Exploring the Mechanics of Male Child sexuality in the context of the street: Obstacles and Solutions

Index:

Glos	Glossary		
Intro	duction	3	
Justification for taking Bodily Changes to the next level			
Obje	ctives of the proposed research	4	
One	odology of the research process Day Workshop Activities		
2.	Reflecting upon child hood experiences Sharing of the Literature Survey Brainstorming to realize the scope of data and	7	
4.	methodology required for the research Selection of the populations to be approached for purposes of research		
5.	Finalization of the cities, organizations and key persons to be included in the research		
Rese	earch Findings:	9	
1. 2.	Friendship does not acknowledge age difference Stigmatization of children on the streets The sexual encounter between adult and child is being seen within the	.10 .10	
	framework of homosexuality A child on the street is available and can be taken	.11	
5	advantage of without attributing any moral responsibility to self		
6. 7.	Recognizing a child as a sexual being Sex education	.13	
8.	Power play within an adult and child relationship, in the context of the street child and otherwise	.14	
	pth tool development recommendations:	.15	
1.	Personal barriers and a lack of basic information	15	
2.	on sexuality for the care givers Friendship does not acknowledge age difference	.15	
3.	Self esteem of the child	17	
4.	Homosexuality and Pedophilia	.18	

Glossary:

Aadat	Habit
Babar Sher	Lion
Bud faili	Wrong doing
Chalaki	Cunningness, Craftiness
Jinsi	Sexual
Karahi	Spicy meat gravy prepared on a skillet
Madarsa	An Islamic school most often meant for children for religious education. It can be functional from within a mosque as well.
Mano Billi	Cat, Kitten
Mano Billi Masoomiat	Cat, Kitten
	Cat, Kitten
Masoomiat	Cat, Kitten Innocence Enjoyment, fun
Masoomiat Maza	Cat, Kitten Innocence Enjoyment, fun

Exploring the Mechanics of Male Child sexuality in the context of the street: **Obstacles and Solutions**

Introduction:

The visibility of children on streets makes them vulnerable to various forms of abuse. Where as sexual abuse remains one of the most common forms of abuse relevant in this context.¹

It is considered to be a societal norm that the most sustainable and effective intervention that can rescue a child from a sexually abusive or sexually exploitative situation should come from the adult who has the best interest of the child at the very core of his/her thought process, that generally being the parents or blood relatives of the child. However, what is becoming evident is that due to rising poverty levels resulting in the neglect of the child, the core values of care giving and/or care taking of the children is getting redefined. In this redefinition, children are becoming part of a process that adds to the economic sustenance of their own families. Thus constructing a feasible situation where children were taken care and protected from any or all forms of abuse becomes extremely difficult in certain social-economic set ups.

This holds valid for most of the developing societies but its manifestation is highly pronounced in South Asia i.e. Bangladesh, India, Nepal and Pakistan.

Historically military conflicts and anarchic situations in countries add to the vows of children. This effect is multiplied in the context of the children who already exist on the fringes of a society, therefore making them even more vulnerable.

Currently Pakistan is facing an economic crisis in addition to a highly politicaly volatile situation. This has had a major impact upon the populations of children who for one reason or another define the streets to be their temporary or permanent abode².

In most cases the survival of children on streets is through labor. However, this form of abuse is not inflicted upon children in isolation. Rather the curse of child labor is accompanied with other forms of abuse, such as sexual abuse and/or sexual exploitation of the child.

These changing realities create an entire new set of needs for the children who are increasingly becoming vulnerable and exposed to abuse and exploitation. In a society ridden by disease and conflict, **knowledgeable children** may actually be part of the solution to the larger problem. However, what cannot be taken for granted in case of Pakistan is the caution that needs to be exercised in educating these children.

Conventionally, Pakistan as a society has projected a level of inhibition and discomfort in discussing with and educating youth on issues around sexuality and/ or biological and natural sexual changes in growing up children. This has created a vacuum and this vacuum is clearly

¹ . See EQUINOX, Musafir Khana, a documentary made by Muhammad Ikramzada for DAWN News Channel.

The preliminary findings in the Peshawar Mapping that VISION has just completed are also reflecting a high volume of sexual abuse and sexual exploitation of children amongst other forms of abuse. The four/five year work of VISION in Lahore and 3 years work in Abbottabad is reinforcing the pattern of sexual abuse and sexual exploitation of children as the most common form of abuse along with other forms.

². This is evident in at least two cities of Pakistan i.e. Abbottabad and Peshawar. In Abbottabad the documentation of VISION's work is consistently showing such patterns and in Peshawar, the preliminary findings of the current mapping is reflecting similar patters.

identified and used for her/his benefit by the abuser or the person taking advantage of child's innocence and /or ignorance.

Children on the streets remain completely unprotected and this being not unique to only Pakistan. What remains unique to Pakistan is the lack of tools and mechanisms to create a knowledge base in children that responds to many questions regarding changing sexual realities of these children. Whereas the already present information that the children receive is through the source that is the sole actor mentioned above who is monopolizing and taking advantage of the lack of information in the child.

Justification for taking Bodily Changes to the next level:

VISION had recently developed a coloring book meant to respond to some of the questions that a growing boy may ask himself or people around him. The coloring book takes the boy through a journey of exploration of certain things that are happening to his body. In this journey the boy is accompanied with a goat that he has nurtured and befriended while taking it for grazing. The goat guides the boy through his confusions and brings clarity to his thought process by addressing most of his confusions.

The book has text next to each picture that children (a boy child) can color. The text is in Urdu and is simple, comprehensive and yet short. It can be read to the child by the care giver without culturally cultivated inhibitions or if the child has been through primary school, can read it for himself. This effort, though very basic in its content was the first step to address the issue of bodily changes in the male street child.

Keeping in plain view VISION's previous effort in educating the child in regards to his sexuality, VISION felt that the time was ripe to undertake a new research with a more diverse and ambitious scope for the development of tools.

Objectives of the proposed research:

VISION feels that it can through a proper informative research process develop and evolve materials that correspond to other similar needs of boy child. Some of the objectives and materials that VISION may be able to develop are as follows:

- 1. A workshop design for care givers who are directly reaching out to the children on streets. This workshop design would include basic information on sexuality and in addition would address barriers and inhibitions of caregivers around sexuality, through process oriented exercises. This would enable the care givers to educate the male children within their reach to understand their bodies and its functions better. In this effort, any information that may be considered necessary for children will form part of the package in the shape of a guide book and care givers will deliver the said information in an age and culturally appropriate manner whilst consulting the guide wherever needed.
- 2. A complimentary package for children that may include a story line or series of storylines, an activity book, cue cards and/or coloring book (depending upon the outcome of the research and design). This package will include messages of caution without imposing opinions, assumptions and judgments. The package will steer clear of developing any kind of mistrust amongst children of their adult friends but would have caution and useful tips for children to use as their guidelines while befriending/or being befriended by an adult.

3. An awareness campaign on child safety and child protection with especial emphasis on protection from child sexual abuse and commercial sexual exploitation of children. This campaign will be focused for the adults who exist in the same environment as the children on streets/roads. This campaign may be through a street theatre.

Methodology of the research process:

A one day workshop was conducted with the research team members to take them through each step of the research objectives and allowing them to deconstruct and construct them again. This was done to act as an aid in formulating a strategy that would enable the entire team to comprehend the essence of the research along with an understanding that would facilitate the evolution of tools for purposes of conducting the research.

One Day Workshop Activities

1. Reflecting upon child hood experiences

A discussion on child hood reflection was designed keeping in mind the objectives of the research. This discussion was facilitated between all team members of the proposed research team. The discussion mostly involved personal experiences and was mainly focused on the following three issues amongst others:

- 1. Relationship with other male adults during childhood.
- 2. Discovering bodily changes and issues around puberty and post puberty.
- 3. Sources of Information on sexuality pre and post puberty.

The objective of the discussion was to understand through self reflection, the difficulties of childhood from a child's perspective and through this journey also comprehend the roles of adults and what could they have had done better to convince the child at that point.

The discussion was candid and involved inputs from all participants who contextualized each experience to their own social reality. Two of the participants (also members of the research team) were from North West Frontier Province (NWFP) of Pakistan and still having a very close link with their rural roots, therefore bringing a diverse and rich thought to the discussion.

Some of the reflections that emerged from this discussion are as follows:

"I was a lonely child. I was fond of pen friendship. I think I was around 12 years of age when I had a friend who belonged to Southern Punjab. This was a pen friend and older to me. My mother used to read all the letters he sent me and also read what I wrote back. He was a nice chap and came to visit me in Lahore. He brought me some gifts with him. My family was very cordial to him while he was visiting. Following that I also went to that city of Southern Punjab as my maternal aunt lived in that city. I went to visit him along with my older cousin, once again he was very nice to us but once I returned to the house, I was told that I was to cease writing to him. Consequently I also stopped responding to his letters. That is how the friendship ended. I did not understand anything and nobody explained it to me."

In another situation, one of the participants shared the following:

"I had a tutor who used to teach me at home. He started talking to me about religion and how there would be just very few people who would go to heaven on the Day of Judgment. I thought that it was necessary that all my family should be included in that group so I revealed all the information that was given to me by this tutor. Upon this my family stopped my tuition with that tutor but never explained me the reason for it. However, I outsmarted them and kept on meeting this tutor and the religious group that he was involved with. I lied to my family about my trips to different city. I even sneaked to a city in Sindh with this group, telling my family that I was going with friends to a city in the mountains for the summer. I suffered later on this account and wished things were explained to me better. I think my family should have at least informed me why they were suddenly stopping the tuition. I do not think that I would have stopped even then but I do think that they should have done something more at that time. It would have saved me lot of pain later in the life."

The conclusion reached from the above reflections and other snippets of similar reflections was that children need to be stopped by adults from a situation that can later on be problematic for the child to handle. But then the adult needs to not only explain the dangers in the situation but also needs to go beyond that and facilitate the child to cope with the sudden disruption in her/his life. Another team member/participant added his own experience to this and his reflection is explained as follows:

"There was a kid's movie that had come to the theatres in our town. We had 5 cinemas in the town and it was common knowledge that the five cinemas used to show pornography during the intermission. I and my brothers were insisting that we wanted to go and see the kid's movie that one of the cinemas was showing. My father was posted elsewhere so when he came for the weekend we told him about the film and insisted that he take us to see it. He went and inquired about the movie at the cinema and found that in this specific film they were not showing any pornography during the intermission. Next day was Sunday and he took us all to the film but close to the entrance of the cinema, he suddenly informed about an amusement park that had opened some 45 minutes where we lived. He told us that there are pedal boats and a nice lake. We insisted that we go there instead of the film and explore that. He immediately took us all there and from that weekend onwards it became a ritual for all of us to go to the park each weekend when my father would come."

This experience not only reinforced the earlier drawn conclusion but added to it that if children are to be stopped from something then a healthy alternative of their liking should be provided to them instead of just stopping them from something that they deem important.

Another reflection relevant to puberty was as follows:

"It's a funny story but I will still tell you guys, see when I was in school this teacher of mine told me that certain hair on the body are to be shaved off and it is unIslamic to let these hair grow. He did tell us that he was talking about hair beneath the navel. Next day a class fellow of ours could not sit in his seat and disclosed that he had shaved the hair both his pubic and the ones in the back and in this process had actually cut himself in the back. We laughed for the longest time and used to tease him a lot later as well."

In another situation, this is what one participant added to the discussion:

"I remember a similar funny story. When we were in school, a class fellow one day told us that at night time, he needed something from the refrigerator but it was in his parents room so he went inside where his parents were in middle of a sexual act. He thought that his father was being abusive to his mother so he immediately called for his mother saying: Ami, from that day onward whenever anyone of us used to see the boy we would say: Ami and he would be very embarrassed."

In light of these reflections it was agreed upon during the discussion that correct age appropriate information on sexuality and puberty should be given to children. This would fulfill the purpose of protecting them from undesired embarrassment or of being taken advantage of just because of their inability to comprehend a certain situation. It was also concluded that the information should be given by someone who may be related to the child such as older brother, father or a teacher.

This discussion helped the entire research team to understand the objectives of the research better.

2. Sharing of the Literature Survey

As the second step, the summary of the literature survey conducted till that point was shared with the research team. With the help of a verbal presentation, the team was made to understand how the literature survey was accomplished and what the analysis of the survey till that point in time.

3. Brainstorming to realize the scope of data and methodology required for the research

Following the sharing of the literature survey, a brainstorming session was facilitated amongst the research team. In this session, using the previous two sessions as the backdrop the following points were explored:

- 1. If a research is to be conducted to get information from the male children on the street about their present knowledge base on sexuality, what would be the most effective method of collecting this information? Further more how can this be accomplished without getting the child into a reflective form of thinking and without taking him through any process that might be traumatic or painful for him?
- 2. Within the context of the environment where the male street child exists, who would be the adult who would provide insights into the culture of this environment? How do these adults establish their links with the children in those spaces and generally how do these adults perceive the children who exist in these spaces.
- 3. If non governmental organizations (NGO) try to reach out to these children on the street then how would these organizations be helpful in providing information on sexuality and if need be facilitate the children beyond just giving out information?
- 4. Finally, what mechanism would be put in place to obtain all the above needed information?

What were the actual findings of this discussion??? Should those be not listed here?

4. Selection of the populations to be approached for purposes of research

A consultation process took place between the team members to decide upon the populations that would be approached for purposes of this research. This provided an opportunity to initiate a discussion on sampling frame work as well. During this activity the following categories were devised:

- 1. Care givers from organizations which are into service delivery for children who are permanently or partially living on the streets.
- 2. Children who were part of the outreach or shelter programs of these organizations, whose care givers were to be included in the research.
- 3. Random children who exist on the streets and could be accessed by the researchers themselves.
- 4. Key persons: This category included some of those individuals who were part of the same environment and spaces that the already discussed children were living in. The were identified as follows:
 - a) Beggars
 - b) Male masseurs
 - c) Tea shop owners at bus stations/terminals or close to shrines

- d) Any other individual who exists in that space as one of the permanent members, doing an odd job for over a year
- e) A Government Primary school male teacher
- f) Mullah from Madarsa
- g) Driver/conductor of a bus that travels between different cities

The three cities that were selected to conduct this research were as follows:

- a) Peshawar
- b) Karachi
- c) Lahore

In the same session, the framework for the gathering of the information was also decided. It was agreed upon that the following methods were to be used:

- a) Focused Group Discussions (FGD) with the care givers from the selected organizations
- b) Art activity with both groups of children, i.e. children existing within the framework of an NGO and the children surviving on the streets.
- c) In depth interviews (IDI) with the key persons

5. Finalization of the cities, organizations and key persons to be included in the research

During this session, a consultative process was conducted to discuss the objectives of the research once again and the theme, question format and the order of progression required in the two tools (FGD's and IDI's) were decided.

In this process, the finalization and identification of the organizations which were to become part of the research was done. The following organizations were finalized:

Would it not be a good idea to provide addresses or contact information of these organizations at this point as well?

Peshawar:

- 1. Dost Foundation
- **2.** Chand Foundation
- 3. Flowers

Karachi:

- 1. Edhi Centre for street and lost children
- 2. Pakistan Society
- 3. Hindu youth committee

Lahore:

- 1. Sheeds
- 2. Godh
- 3. Nijat & Idara-e-Khidmat-e-Khalq

It was decided that the sampling framework that would be used for identification of organizations, groups of children and key players would be **purposive sampling**.

The number of interviews to be conducted of the key players was also decided upon in this session:

Peshawar:

Beggars	2
Masseurs	2
Bus driver	2
Tea shop owner	2
School teacher	2
Mullah	2

Karachi:

Beggars	2
Masseurs	2
Bus drivers	2
Tea shop owners	2
School teacher	2
Mullah	2
Lab. a.v.a	

Lahore:

Beggars	2
Masseurs	2
Bus drivers	2
Tea shop owners	2
School teacher	2
Mullah	2

To minimize the bias, it was decided that the in-depth interview would be conducted by rotating the team members. If one person would interview then the other would transcribe and the same process would then be repeated by the other pair on the team. In other words, no two people from the team would continue doing interviews solely and the teams would keep on changing.

In Karachi and Lahore, art workshops with children were conducted in two different set ups, one monitored by NGOs and the other selected randomly without any such mechanism in place.

The entire data collection took 15 days with two to three days break between consecutive cities. In other words the data collection started from July 15th and ended on July 31st 2009.

Research Findings:

At a very cursory glance the data reinforces attitudes that are visible in the literature survey on issues such as:

- a) Adult male to male child friendships
- b) Male sexuality with special reference to child sexuality
- c) Sexual encounters between adult male and underage male child

However, a detailed analysis provides nuances that are distinguishing some of the current findings from the patterns emerging in the literature survey. Where as the individual findings were as follows:

1) Friendship does not acknowledge age difference:

This pattern emerges as part of the larger social belief system irrespective of time span. The historical and literary perspective; generated from the literature survey, indicates no inhibition in a friendship between an older man and a young male or even a male child. It was observed that this idea was very much alive within the collected data after it was collated and analyzed for purposes of this research.

There is no negative connotation linked to the friendship between an adult male and a male child. Rather in most cases it is seen as something very positive as this relationship is viewed as assisting a child in lessons of wisdom and learning of the ways of the world.

In addition to this, there is an inherent trust in this relationship, where the adult seems to be entrusted with the responsibility of mentoring the child.

It is evident from the literature survey as well as the analysis of the data that a child's sensibilities are considered very limited. The element of responsibility falls upon the adult to evaluate the environment around the child and then make an appropriate decision on behalf of the child. The assumption that is integral to this belief is that the adult will always remain a well wisher of the child since at the very core of this relationship is the duty of the adult to guide, mentor, teach, and groom the child.

Recommendation for material development:

Workshop design: The workshop must have a process exercise in it where the issue of age difference is discussed. This may happen through understanding the advantages and the disadvantages of having an age gap between two friends. The exercise may be a brainstorming session that would lead to a reflection on the benefits and the challenges of such a relationship.

Material development: The general consensus seems to be that friendship between an older male and a male child or youth is positive. It is a relationship where wisdom, mentoring, nurturing and care are defining points. In this regards there is no mention of child being taken advantage of or the exploitation of the child in any form.

2) Stigmatization of children on the streets:

Through out the research it was observed that the terms used for identifying a child who was on the streets were all negative. It was understood that either the child had the power to seduce an older man or was at least an equal participant in sexual encounters. Age was not relevant; however the mechanics of the relationship were viewed in moral and ethical light to gauge their appropriateness. It was also communicated very loudly that the general belief was that once a child is on the street and is abused, he is destined to become an abuser or a thief.

Therefore it as observed that there was heavy stigmatization and negative stereotyping of the child who was present on the streets.

Recommendations for material development:

Workshop design:

The following exercise can be used as a part of the workshop design to remedy the above mentioned obstacle.

Step 1: Participants will develop a list of phrases that they use for a street child.

Step 2: The participants get divided into groups and each group will be named from the phrase that is being used in the list.

Step 3: Each group will list down the attributes that comes to their mind while using the phrase that they are named after.

Step 4: All groups come together for presentations and in the larger group each presenter will describe the reasons of listing the attributes with the phrase and how it felt to be called the specific phrase, assuming that they had the attributes.

Material development: The child is heavily stigmatized and all the phrases that are being used for the street child are derogatory. This is harmful for the child's self esteem and self respect, amongst other hazards. Materials may want to mitigate this damage. In addition to this the materials may also reflect upon the child's true level of responsibility and its lack of.

3) The sexual encounter between adult and child is being seen within the framework of homosexuality:

This was another similarity which the research shared with the literature survey. The concept of pedophilia and homosexuality were both thought to be interchangeable. This can be problematic in remedying pedophilia since it shows that the very understanding of pedophilia is not clear. Furthermore this also helps to support an extremely negative stereotype and misunderstanding that all homosexuals are pedophiles.

Recommendations for material development:

Workshop design: A visual exercise may be needed as one of the workshop sessions. Visuals clearly depicting the differences between homosexuality and pedophilia can be shared with the participants and after the sharing, participants may be given papers and pencils to write the similarities and differences between the two concepts. Their written reflections should be anonymous but once they are done, the facilitator/facilitators can generate a discussion around the responses and sum it up by clearly listing the differences of the two situations.

Material development: The sexual interaction between an adult male and a male child is being viewed as homosexuality. At no point in literature survey was there any sense of exploitation or abuse within this relationship. In the current research, very few people have referred to this interaction as *"Jinsi ziadti"*, which literally means sex by force. Generally this interaction is seen as an act of homosexuality where adults are getting *"Jinsi taskeen"* i.e. sexual satisfaction from the act and the child is also having *"maza"* i.e. meaning that the child too is enjoying this.

4) A child on the street is available and can be taken advantage of without attributing any moral responsibility to self:

It was generally noticed that once a child makes his way on the street he is avalaible for all intents and purposes. The role of that child no longer limits him to the confines of that attributed to him previously. It is as if the street assigns new roles to him and these roles are at times not only understood by the adults around the child but by the child himself as well.

Workshop design: A simple role play exercise can help caregivers or concerned personnel understand the gravity of the above mentioned negative stereotype.

Five participants are asked to volunteer for this role play. One person plays a child who is sniffing glue. Two portray children who are being sexually exploited. One participant portrays a child who is being commercially sexually exploited. The fifth participant portrays a child who has just arrived in the city and this is the first time he has left his home or has run away from his home. Two participants are outreach workers who are in contact with the four participants portraying the children who have been present on the street for some time. The four children introduce the new child to the two outreach workers.

Step 1: The two outreach workers converse with the children as if they were doing their regular outreach activity.

Step 2: The outreach personnel try to convince the new child to either come to the shelter or go back home.

Step 3: The outreach personnel try to create a safety net around the new child by somehow negotiating with the older children.

After the role play a Q&A session can be generated with everyone around the performance on the following points:

- 1. Which child needed the most support/assistance/help from the outreach members?
- 2. Why that specific child and why not the others?
- 3. How did the people playing the different roles feel when they were playing those role and what traits did the role playing participants chose for themselves to conform to those roles and why?

After the above mentioned Q&A session a discussion can be generated around the following questions:

- 1. What is *masoomiat*?
- 2. What is "chalaki"?
- 3. What is the age of innocence?
- 4. How does one become crafty in that age?
- 5. What can be done in your opinion to safeguard innocence?
- 6. Why should innocence be safeguarded?

Material development: The research indicates that children on the streets are perceived to be available for all intents and purposes. The other perception that is evident from the research is that the child is viewed in some situations as an adult and not a child. The availability factor is being conveyed to the child as well and the child is not only understanding it but also internalizing it in the same manner as it is being conveyed.

5) Determination of age of the child:

Generally, the research emphasizes that age range of 10 years-12 years for male child to attain some sensibilities and be deemed a child. The Urdu word being used by most of the participants in the research is *Samajhdari*. In other words, the research reflects that in the above age of 10-12 years, a child attains a certain level of maturity and therefore ceases to be a child. However, this may not apply to the child who has come on streets. The maturity of the child that appears on streets does not seem to has any relevancy to his physical age rather it is his point of coming on the streets that his maturity and his status as a child will be assessed from.

Material development: The materials developed should aim to establish the fact that a child remains a child by sole virtue of his age. The experiences that a child goes through whilst on the street on otherwise do not tarnish the child's innocence. Furthermore the materials should aim to work with both the street child and the caregiver community.

Workshop design: By the time this matter comes up, it may get resolved in one of the earlier exercises but in case if it does not then a discussion around the age factor may be relevant here and it should focus on what are some of the indicators participants are using in their work to determine the age limit of the child up to which assistance from the care giver is required.

Furthermore a discussion can be facilitated on the regarding the kind of information we feel is essential for children who have been on streets for one year and beyond. This may include life skill information, sexual health, bodily changes and different sexual preferences amongst other relevant information.

6) Recognizing a child as a sexual being:

The child is a sexual being and therefore can be sexualized irrespective of the amount of willingness of the child within the context of the sexual act itself. Therefore a child has to be acknowledged as a sexual being who would respond to sexual stimuli and therefore be sexualized.

Workshop design: Exercise-Body mapping

Step 1: Divide participants into groups and give each group a white chart paper, colors, papers of different colors, scissors and glue.

Step 2: Tell the groups that they have to map a body. Meaning half of the participants will be making male body and half of them a female body.

Step 3: They can do this by drawing the outline of the two bodies and cutting out the colored papers in shapes of organs and sticking them on to their respective places within the outlined figure. The participants have to name the organs and write about their functions on the same chart.

Step 4: After 20 minutes, the participants come back in the larger group and make group presentations whilst reflecting upon the following questions:

- 1. Which part of the process were you most hesitant at expressing yourself?
- 2. Why?
- 3. Did you over come the hesitance and if so how and if not why not?
- 4. What remained easy in this process of drawing and pasting the body parts?
- 5. Why was it easy?

Material development: The research reflects a sense of disgust towards sex and sexual interactions. This is especially true in reference of the sexual interactions within children on streets. A phrase used in particular was *Bud faili* meaning wrong doing. Furthermore we were also informed that the child develops the *aadat* of getting penetrated. This is adding to an already stigmatized situation. In other words, the child on the street is not being seen as a sexual being and therefore the proactive role of the child to seek sexual gratification is not deemed appropriate behavior for his age. This is also being seen as part of the child's eventual dissent towards his un doing.

7) Sex education:

Building upon the notion of "child is a sexual being" the entire spectrum of sex education has to be addressed as the findings of the research are reflecting reinforcement of myths and misconceptions around sex, sexuality and sexual acts. The education of the child on street on sexuality, sex and sexual acts is something that seems to be taken for granted. It is being understood that the child already holds the correct information which is far more than compared to the care giver.

Workshop design: An entire day at the end of the workshop should be dedicated to open discussions on issues such as:

- 1. Appropriate age for sexual interaction
- 2. Conversations around safe sex
- 3. What needs to be conveyed to the child on the streets and how and by whom etc.

Material Development: Visual materials might be required to ease the shock of the information being communicated with the caregiver community. The visuals would have to be content appropriate and within the confines of cultural and religious values of the target audience.

8) Power play within an adult and child relationship, in the context of the street child and otherwise:

The research reflects very clearly the occurrence of power play in relationships between adults and children in the context of the street child.

- a) The power imbalance that occurs with the adult's ability to provide shelter.
- b) The power imbalance that occurs with the adult's ability to provide the security of food.
- c) The power of age.
- d) The power of physical strength as well as superiority that enables the child to view the adult as someone providing protection and safety from unsafe situations.

The respondents agree in the research that this power play acts as a catalyst for exploitation.

Workshop design: Interactive theatre exercise

Three facilitation team members can participate in this exercise. One participant will play the role of a child. A second participant will play the role of an older person at an outreach point and the third participant will play the role of an outreach team member. The child is seen sitting with the older person whilst the older person acts very physical with the child. He is seen to be touching the child on his face and is drawing the child close to him. The following conversation takes place between the child and the adult. Where as the lines are being uttered by the adult:

"From today onwards you are not going to stay hungry ever. Now both of us brothers are going to have chicken karahi every day. We will have lots of fun together".

At this point the outreach worker walks in and the child very happily introduces the adult to the outreach worker. The child uses the following lines for the introduction:

"He is my brother now and will take care of me. He will give me food every day."

The outreach worker responds as follows:

"That is very good. I am glad you have found an older brother. You should now stay with him and should never leave him because he is good to you and will provide you with food."

During this conversation the child is being touched by the older person quite visibly.

After the exercise a discussion needs to be generated to have the participants analyze and reflect upon this situation by understanding the power play depicted. It would also be important to notice that whether the outreach team member is registering the underline factors beneath the surface.

Material development: The materials to be developed should very clearly depict the above mentioned power play. These materials can be later used for not only the purposes of illustrating this idea to the caregivers but also to with the child. This would enable the child to realize that though taking advantage of the favors that an adult might be bestowing on him, might seem rather benign, but there might be ulterior motives behind them. And to what effect would the adult use his ability to provide those favors to control the child.

In depth tool development recommendations:

The following recommended methodologies for possible tool development directly derives information from the conducted research and aims to address the obstacles identified in the research as humanly possible.

NOTE: All material development is to take place keeping the following points in mind:

- 1) The said materials would be developed without imposing opinions, assumptions and judgments. The materials will steer clear of developing any kind of mistrust amongst children of their adult friends but would have caution and useful tips for children to use as their guidelines while befriending/or being befriended by an adult.
- 2) The materials do not aim to promote or disregard any specific form of sexual orientation or consensual sexual practices. But only aims at exploring other ideas in this realm and making that information available.
- 1) Personal barriers and a lack of basic information on sexuality for the care givers:

Question 1: What basic information on sexuality is to be shared? **Question 2:** What specific barriers and inhibitions are we talking about?

Obstacle 1: The reluctance of the caregiver to acknowledge the fact that the child is a sexual being.

Obstacle 2: To make the caregiver realize that the child might already hold a lot of information, therefore stressing that how important it is for them (the caregivers) to hold if not more than at least the same level of information.

Recommendations for caregivers only:

The arena of sexuality information is quite large. At times it seems that so is the level of absence of such information within the caregiver and the child's psyche.

For a basic understanding it would be advisable to discuss:

- 1) The basic Human reproductive health with an emphasis on the functionality of reproductive organs in both male and female.
- 2) Basic information on non hetero-normative orientations and their occurrence on the streets can also be discussed .e.g. homosexuality, transgender. It should be noted that a fundamental problem is not only not knowing but the reluctance to know and express the information vocally.
- 3) The caregivers need to be given appropriate basic information about the earliest a human being is capable of sexual expression and its benefits and needs for the human body and mind alike. It would be recommended at this point to share with the team definitions on 'Sexuality and bodily rights' by WHO, UNICEF or HRC.
- 4) Myths surrounding masturbation should be debunked during this session as well. A candid discussion around what the caregivers perceive to be the ill effects of masturbation can be discussed and than debunked. It is recommended that using the information generated from this discussion, a separate manual can be created for the purpose of delivering the debunked myth information on masturbation to the child as well.

Therefore the key barriers would be to:

- 1) Allow the caregivers to talk openly about sexuality, both on physical and psychological levels. Question them about the authenticity of the information that they might already have and to make them realize that sexuality is not only what pertains to the body but also to the mind. Gender roles and sexual orientations can be discussed at this point.
- 2) Make the caregivers realize that the past information that they have and the manner in which it was transmitted to them might be inadequate. Whilst discussing both, the information and mode of its transmission.
- 3) Make the caregivers realize the need to know more and accurate information on sexuality.
- 4) Destroy any preconceived negative attributes associated with being vocal about sexuality.
- 5) Allow the caregiver to realize that sexuality is very innate and natural for everyone, even for children. It is not to be feared or disgusted.

The above mentioned barriers can be addressed using a simple workshop design followed by a discussion. The workshop would aim at allowing the caregivers to relate childhood myths and stories about sexuality and how they differ from factual information. This should be followed by a candid discussion on the importance of open dialogue on sexuality and personal barriers.

Furthermore the discussion should also be diverted towards the conceived information on sexuality that the child might already have. It would be crucial for the caregivers to realize the level of information that they have and the fact that having information is not enough. Mere information and a lack of understanding can be dangerous for them and the child who is dependent on them for the information. Therefore it is extremely important for the caregiver to be even more educated on sexuality.

2) Friendship does not acknowledge age difference:

Question 1: There is an absence of negative connotations concerning the age difference. Are we to make this negative connotation available to the child or the caregiver in some form? Are we to dictate to the child or the caregiver of the negative implications of such a friendship?

Question 2: If there is no mention of the child being taken advantage of or the child being posed as an active participant, are we to educate the child or the caregiver that abuse can in fact take place in such a situation?

Recommendations for child and the caregiver:

Prior to the research and the research report it was decided that we would not hold any position which would deem all adult young friendships as abusive or help to develop a level of mistrust within the child concerning adults.

Like wise the caregivers would not be encouraged to view every adult that the child interacts with on the street as an abuser.

Recommendations for the child only:

The development of a story book is recommended to illustrate the mechanisms of power play within the confines of such a friendship. This story book can latter be used as a point of discussion and dissemination of information with both the child and the care giver.

NOTE: Due to the graphic nature of the message it is necessary to make it visually appropriate and easy to disseminate keeping the culturally values in mind. Therefore it is advisable to replace the 'child' with a symbol of the child e.g. *Mano Billi* and the adult with a symbol of some one in power e.g. *Babar Sher*.

"Mano Billi Aur Babar Sher"

(The kitten and the Lion)

This would be a story line keeping the following points in mind:

- 1) To illustrate the power play existing within an adult young relationship, irrespective of its nature.
- 2) Inform the child that though the child might feel himself at ease, the adult is in a position to take advantage of him.
- 3) The story line would progress in a 'What if' situation where both the negative aspects and positive aspects of such a relationship can be illustrated.
- 4) The storyline would leave it to the child to decide that which adult young relationship can be abusive for him, and which is not.

Recommendations for the caregiver only:

Using the above mentioned storyline, a discussion can be generated with the caregiver keeping the following points in mind:

- 1) Fear of being labeled as an abuser by virtue of being an adult.
- 2) Realizing the barter that the child might be practicing, exchanging food and protection for sex.
- 3) Discussing the existing structure that the child might have developed around himself, which might include a relationship with an adult. If this structure is to be removed, what positive and negative effects it might have on the child.

3) Self esteem of the child:

Obstacle 1: Stereotyping of the child on the street, referring to him as a lost cause or an abuser in the making. This is not only a preconceived notion but perhaps also a barrier that the caregivers might have.

Obstacle 2: Perhaps the child is internalizing this stereotyping as well and needs to be communicated that this is a false concept.

Recommendation for the child only:

Keeping the above obstacles in mind, it is proposed that an interactive tool be developed which would help not only a child but also a caregiver realize the manner in which they view the child.

"Mein phir bhe tu Bacha hoon"

(I am still just a child)

A two sided jigsaw puzzle can be created with an illustration of a child on both sides. The jigsaw puzzle would be fashioned in such a way that the pieces can be assembled using the image on either sides of the individual pieces. One side of the jigsaw puzzle would have an image of a child in a derelict and sinister form, pertaining to the innocence lost stereotype, where as the other side would have an image of a more kept and innocent looking child.

The puzzle would be made in such a manner that the child would have the opportunity to fit or flip the pieces so as to enable him to choose to:

- 1) Only illustrate the positive image of the child.
- 2) Only illustrate the negative image of the child.
- 3) Illustrate a mix of the both.

The desired effect of this jigsaw puzzle would be:

- 1) Allow the child to assemble a positive image of him self.
- 2) Allow the child to realize that no matter what has already happened or what he has done he remains a child.

Recommendation for the caregiver only:

The above mentioned tool can be used with the caregiver as well to generate a discussion. The caregiver can be given the jigsaw puzzle and asked to assemble an image of the child which they have in their minds. Once that is done a discussion can be generated around the jigsaw puzzle keeping the following points in mind:

- 1) How do you define who is a child and who isn't?
- 2) What is innocence or "masoomiat"?
- 3) What is craftiness or "chalaki"?
- 4) What is the age of innocence?
- 5) How does one become crafty in that age?
- 6) What can be done in your opinion to safeguard innocence?
- 7) Why should innocence be safeguarded?

The desired effects would be:

- 1) To make the caregiver realize that a child by virtue of being a child is never a lost cause.
- 2) The importance of having a positive image of the child in their minds.
- 3) The importance of not passing a judgment on the child in their minds.
- 4) The importance of not passing a judgment on the sexual practices of the child in their minds.
- 5) How their judgment of the child might affect their line of work? And how in turn it might affect the child.

4) Homosexuality and Pedophilia:

Obstacle: Homosexuality and Pedophilia seem to be interchangeable terms. Stark difference needs to be highlighted between the two.

Recommendation for the caregiver only:

It is recommended that a visual representation between the difference between homosexuality and pedophilia be made and used to highlight the difference between the two. Some of the differences that can be highlighted would be the age difference, level of consent and level of emotional attachment between the two parties.

Using the same visuals a discussion can be generated on the topic. Whereas during the discussion the following points must be kept in mind whilst doing so:

- 1) We are not promoting or discouraging the practice of Homosexuality by differentiating it from pedophilia. The position of VISION through out this process would be neutral.
- 2) We are simply encouraging our teams to open their minds to diverse sexualities and develop a threshold of tolerance. Where as tolerance does not mean acceptance.
- 3) The concept of consensual sexual activity, its presence between two adults and it's the misconception of it being present between an adult and a child.
- 4) Allow the caregivers to realize that a child engaging in sexual activities doesn't necessarily mean homosexuality; it may mean pedophilia therefore freeing the child of the blame that he may carry. Therefore also making the caregiver realize that the child is

not an active participant and that the child is not the one who is to blame or who is at fault. Therefore there is no need to FIX the child in that context.

Recommendations for the child only:

It is my personal recommendation that the child should not be exposed to any level of information concerning the above mentioned topic. The best remedy for the child would be a change in the behavior and mentality of the caregiver owing to the above mentioned exercise. It is hoped that the above mentioned exercise would trickle down its effects to the child through the caregiver. Therefore there would be no need to educate the child directly about the differences between homosexuality and pedophilia.