescent girls and young women were elicited by asking the specific questions about whether they felt weak, precarious, lonely and/or depressed during the lockdown period. They could give only one response. The responses have been enumerated in the Exhibit-3.7.

24% girls felt 'depressed'. This is a very serious number, because in a society where the word 'depression' itself has a stigma associated with it, girls have openly said that this is what they felt. It could or could not be severe, but it is very important to note that girls have identified it.

It was also observed during the survey that almost all domestic workers, mainly adolescent girls and young women lost their job suddenly due to imposition of the lockdown, which resulted in loss of their income source(s). They were also treated as 'spreaders' of the virus which led to mental distress. Similar observations were also shared by respondents from migrant families and vulnerable muslim communities.

There are girls who did not want to answer the question and it seems that something happened with them, which they have not yet found the space to express. A significant number of girls (15 to 20%) who responded on these conditions as 'sometimes in between' constitutes a significant number and also adds to the problem with girls. All these are significant numbers looking to the age of the girls, who usually do not hold any major responsibility of their houses. It would be important to probe further as to the exact nature of their loneliness and depression.

Girls' Responses	Respondents number in %age			
	Weak	Precariousness	Loneliness	Depressed
Yes	20%	34%	23%	24%
No	56%	44.5%	58.5%	55%
Do not want to tell	4%	5%	3%	3%
Sometimes in between	19.5%	16%	15%	18%

Reflections from the Case Studies

Comparing the inferences of the case studies with the data of the survey, makes clearly visible and validates the adverse effects on mental health of girls. Even in the case studies it is seen that 23% girls (N=7) reported facing conflicting, non-conducive and discriminatory environment in their families, perhaps because of poverty, low / no income source and burden of debt which resulted in stress and mental health problems among especially adolescent girls and young women. 30% of girls (N=9) shared that they had health problems,

fevers and skin infection during the lockdown and were not able to reach out to a medical practitioner and therefore, were forced to take treatment from ‘quacks’ which further caused health complications.

The voices of the girls recorded in their case studies are highlighted here to understand from them their situation during lockdown.

- “Time passes, but somewhere there is a feeling of restlessness, all the time there is some worry”.
- “My father came home from Maharashtra. His business had closed and he was under debt. It worries us thinking about how our household expenses will be managed”.
- “My routine has totally changed. Sleeping and waking up late makes me feel very bored”.
- “I am feeling stressed due to pressure from my in-laws. I have suicidal thoughts.”
- “The house environment caused irritability”.
- “Fake news from the TV scares us”.

Incidents of violence, restrictions, and emotional hurt, are all reflected in the case studies. 2 out of 30 girls have said they feel like harming themselves and some have attempted suicides, while others know of their friends committing or attempting suicide. This shows the intensity of the problem at hand. Examples of anxiety, stress, fear, behavioral changes, and restlessness all appear in case studies and are briefly given below.

The Effect of Violence on Feelings of Girls

“The incident that happened with my friend, also led to restrictions being put on me.”- 28 cases

“I got a call from a boy, which was a wrong number. I was beaten and forbidden to use the phone.”

“I used to get affected when I saw an incidence of violence.”- 4 cases

“My friend used to get beaten up at home. She could not go anywhere to escape this and committed suicide.”- 3 cases

“My friend who was 17 years old, committed suicide.”

“I faced increased abuse in terms of both verbal abuse and physical beatings.”

“The pressure to get married increased for me. When I said no, my family’s behaviour towards me changed.”

The revelations on the mental health of the adolescent girls are in tandem with the findings of a study of PFI as mentioned in the beginning of this section.

There are certain dimensions which are seen very clearly, certain which are not and some which give us only a hint of being present. Those which are hidden, require an extensive qualitative and quantitative study. This is a short study and has its limitations, and yet, has

been able to garner rich information on the effects of lockdown and the pandemic on girls' mental and physical health. They also point towards the necessity of a deeper understanding of women and girls' health.

SECTION-4. IMPACT ON GIRLS' EDUCATION

The Covid-19 pandemic has led to a staggering number of children being out of school. There has been a lot of effort across the globe to bring women and girls into the fold of education, who have been left out of this due to gendered societal norms. For decades, the progress that has been made towards this has taken a big hit during the pandemic. According to UNESCO, an estimated 743 million girls worldwide are out of school due to the lockdown initiated because of the pandemic²⁷.

Some recent studies, surveys and webinars (*PFI, Dasra and Breakthrough*, May & June 2020)^{28, 29, 30} reveal that 'adolescent girls' were found to be educationally the most vulnerable group, since most of them are not able to access digital learning platforms. Schools in rural areas by and large have not transformed to online education like the ones in urban centres. Even if they did, the students did not have resources (phones, internet, and computers) to access the content.

Mona has recently been promoted to 12th grade, narrates, "I could not access the benefits of online classes due to the unavailability of a smartphone and internet. Sometimes I used my elder sister's phone, but for general calls only. Before the lockdown, I had planned to join coaching classes in May or June so that I could do well in my 12th standard and score good marks, which would help me get admission in a good college. But that did not happen. My engagement in agricultural activities and domestic chores over-burdened me and I could not find any time to study. My study seems to have discontinued forever".

There is an added fear that the longer schools remain closed, the greater are the chances that girls (and some boys) will drop out or be made to drop out when they reopen. Not being in school also means no midday meal, no weekly iron and folic acid supplementation, no sanitary napkin distribution, and no interaction with friends.

The school as a space is also very important for children, and more so for girls. It provides them with a platform for holistic education, where they are able to learn not only their

²⁷ <https://en.unesco.org/news/covid-19-school-closures-around-world-will-hit-girls-hardest>

²⁸ *An Assessment on the Impact of COVID-19 On The Mental Health Of Adolescents In Bihar, Bihar, UP And Rajasthan by Population Foundation of India (PFI, May 2020), link: <https://swachhindia.ndtv.com/new-study-assess-the-impact-of-covid-19-on-the-mental-health-of-adolescents-in-bihar-uttar-pradesh-and-rajasthan-48287/>*

²⁹ *Observations of conversation of Adolescents in a recent webinar hosted by the 10to19 Dasra Adolescent Collaborative <https://www.news18.com/news/buzz/pandemic-impact-on-adolescents-the-conversation-that-needs-to-be-done-2632445.html>; <https://www.dasra.org/resource/lost-in-lockdown-chronicling-the-impact-of-covid-19-on-indias-adolescents>*

³⁰ *A Survey by Break Through (June 2020), link: <https://inbreakthrough.org/covid19-and-adolescent-girls/>*

subjects, but also play games, indulge in physical activity, develop their creative skills and develop a peer/friend support system. This system goes a long way in supporting the girls even beyond school. The school also provides an atmosphere for the girls which is away from daily household burden, and in some cases, abuse- both physical and mental. Closing of schools has thus not only led to a break in their education for qualifying classes, but also a disruption of their own space, where they have the opportunity to express themselves openly and live a life outside the confines of the home and were unhappy with school closures.

Kamini says, "My everyday work has changed a lot. Earlier I used to stay in the hostel, where there was no work to do, only studying. But in the village now since there is a water issue, I have to spend my time getting water all day. Since it is a joint family, there is no time or space to study. I would get a little time, but in that I had to take care of my younger cousins".

A worrisome situation stated in a study report³¹ published in 'Independent' that half of girls are at risk of never returning to school in Asia and Africa in wake of Corona virus. The study warns that families will prioritize pushing their daughters into marriage at a young age or making them do child labor over returning to education once schools can safely open up. This claim also supports our findings. The study also says, 'financial uncertainty unleashed by the coronavirus crisis increases pressures to find money, which can lead to girls being pushed into child marriage or sex trafficking and other forms of exploitation'.

Several studies have also found that the closure of schools increased girls' vulnerability to physical and sexual abuse both by their peers and by older men, as girls were often at home alone and unsupervised. Sexual exploitation, in the context of selling sex for food and other essentials, was also widely reported, as vulnerable girls and their families struggled to cover basic needs. The loss of a school year or term can also have a significant impact on girls' futures, as they face the ever-growing pressure to marry.

As per the UNICEF-Report (June 2020)³² claims that the school closure adversely affected the education of about 2.7million children in India a large number of them are in rural parts of the country who likely find deprived of distance learning opportunities as only 24% of the households were estimated to have access to the internet.

The state government also asked their teachers to start online classes for government school children which found totally ineffective as most of students or even their parents in rural areas do not possess smartphone and internet. (as stated earlier). Therefore, it is an urgent

³¹ Room to Read Study Report (9 July 2020), link:

<https://www.independent.co.uk/news/world/politics/coronavirus-school-closures-child-marriage-a9608221.html>

³² School closure has affected 27 crore kids in India (UNICEF, Jun 24, 2020), link:

http://timesofindia.indiatimes.com/articleshow/76541506.cms?utm_source=contentofinterest&utm_medium=text&utm_campaign=cppst

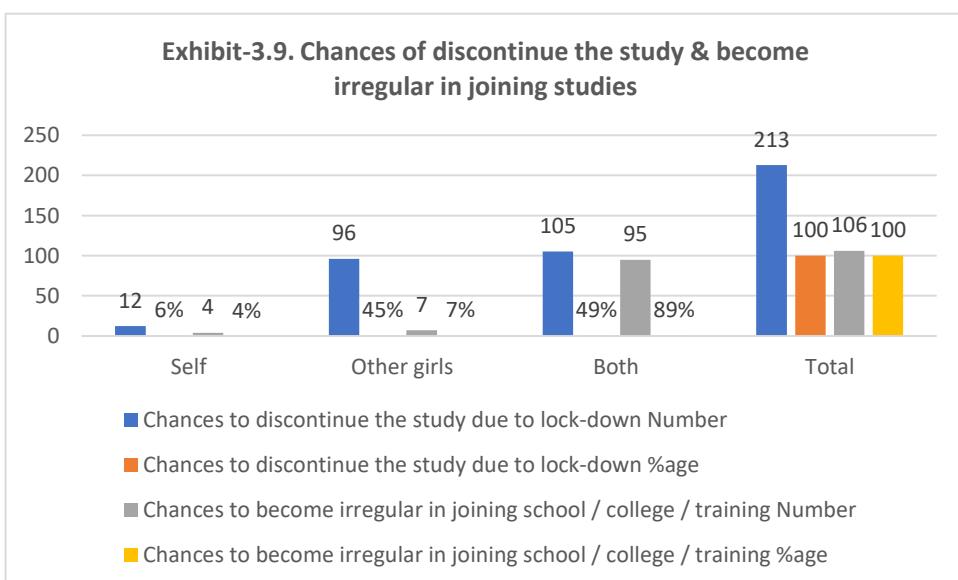
requirement for the government to either reopen schools with all necessary precautions, or come up with strategies to reach children in their homes and continue their education³³.

The above secondary data give a broad picture of the country as well as the state of Rajasthan, but not enough to understand the real impact on various aspects of development of girls and young women caused due to COVID-19 and lockdown and for further planning of the specific interventions for empowering them in Rajasthan. There is too much variability in the available data, specifically not denoting the situation in the state. Hence, the findings and results of present study data aligning with other studies will help us to understand the ground reality of status of girls and young women and plan the actions / interventions for them by the CSOs and could be used for advocacy with the government for the same.

Education of Girls: It is important to understand the impact on Education and Training based on the survey data as responded by girls due to lockdown.

Exhibit-3.8. Impact on Education of Girls						
Girls' Responses	School / college / training attending girls before COVID-19 lockdown		Stopped going to school / college / training after COVID-19 lockdown		Girls accessed study material on internet	
	Number	%	Number	%	Number	%
Yes	233	60%	225	97%	65	28%
No	155	40%	8	3%	168	72%
Total	388	100%	233	100%	233	100%

Due to COVID-19 lockdown 97% girls had to discontinue with their classes, whereas 8% did not respond. It is clear that due to the closure of all the educational institutions, students



were sitting at homes and were left with no option but to study at home with meagre resources. 28% girls could able to access the study material available on internet to some extend. A large number of girls

³³ Opening of Govt. schools in Rajasthan worries teachers, link:
<https://timesofindia.indiatimes.com/city/jaipur/opening-of-govt-schools-worries-teachers/articleshow/76225674.cms>

were deprived of this kind of facility.

It was important to take perceptions of the girls as to 'what are the chances of discontinuation of their and other girls' studies even after the lockdown is lifted'. 45% of girls currently studying had fear of discontinuation of their studies even after the lockdown are lifted and educational institutions are opened. So,

there are higher possibilities that a large number of girls may not continue with

their education, which is alarming, and in turn, they would be exposed to early marriages and abuse.

89% of girls feel that the chances of irregularity in joining the education are much higher for both themselves and other girls after the lockdown period is over.

Exhibit-3.10. Declining interest of parents towards girls' education & Deprived of education due to poverty

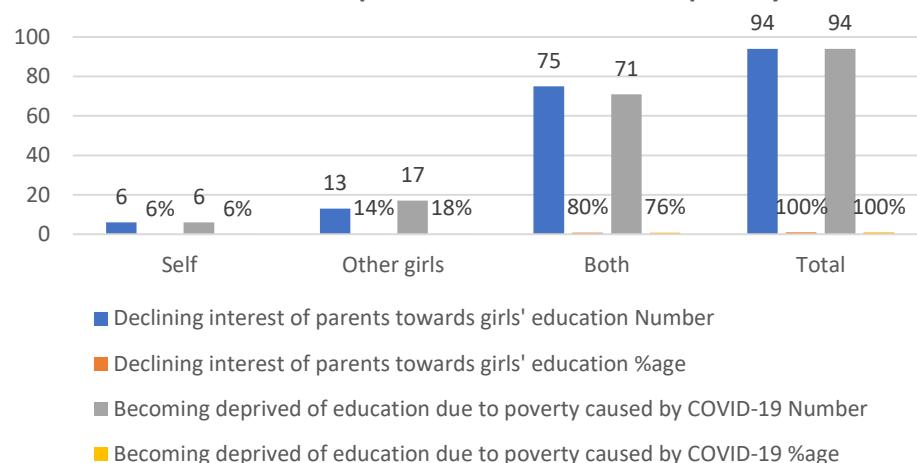
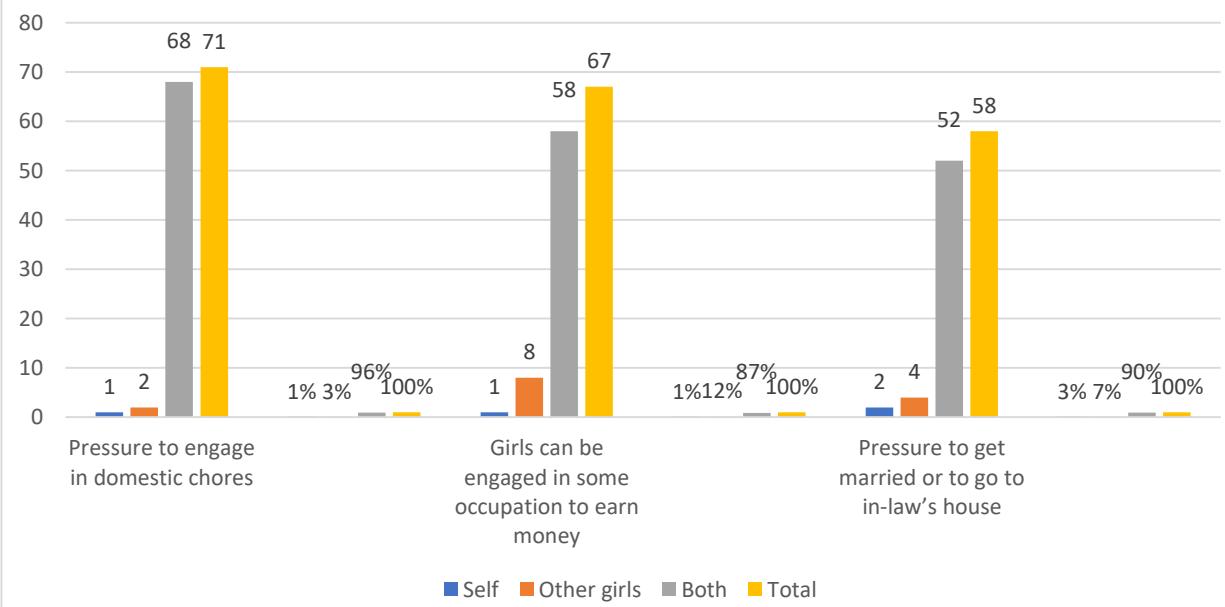


Exhibit-3.11. Pressure to engage in domestic chores & to earn money & to get married



Discontinuation of education of girls during the lockdown period may lower the interest of parents on educating their girls is feared by the participating girls. 80% of them said that they as well as other girls may fall prey to parents' disinterest of continuing with their education.

Reasons behind this fear may be financial or societal or family pressures of not to keep the girls unmarried for a long with them.

The COVID-19 related lockdown caused a bad impact on the financial conditions of most of the families and the resulting impact can also be felt on the continuation of the education especially of the girls. 76% of them said that they as well as other girls may be deprived of the education due to the poverty as a fall out of COVID-19.

The discontinuation of the education of the girls even after the lifting of the lockdown may result in to increased pressure to engage in domestic chores, indulging earning activities and even pressurized to be married.

Shabana Bano (a divorcee who got married in early age) from vulnerable Muslim community describes her odd situation, “*I was preparing to complete graduation and preparing to appear in its part-II examination with hope to get good marks which could have helped her to get appropriate job to earn money. But the prevailing crisis disrupted my plan. Meanwhile, I suffered by fever and took medicines from Jhola Chhaap doctor (quack) since I was not able to go to consult medical practitioner due to a fear of corona infection. This disrupted my study. I also didn't access the benefits of e-learning due to unavailability of Smartphone and internet. I was also supporting my family by earning some income from the tailoring job which also stopped. Therefore, my parents showed disinterest towards my study due to their poor economic condition. Now there is a greater possibility of discontinuation of my study even in post lockdown period*”.

96% of them said that they as well as other girls are most likely to be under pressure to be engaged in domestic chores against their unwillingness to do so. Due to the poverty and discontinuation of the education 87% of them said that they as well as other girls may have to be engaged in some occupation to earn money to survive.

The most threatening impact of discontinuation of the education is occurrence of early / forced marriages and the married ones are most likely to be sent to in-laws house after a brief ceremony called *Gauna* or *Muklawa* in local dialect. This usually happens after attaining the age of marriage but in this case these brides may be sent much earlier with their husbands as scheduled. 90% of them have expressed fear of either getting married or sent to their husband's house. It was also reflected from 60% of the case studies (e.g. *Santosh from Jaisalmer district and Veerpal from Bikaner district*) that they faced conflicting and non-conducive environment in their families during and post lockdown period which hampered their studies very much and they also suffered by social pressure of getting married soon or sending them to In-laws house if they got married earlier.

The study response on the impact of pandemic heightened existing inequities in access to and quality of education – gender disparities are widening, as are disparities by social disadvantage and household poverty. Special interventions to deal with these disadvantages are required.

SECTION-5. IMPACT ON WOMEN'S DIGNITY: VIOLENCE AGAINST GIRLS AND WOMEN

Violence against women and girls has been very expressly defined in the past years.

The *Convention on the Elimination of all forms of Discrimination against Women* (CEDAW) defines discrimination against women as "...any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field"³⁴.

According to the *Protection of Women from Domestic Violence Act* (PWDVA), 2005³⁵, domestic violence is defined as something that:

- (a) Harms or injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the aggrieved person or tends to do so and includes causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse; or
- (b) Harasses, harms, injures or endangers the aggrieved person with a view to coerce her or any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or
- (c) Has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b); or
- (d) Otherwise injures or causes harm, whether physical or mental, to the aggrieved person.

In this context, when the results of this study are looked at, it is seen that all forms of violence have prominently surfaced in the time of this pandemic. This includes but is not limited to domestic violence, added burden of household work, physical, verbal and emotional abuse by male members, sexual abuse, child marriage, pressure to go to the house of in-laws, and asking for sexual favours.

There is an underlying theme of violence in all sections, for example, the girls who were studying, are now at home most of the time, due to which the family members are pressuring them to do more and more domestic work. The pressure also increased due to the male members of the family being present at home all the time, and their surveillance on all the activities of the girls made them uncomfortable in their own home.

Arti (aged 16 years) had stopped her child marriage 6 years back. She completed her 12th standard last year and took up a job for INR 6000 (USD 82) to help her widowed mother run the house. Her younger brother bears a dominant attitude and tries to control her. She says, "My brother dominates us in the house. He does not let me go out and for the past 3-4 months he is behaving badly, abusing and he sometimes even hit me. My mother also takes his side and says that

³⁴ <https://www.un.org/womenwatch/daw/cedaw.htm>

³⁵ <http://legislative.gov.in/sites/default/files/A2005-43.pdf>

since he is a boy, he knows more about the outside world. When I told my mother that I am the one who works and runs the house, she said that I am able to do this because she is the one who has made me this capable”.

In this section, we deep dive into specifically physical violence, abuse and child marriage, as seen through the experiences of the girls and women. The story of violence in the lives of the girls and women is captured in the way they tell their own stories and those of others around them. In keeping with the authenticity of those experiences, this section will explore the above-mentioned aspects through closely linking with the stories as the respondents tell them.

1. Early, Child and Forced Marriage

According to *Girls Not Bride Network*, ‘A pandemic of this nature will also present unique challenges that can increase child marriage both in the acute and recovery phases. Challenges include the loss of household income, higher risk of violence in the household and lack of access to schooling. Plan International research shows that, in crisis settings, girls live in fear of violence and are not only concerned about the constant presence of armed men, but also about Gender-Based Violence (GBV) within families. The breakdown of social networks can also heighten families’ and communities’ desire to control girls’ sexuality and protect their “honour.” Marriage is often seen to protect girls and their families from the social stigma that can result surviving from rape or sexual assault. These risks can be greater in camps where girls are exposed to a different environment than their previous community. Parents might marry their daughters out of fear of pre-marital pregnancy or relationships, which can bring shame on the family³⁶.

Maya Kunwar was faced with extreme pressure of marriage and she says, “I strongly objected to this as I wanted to choose a partner for myself and get married. Because of this, my mobility has been completely taken away, nobody talks to me and I feel completely alone. On top of this, we do not have any money and I don’t think I will be able to start studying again”.

Exhibit-3.12. Incidents of marriage reported by respondents		
Category	No. of respondents	Incidents occurred
Respondents own families	5	7
Relatives families	6	7
Friends families	7	29
Village / community	22	36
Other villages	7	16
Total	29 girls reported	95

5 girls have agreed that child marriages have occurred in their area but reported none.

The above quote represents the complicated nature of child marriages. The most threatening impact of discontinuation of education of girls is the occurrence of early marriages and the fear that girls who are already married are most likely to be sent to the in-laws’ house after a brief ceremony called ‘Gauna’ or ‘Muklawa’ in the local dialect. According to the study, 90%

³⁶ <https://www.girlsnotbrides.org/wp-content/uploads/2020/04/COVID-19-and-child-early-and-forced-marriage.pdf>

of girls have expressed fear of either getting married or being sent to their husband's house forcefully. 10% of the girls reported seeing such incidents in their homes or around them. *Gauna* is a tradition in some areas of Rajasthan where the girls are married at a very early age, but sent to the in-laws' house later, mostly after attaining the legal age. This has brought a lot of problems for girls during the lockdown. A total of 95 incidents are reported of child marriage. The table below gives details about this:

After enduring many troubles, *Nisha Gurjar* had registered herself for her 10th class, but she started facing the pressure of going to her in-laws' house during the lockdown, as she had been married many years ago. She went to her husband's house but somehow managed to convince them to let her complete her studies and come back to her parent's home. She also talks about her friend and says, "*her brother beats her for using the phone and she feels extremely depressed, she tried to commit suicide. She was saved because she received medical help urgently. But as soon as this news spread in the village, a lot of girls were quickly sent to their in-laws' house. Because of this, their peer group also became very scattered*". She also shares, "*our group gives us a lot of strength and we are able to together think of solutions to our problems. Due to the lockdown and pandemic, we are left with no space*".

The girls were also asked to specify the incidences reported by them to the competent authority of the government at local level and the actions taken by them if any. A total 25 cases of child marriages were reported to the nearby Police station through phone calls by the girls or their friends before the incidences occurred, but no action was taken in any of the cases and finally the marriages occurred.

Manju says, "*My brother is 16 and he was just married. His wife is 14 years old. I know it is punishable by law, but I could not stop it. My brother's mother-in-law is a widow and the only working member, so she was pressuring us to get the marriage done, and she said if we didn't, she would break the relationship. Both the families are poor and if this 'rishta' was to break, they wouldn't be able to find another one. Since they are poor, their relatives also maintain distance from them*".

2. Violence

"*My sister was less scared of corona, and more of my father's beatings and anger.*" *Vaishali*.

Women and girls have reported over 67 cases of domestic violence in this period of lockdown. These are cases that have either happened with them, with their friends, or neighbours / relatives.

According to the *Rajasthan Police* data, domestic violence cases in Rajasthan³⁷ have seen a spike of 76% while crimes against women and girls have seen a rise of 34% between June and July (post lockdown). An alarming increase of 67% was also seen in cases of crime against women were

³⁷ <https://timesofindia.indiatimes.com/city/jaipur/raj-domestic-violence-up-76-in-june-july/articleshow/77710566.cms>

registered under POCSO³⁸ during the period from January to July this year as compared to the cases in last two years, with more cases being related to girls.

The situation has prevailed through the years where many a times these incidences are not reported to the police or any authority/support system by the survivor.

This is because a majority of the women do not go to the police, the helpline, or any organization to complain about violence. Most of them talk to their peers or families, which is not fruitful as families do not listen, which is not a surprise since a lot of the violence takes place within homes for women. Vaishali says, "*Despite my protests, I was forced to get engaged. I know I will be married soon and my dream of being a dancer will perish. I was very troubled with the violent atmosphere at my house and felt uncomfortable in my own home. No one could understand me and if I tried to say something, I was told to shut up. No one cared about what I said or didn't say*".

Various news articles also highlight specific instances of violence in the community. For example, HT analysis of cases recorded across the country elaborate that the incidence of domestic violence during the lockdown depends upon the ability of victims to make complaints while they share domestic spaces with perpetrators. The second aspect to this issue is that while there are several helplines and shelter homes available for women to call or live in — both state-run, and those maintained by NGOs — the help that they can provide is limited due to the lockdown. Women cannot travel to police stations, and social workers are unable to reach them or arrange for their travel; the police are overburdened with COVID-19 duties, and visiting homes to investigate domestic violence complaints is often not considered a priority. What's more, domestic violence cases are filed in lower courts as these are civil disputes and at present, courts are only open for emergency hearings, such as bail pleas³⁹.

Instances of Violence: The instances of violence recorded in the study range from physical beating, rape and murder to verbal abuse and increasing burden of domestic chores. These instances, though presented in singular cases, tell the story of an environment strewn with violence, where women and girls are constantly being suppressed.

Roshni says, "My uncle drinks a lot and fights. He insinuated that I was having an affair with his son-in-law and was fighting with me a lot. I could not

Exhibit-3.13. Types of Violence against Girls and Women	
Violence category	Incidents
Physical beating	42
Quarrelling/verbal abuse	2
Increase in domestic burden	5
Pressure for marriage	4
Pressure to get pregnant	2
Physical and sexual assault & teasing	4
Pressuring for sex	1
Rape	6
Murder of wife by her drunken husband	1
Total	67

³⁸ <https://www.hindustantimes.com/jaipur/over-66-rise-in-crimes-against-children-in-rajasthan/story-bRzOTrhDFtX3DrRROYTqfP.html>

³⁹ <https://www.hindustantimes.com/india-news/domestic-violence-during-covid-19-lockdown-emerges-as-serious-concern/story-mMRq3NnnFvOehgLOOPpe8J.html>

take it and I hit him. When my father came home, I told him the whole story and he called the police after which my uncle was arrested”.

According to other news reports of the area, there have been many instances of rape, especially of minors and beating by male members of the house⁴⁰. The same have been talked about by the respondents. Below is a table mapping the instances of violence reported by the respondents.

50% of the instances of physical beating have been caused by drunk husbands. Only 3 cases out of these have been reported to the police, stressing again that these cases are not reported. 13 cases out of these were solved by community elders. In the cases of physical and sexual assault, one case relating to a minor was reported to ChildLine.

In the instances of rape, 2 were against minors and 4 have been filed with the police. Arrests have been made in three cases and further action is being taken. In the case of murder of the wife, the husband has been jailed.

Through this micro data, it is seen that only cases which are ‘severe’ according to the society are being pursued with the authorities, whereas cases of beating, verbal abuse, teasing, pressure for marriage or children, which are also instances of violence are seen as being resolved within the family or community, making it very difficult for women to come out of this situation of abuse.

Arti narrates, “My friend Asha lived in a ‘kacchi basti’ in Ajmer. She was studying in 12th class and would come to my coaching centre, so that she could study and then work to earn good money. She committed suicide on 6th June but we did not get to know for many days. Since we had lost connectivity during lockdown as we had no phones to speak to each other, we found out about this from a teacher at the coaching centre.

Asha lived with her parents, one brother and two sisters. Her father would get drunk and create a ruckus in the house and beat his wife and children. Asha had been married when she was very young and she did not like her husband at all. But during the lockdown, her In-laws and parents started pressuring her to go to her In-law’s house and In-laws started coming home to take her. Her father also did not want her to study further and was keen on sending her away. He had made her quit studies many a times, but she would resume on the insistence of her friends and the coaching class teachers. This happened many times and even before her exams, but she was finally able to attend the exams. People at the coaching centre and her friends were well aware of Asha’s situation and they supported her. She wanted to become a police constable and was preparing for the exams.

I found out through another friend that Asha was being beaten up for four days before her suicide and she had not eaten any food. The day before she died, there was a lot of fighting inside her house and their light was on the entire night. In the morning, the neighbours were told that Asha has been bitten by a snake and they quickly took her body to be cremated. This was not reported anywhere. Neighbours said that they saw deep blue marks on her body, which are left after being badly beaten. They were

⁴⁰ https://www.thehindu.com/news/national/other-states/13-year-old-allegedly-gangraped-by-school-manager-teachers-in-rajasthan/article32193800.ece?utm_source=taboola

speculating if this was murder or suicide. Her result has come now and she has scored 64%, which is a first division, but now she and her dreams have both drowned somewhere”.

Manju, Asha’s cousin says, “Ashas’s parents are justifying her death and my parents say that if their own daughter (Manju) did the same as Asha, they will not hesitate to kill her.” This is a clear threat Manju’s parents gave her. 19-year-old Manju is a domestic worker earning INR 12,000 (USD 163) a month and supporting her parents to run the house. She is a main earner in the family. Manju was married when she was 12-years-old and now her parents are forcing her to go to her in-laws’ home. Though she is also studying in college and is the main earner of the family, she is not allowed to take her own decisions.

In a similar voice, Shabana Bano says, “My friend was married and sent to her In-law’s house on Holi festival. In the beginning, she was in touch with us over the phone and she would tell us that she had to bear a lot of torture and physical abuse in the house. During the lockdown, when mobility and communication had completely stopped, she could not take help from anyone and she ultimately committed suicide by consuming poison”. These numerous cases demonstrate the kind of threats and risks girls face, pointing to the need of a deeper inquiry.

3. Long-Term Effects Girls Foresee

Among the respondents, over 60% said that this lockdown will have long-term effects on their lives. Below are the opinions of girls on the various impacts this has had on their lives during the lockdown:

- i. Over 80% girls said that the pandemic has impacted their mobility and they have had to face increased restrictions in the house.
- ii. 73% girls also said that the pressure and violence at home has increased.
- iii. 81% said that sanitary napkins were not available to them. This is because mostly sanitary pads are distributed through the schools and ‘Anganwadi’ centers. With these being closed, there was no alternate arrangement for girls to access them.
- iv. Almost 80% girls accepted that there is increased pressure on them to get married as their parents don’t want to or cannot afford the expenses for their education due to poor financial conditions.
- v. Over 50% girls feel that they will be asked for sexual favors in lieu of employment. This is alarming to see and is a matter that needs deeper probing. It remains to be seen if this is

Exhibit-3.14. Variables of Long-Term Impact		
Variables	Respondents (N=388)	%
Increased pressure of domestic chores	211	54
Discontinuation of education	261	67
Increased pressure of family	30	8
Disruption of future plans	110	28
Unable to move out of house	90	23
Increased family restrictions	18	5
Pressure of marriage or gauna	28	7
Pressure of early pregnancy	4	1
Increase in violence and beating	23	6
Any other	4	1

a reality, or if girls have overheard people talking about it, or heard from elders who might want to dissuade them from employment.

It has been seen that these are not just issues which have come up during the pandemic. They are systemic issues, which have been there before and will continue even after the lockdown is lifted.

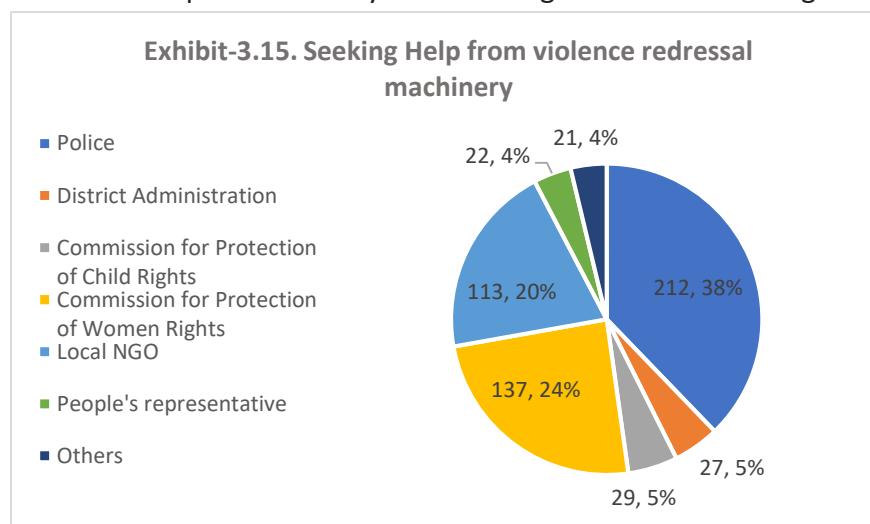
According to the respondents, this will have long-term effects. The table below explores the kind of impact they see it having.

It is clear from the data above that girls' education will be the most impacted in the long-term. This coupled with increased household chores will directly impact their future plans, thus, changing the course of their lives in next few years. This means that they will have to find new ways to negotiate and re-structure their dreams.

4. Ways to combat the Violence

It is very clear that violence affects girls' lives deeply and they need to find ways to combat it. Our social structures need to have in them spaces for resolution with the ultimate goal of ending violence. A lot of respondents in the study seemed to know where to get help in such cases. Though it is also seen that they do not have enough knowledge of what to do when they approach the authorities or helplines. This information gap is an important domain that needs to be addressed.

A majority of the respondents said that peer support is important to get information and negotiate with violent situations in their lives. Many case studies highlighted that girls tried to be in touch with each other and exchanged information and advice with one another to address the problems they were facing. But these strategies used by girls need to be



incorporated into formal structures and associated processes.

We found that 72% girls said that they knew they could stop violence against women whereas 28% girls were not aware of the fact that they are capable of taking initiatives to intervene

in situations of violence by using knowledge of appropriate channels of complaints. The chart below gives a distribution of girls' knowledge of who they can approach for complaints (this is from the 72% who know they could complain about violence).

5. Role of Stakeholders in Putting an End to VAW

Throughout the survey, the roles girls expect various stakeholders to play with regard to addressing issues of violence in their lives and communities were brought forward. The stakeholders in this are the government and allied bodies, NGOs, family members and the girls themselves. 42% of the total girls responded on this and the results are as below.

- i. **Girls themselves:** A majority of the girls want to learn self-defense and raise their voice individually or in groups (30%), they also want to empower themselves through trainings (19%) and do collective efforts through Adolescent girls' forums(12%).
- ii. **Family:** In looking at the role of family, girls felt that most importantly families should empower girls through information and awareness of protective measures (37%). Girls also felt that families need to hear the girls' voices and counsel them (31%).
- iii. **Gram Panchayats:** Panchayats are constitutional bodies constituted under the 73rd amendment to the constitution and are responsible for ensuring common good of citizens. Panchayats are locally accessible to girls. In many cases girls have said they expect the Panchayats to intervene and stop further violence and help them seek justice. Girls feel that Gram Panchayats should hear girls' and women's complaints and help them to raise their voices against violence. They should help in lodging complaints to the police in cases of violence and prevent further violence and provide right of residence to survivors of violence. Panchayats should play a role in ensuring reach of the COVID-19 response schemes of the government, by working in collaboration with other departments.
- iv. **Government:** The girls expect the government to take strict legal action in reported cases (33%) and also have laws which can lead to effective enforcement (26%).
- v. **NGOs:** Girls felt that NGOs had an important role to play in terms of supporting girls and women in need by taking their cases forward and being involved in processes of resolution (36%). They also feel that NGOs should consult with girls and their families, other stakeholders and also provide training to girls and run awareness and advocacy campaigns.
- vi. **Others (Community, Relatives, Friends / Peers):** The girls expressed their views on the role of other stakeholders apart from the above categories. These included other community members, relatives, and friends. The support of these stakeholders is important to fight against violence. The support may be in the form of emotional, legal, social and logistical support. They should stand with the survivors of violence during the difficult times.

In all of the above it can be seen that girls want a support structure and group where they are able to get counselling, talk about their issues and seek resolution. For a lot of girls, this space if found in their peer networks.

Arti feels that 'it gives us a lot of strength when we meet each other; we are able to find solutions to our problems. Pandemic and the lockdown took this space away from us. She further says: 'girls, however, have not given up; rather they have found ways to deal with adverse conditions.

Sushila says that "even if girls get little support in their families, they are able to break many barriers. Only a few girls had this kind of support".

The violence girls' face is structural and systemic and has become a lived reality for many. The fact that girls were able to talk openly regarding this in the survey goes to show that they are aware and want to fight this violence. This struggle is indeed a societal struggle and a lot of systems will have to put in place and some removed in order to end violence against women and girls. This has emerged in a big way in the pandemic and thus also in the study. In the later chapters we will explore the demands girls are making of various stakeholders to put an end to this.

CONCLUSIONS

Well-being of an individual has been discussed in the entire above sections and it is seen that this is related to mental and physical health of an individual. Factors that affect well-being are presented in the table below, along with the percentage of girls who have had to face them.

Exhibit-3.16. Key Issues felt by the respondents	
Key Issues emerged	% of respondents
Women in the house lost their jobs	11
Shops were closed & small businesses could not sell	32
Women's jobs became irregular & they did not get their salary	12
The house was running on borrowings, and personal savings got over	21
Difficulty during menstruation in management and infection	49
Effected girls' friendships and networks, peer groups became scattered	56
Entertainment & sports were affected	35
Differences in relations within family, unable to maintain interpersonal balance, tensed relations	44
Girls whose health was affected and who decided to not go to the doctor	20
Change in routine, which makes it difficult to go back to their older routine	100
Unable to go to school or college, restricted mobility	100
Feeling bad about not going to school or college	97
There is danger of the girls' plans & programs getting disrupted	89
The interest of stakeholders in girls' education is decreasing	80
Girls have the pressure of household chores, & pressure to take on gendered roles in the house	96
Pressure to get married- there is a feeling of less spending during the wedding and families relieving themselves of the responsibility of girls	90
Increase in violence against women and girls – including cases of pregnancy & rape	17

The above analysis is an attempt to put together various data obtained from the entire study. It is clear that economic conditions have weakened, borrowings have increased, friendships

and supporting structures have weakened, recreation and sports activities have been affected. Relationships, and people's behaviour in them has changed and violence has increased. Due to the change in daily routine and work pressure, there is an education crisis coupled with the pressure to get married. All of this goes to show that the overall health of girls is severely affected and it needs to be studied in further detail.

CHAPTER-4

GIRLS' DEMAND ON AVAILABILITY AND ACCESS TO SERVICES AND OPPORTUNITIES

Women are subject to discrimination and inequality which is rooted in societal norms and structures. There has been a long-standing struggle world for equality and equity but we are yet to achieve it. There is not one solution for this as the problem is complicated through differences in caste, class, religion, age, gender, region, culture, etc. It is these differences which need to be taken into account for any effort being made in the direction of safeguarding women's rights.

Various studies have proven that if adolescent girls and young women are given equal opportunities, they can perform better in all sectors. A study⁴¹ states that the pro-women constitutional reforms, amendments, policies, and programmes have increased the participation level of women in decision-making processes at the family and community level and broken the stereotypes that exist in the public and domestic spheres. The presence of female leadership in villages has significantly reduced the gender gap in education and other sectors.

Empowered girls and women⁴² have a multiplier effect on the society. Reaching out to girls with essential services and giving girls greater choice and control over decisions that affect them, help break the cycle of poverty between one generation and the next. Girls and young women who have been a driving force for various activities and social programs, especially in villages, need to be supported and prepared for leadership roles. This is essential in formulating policies that support women and girls.

According to *Bilquis Bano*, “*In this hour, there are many people who need help. Organisations and the government need to listen to women and girls and support them*”.

It is evident through the study that for adolescent girls, the organisations working in their field are very important. Girls feel that organisations are essential support structures for them and hence also have expectations from them. The study tries to gather the aspirations and voices of such young women and girls on issues of greater importance like education, living with dignity and freedom. The voices as reflected in the analysis express their concerns and opinions on different issues and their demand of access to services and opportunity. In this section, we will look at the demands girls are making from the government and organisations/NGOs.

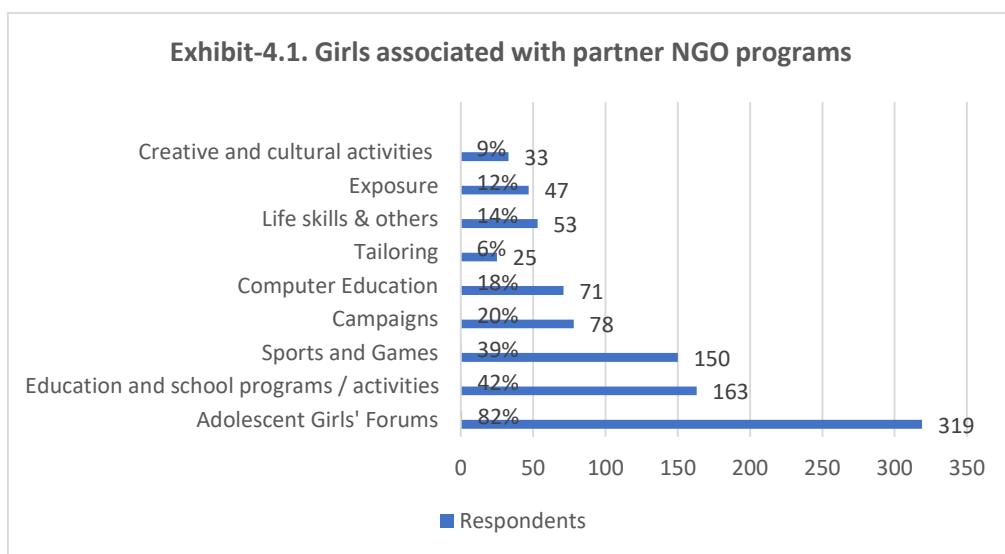
⁴¹ J-PAL Study (2007-08) <https://www.povertyactionlab.org/evaluation/changing-teenage-girls-aspirations-and-educational-attainment-through-increased-female>

⁴² Vikalp: <https://www.youtube.com/watch?v=5jDzMCmVWVQ>; CULP / UNFPA, <https://vimeo.com/76348084>

Girls Association with the Partner Organizations

The Exhibit-4.1 shows the capacities in which the girls are engaged with the organisations. All the members of the study group were associated with one or more programmes of the organization.

Building adolescent forums and making these the centre of various activities, is one of the



primary works of all organisations involved in this study. These forums are the girls' own space for their expression and they give them strength and majority of

the girls are associated with them.

The respondents were also asked to suggest what the organisations should do to, strengthen girls and their capacities. The same was asked during interviews in an open-ended manner, to explore more deeply what the girls want. Therefore, the demands presented by the target respondents for accessing services from different key stakeholders as their rights seem relevant in the study.

1. Girls' Demands from Organisations

The next exhibit reflects data on the suggestions of respondents elicited from survey and case studies for assessing their demands from the organizations. The girls were asked to mention their views on the areas of functioning of their organization as to which should be the thrust areas in their opinion on which the organization should work on, in the near future. The top 5 suggestions are given in the table below.

It can be seen that girls

Exhibit-4.2. Suggestions by Girls to NGOs: What girls want		
Suggestion	Respondents	%
Training & exposures for adolescents' life skills & leadership	40	10
Vocational trainings: computer, tailoring, singing & dancing	28	7
Education	34	9
Inspirational programs for girls' collectivization through fairs, sports & games, creative & cultural events / peer interactions	64	16
Others	90	23

want the organisations to provide more motivational activities which include things that give

them joy. It's very important for us to see that 16% of the girls have chosen this, as the organisations are not only a source of information and training, but girls are look to them as spaces where they are encouraged to explore, play, think and lead. Girls have also given importance to life skills, and leadership (10%) and education (9%). The suggestions under 'other' can be seen as reflected in the demands below, elicited from the case studies.

Specific Demands

1.1. Use of Technology for Linking and Support

- i. Girls should be taught to use the internet for get information.
- ii. Virtual networks should be created to stay in touch with girls; WhatsApp groups should be created where girls are able to voice their opinions freely.
- iii. A helpline should be in place and a committee should be in place where girls can complain and seek immediate support.

1.2. Deeper Engagement with the Community

- i. Engage with parents for improvement of their behaviour toward girls; educate parents on gender equality and child & women's rights.
- ii. Work on changing attitudes and behaviour of people regarding women's rights at the village and tehsil level
- iii. Work with appropriate government authority to ensure that laws are enforced effectively.

1.3. Training and Awareness

- i. Teach and train girls on matters of education, violence, child marriage, safety, so that girls are equipped to help themselves and others
- ii. Strengthen adolescent forums so that solutions can be derived at the group level.

1.4. Creating a Girls and Women Specific Centre

- i. There should be a centre just for girls, where someone is present at all times and it is equipped with different materials for engagement; this centre should also have medicines, pregnancy test strips, and other associated information.
- ii. Girls should be able to speak openly about their issues at this centre and get information and support; Information about safe sex, abortion and contraceptive pills should be available
- iii. Organisations should provide regular counselling to girls on sexuality and sexual health
- iv. The medium of information should be such that girls can learn them and use it themselves
- v. The centre should be such that the girls get information freely on any topic

It is felt that the girls are very excited to talk about themselves, they derive strength from their networks and can really help each other. Arti says, "*I really liked this survey because it gave me an opportunity to think and understand. I want my story to be published with my name on it*".

Like Arti, many other girls associated with the organisations are peer leaders. It is interesting to note that in this pandemic situation, where the organisation workers could not go to the

field often, these girls have come up as strong leaders, being sources of information and helpers in tough situations. Making their leadership more systematic and operational has to be determined. 57% of the girls have said that they would like to take up certain roles in the organisation so that they are able to continue working for their community and peers and also tackle some of the above-mentioned issues themselves. They have expressed interest in being youth leaders/social workers/supports (45%), or group leaders (28%) and trainers/teachers (14%).

Vaishali says, "I saw that the people migrating back to their homes were in a very bad condition. I helped by giving them rations, and information to go home. I was also part of a collection drive where I collected wheat and gave it to the migrants."

Chanda helped girls procure sanitary pads. She says, "I linked them up with the NGO and distributed sanitary pads to many girls in need. We also distributed books to girls who needed them but did not have the resources to buy books for them."

Apart from aspiring to take up certain positions themselves and work for the community, the girls were also asked who they would like to see taking the lead for this work within organisations with whom they are associated. 29% said that any and all staff members could take up this role, and a significant number felt that it should be a female member who takes the lead.

Manju says, "Girls are not given importance in the family; therefore no one thinks that they can have some money to meet their own expenses. Those expenses are not valued at all, whether in a low-income or medium-income household. Generally, it is believed that girls who spend on themselves or materials, are not good girls. I and some other girls who are continuing to study, work on the side to save money for our education and other needs. The most essential expense out of this is for sanitary pads, which is given free by the government, but there is no guarantee of it. During the pandemic, not getting pads was very problematic for many girls. We need to think of something so that we are spared of this disaster next time".

2. Demand from the Government

The pandemic has exposed many loopholes in the support systems available to girls at the ground level. Certain provisions in education, health and support services are available as per government schemes, but this time has shown their flaws in operation. The girls have made certain demands of the government and the responses of the target group have been presented for each of the development aspects of the girls in this section as follows:

2.1. Effective Compliance of Right to Education (RtE) Act for Ensuring Education for All: The data reveals that 64% of respondents reported that they do not have adequate number of teachers in their schools and they expect that the required number of teachers and subject teachers (21% respondents) should be appointed. 33%, 32% and 18% of the respondents want proper facilities for computer education, internet and library in their schools respectively.

It is clear that the girls face lack of attention from teachers which holds them back in their studies.

They have also demanded that they be digitally literate as it is a very important need of today and has emerged as critical during the pandemic time.

More specifically, girls

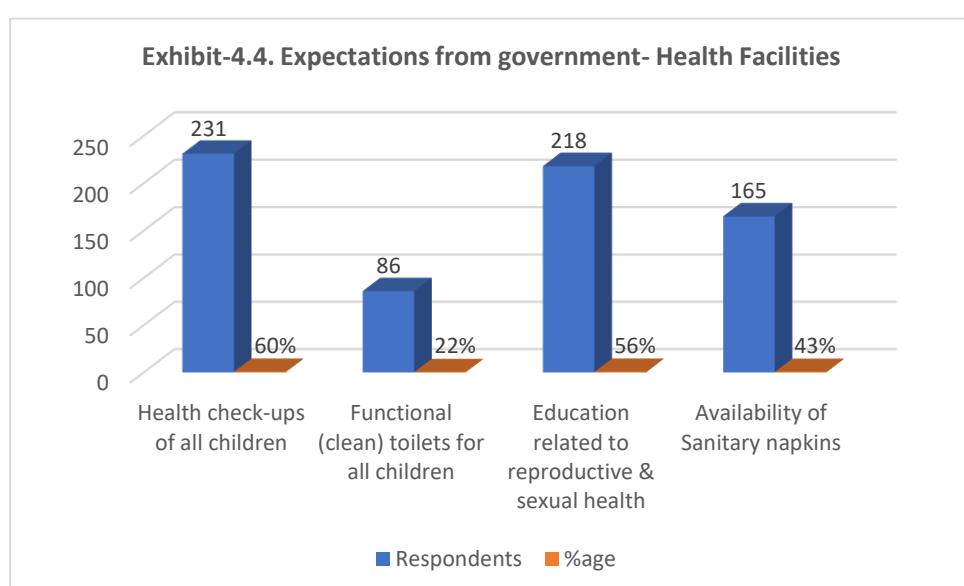
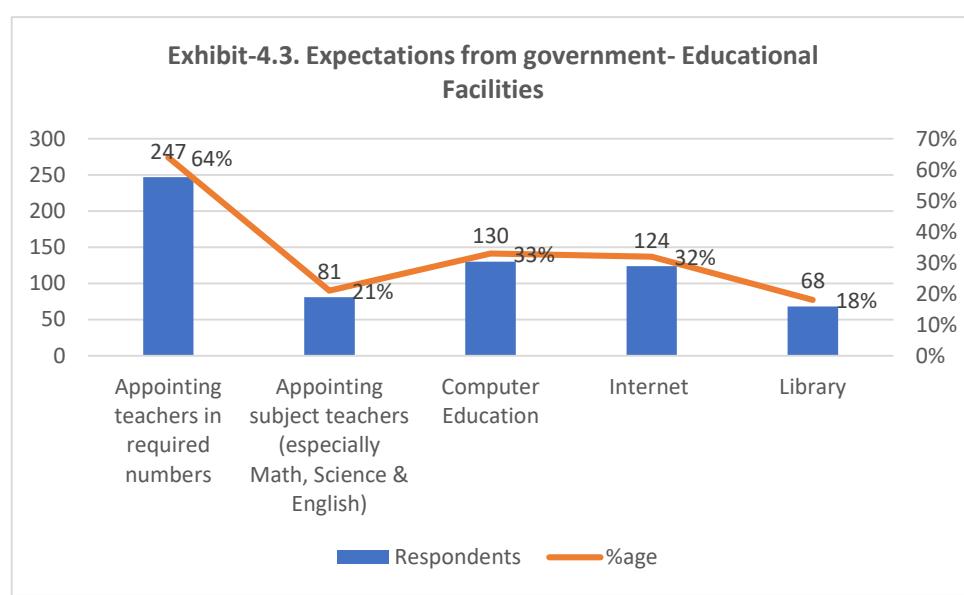
demand:

- i. Free internet and gadgets available for online education; computer trainers in schools
- ii. Violence, sexuality, menstrual health should be made integral parts of the curricula
- iii. Training for life skills; Developing different ways of learning in order to include every student
- iv. Education and training which leads to work

Aafreen says- “the government should have classes in our school on violence, sexuality and health so that girls know what is happening to them and what they should do. There should be a teacher who girls can speak to freely.”

2.2. Health and Hygiene: Girls are vigilant that there is a need of regular health check-ups of the students in schools as 60% responses were in favour of these. It is also possible to have a

more comfortable environment for the girls to get regular check-ups done, as they would not be able to visit the doctor more frequently, unless they were ill, and this gives them a chance to know more

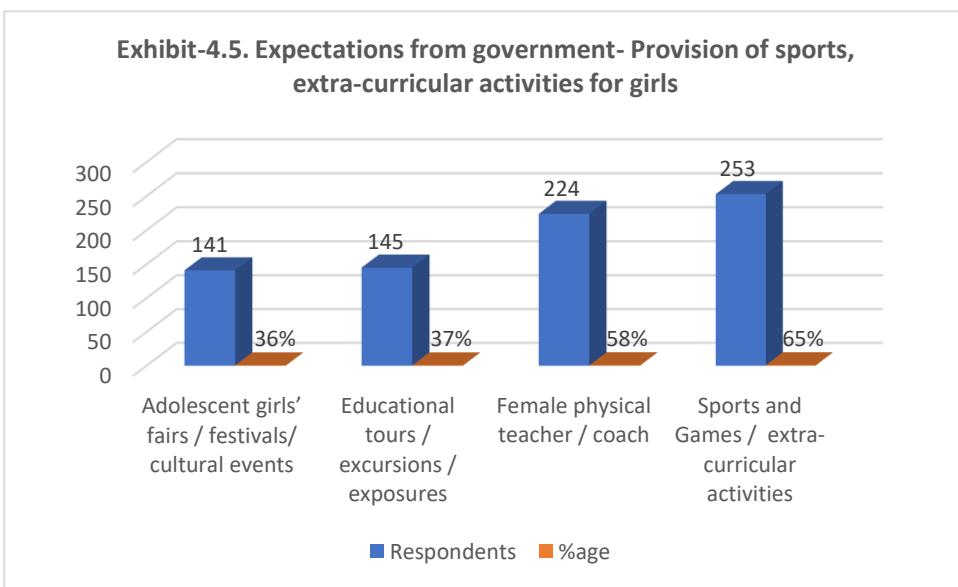


about their own health and be on top of things. A large number of girls have spoken about the need of reproductive and sexual health education (56%) which is largely absent in the classrooms. This has come out as a major concern even in the previous section on demands from organisations. Similarly, 22%, 56% and 43% of the girls expected to ensure availability of functional / clean toilets in schools, information related to SRHR and sanitary napkins in schools respectively. Girls also expect government to ensure the availability of sanitary napkins for them. Right now, girls can access them in schools and Anganwadis, but with these being closed down, a lot of girls had issues and could not get sanitary napkins. This is a basic need for girls and it has been highlighted many a times in the report.

Additionally, girls demand:

1. Solutions to malnutrition and anemia
2. Low-cost medicine availability
3. Rest room in schools to rest during menstruation
4. Information provided on use and disposal of sanitary pads

2.3. Sports and Extra-curricular Activities: 65% of girls expect increased extra-curricular activities and availability of sports items in the schools, which are either available only for



boys or non-functional. It is evident that there is discrimination between boys and girls during sports activities in school. There is a perception that some kind of sports are meant only for the boys and not girls,

which needs to be broken. The absence of female PTIs in schools increases this divide. That is why a considerable number of girls have demanded appointment of female PTIs.

The Specific Demands from Girls are:

- i. Availability of enough playing fields and ensuring that they are usable and safe for them.
- ii. Exposure visits: various programs focusing on girls' entertainment and fun activities like picnics, films, attending *melas*.

2.4. Ending Violence against Women and Girls: The responses show that girls need to be briefed and trained on the complaint channels available in the system. This is the area where most of the girls don't feel empowered and well equipped with the information. Even though we have seen that the girls know who to approach, for example the police, but they do not

know how, whom to approach exactly, how to lodge a FIR, what are the provisions available to them and so forth. This is the essential information that they lack.

They also indicate towards the dire need of life skill education in schools. The demand of at least one female teacher in school shows their discomfort with all male staff in the schools. They also want that girls' collectives be constituted in schools where they can share their concerns and views in its regular meetings.

Through the above sections it is seen that girls are demanding groups to be formed and maintained for them to be able to voice their thoughts. This is a very critical part to focus on because through various examples it is seen that girls need someone who can understand them. They have been approaching their peers, helping them, taking help from them, and in cases where they could not reach out, it has led to a sad result for all of them.

Exhibit-4.6. Expected Interventions for Ending Violence and Discrimination Against Girls		
Activities	Respondents	%
Life skill education to adolescents	115	30
Providing child rights related knowledge and information where to complain against culprit of violence / discrimination (providing information. Name of official/s and contact phone number/s)	259	67
Establishing adolescent girls' forums and their regular meetings	83	21
Legal Literacy / education (constitutional rights, laws related to stopping child marriage, discrimination, violence, child rights, women's rights, gender equity)	68	18
Provision of at least one female teacher in every school and ensuring her regular attendance	141	36

Girls' Specific Demands are:

1. Helpline numbers to be advertised and distributed in every village
2. A safety and counselling centre should be made available for girls in village
3. Training should be given to girls for handling matters related to violence
4. In incidents of eve-teasing, violence, stalking, etc. ensure swift action
5. Creation of place where the girls can complain online and get immediate resolution
6. Enforcing a ban on things like child marriage, '*gaund*', and '*atta satta*'

2.5. Other Provisions: Looking at some other expectations from the government, the girls laid

Exhibit-4.7. Other Provisions Required from the Government (N=388)		
Provisions	Respondents	%
Bringing new schemes for continuation of development and education of girls in COVID-19 crisis	246	63
Alternative arrangement of education of girls during closure of schools	207	53
Skill Trainings and counselling	84	22
Legal Education / imparting information / knowledge about legal entitlements / new / social protection schemes related to development of adolescents	239	62

emphasis on the emerging need of continuation of education during the COVID times. They wish that an alternative arrangement for the girls' education could be made as their schools are closed and likely to remain so in the near future. Information on legal entitlements of the

social schemes should be made available through the school education in order to minimise the corruption & maximise the benefit.

Specific Demands are:

- i. There should be part-time work opportunities for girls & women
- ii. Opportunities for online work
- iii. A scheme like NREGS for girls, so that education and work can go on simultaneously
- iv. Free transport pass for public transport
- v. Scooter or cycle availability
- vi. Cash benefits for: Higher education; Girls' necessary expenses; & special scholarship

Conclusion: We have seen through the study that in cases where the girls had phones and/or were associated with organisations who were providing them information and support, they were able to help other girls as well. They gathered the information from their neighbourhood of those in trouble and lent a helping hand to them as well. But for these families living in poverty, who are unable to afford a smartphone and a computer, and therefore internet, the needs for information, e-learning, and associated models need a careful re-assessment and redesigning in order to ensure education for all, support to girls in cases of violence and effective redressal. These demands put forward by the women and girls are the very basic minimum that needs to be ensured so that they are able to lead their lives fully and with dignity.

CHAPTER-5

KEY FINDINGS AND CONCLUSIONS

This study has given *Girls Not Brides* member organizations in *Rajasthan*, the opportunity to build a new and comprehensive framework to engage with girls during the present Covid-19 crises. These girls have been working with these organizations for many years but had to face many communication roadblocks when the Covid-19 lockdown began in March this year.

The lockdown had created a lot of confusion leaving governance and public health systems fully occupied and frazzled. People did not know what had happened as numerous advisories were issued. Organizations/ NGOs also took time to settle and gather their resources to build a strategy around response. In these times, the organizations and girls associated with them found the study to be a very timely and important intervention. The entire process has left them feeling important and empowered.

Finally, a space could be created to discuss and reflect on lived experience during the lockdown and all that it brought down upon individuals and groups. The study, therefore, became more than just a research by relinking organizations and individuals in crucial ways in these trying times. It has also been instrumental in showing new directions for the future.

The data from the study points to some key findings which have been placed under separate categories below:

5.1. Economy

The COVID-19 lockdown that began in March in India brought about large-scale physical as well as economic immobility. Several business and services had to close overnight. The lockdown badly hit daily earners who were left with no option but to rely on the assistance of government, NGOs etc. for food and essential commodities. This has had various long-term effects.

- **Burden of Domestic work:** The study shows that shut-down of economic activity and educational institutions led to girls bearing the major burden of household work, where, in many instances, there were more people than usual.
- **Low Spend on Nutrition:** The financial hit families took and the uncertainty of income led to less spending on nutritional requirements, especially for girls. Girls are bearing the major burden of household work, less spending on nutritional requirements
- **Lost Work:** There were examples of girls funding their own education by doing part-time work. The lockdown had them running out of work, while, additionally, schools shut down as well. Their plans have been disrupted and they face an uncertain future, due to loss of money and schooling.

- **Increased psycho-social pressures:** COVID-19 related lockdown impacted the economy, and also the mental status of human beings greatly. This happened due to many reasons including but not limited to the loss of income; fear of the disease, safety of the family, lack of facilities, low nutrition and lack of mobility, which affected relations within the family.

5.2. Education

- **Education Fears:** As per our survey, 67% of the girls who are studying feel their education will be severely impacted and may even be discontinued in the long-term.
- **E-Learning and Communication:** Most private players and the government have stressed on ‘digital education’ during this emergency period, but barring selected urban areas, the e-learning infrastructure is not sufficient at all. Students say that there is a poor accessibility of e-learning for them, especially for girls of marginalized communities in rural Rajasthan.
- It should also be noted that women and girls do not have equal access to technology and services. Around 74% of the respondents in the survey do not even have basic phones. Of the 26% of respondents who have relatively better phones, only 72% have smartphones within which only 67% have access to internet. In today’s times, not having a phone amounts to not having access to information as well as no access to services and helplines. Most of the time they don’t have money for recharge.
- **Education Infrastructure:** The majority of teachers (both at the school and college levels) in rural areas have taken little interest in organizing e-learning classes for their students since they are not well equipped for the same due to non-availability of internet connectivity and lack of specific student-centric learning material. It is seen that private education institutions and coaching centres, after having charged the students’ families with fees, are not making access to e-learning for their students easy due to lack of the required infrastructure.
- **Schools as spaces for expression and support:** In the conversations with girls, it has come out very clearly that they think of schools as not just a space for classes and studies, but also a space where they meet peers, build and expand their networks, interact with their friends and have spaces to talk about themselves, their families and seek support. This enables them to think about themselves and also make decisions on what they want to do in life. This physical space is very important in expanding the horizons of girls, where they are able to ‘be’ without much interference of their families or the community. They help them move forward and find new avenues for themselves. It is important thus to maintain these spaces for them. However, it is also felt that alternative spaces apart from school are needed.

5.3. Abuse & Violence against Girls and Women

- **Grave Violence:** According to the data, all forms of gender-based violence have been prominent in the lives of the girls themselves, and in the lives of their mothers, sisters or friends and acquaintances. It also shows that there has been little to no intervention or help provided to these women and girls during this time for the same. This violence is very grave which includes girls' death, burning by throwing hot tea, bruises through physical beating, throwing her out of the house, making her do work above and beyond her physical capacity, rape and sexual abuse, child sexual abuse, cyber-crime and many other instances which have come out through the study. There is an environment of fear and violence which has been created around the girls, which has affected the parents as well. Due to this added fear, there is a great danger of their opportunities and spaces being taken away. Present redress structures are inadequate and are helping girls and women in a limited way. Also, structures constituted by NGOs and government need to coordinate with each other.
- **Difficulty in Seeking Assistance:** The study notes that although a majority of girls know where to complain about violence against women, they do not know how to go about it and what the process is for the same, hence they feel apprehensive at the thought of approaching the appropriate authorities and uncertain about the actions those authorities might take.
- **Pushed into Marriage:** As mentioned before, the shut-down of schools has restricted the mobility of girls to the household and thus put under strain their opportunities for their future. This has led to girls being pressurized into marriages. And if already married at a young age, they are being sent to their in-law's house as per the traditional *gauna* custom. This leads to girls being out of education for a long-term and also results in early pregnancies. It is observed that these marriages are happening to reduce economic burden of the household. Due to the economic crisis, some families have chosen to get girls married along with elder brothers or sisters, to save marriage costs, leading to girls pushed into marriage without consent. Early pregnancies can also be anticipated as resulting from these changes.
- **Surveillance:** There is increased control over girls' sexuality and surveillance on their movement outside their homes by the male members in the house since all members are confined to the home for a long time.
- **Suppressed Autonomy:** The girls' struggle for autonomy has been brought to a halt due to COVID-19. In some cases, the gains that girls have made are being lost and urgent attention is needed to support the girls who are hoping and trying to regain their autonomy and feel empowered.

5.4. Health (Mental and Physical)

- **Physical Health and Access to Health Services:** It is clearly seen that girls' physical health has been neglected even in cases of severe illness, where sometimes families

have refused to provide proper treatment. There is no investment on improving their health conditions. It seems that the impact of the COVID-19 lockdown on girls' health shows that girls / women have not gained complete confidence in the health system. In cases where they have approached health services, their experience has been bad as they faced disrespect from service providers. This increases the chances of their remaining unattended during their ill health and not getting the right consultation and treatment from medical practitioners. Girls need to be engaged with and connected to health service providers to ensure their well-being.

- **Menstrual Health:** The study found 29% of respondents were facing issues of menstrual management. The non-availability of sanitary napkins is seen as a major issue. Due to this, many girls reported having to use cloth during menstruation, leading to hygiene issues, high discomfort, and ultimately a feeling of loss of dignity.
- **Privacy and Communication:** The study clearly shows that the privacy for girls in families is not getting any importance. The scope of privacy is shrinking, leading to self-respect being hurt. In the case studies, some respondents also said that SRHR related information was not available. Girls are not finding spaces to communicate and interact with friends, which has led to loneliness and isolation. This has further led to narrowing of spaces for resolution of conflict and girls are having to face violence without any recourse. This has led to girls committing suicide.
- **Mental Health:** The study reveals that 47% of the girls surveyed have gone through feeling of loneliness, anxiety and depression while 34% girls have gone through feeling of dependence and vulnerability issues. The effect of which can result in anxiety. Also, 24% girls say that they are going through depression. It may or may not be clinical depression, but the fact that they have articulated it as 'depression' cannot be ignored.

The case studies have recorded accounts of incidents of violence, suicide or attempt to suicide, harming themselves, restrictions on mobility and strain on mental health.

5.5. Over-all Impact of the Study on Girls and Women

The girls and young women engaged by this study felt that they finally got some space to talk about and reflect on their own lives and experiences during the lockdown. The interactive module of the study has paved the way for the organizations to think about new strategies and frameworks for the future in collaboration with the girls.

The study has seen many girls take active interest and initiative to articulate their problems and propose solutions. In this sense, they have taken the role of researchers. A total of 35 girls have been part of this research and they are keen to move forward with the support of their organizations to take on leadership roles in addressing the issues that they are so familiar with. These girls see organizations/ NGOs in a supportive role in their life. This is clear from the expectations they have from the organizations. It also has to be seen that the CSOs and the programmes they run have an important role and contribution to make in the lives

of girls. This becomes even more important in the situations which have emerged as a result of the pandemic. Just like schools provide a space to girls, organizations can also assist in bringing out the potential of girls, for which a constituted effort can prove fruitful. It is hoped that the organizations are able to give them the support they want.

Demands of the Girls from Organizations and the Government

It is very evident from the study data that almost all of the girls and young women engaged with have felt extreme vulnerability with regard to their basic needs—be they economic, education, health, work or dignity related—since the COVID-19 crisis began. The basic demands that these young women have made in these circumstances from support groups and the government include proper implementation of policies related to girls and women and ensuring that existing programmes reach-out to all girls of different sections of the society, especially those living with extreme poverty in the difficult socio-geographical settings of Rajasthan.

Therefore, one important finding of this study is that this research cannot be concluded here. This gives us a push to engage with the young girls who have been part of the research and discuss the results and findings with them to come up with concrete strategies through which strong community based programmes can be built. The researchers and partner organizations also now have insight into the leadership roles that the girls can play and are willing to take on. This provides opportunity to build and run comprehensive programmes at the State level, with their leadership playing a central role to these programmes.

CHAPTER-6

WAY FORWARD

The study elucidates that the COVID-19 crisis and the subsequent lockdown have put pressure on these adolescent girls and young women on all aspects of their lives. Clear strategies are needed to empower them to resist and overcome these pressures. We need to think of solutions on multiple levels to negotiate with the issues that adolescent girls and young women currently face in households across Rajasthan. It is important for us to design programmes adopting the convergence model approach for various policies and programmes with line departments of the government in the state. The previous chapter of this report highlighted the key findings from the study. We also discussed the demands that have come up from the respondents this study has engaged. Together, these have helped to put together the various aspects to be covered by the organizations for the way forward.

As active participants, respondents and researcher girls and women associated with the study, created communication channels and provided observations that helped in the emergence of an authentic picture of their situation as this report presents. These girls and women want to move beyond the suffering of the pandemic, to do something with their lives which brings them happiness and security. This is evident in their positivity regardless of the crisis situation. They want to move forward and it is an opportunity for GNB through their strong partner alliance to help them mobilize and exercise their leadership.

The way forward comprises of two sections. The first section lists out immediate intervention strategies while the second highlights strategies for the future. A crucial observation for future interventions is that organizations should be mindful of a capacity building focus for the girls and hope to eventually cultivate in them the ability to negotiate with state institutions when it comes to gender issues.

6.1. Immediate Intervention Strategies

- The study has brought out demands from the girls. It needs to be made sure that this study does not end just as a research, but there is a roadmap prepared and a concrete strategy made for next steps arising from the findings and demands.
- Through the course of the study, networks among the girls, between girls and organizations, have been formed. These networks need to be maintained and expanded to reach out to more girls and women.
- Ensuring the distribution of ration to all needy women. Difficulties like ration card should be addressed. The state government should launch door-to-door immunization and healthcare services in partnership with local NGOs to address malnutrition among children, girls and women.
- The government should launch a single window help desk at the village level for all the essential services citizens need such as education, health, employment and nutrition.
- Panchayats should be strengthened and supported to provide services to girls, women and other vulnerable citizens.
- NGOs should assist girls and women in reaching out to helplines set up by the state addressing health issues and gender violence.

- The government should renew its commitment to prevent child marriage and *gauna and strengthen legal-procedural mechanisms in this regard*. In many cases, mechanisms in place to fight child marriage have become inactive due to the Covid-19 crises.
- The key findings and suggested actions derived from this study need to be shared with diverse stakeholders such as state governments and district level, NGOs, professional organizations, funding agencies, social activists, civil society individuals, women-led organizations, peoples' representatives and the media. NGOs should engage with the government to ensure that it takes responsibility for use of these strategies to improve the situation of COVID19 response with focus on girls and women.
- The government needs to uniformly distribute menstruation kits including 'sanitary napkins-underwear-soap' with iron, vitamin supplements through ASHA and ANM workers and NGO networks. Contraception should be made easily available.
- Creating alternative spaces for the adolescent girls to meet and get support from their networks.
- Share the results of the study with girls to help them to clearly articulate their demands and support them to prepare a 'charter of demands' for the advocacy at the state and local level.

6.2. Long-Term Intervention Strategies

- There is need to develop specific collaborative and innovative projects with time-bound action plan based on the study findings and actions suggested for future interventions to bring long term impact on the lives of girls and women by GNB Rajasthan Alliance partners.
- There is a need to invest in women and girls. Interventions need to be made from the family to the State and National levels so that girls are empowered to be able to take their own decisions at the family level and also do advocacy for their rights at the State and National level.
- Need to connect young women with and through technology. This includes providing technical training and access to gadgets. NGOs need to engage with the government to make sure rural girls and women get free and strong internet connectivity at the village level.
- There is a need for a more flexible approach to digitizing curricula that recognizes the difficulties faced by rural girls in access to technology and the internet with digital education materials.
- It is essential to supplement the existing education curriculum with additional content to ensure that adolescents develop the skills to be resilient. For this, the curriculum must incorporate a variety of subjects including life skills, awareness of laws, rights and entitlements, government schemes and programs targeted towards adolescents, gender empowerment and IT skills.
- There is an essential need to support girls with cash transfer scheme for ensuring their continued education. This may include financial assistance to families to access digital tools, cell phones and the internet. The conditional cash transfer scheme may be based on attendance and participation.

- Needs of girls and women related to Sexual and Reproductive Health and Education have to be prioritized by both the government and social sector organizations while preparing programs and projects. Serious strategic planning and a thorough implementation plan are the need of the hour.
- Adolescent girls and young women should be provided vocational training and employment opportunities as per RTE and Prevention of Child Labour laws.
- It takes tremendous convincing on the part of frontline workers to encourage and educate school-going girls on reproductive health issues. Therefore, the government and NGOs need to ensure rigorous training of frontline workers on sexual and reproductive rights including on ways to engage with girls, women and rural communities on the issue.
- Studies claim that more than 50% of school going girls will be deprived of accessing relevant and equitable education opportunities in this crisis situation if it prolongs for the next few years, unless timely actions are taken by both the government and organizations engaged with girls to address their learning needs. For this, we as civil society organizations part of the GNB Alliance must develop alternative community-based contextualized models of education for girls located in diverse socio-geographical settings. Success stories from these interventions can be advocated at the formal school system level to universalize the same.

CONCLUSION

The over-all experiences of conducting this study helped young researchers and field workers understand the ground realities of the lives of adolescent girls and women in the current context of COVID—19 pandemic crisis. The insights and vision of the senior management team of the organizations who participated in this study and analyzed the data for this report have been further developed on designing interventions for the future. It is assumed that the partner organizations for this study will able to contribute significantly towards empowering adolescent girls and women by designing and implementing contextualized projects for future interventions through convergence and collaborations with other organizations and government programmes.

Research on COVID-19 response: Impact on Girls-Making their Voices Heard

Annexure-1

Research Tool-1. Study Survey Questionnaire

1. Organization.....

2. District.....

About the Survey

This study is to assess the impact of Covid-19 on girls. The result of this will be shared with you and it will be used to create upcoming strategies for working with girls. In this, your identity will be kept confidential - so if you openly participate in it, will bring the quality in the study.

We are committed to protecting you. A "policy for the protection of children" has been made for that, which is being given to you.

You can read it and if necessary, you can contact the following persons on the given phone numbers: Arvind Ojha (9414137093), Shakuntala Pamecha (9929826721). If there is any problem in understanding and filling any question in this survey form, you can contact Sudhir Upadhyay (9950009792).

Do you consent to being part of this survey? (Fill this format only if you agree): **Yes / No**

Information related to the respondent

Respondent category (choose one)

Select the category of the respondent, only one category

-Members of Adolescent Forums (aged 15 to 19)

-Adolescent girls with leadership potential in the group (ages 15 to 19)

-20 to 25 age group (attached to any work of the institution)

1.1 Name of respondent.....

1.2 Age.....

1.3 Location of the respondent

1.3.1 Village/Town

1.3.2 Panchayat

1.3.3 District

1.4 Contact number

1.5 Total family members

1.5.1 Women

1.5.2 Men

1.5.3 Girls aged 10-14 years

1.5.4 Boys aged 10 to 14 years

1.5.5 Girls aged 15 to 19 years

1.5.6 Boys aged 15 to 19 years

1.5.7 Women aged 20 to 25 years

1.5.8 Men aged 20 to 25 years

1.6 Name of the head of the family.....

1.6.1 Head: Male / Female

1.7 Is your family

- Joint (with parents, siblings, grandparents, uncle-aunt)

- Nuclear (with parents and siblings)

1.8.1 Number of earning female members in the house

1.8.2 Number of earning male members in the house

1.9 Are you studying? (If not, move to question 1.11.1): **Yes / No**

1.10.1 If yes, which class are you studying in?

1.10.2 If you are taking training, then what kind of training are you taking?

1.11.1 If NO- What are you doing?

-Work in the house?

-Paid work outside the house

-Do nothing

1.11.2 Did you work to earn money along with studying? Yes / No

1.12 Do you own a phone? (If the answer is no, go straight to Q 1.12.2): Yes / No

1.12.1 If Yes then which one? **Smart Phone / Feature Phone (ordinary phone)**

1.12.2. If not, then whose phone do you use?

Common family phone / Father / Brother / Sister, Mother, sister-in-law / Husband's/ Friend or other relative

1.12.2.1 Is that phone a smart phone? Yes/No

1.12.3 Does the phone have internet connection? Yes / No

1.12.4 If yes, then what all do you use it for? (can choose more than one answer)

- For entertainment
- For speaking to friends and relatives
- For looking up information
- For WhatsApp

Marital Status

- Married but 'gauna' or 'muklawa' has not happened yet
- Live with in-laws
- Been engaged
- Aata-Aaata marriage
- Single
- Divorcee / Nata

IMPACT OF COVID-19

2. Total family income (pre-COVID19)

2.1 Did the COVID lockdown affect your family's financial situation? Yes/No

2.2 If yes, then what happened?

- Did they lose their job? Men/Women
- Work was shut down? Men/Women
- Work is ongoing but they are not getting paid? Men/Women

2.3 Will they be able to resume work? Yes / No / Can't say

2.4 If they get employed again, then how long will it take?

One month / 2-3 months / 4 months or more

3. During the lockdown, how did you fulfill the financial needs of the family? (Can choose more than one)

- Had savings and used them
- By selling the crop
- Took loans / borrowing
- Selling household items, jewellery etc.
- Other (please specify)

4. Did your family receive any help? If not, then move to Q6: Yes / No

4.1 If yes, then what kind of help did you receive?

Food Packets / Dry Ration / Pension / Cash / Medicines / Health support/ Any Other (specify in which form)

.....

5. From whom did your family receive help? Government/ NGO / public / family members / other

5.1 If 'other', then please specify

6. What was the impact of the Covid lockdown on you and your family? (Choose a maximum of 2)

- None
- Very limited impact
- Our financial situation became very bad
- Was mentally and psychologically troubled
- Health worsened
- Loss of education for self and other members of the family

7. What did you do with your time during the Covid lockdown? (Choose a maximum of 2)

- Doing things that made you happy.....
- Doing work that bored you.....
- Did things that made you sad
- Did things which increased your tension and anxiety
- Did things which helped you just pass the time?

8. What impact did COVID-19 have on you? (Choose any three)

- Education
- Health
- On menstruation
- On friendships and networks
- On entertainments and sports
- On any work you used to do
- On the environment at home and personal relations
- Any incident that happened around you which affected your mind and heart (being scared, sad, irritated)

9. During COVID 19 lockdown, how did you spend your maximum time? (Choose any three)

- Studying
- Household chores and helping other women
- Cleaning
- Resting and leisure
- Entertainment or any work of own interest
- Working in the fields and taking care of animals (cattle, etc)
- In supporting the family business/work

10. Do you think your health was affected during this time? (If no, go to Q 11): Yes/No

10.1 If yes, the did you need to access any healthcare facilities nearby? yes / No

10.2 Were you able to go to the hospital? (If no, go to Q10.4): Yes / No / With difficulty

10.3 Were you attended properly at the hospital? Yes / No

10.4 Was there any inconvenience in buying medicines? Yes/ No

11. Did you feel helpless and weak during this time?

Yes / No / don't want to tell / Nothing like that happened / Sometimes

12. Are you feeling unsure and ill-equipped to handle the situation during this time?

Yes/ Yes No/ don't want to tell / Nothing like that happened/Sometimes

13. Do you feel you are alone? Yes/ No / don't want to tell / Nothing like that happened/ sometimes

14. Do you feel sad? Yes/ No / don't want to tell / Nothing like that happened / Sometimes

15. Were you going to school / college / training before Covid-19? (if no, go to Q20): Yes/ No

16. If yes, did the school / college / training centre shut down after Covid-19? Yes/ No

17. How did you feel when your school / college / training centre / coaching centre closed?

Good / bad / very bad / Okay

18. Have you been able to access online teaching? Yes / No

19. Beacuse of the lockdown, dropping out of schooling/training/college can occur for:

You / Other girls / Both

19.1 Beacuse of the lockdown, irregularity in schooling/training/college can occur for:

You / Other girls / Both

19.2 Parents' interest in education can possibly reduce for: You / Other girls / Both

19.3 Due to the worsening financial situation of the family and struggle to earn money, who can be denied the access to education? You / Other girls / Both

19.4 There can be increased burden of household chores/domestic work on: You / Other girls / Both

19.5 Forced to earn a living / go to work to earn: You / Other girls / Both

19.6 May be forced to get married or if married, go to your in-law's house? You / Other girls / Both

20. Have you seen or heard of child marriage or forced marriage during or after lockdown in the family or around you or in the village? (If no, go to Q21) : Yes / No

20.1 If yes, then how many such girls do you know of? Give numbers in the answer to the following questions

20.1.1 Yourself and your sisters.....

20.1.2 Someone in family or related to you.....

20.1.3 In your friends' network.....

20.1.4 In the community or village.....

20.1.5 Others you have heard of somewhere

20.1.6 What was the incident, please describe.....?

20.1.7 Was there any action taken, describe.....?

21. Have you seen or heard of incidents of violence girls or women in your surroundings or in your village during lockdown? (If NO, go to Q.22): Yes / No

21.1. If yes, what was the incident?

21.2. Was there be any action taken?

21.3. How many such incidents do you know of? (Give Number)

21.4. How many of these happened to you or to your sisters (Give Number)

21.5. To someone in family or among your relatives (Give Number)

21.6. Within your friends' network (Give Number)

21.7. In your neighbourhood, community or village (Give Number)

21.8. Others may be heard somewhere (Give Number)

22. Do you think that this lockdown will have a long-term impact on you or girls like you?

Yes/ No/ don't know / can't say now

23. What can be the impact on you and or other girls like you? What do you think about this?

(Choose any 2)

- increase the burden of household chores,
- drop out of education,
- affect your own future plans,
- increased family pressure on you,
- restrict your mobility / reduce your ability to get out of the house,
- family restrictions may increase,
- pressure to get married,
- pressure to produce children early,
- increase in violence (beatings may increase)
- Others (specify)

24. Do you know that you can try to prevent the occurrence of violence against girls or women? (If NO, go to Q.25): Yes/ Yes No

24.1. If yes, where and from whom can you take help? (Choose any 2)

Police/District administration/Child right protection services/ Women Development cell /NGO working in your area / local leader-elected leader / other

25. If your answer in Q24 is no, then in the future if there is any such pressure, then what do you think should be done to reduce or eliminate this? Who can do this? What can they do? Write your thoughts in one sentence in the below given questions.

25.1 Girls themselves

25.2 People in the family

25.3 Panchayat leaders

25.4 Government

25.5 Organisation workers

25.6 Other

Please give your opinion in questions 26 to 33

26. Movement of girls has completely stopped after lockdown.

Agreed		Disagre		Fully agree		Completely disagree		Agree a little		Disagree a little	
--------	--	---------	--	-------------	--	---------------------	--	----------------	--	-------------------	--

27. Pressure and violence has increased with girls in lockdown

Agreed		Disagre		Fully agree		Completely disagree		Agree a little		Disagree a little	
--------	--	---------	--	-------------	--	---------------------	--	----------------	--	-------------------	--

28. Girls cannot access pads during menstruation and they have to use one pad for several hours at the time of menstruation.

Agreed		Disagree		Fully agree		Completely disagree		Agree a little		Disagree a little	
--------	--	----------	--	-------------	--	---------------------	--	----------------	--	-------------------	--

29. Girls and did not know that they could complain about violence during the lockdown

Agreed		Disagreel		Fully agree		Completely disagree		Agree a little		Disagree a little	
--------	--	-----------	--	-------------	--	---------------------	--	----------------	--	-------------------	--

30. Increasing poverty has brought more pressure on girls to marry.

Agreed		Disagre		Fully agree		Completely disagree		Agree a little		Disagree a little	
--------	--	---------	--	-------------	--	---------------------	--	----------------	--	-------------------	--

31. Pressure will increase on girls to have physical relations whenever they come out of their homes

Agreed		Disagre		Fully agree		Completely disagree		Agree a little		Disagree a little	
--------	--	---------	--	-------------	--	---------------------	--	----------------	--	-------------------	--

32. Girls might have to enter into physical relations to get work.

Agreed		Disagre		Fully agree		Fully agreed		Agree a little		Disagree a little	
--------	--	---------	--	-------------	--	--------------	--	----------------	--	-------------------	--

33. More girls will need medical assistance after the lockdown, because they could not get treatment for their disease in the last days.

About	Agreed		Disagre		Fully agree		Fully agree		Agree a little		Disagree a little	
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34. What all activities of the organization are you a part of? (choose maximum 3)

Adolescent girls' group / sports / computer literacy / campaign / exposer / education / school activities / cultural groups (plays,etc) / sewing and other vocational training/creative activities/children fare or festival/other

35. What would you like to suggest to your institution about further work according to your needs? Which helps increase the courage and strength of girls and women?

36. Who should do this in the organization?

37. Would you like to take a role? Yes/No

37.1 If yes, then what will it be?

38. What demands would you make to the government to help you and other girls according to your needs?

38.1 Education related (choose maximum 2)

- Appointment of teachers in full capacity as required for proper education

- Appointment of expert subject teachers at high school levels

- Special appointment of teachers for science, maths and english
 - Internet access facility in schools
 - Computer training
 - Library facility
- 38.2 Health related (choose maximum 2)
- regular health checkups for all children
 - hygienic toilet facilities
 - provision of training and knowledge on menstruation, sexual and reproductive health rights for all boys and girls
 - availability of sanitary napkins at all schools
- 38.3 Related to sports and extra curricular activities (choose maximum 2)
- there should be the facility for indoor and outdoor games for all girls (provision of playing fields and equipment)
 - Women coaches for training girls in sports
 - Organisation of 'kishori mela'
 - organisation of educational tours/trips
- 38.4 related to violence and discrimination (choose maximum 2)
- one female teacher be appointed and regularly present in all schools
 - formulation of 'kishori balika manch' and organisation of monthly meetings for the same
 - life skills training for adolescent girls
 - provide and display the information (name and number) for the responsible person for child protection in notice boards of every school
 - display information (name & number) for the police station related to child protection on School notice boards
 - procedure & information for complaint of violence & discrimination to be displayed on notice boards of school
 - all adolescent girls to be educated on violence, discrimination, child marriage and child labour in school
 - all students should be educated on gender equality and the constitution
- 38.5 Others (choose maximum 2)
- all students to be educated on special schemes and laws for girls
 - formulate new schemes to ensure development for girls and their retention in the education system during and after COVID19
 - provision for education to all girls in the event of school closure
 - Training and counselling provision for skill development.

Research Tool – 2. COVID-19 Reaction - Girls' Voices: Guidelines for Case Studies

It will be mandatory to seek the consent of the girl whose case study is being prepared. Ask them to clearly if their names can be published along with their case study. If not, assure them that their name will not be published. Keep writing down important facts as they emerge during the conversation.

Read the survey result sheet carefully. They are guiding questions. Use them to have an in-depth discussion on each of the issues they address.

1. Personal Information- Name, Age, Caste, Education, Village, Work
2. Family Information- Parents, Siblings, Their Educational Status, Employment, Income, Migration, Other Information | (This information can be taken from the survey Excel sheet or mention the number)
3. How, when and what information did you get regarding the corona epidemic? What did it feel when you heard about the spread of the disease?
4. What was the home environment during the lock-down? Write in detail about the situation at home, the status of the family.
5. Were you attending school before the lock down? How did your life change after the lock down? Explain in detail. How has your break in schooling affected you?
6. Do you think you will be able to continue your education smoothly? Do you need some kind of help – so what help?
7. Was there anything you liked about the new routine? What did you not like?
8. Did you have a plan for further studies and future? Can you still complete it or is there any problem?
9. Has the lock-down made a difference to the sharing of work in your family? If yes, what kind of difference?
10. What kind of relationships did you share with your family at the time of lock-down? Did it change during the lockdown? Did you find any increase in tension in the family during lockdown?
11. Have you personally experienced any kind of pressure or stress? If yes, when, why and how? Did you speak to anyone? Can you describe the state of our mind during this period?
12. Have you felt any impact on your movement during lock-down? If yes, what kind of? Have you felt more restriction? Apart from the restrictions imposed by government, was there restrictions imposed by the community or family? What kind of restrictions? Describe.
13. What do you think about the safety and violence of girls due to lock-down? Would you like to mention an event – which has had an impact on you?
14. What kind of pressure and violence has emerged with the girls in your knowledge during the lock-down? What are the main reasons for this?
15. Did you need any help to prevent violence during the lock-down? Did you get any help? Write in detail if help is received, what kind of and where?
16. Have more girls been married during this period or increase in *gauna* of married girls? In your village? In your family? If yes, can you describe in detail?
17. Have you been aware of the incidents of physical relationships or blackmail of a girl without her wishes? Give details.
18. Did you need menstruation or sexual and other health services at the time of lock down? How did that situation cope and what kind of experience have you had? Describe in detail.

19. What help did you think the girls could have needed to address their difficulties during the lock-down? Did they get help?
20. If you have taken any help or initiatives from other girls, also tell us the details of the same.
21. What do you think organizations and the government can do if any help is needed at the village or *tehsil* level so that girls can get help and relief?
22. Can girls be helpful to each other at such times? In what way? In what difficult case - in which case? What difficulties can it have?
23. You had participated in the survey and now in this detailed conversation – how are you feeling? If you want to add anything please do so.

District-wise Distribution of Study Respondents

District	Respondents	%age
Ajmer	67	17
Alwar	33	09
Banswara	08	02
Barmer	22	06
Bikaner	10	03
Bundi	24	06
Dausa	07	02
Jaisalmer	12	03
Jodhpur	15	04
Karauli	52	13
Rajsamand	42	11
Tonk	32	08
Udaipur	62	16
T=13	388	100%

Organization-wise List of Case Studies

Organization	Respondent category wise / name		
	15-19 AGG	Peer leader	20-25 Age
CULP	Mona Meena	Sohina Bano	Jema Damor Shabana Bano
Educate Girls	Nisha Gurjar Ganga Devi	-	Rekha Gurjar
Dhara Sansthan	-	-	Indra Chaudhary Jasu Kanwar Lalita Godara
MJAS	Arati Meghwal Kamini Sharmin Shaikh	Manju Rawat Mehar Bano	Chanda Nayak
RJVS	Suman Salvi Sushila Bhil	-	-
SSSR	Pooja	Aafrin	Neelam Gandhi
Urmul trust	Komal Khatri	Madina	Santosh Veerpal
Vikalp	-	Bilkis Bano Roshni Gameti	Anita Sen Vaishali Sen
Vishakha	Manisha Meena Puji Meena	-	Maya Kunwar
Total – 32	12	7	13

Profiles of Young Researchers



1. Anita Sen
Age - 21 years
Education - Graduate
Social Category - OBC
Phone - 9587756461
Organisation - VIKALP



2. Aradhana Singh
Age - 24 years
Education - Master in SRD
Social Category - General
Phone - 7052592321
Organisation - SSSR



3. Aarti Gurjar
Age - 20 years
Education - BA
Social Category - OBC
Phone - 8104433006
Organisation - CULP



4. Chandani Jangid
Age - 15 years
Education - 10th
Social Category - OBC
Phone - 6367827810
Organisation - AMIED



5. Faruna Bano
Age - 22 years
Education - 9th
Social Category - Minority
Phone - 6377305004
Organisation - CULP



6. Guddi Bano
Age - 21 years
Education - BA
Social Category - Minority
Phone - 9587552019
Organisation - CULP



7. Haritha K R
Age - 25 years
Education - PG(Mass Com)
Social Category - OBC
Phone - 8593938319
Organisation - RJVS



8. Hemlata Gameti
Age - 17 years
Education - 10th
Social Category - SC
Phone - 9602182667
Organisation - RJVS



9. Jasoda
Age - 16 years
Education - 11th
Social Category - Minority
Phone - 9024612543
Organisation - AMIED



10. Indira Choudhary
Age - 29 years
Education - 12th
Social Category - OBC
Phone - 9602138298
Organisation - DHARA



11. Kajal Khatik
Age - 16 years
Education - 12th
Social Category - SC
Phone - 6378888846
Organisation - MJAS



12. Kalpana Rawat
Age - 22
Education - MA
Social Category - OBC
Phone - 7427864547
Organisation - Educate Girls



13. Khushbu Jangid
Age - 21 years
Education - BA
Social Category - OBC
Phone - 9983939536
Organisation - CULP



14. Komal Yogi
Age - 18 years
Education - 10th
Social Category - OBC
Phone - 6378207964
Organisation - AMIED



15. Lalita Meena
Age - 24 years
Education - MA, BEd
Social Category - ST
Phone - 9352739682
Organisation - CULP



16. Mamta Gameti
Age - 17 years
Education - 10th
Social Category - SC
Phone - 8290707188
Organisation - RJVS



17. Manpreet Kaur
Age - 25 years
Education - MSC (H. Dev.)
Social Category - OBC
Phone - 7665159373
Organisation - URMUL



18. Maya Meena
Age - 21 years
Education - 12th, STC
Social Category - ST
Phone - 8290280650
Organisation - VISHAKHA



19. Mehar Bano
Age - 15 years
Education - 10th
Social Category - Minority
Phone - 7737066144
Organisation - MJAS



20. Meena kunwar
Age - 26 years
Education - B.A.
Social Category - General
Phone - 9521543915
Organisation - VISHAKHA



21. Nandu Meena
Age - 22 years
Education - 12th
Social Category - SC
Phone - 8905713604
Organisation - VISHAKHA



22. Neelam Choudhary
Age - 21
Education - MA
Social Category - OBC
Phone - 9772555180
Organisation - URMUL



23. Neelam Gandhi
Age - 24 years
Education - BEd, MA
Social Category - General
Phone - 9587930386
Organisation - SSSR



24. Nisha Gujar
Age - 18 years
Education - 10th
Social Category - OBC
Phone - 9352103136
Organisation - Educate Girls



25. Parvati
Age - 16
Education – 9th
Social Category - OBC
Phone - 7568103429
Organisation - URMUL



26. Pooja Meghwal
Age -22 years
Education - 10th
Social Category - SC
Phone - 9660503992
Organisation - RJVS



27. Priti Jatav
Age - 18 years
Education - 10th
Social Category - SC
Phone - 7878683529
Organisation - AMIED



28. Prachi Garg
Age - 20
Education - 12th
Social category - General
Mobile - 9460438112
Organisation - SSD



29. Rekha Gurjar
Age - 25
Education - MA, BEd
Social Category - OBC
Phone - 7976381220
Organisation - Educate Girls



30. Rekha Meena
Age - 24 years
Education - MA
Social Category - ST
Phone - 8502812179
Organisation - AMIED



31. Saikuna
Age - 25 years
Education - BA
Social Category - Minority
Phone - 9799310275
Organisation - AMIED



32. Sapana Gurjar
Age - 17 years
Education - 12th
Social Category - OBC
Phone - 7014560608
Organisation - MJAS



33. Shabana Bano
Age - 22 years
Education - 9th
Social Category - Minority
Phone - 8949038122
Organisation - CULP



34. Sharmin Sheikh
Age - 15 years
Education - 10th
Social Category - Minority
Phone - 9680978290
Organisation - MJAS



35. Suguna Salvi
Age - 18 years
Education - 10th
Social Category - ST
Phone - 9352531037
Organisation - RJVS



36. Vaishali Sen
Age - 22 years
Education - 12th
Social Category - OBC
Phone - 9785936021
Organisation - VIKALP

Field Research Coordinators/ Mentors of Study Partners

Partner Organization	District	Name of Field Research Coordinator & Position	Contact Information (Phone & E-mail Id)
Alwar Mewat Institute of Education and Development (AMIED)	Alwar	Sangeeta Dadhich, Dy.Director -Programme	M: 9352571746 sangeeta.amied@gmail.com
CULP – Centre for Unfolding Learning Potentials	Banswara	Mr. Dharmesh Bhardwaj Zonal Manager	M: 9660554770; culpbanswara@gmail.com
	Tonk	Ms. Seema Sharma, Block Coordinator	M: 966760934; 9024099795; culptonk@gmail.com
	Dausa	Mr. Hemant K. Sharma	M: 8949824311; hemantkumars2010@gmail.com
Educate Girls Globally	Ajmer	Meera Karki, Programme Officer	M: 7073559878 meera.karki@educategirls.ngo
Dhara Sansthan	Barmer	Indira Choudhary	M: 9602138298
Mahila Jan Adhikar Samiti (MJAS)	Ajmer	Padma Joshi, Programme Coordinator	M: 7976762986 padma.mjas@gmail.com
		Mery Sadumha, Coordinator - Digital skills Development	M: 9079870914 mery.mjas@gmail.com
Rajsamand Jan Vikas Samiti (RJVS)	Rajsamand	Haritha K. R. Communication officer	M: 8593938319 harithakrrjvs@gmail.com
Shiv Shiksha Samiti Ranoli (SSSR)	Tonk	Aradhana Singh	M: 7052592321 Singhradhna1995@gmail.com
Society for Sustainable Development (SSD)	Karauli	Sunita Kasera, Field Coordinator	M: 9460438112 kumarisunita1973@gmail.com
Urmul Trust	Bikaner	Manpreet Kaur Mahal, Field officer	M: 7665159373 manpreet.kaur@urmul.org
Vikalp Sansthan	Udaipur	Yogesh Vaishnav, Development Director	M: 9414105995 yogesh@vikalpindia.org
Vishakha	Udaipur	Uma Paliwal	M: 9672860674 vishakhayrcudaipur@gmail.com
		Shabnam Shab	M: 7230070786 Shabnam.vishakha@gmail.com

Organizational Profiles of Study Partners

1. AMIED: Alwar Mewat institute of Education and Development is a non-government and non-profit organization founded in 2000. AMIED's mission is participating in the formation of an egalitarian progressive and enlightened society by contributing in the process of evaluation of a system equitable and quality education and development for all. Currently, AMIED is working in Alwar, Bharatpur and Karauli districts of Rajasthan. Organization mainly focuses on Children's quality education, Digital Education, Women Empowerment, Gender-Based discrimination, Adolescent Education, Sexual and Reproductive Health, Child Marriage, Child line, School Wash, Child rights etc. Organization aims to ensure quality education to children of marginalized communities.

Over 20 years' experience currently AMIED focus on Girls secondary education , adolescents education and empowerment , adolescents sexual and reproductive health , Institutional WASH , Nutrition, Early child marriage with involvement of community , creation of people's organization, strengthening of stakeholders , residential education and training and institutionalizing the praxis of learning , action , review and learning with gender inclusive approach . Over all impacted 250000 children (0-18) where AMIED are working for above thematic coverage with active involvement of communities.

Mr. Noor Mohammad, Secretary; Contact Number +91 9413304746; Email- amied.director20@gmail.com; Website- <http://www.amiedmewat.org/>

2. CULP - Centre for Unfolding Learning Potentials: As a non-profit organization constituted by professionals in 2001, CULP's journey began with '*Pehchan Project*' for ensuring contextualized quality elementary education to out-of-school rural girls in 2002. Subsequently, it was scaled-up with new initiatives related to protection and education rights of children & pre-primary education in seven districts for strengthening school system through developing teachers' professional skills, bridge courses to mainstream out-of-school children and compensatory education to low performing girls at secondary level and imparting life skills to adolescents. CULP has reached-out to 14.75 lakh people, benefitted about four lakh children since its inception. Currently, the organization is directly implementing its programs in 4 districts. CULP also implementing a program for strengthening the Anganwadi Centres in one district, which includes the component of early childhood education. As an emerging resource centre for education and research, it has been working on alternative strategies of educating rural students due to the current COVID situations. In addition to this, CULP has also conducted several research studies and provided technical support to both Government (DIET & TAD) and field NGOs in Education.

Dr. Om Prakash Kulhari, Secretary; Contact Number- +91 94140 68212; Email- culpjaipur@gmail.com, Website- <http://culpraj.org/>

3. Dhara Sansthan is a non-governmental organization founded in the year 1989 and is working for the upliftment of the marginalized communities from the past two decades in western part of Rajasthan. It has worked to meet basic requirements such as health, education, drinking water, and resource base in collaboration of NFI, Vedanta, Cairn Oil & Gas etc. DHARA follows the principles of resource development and productivity through efficient management practices, focusing on aspects of sustainable development and approached up to more than 100000 rural families and many funding agencies.

Mr. Mahesh Panpaliya, Secretary and CEO; Contact Number +91 96361 53333; Email- dharasansthan@gmail.com; Website- <http://www.dharasansthan.org/>

4. Educate Girls Globally: Educate Girls is a not-for-profit organisation that focuses on mobilising communities for girls' education in India's rural and educationally underprivileged areas. Working in

partnership with the Government, Educate Girls currently operates successfully in over 18,000 villages in Rajasthan, Madhya Pradesh and Uttar Pradesh.

By engaging with a huge base of community volunteers, Educate Girls helps to identify, enrol, and retain out-of-school girls and to improve foundational skills in literacy and numeracy for all children. It has helped enrol over 750,000 girls back in school with 94% of retention and increased the learning levels for over 1.3 million children. It has extended its intervention into secondary education by piloting community and in-school interventions for secondary school students for 3 academic years (2017-20). Its Adolescent Girls Program aligns with global and national trends of laying greater commitment to secondary education through SDGs internationally and the growth of Rashtriya Madhyamik Shiksha Abhiyan nationally. The programme has been up scaled to 907 villages across five districts where Educate Girls has successfully delivered its primary program and enrolled 90% of out-of-school-girls identified.

Ms Shabnam Aziz, Project Leader, Adolescent Girls Programme; Educate Girls, Contact Number +91 94140 16065; Email- shabnam.aziz@educategirls.ngo; Website- <https://www.educategirls.ngo>

5. Mahila Jan Adhikar Samiti (MJAS) is a women-led feminist organization – promoting Youth Leadership; founded in 2000 in Ajmer, Rajasthan. It works with rural and urban communities in central Rajasthan. The organization is extensively working on the issues of adolescent – young girls' rights, women's rights, child rights, youth mobilization, livelihoods, gender equality and prevention of early and child marriages. It has led campaigns for prevention of violence against women and girls in Rajasthan. An important area of intervention is in the field of prevention of branding of women as witches and witch hunting and raising community awareness against unscientific occult practices. The organisation's flagship programs include 'Football for Freedom, Unity and Solidarity' and TechCentre with feminist approach to technology for adolescent girls and young women. The close to twenty years of work of MJAS on gender equality was recognized by Martha Ferrel Foundation, New Delhi that awarded the organisation "Best organization of Gender Equality Award" in 2019. The organisation is also engaged in knowledge creation through action research and documentation projects aimed at creating community awareness and use in advocacy.

Indira Pancholi, Secretary; Contact Number +91 88268 8066; Email- indiraajm@gmail.com; Website- <http://mjas.weebly.com/>

6. Rajsamand Jan Vikas Sansthan (RJVS) is a non-profit organization founded in 2003 in a vision to build a society that ensures equal opportunity, justice, equality and respect for all, especially women and children. RJVS established as a support organization to strengthen and sustain the women's movement called *Rajsamand Mahila Manch*, which came into existence in Rajsamand district in 1998 with the 8000 women members. Rajsamand Jan Vikas Sansthan works to empower women, young people and adolescent girls and boys, especially those from marginalized and disadvantaged social groups to mitigate child marriage and violence against women, promoting education amongst girls. RJVS approach is collectivization of rural women and girls, their capacity building, awareness creation, legal awareness and empowerment. RJVS has been working in the 7 Blocks of Rajsamand District working on the issues of Violence against women & Empowerment, Education, Child Marriage, Livelihood, Health, Gender, advocacy on social issues and capacity building training, etc. RJVS runs a women's court called '*Naari Adalaat*' in order to help the poor, distressed, exploited, illiterate and marginalised women to solve their disputes and get justice easily and quickly. In aim to mitigate Early/Child Marriage RJVS runs a project named '*Jagrati*' focusing extensively on the adolescents. Year 2015 onwards an initiative from Rajasthan government MSSK - to address the grievances of VAW operating successfully in the Rajsamand district.

Ms Shakuntala Pamecha, Founding Director & Secretary; Contact Number- +91 99298 26721; Email- rjvs10@yahoo.in; Website-<http://rjvs.in/>

7. Shiv Shiksha Samiti Ranoli (SSSR) is registered under Society Registration Act 1958, on 24th October 1989 as a non-governmental and non-profit organization with the pious objective of working for the

emancipation of deprived and marginalized sections of the society, with a special focus on women and children. A group of youth and village level collective movement for overall development for equality and equity. The group consists of experience person as Doctors, Health Experts, Legal Experts, Social Scientists, Educational Expert and Agriculture Experts who have strong knowledge and experience in their related fields. We made stronger and dedicated team of volunteers, community leaders, and staff in the field, who work towards the achievement of our common objective. We undertake and implement our activities in Tonk, Sawai Madhopur, Bundi, Jaipur, Ajmer, Sikar and Pali districts of Rajasthan

SSSR working on different developmental projects since its inception, focusing on 05 Thematic - Child right, health, livelihoods, women empowerment & PRIs strengthening.

The organization has reached out to 10,000 Adolescents on SRHR with comprehensive sexual education, 258 Child Marriage stop, 23559 people covered through Mobile Medical Units and 3500 Women through Livelihood Nutrition session.

Mr. Shivji Ram Yadav, Secretary; Contact Number +91 98281 63831; Email- sssr99@rediffmail.com; Website- <https://sssr.ngo/>

8. Society for Sustainable Development (SSD) is a non-profit organisation, centred at Karauli District, Rajasthan founded in 1994. It has been working towards achieving sustainable development goals for the people of the eastern Rajasthan and aimed to bring economic progress and social development through sustainable means by utilizing the present natural resources and human skills for further creating new means to improve the sustenance of the people. Organization has extensive intervention in the rural remote areas. SSD is working on the issues of Child rights, child marriage, livelihood, governance, education, health and natural resource management.

Mr. Arun Jindal, President and Executive Director; Contact Number +91 70140 21199, +919414683683; Email- jindal1965@gmail.com; Website- <http://ssdrajasthan.weebly.com/>

9. URMUL TRUST: The Rural Health, Research and Development Trust, Bikaner was initiated by URMUL in 1983. URMUL is working towards social and economic change in the lives of the people in the harsh, inhospitable and interior regions of western Rajasthan. URMUL TRUST is an intrinsic faith in the capacity of rural people to devise, manage and sustain development programmes.

All the work is focused on vulnerable sections of the society, women and children being the prime. Following the integrated development approaches, Urmul works on all the Millennium Development Goals, training and coordinating thousands of Community Health Workers, service delivery Food, Fodder and Water securities are major concerns including drought and disaster mitigation . We adopt service delivery platforms, advocacy and lobbying tools for empowering the marginalised and vulnerable sections of society in over 500 villages. Urmul collaborates with a network of over 5000 youth for their capacity building and also collaborated with over 300 Village Panchayats in over 500 villages. More than 30,000 families have been partners of various programs. . The trust is an executive member in several GO-NGO collaborations and Policy Planning Committees.

Mr. Arvind Ojha, Secretary and CEO; Contact Number 94141 37093, Email- ojhaarvind@gmail.com; Website- <https://www.urmul.org/>

10. Vikalp Sansthan is a not-for profit organization and has worked in 510 villages and twelve districts of rural Rajasthan state in India since 2003 with the aims to zero gender-based violence against women and violence free societies based on equality, justice and peace.

Vikalp has always been focused to bring analytical attitudinal change among youth with the help of adopting four fold strategies (community awareness, make stakeholders accountable, help women and girl survivors and advocacy) under which several programs and campaigns 'My Happiness, Engaging Men & boys, learning & Education Centers, My daughter's rights etc. have been introduced and resulted stoppage of more than 12,000 child marriages, more than 10,000 girls have been re-enrolled and are pursuing their higher education and more than 3,500 survivor women have been legally helped to live violence free lives.

Vikalp has been the part in advocating various laws, along with contributing in formulation of women and girl child policies with the state government. Vikalp has built up good networking from local to state administrative level. Vikalp has been representative member with GNB, Forum to Engagement, Asia Abortion Rights, Empowerment Institute both at Global and National forums. Currently working with many renowned national and international partners in its mission to end gender inequalities.

Ms Usha Choudhary, Secretary and Executive Director, Contact Number +91 9414146408, Email- vikalporg@gmail.com, Website- <https://vikalpindia.org/>

11. Vishakha Mahila Shiksha Evam Soudh Samiti: Vishakha is a voluntary organization working in Rajasthan for empowerment of women, young people and marginalized communities. Since 1991 it has been working with communities (tribal . rural and semi urban), institutions and the state to challenge iniquitous gender norms, and working creatively to enhance opportunities for learning, education, countering violence and accessing health and well-Being.

Core to Vishakha's work is to empower individual and communities and to address the root cause of inequality, injustice and discrimination. The focus is on inclusion based on gender, marginalization, vulnerabilities and creating accountability mechanisms to ensure guarantee rights of the people.

Vishakha was one of the key litigants in filling a joint a joint PIL in the case where the Supreme Court of India issued the landmark Guidelines for Prevention of Sexual harassment at the Workplace in 1997, popularly known as the Vishakha Guidelines, which became base for the new The Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013. Vishakha has designed, experimented & replicated the various models to address VAWG & ensuring well-being i.e. -**Mahila Salah Evam Suraksha Kendras', Anandi healing centre, Youth Well-being & Resource Centre & *Fostering strength course for professional in psychosocial work.*

Mr. Bharat, Secretary, Contact Number- +91 94140 51996, Email- bharatvishakha@gmail.com, Website- <https://www.vishakhawe.org/>