

To understand the child's development impact and coping strategies of children living in the existing relief camps due to the ethnic conflict at Kokrajhar and Chirang districts of the Bodoland Territorial Council (BTC), Assam.

Digambar Narzary- CRY Fellow

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1. Background

1.1 Introduction

The Bodoland Territorial Council (BTC) is to go a long way in ushering a sea change in its socio-economic and political affairs. It was a standstill situation in BTC in which people were caught between unemployment and underdevelopment. So, the people raised genuine demands on separate State – Bodoland, for which the movement lasted for many years. In the beginning of New Millennium, both Dispur and New Delhi proposed agenda for peace and development in Bodo-dominated areas resulting the formation of the BTC on February 10, 2003. The BTC is emerging as a progressive council and fast making its presence felt from its political importance to the ruling Tarun Gogoi led Congress Government that it gained in the recent Asom Assembly elections, 2006. It is deputed as many as three Cabinet Ministers in the Gogoi ministry. It's a landmark achievement in the political history of Bodoland, people and its heritage.

1.2 The Profile of BTC Districts

BTC has been divided into four districts namely Kokrajhar, Chirang, Baksa and Udalguri. Kokrajhar district is the western most district of Assam, it falls in between 90°E to 91°E longitude and 26°28 N to 26°50 N latitude. It was one of the subdivision of Goalpara district and it was given the status of full-fledged district in 1983. Kokrajhar district is bounded by the international boundary between Bhutan and India in the north; Goalpara and Dhubri on the south; Chirang district on the east; and Jalpaiguri district of West Bengal is situated on the west of the district. The geographical area of the district covers 3195.21 sq. Kms. The Kokrajhar district is a homogenous geographical unit and a part of Brahmaputra valley except the foothill region of Bhutan (Himalaya). The people of different communities, religion and languages inhabit in this region like Boros, Assamese, Bengali, Rajbongshi, Santhal, Muslim, Napalese etc. The Boro is the second largest community in the North-East Region of India with centuries old social, political, cultural history and rich heritages. It is the mother tongue in the vast Bodo dominated areas and associated official state language of Assam.

DISTRICTS	ST	SC	GENERAL	TOTAL
1. Kokrajhar	5,28,774	32,609	3,37,608	8,98,991
2. Chirang	1,69,811	30,035	1,43,780	3,43,626
3. Baksa	3,38,630	45,967	3,33,045	7,17,642
4.Udalguri	3,17,412	28,933	3,24,685	6,71,030
Total	13,54,627	1,37,544	11,39,118	26,31,289

Population Pattern of BTC



1.3 Ethnic Conflict and Internally Displaced Persons in North East

North-east has remained an economically blocked and underdeveloped region in India despite being rich in terms of natural resources. Whatever development that has taken place in north-east India during the entire post-colonial period under state initiatives has caused massive displacement of population, particularly of the tribals. Even a state like Assam, where the tribals constituting no more than 12 per cent of the population, has experienced the brunt of development-induced displacement the most. North-east India has remained a politically sensitive and disturbed region since it entered the post-colonial phase of its history. Its perpetual vulnerability to ethnic conflicts and the resultant violence has caused innumerable deaths and massive displacement of population in the region. Unfortunately, the question of conflict induced Internally Displaced Persons does not find any place in the agenda for building peace and conflict resolution in the north-east. Here, the benefits of any statesponsored rehabilitation package go first to the insurgents/ ex-insurgents and the criminal elements among the insurgents only. Right to rehabilitation has only been granted to the ex-insurgents, but has been systematically denied to the actual Internally Displaced Persons.

Internally Displaced Persons in North-East India

Most internally displaced persons in the north-east are victims of environmental degradation, skewed development processes and ethnic conflicts. Though technically they are citizens of the country, empirically they are refugees, and their exact numbers are still to be estimated. Their deplorable condition in the camps and general neglect suggests that the state is not bothered. Internally displaced persons (IDPs) and refugees remain the most marginalised and excluded of all social groups. The IDPs' status is very similar, to that of refugees except to become a refugee one must cross an international border whereas an IDP does not usually cross the border of the country of origin. Technically, an IDP is a citizen but empirically s/he is a refugee in his own country. Both the groups lack a voice of their own, and many a times they remain invisible. By and large, they remain outside the public "consciousness" or "imagination", experiencing a high degree of alienation, marginalisation and exclusion from the larger society. Hence, they deserve attention from the state and the civil society.

North-east India has a very distinct civilisation, geographical, socio-economic, cultural and political entity in India. As a result of distorted environmental, socioeconomic and political transformation, the entire region has experienced massive internal displacement of its population. Perhaps this region has generated the highest number of IDPs in India. The citizen-IDP ratio in north-east India is very high. It is, of course, very difficult to ascertain the exact number of IDPs in the region. However, we must point out explicitly that we find all three categories of IDPs, i.e. environment, conflict and development-induced, in all the seven states of north-east India. The people of these states have suffered immensely from the degraded environment, brutality of state-sponsored development and fear of violence caused by political conflicts for space and identity.



Estimate of IDPs

It is difficult to ascertain the exact number of IDPs in the north-east because even the states do not maintain any proper data on them. Of course, for the state it is difficult to acknowledge the existence of IDPs because it bespeaks of "state failure". The state is not at all transparent in this regard. As a result of continuous environmental degradation, flood and river-bank erosion in the plains as well as landslides in the hills have become endemic. This has caused innumerable deaths, destruction and population displacement. The intensity of flood, river-bank erosion and landslide has increased substantially over the years in terms of area and victims claimed. It would be pertinent to point out that the plight of displaced people due to the river-bank erosion, is much more severe than that of the victims of flood. The victims of flood at least can go back to their original land once floodwaters recede. However, the people displaced due to river-bank erosion cannot go back to their land. Because, their land has become a part of river's new/extended bed. It is not only the mighty river Brahmaputra but also the innumerable small- and medium-sized rivers that are also causing havoc in the plains of Assam, i e, the Brahmaputra valley and the Barak valley.

As mentioned earlier, North-east has a large army of conflict induced IDPs. Though, we do not have exact data, with a fair degree of certainty we can talk about the number of IDPs in Kokrajhar district in lower Assam. Till April 2005, 1,26,263 inmates were living in 38 state-sponsored relief camps in the district. Besides, there are also relief camps in Bongaigaon, Dhubri, Barpeta, Karbi- Anglong, North Cachar and Cachar districts along with recent Udalguri in Bodoland Territorial Council, Assam. At one stage there were more than 2,00,000 IDPs living in the relief camps in Kokrajhar and Chirang districts of BTC. All these IDPs were victims of the Bodoland movement. Some of these conflict-induced IDPs have been living in the camps for more than a decade now. The government provides only rice to the inmates of the camps for 10 days a month. The IDPs live a dehumanised life in the camp. Besides, about 40,000 Reang/Bru IDPs are living in state-sponsored relief camps in Assam and Tripura. They were displaced from Mizoram as a result of ethnic conflict there. Besides, about 40,000 Chin refugees who were working in bottom level jobs in Mizoram for quite a long time were forced to go back to Myanmar from where they had fled to Mizoram earlier. On the other hand, there are a large number of conflictinduced IDPs in Manipur because of the Naga-Kuki conflict there. The Hmar and Dimasa conflict also has displaced several thousand people in the North Cachar Hill district in Assam. The Karbi and non-Karbi conflict also displaced thousands in the Karbi-Anglong Hill District. Movements against outsiders in Assam and Meghalaya have displaced a large number of people.

Neglect of IDPs

Most IDPs living in camps receive little medical care and their children have neither access to formal education. Though some receive food aid, it often arrives sporadically and is insufficient in quantity and nutrition. Within the IDP communities, it is the children and women who suffer most. Throughout the north-east, conditions



of the displaced are pathetic and no intergovernmental or international organisations are present. The displaced live in a most degrading way in public buildings and makeshift shelters. They have lost their most precious possessions, i.e. the land, home and livelihood. If we look at the IDP issue from the impoverishment risk model developed by Micheal M Cernea, we find that all the IDPs of the north-east suffer from landlessness, joblessness, homelessness, marginalisation, food insecurity, increased morbidity and mortality, loss of access to common property rights, social disarticulation and disintegration (Economic and Political Weekly; May 2005). We must point out that in post-colonial north-east one cannot look into the problem of internal displacement of population only through the category of displacement alone. In many situations, one person may experience the same kind of displacement more than once. Similarly, one may become the victim of environmentally- induced displacement repeatedly and again, the same person may experience conflict-induced displacement in his/her new place of residence or livelihood. For example, a person displaced by flood or river bank erosion may cross the boundaries of her district or region in search of livelihood, where she may become a victim of conflict-induced displacement. This very often happens in Assam. And the status of "displaced" which is supposed to be a temporary or transitory, becomes permanent where a displaced person waits and struggles to survive in an all-encompassing situation of fear and uncertainty. It seems the displaced people in Assam in most cases experience displacement more than once. It is a serialised and multiplied experience.

2. The Study

2.1 The Rationale of the Study

Ethnic Conflict has drastically damaged all the four districts of BTC, namely Kokrajhar, Baksha, Chirang and Udalguri of the council where largest population of the Bodos ethnic communities are living. In the conflict many innocent lives are lost especially women and children. Many lost their properties, became homeless and displaced from their own native places/villages. In such situation many villagers were forced to leave their native place. 45% of the women and children from the districts are made to stay in the relief camps set up by the community and the paramilitary forces. The public properties such as schools, colleges and public health centres were burned down in order to avoid Indian military coming and staying as camps in such places. The baseline survey conducted by NEDAN with support of district administration in Chirang district through village committees indicate that altogether 685 households were affected in ethnic conflict from both Santhals and Bodo communities at international border area of Assam and Royal Kingdom of Bhutan. Altogether 1083 boys and 1220 girls in the age groups of 5-20 years from 20 villages and towns became homeless in 1998 ethnic violence and are still living in the existing relief camps.

Existing Population in the Relief Camp

Under	XUKI a	jilal Sub Divis				
No.	of	Community	No of	Adult	Minor	Total
camps			family	population	Population	

Under Kokrajhar Sub Division



5 Summars 0127 51,027 10,150 17,700	9	Santhals	8127	31,627	16,138	47,765
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Under Chirang Sub Division

No.	of	Community	No of	Adult	Minor	Total
camps			family	population	Population	
1		Adibasi	1500	6,948	5,052	12,000

Under Gossaigaon Sub Division

No.	of	Community	No of	Adult	Minor	Total
camps			family	population	Population	
19		Adibasi	19,993	66,296	35,364	1,01,660

As evident, long ethnic conflict in BTC has drained away peace and prosperity of the state and in this conflict many of the households were burnt down and thousands of people in both the communities lost their houses and families. In such situation young boys and girls are compelled to be victimized psychologically and mentally. These ethnic groups are as it is vulnerable and the conflict situation heightens their vulnerabilities making them victims of worst forms of violence. As a result many adolescents were lured and motivated to join in arms struggle. Under such circumstances children loose their confidence to face the reality in life. Another important factor that leads many young boys and girls to join in the arms-struggle activity is the lack of direction and vision in life.

Through this fellowship study, attempt was made to explore the vulnerabilities of children due to the conflict, and developmental impact and coping strategies of children living in existing relief camps due to the ethnic conflict at Kokrajhar and Chirang districts of the Bodoland Territorial Council (BTC), Assam.

2.2 Objectives of the study

- To understand the coping mechanisms of the ethnic children in ethnic conflict situation and their experiences of living in existing relief camps (camps due to the ethnic conflict)
- To find out the impact of ethnic conflict on their overall mental growth and development
- To understand the child's relationship with family and other communities in the area

2.3 Methodology of the Study

- Formation of the core team: A core team consisting of five members was formed including two camp inmates (one male and one female), leader of students union along with the research fellow and research associate.
- 12 relief camps in two districts Kokrajhar and Chirang of BTC were identified for the study
- Interviews and Focus Group Discussions (FGDs) with children in the group of 10-19 with the help of a questionnaire developed



• Data compilation, analysis and report preparation

2.4 Sample Size

Individual Interviews:

Figure no 1. Children Respondents: Age and Gender

Age	Male	Female	Total
10-12	64	14	78
13-15	120	46	166
16-19	86	45	131
Total Number	270	105	375

FGDs:

Figure no. 2: Number of FGDs

rigure no. 2. Number of rods							
No. of	Age Group	Ne	o. of Child	dren	Topic		
FGDs		Male	Female	Total	_		
3	10-12	7	5	12	Opinion on Violence		
	13-15	6	6	12	_		
	16-19	8	6	14			
2	13-15	10	6	16	Coping in the Camps		
	16-19	8	9	17			
2	13-15	11	8	19	Conflict Solution		
	16-19	9	7	16			
1	13-15	10	8	18	Social Interaction outside the		
					camp		
2	13-15	11	9	20	Children experiences of brutal		
	16-19	10	6	16	killings of their parents and/or		
					persons known to them		
10	10-19	90	70	160			

2.5 Finding of the Study

2.5.1 Children in the Relief Camps

The situation of the children living in the relief camp is very difficult to explain. The study revealed that as high as 90% of the children of every camp have experienced the conflict situation, which took place in Bodoland. Some children (22%) had lost their parents and their family members which was very difficult for them to accept and cope with. About 40% girls among those interviewed had been forced in early marriage, which affected their education and future development adversely. The



children had to leave their schools and could not continue their studies and started working as a daily labours. Only 30% children were found to be attending school in the age group of 10-12 years and maximum children in the age group of 13-19 have dropped out of the school. Out of the drop-out children, about 60% reported to be working either as domestic servants or daily labourers in the surrounding areas. Rest of the male children either seem to hanging around the camps all day without any direction or may be involved directly or indirectly in the arms-struggle.

It's already been 13 years for them being an inmate of the relief camp, but so far nothing has been done from the Government side. Very few institutions/NGOs have come up to take the responsibility of these parentally deprived children. The schools have been established in the relief camp but due to the lack of trained teachers the children are not able to get sufficient knowledge. The Government had promised to provide food every month but they are getting food only for 10 days in a month, which is very difficult for them to survive. The Government has newly started the provision of mid day meal for the children in the schools till class IV. In these circumstances the parents are compelled to make their children work as a labours. Most of the vulnerable young girls, women and children are being taken away from their relief camps by the agents with a promise to get them good jobs with a good salary, whereas, the agents are selling them into the brothels where they are being sexually exploited. And those trafficked victims and domestic workers who are returning to their camps are being discriminated by the society. It is also reported that adolescent Adibasi domestic workers are returning with unwanted pregnancy in the camps. Most of the inmates are consuming locally made alcohol (rice beer) and have been addicted to it from the young age. Alcohol dependence is high among children and youth in absence of any vision and options in life and has become a way of coping with the adverse realities of living in the camps.

Due to lack of health care and medical facilities, children suffer from various diseases such as malaria, diarrhoea, and water-borne diseases. Armed conflict is a major public health hazard particularly at Kokrajhar and Chirang camps. Any disease causes largescale damage to children in the camps because of lack of access to health care services and the area is also prone to malaria and Tuberculosis. Many children are suffering from malnutrition. At the height of the conflict in Bodoland Territorial Council, more than half the deaths of children in some places were caused by measles. Diarrhoea is another common and often deadly disease. Cholera is a constant threat as exemplified in refugee camps in Telipara and Deosri camps. The World Health Organization (WHO) estimates that half the world's refugees may be infected with tuberculosis, as crowded conditions in refugee camps provide a breeding ground for infections. Malaria and acute respiratory infections, including pneumonia, also claim many lives.

80% of the children in the FGDs opined that they are living in inhuman conditions in the camps without any basic facilities for last many years.

2.5.2 Child's Psychological Impact in Conflict Situation

The children in displaced camps are under the influence of terror. They have suffered from physical and psychological disturbances. Historically, those concerned with the



situation of children during armed conflict have focused primarily on their physical vulnerability. But the loss, grief and fear a child has experienced and invisible wound must also be taken into account. For increasing numbers of children living in war-torn situation childhood has become a nightmare. Armed conflict destroys homes, separates families, splinters communities, breaks down trust among people and disrupts health and education services, undermining the very foundation of children's lives leading to various kinds of emotional insecurities and psychological disturbances.

Impact	Age Group	Male	Female	Total % of
-				Respondents
Emotional Insecurity	10-12	64	14	100%
	13-15	120	46	100%
	16-19	86	45	100%
Anger/Revenge	10-12	24	9	42%
	13-15	62	22	51%
	16-19	67	36	79%
Frustration	10-12	33	14	60%
	13-15	84	35	72%
	16-19	65	42	82%
Alienation	10-12	52	12	82%
	13-15	97	41	83%
	16-19	54	33	66%
Depression	10-12	43	9	66%
_	13-15	41	36	46%
	16-19	51	37	67%
Nightmares/Sleeplessness	10-12	7	4	14%
_	13-15	21	17	23%
	16-19	40	26	51%

Figure 3.	Psychological	Impacts on	Children:
1 15ul 0 0	i sychological	impacts on	Chinai chi

The psychosocial concerns and impact intrinsic to child development, as revealed through above figures, must be taken into account. Seeing their parents or other important adults in their lives as vulnerable severely undermine children's confidence and add to their sense of fear. As bad as these experiences are, the FGDs revealed that in the age group of 13-15, 50% children experienced brutal killings and torture of their parents or others known to them and in the age group of 16-19, as high as, 80% children (12 children) shared experiences related to the same.

When children have experienced traumatic or other events in situation like this, they suffer from increased anxiety about being separated from their families, or they may



have nightmares or trouble sleeping, which is evident from the above findings. Some of them have been so affected and seem depressed that they have ceased playing and laughing, a few of them have lost their appetites and have withdrawn from contact. Younger children reported having difficulty concentrating in school while older children and adolescents seemed anxious or depressed due to feelings of hopelessness about the future. Quite a few have developed aggressive behaviour and in turn willing to take revenge in life. A combination of these factors leads to quite a few of them joining in to arms struggle.

A psychological impact is bound to reflect itself on one's own personality as well as on one's behaviour and attitudes, vis-à-vis others. But the impact of violence on the respondents was accordingly sought to be evaluated through the respondents' description of certain psychological and emotional states they experienced singly or in conjunction with other conditions.

These psychological conditions included feelings of 'emotional insecurity', 'anger,' 'apprehension about future', 'distrust', 'tension in living with other groups', 'anxiety', 'alienation', 'revenge', 'aggression', 'shock indifference', 'depression', 'frustration', 'nightmares', 'sleeplessness' etc. Other items in this section threw light on the psychological impact of violence on inter-personal relationships with their friends, classmates, teachers and neighbours. 65-80% children felt isolated, alienated or segregated because they belong to a particular community as well as due to the incidents of violence, which aroused a sense of revenge on one hand or strong positive feelings on the other hand such as working for harmony and peaceful co-existence as a response and reaction to the traumatic experience they were subjected to.

2.5.3 Social Interaction of Camps' Children

95% children in the FGDs felt that social interaction with other community is not happening and similar findings were also seen through the individual interviews with children, especially in the age group of 13-19 years. Social interaction acts as an index of exclusiveness or openness of ethnic groups. The wider the spectrum of interaction higher is the degree of openness and, narrower the spectrum of interaction, higher the degree of exclusiveness. Ethnic exclusiveness tends to breed ignorance, misunderstanding, fear and insularity and, therefore hostility among groups. It may not be the sole cause but it is an important factor in deepening the ethnic cleavages. It was highlighted through interactions with children that the day-to-day interactions with people around and specifically outside the camp were not taking place. Visits made in connection with occasions such as marriages, deaths, accidents/ illness, festivals are rare and there are no avenues for consultation or help offered or sought on major decisions in the families in respect of marriages, children's education, or profession, violence or other matters.

2.5.4 Effects of the Violence Incidents on the Children

The children through FGDs and questionnaire schedule were asked questions related to incidents of violence and conflict experienced. In FGDs, they were asked to recall incidents of violence and narrate how many times these had erupted, on what occasions, in what context and in which place. The overall effect violence had on their Cry Fellowship Report; Digambar Narzary



physical and mental health, family education, family finances, school environment etc. was also explored.

i. Physical Health: A large majority of respondents belonging to either group reported that they did not personally suffer any noticeable set back to their physical health as a result of the incidents of violence. Amongst the Adivasis, the 60% Santhal tribal children said that they experienced vague but upsetting feelings of anxiety coupled with fear and general loss of viability, which, they added, were compounded by loss of appetite and onset of depression.

ii. Mental Health: While the school going children respondents stated that the incidents of violence did not palpably affect their physical health, they were deeply affected by these psychologically and mentally. The feelings of panic, experiences of nightmares and mentally disturbance were invariably shared by children in individual interviews and FGDs. Nightmares and sleeplessness related to memory of witnessing ethnic conflict or brutal torture/killing of near and dear ones were reported. Feelings of distrust, insecurity, demoralization and uncertainty about future were the other conditions reported to have been experienced by almost all the respondents. Evidently, adverse effect on mental health appeared to be widespread and serious. The mental states and conditions varying from nightmares to feelings of insecurity and distrust should be a matter of serious concern for psychologists and educators in particular and society in general. However, there are no avenues/institutions and professionals in the region dealing with the mental aspects and impacts on people in general and specifically on various issues related to child growth and development.

iii. Education: The effect of the incidents on the education of the student respondents was serious. Due to protracted civil disturbances and curfews, the schools remained closed for long periods, which in turn had an adverse effect on the pace of their progress in educational attainment. They could hardly go to school and concentrate on their studies. The majority of the respondents in the camps (93%) opined that since the atmosphere was not conducive to learning, the students were adversely affected. They could hardly bring themselves to sit and devote time to the revision of what they learned at their schools. Much of what had been taught in the schools they added, was forgotten through neglect. Their peaceful state of mind was disturbed by feelings of insecurity, panic, distrust and uncertainty about future.

Ninety percent of the Adibashi tribal reported that they lost one academic year because they had to repeat the previous class and as mentioned earlier, many students dropped out of the school.

iv. Effects on Respondents Families: Majority of the respondents reported that the incidents of violence did directly affect their families. Among these families vague feelings of uncertainty, unrest and peace sleeplessness prevailed in the family atmosphere, affecting inter-personal relations between members of the family. Concern was also expressed on the loss of mobility and freedom of movement of the members of the respondents' families, not only during *bandhs* and curfews but also after violence had subsided. The fear somehow lurked over a long period and the people choose to be very cautious and careful about their movements. They would



simply not venture out particularly because of suspicion and hatred that followed the incidents of violence.

v. Effects on their Communities: 50% percent of the respondents revealed that ever since the incidents of violence, their community became targets of police atrocities and discrimination. The responses of the tribal students (40%) included of those of huge financial loss and economic set-back for the community as a whole because the majority of its community members were involved in pursuits related to business, trade or other commercial activities.

vi. Gender Based Violence: In times of ethnic conflict situation like this, the disintegration of families and communities leaves women and girls especially vulnerable to violence. Out of 105 girls interviewed and 70 girls who participated in FGDs, 35 girls shared that many girls working as domestic servants outside the camps or state were known to be sexually exploited and some had returned with unwanted pregnancy. It was also opined by the respondents that parents of the girls want them to get married at an early age in order to avoid them from getting raped (including threats of rape from paramilitary forces). Children affected by gender-based violence also include those who have witnessed the rape of a family member, and those who are ostracized because of an assault on the mother. Acts of gender-based violence, particularly rape committed during armed conflicts, constitute a violation of highest level. Rape is a continual threat, as are other forms of gender-based violence, including prostitution, sexual humiliation, trafficking and domestic abuse. There are reported cases of 110 girls missing from the 25 existing relief camps of Kokrajhar and Chirang districts. Out of 110 girls missing it is reported that they were lured in the pretext of proving job out site of the state and hence they never return.

Through the FGDs and other interactions with camp people that due to armed conflict, poverty, hunger and desperation many women and girls were forced into prostitution for basic survival needs such as food or shelter. The stationing of military troops concentrates large numbers of single men in some areas, including those serving in peace-keeping missions, and has been a factor in the growth of the commercial sexual exploitation of children in the border districts with Bodoland and Siliguri, West Bengal and border districts with Bhutan particularly Daranga Bhutan border.

To conclude, it appears that violence took a big toll not only in terms of killings, massacres, and destruction of public and private property and forced migration but also on other aspects of public life. Individuals suffered mental distress and distortions of serious nature. The atmosphere within the families was affected with regard to inter-personal relationships, freedom of movement, and financial losses. Communities suffered police atrocities and huge economic losses, besides deepening of the family divide and lost of their inhabitant. In the process, children suffered the most and expressed feelings of alienation and discrimination. 82% of the children expressed unhappiness and frustration about the incidents and they wished that it does not happen any more with them.

The wounds inflicted by armed conflict on children are deep rooted including physical injury, gender-based violence, and psychosocial distress. Armed conflict affects all



aspects of child development - physical, mental and emotional. The impact of armed conflict cannot be fully understood without looking at the related effects on women, families and the community support systems that provide protection and a secure environment for development. Children's well-being is best ensured through family and community-based solutions that draw on local culture and an understanding of child development.

2.6 Child Soldiers

One of the most alarming trends relating to children and armed conflicts is their participation as active soldiers. Manipulated by adults, children have been drawn into violence that they are too young to resist and with consequences they cannot imagine. The children most likely to become soldiers are from impoverished and marginalized backgrounds or separated from their families in the camp.

Through the in-depth discussions at the FGDs, it was pointed out by children, especially in the age groups of 16-19 years that child soldiers are recruited in many different ways from the camps, however no personal stories or accounts of known children were narrated.

Some are directly recruited while others are coerced/emotionally lured and others are forced to join armed groups to defend their families and community. Sometimes, hunger and poverty also drive parents to offer their children for service. Sometimes, children become soldiers simply in order to survive or due to lack of any other option/direction in life and they believe that this is the only way to guarantee regular meals, clothing or medical attention.

3. Case Studies

3.1 Case Study of Agnes Mardi (name changed)

Agnes Mardi is 18 years old black complexion girl living in the relief of Srirampur, district Kokrajhar, BTC, Assam. She has been living in the relief camp since 1996 the year when the riot took place, its already 13 years for her being an inmate of the relief camp. During the riot they were compelled to stop their studies. Nothing was left with them to survive. Young boys and girls had to leave their studies in the middle of the standards, Agnes was the one amongst these young boys and girls who was being compelled to stop her schoolling. She left school at the age of 11 years old. At the age of 11 years she started experiencing her option less life of being an inmate of the relief camp with no shelter, no clothes and unhygienic food. Looking into her family situation Agnes also went with other girls searching for a job as a domestic maid where she was being lured by the agent promising her to get a good job but unfortunately the agent handed over Agnes to one of a family in Siliguri and later in Kolkata where the name of the Kolkata city itself was very much new and strange for her. Agnes was very much willing to work for her survival so that she can earn a little out of the work and send it to her parents as well. But unfortunately she was fall prey in the hands of the trafficker and got exploited by the man who purchased her. She tried several times to escape but she couldn't. She become sexual slavery for 8 years in Kolkata.



NEDAN Foundation has established an Information Booth Centre in the year of 2004 in Srirampur where all the information are being collected about the missing as well as the domestic workers working outside. When Agnes's parents got to know that NEDAN Fundation working on missing and domestic worker's issue they approach NEDAN to serch and bring her back to her respective village. They submitted an application to NEDAN with her missing case. NEDAN has managed to bring her back to the native place. Now Agnes is today become a anti trafficking activist with NEDAN.. NEDAN has been imparting training on stitching and embroidery to the domestic worker returnees and the trafficked survivors at Srirampur, where 16 girls are involved in the training so far. Today Agnes is giving orientation to the vulnerable girls and women who are willing to go to another States in search of a job by giving important information what need to be done and to whom to contact if he/ she is in problem.



3.2 Case study of Marshila (Name changed)

Marshila is an inmate of the Srirampur relief camp under Kokrajhar District. It takes 2 hours drive from Kokrajhar to reach Srirampur relief camp. Marshila was only 8 years old when they started staying in the relief camp due to the conflict, which took place in the year 1996-98. After experiencing horror in her life during the conflict and in the relief camp she decided to go out like other girls from the camps to work as a domestic maid so that she can survive. When the agent got to know that Marshila is interested to move out for job he approached Marshila and took her to Sikkim and placed her in one of the house. Marshila was only 12 years old when she left home. In her owner's home she saw one uniform personal who used to stay as a paying guest jointly with the house owner. When the police personal came to know that the owner has got a servant he started giving his clothes to wash and to clean his room as well. Gradually he started exploiting Marshila to have illicit relation with him by promising her for marry. She refused several times for the relationship but he used to forced her and rape her again and again. One day she got the news from her relief camp that Marshila's both the parents passed away leaving her and grandmother only. Marshila begged them several times to come her camp but they didn't allow her to come. The police personal sexually exploited Marshila continuously for seven (7) months. After 7 months when the owner of the house got to know that Marshila is 7 months pregnant they forced her to leave the house and put her in the bus to return in the camp.

Marshila returned to her camp without any payment and in the camp there was no one except her grandmother to keep her. Marshila delivered a little girl child in the year of 2006. When the villager started asking Marshila about the father of the girl child she couldn't tell anybody. One day Marshila suddenly she fall ill and died leave her child in this world. Marshila died with very suspicious circumstances for many people suspected her of having the HIV. Her daughter is surviving with grandmother and she is 2 years old now. Marshila's grandmother is looking after the little child but bringing up the child has become difficult for the old lady without any support for herself.



3.3 Case Study of Mary (name changed)

Mary belongs to a relief camp called Deosri relief camp which is under Chirang District camp is consisting of 240 households. Deosri relief camp is situated between the border of Bodoland and Bhutan. It takes one and half hours to reach Deosri relief camp from Kokrajhar town. Mary is a school dropout girl and was living in the relief camp since its inception. She faced similar experience of being an inmate of the relief camp at the age of six (6) years old. During the riot she was compelled to leave her going to the school. She wanted to continue her studies but she didn't receive any support neither from the Govt. nor from her community to continue her schooling. She stayed 5 years in the relief but when she completed her 11 years of age she was compelled to work as domestic servant by looking into her family situation. At the 11 years of age she was being recruited by the agent and agent took her to Siliguri, West Bengal. The agent sold Mary to one of a Hotel in Siliguri. When she realised that she has reached to hotel immediately she tried to run away from the particular place but the hotel people did not allow Mary to go out by saying that they have already paid the agent for bringing her. Mary was compelled to work in the hotel for 2 years without payment and in the hotel she was being exploited by the people around in that particular hotel. After getting the information of Mary, parents were shocked to know that she has been sold by the agent in the hotel. Mary's parents along with the President of the relief camp rushed towards the police station of Chirang district to file an FIR and they also submitted the copy of the same to NEDAN Foundation.

NEDAN Foundation took up the initiative of rescuing Mary from the employer in Siliguri. While the process of rescuing Mary was happening one fine day Mary parents got to know that she disappeared from the place where she was working. The missing Mary FIR was filed by the hotel owner in Siliguri police station. Since then Mary is nowhere to be seen and she remained in the police record as missing children.



4. Recommendations and Conclusion

- Parties to a conflict should be obliged to maintain basic health systems and services, electricity and water supplies.
- Special attention should be paid to primary health care and the care of children with chronic or acute conditions. Adequate rehabilitative care, such as the provision of artificial limbs for injured or permanently disabled children, should be ensured to facilitate the fullest possible social integration.
- Child-focused health needs assessments involving local professionals, young people and communities should be speedily carried out by organizations working in conflict- situations, and should take into account food, health and care factors and the coping -strategies likely to be used by the affected population.
- During conflicts, Governments and non-State entities should be encouraged to facilitate "days of tranquility" or "corridors of peace" to ensure continuity of basic child health measures and delivery of humanitarian relief.
- Parties in conflict should refrain from destroying food crops, water sources and agriculture infrastructures in order to minimize disruption of food supply and production capacities.
- Post relief should give attention to the rehabilitation of agriculture, livestock and fisheries and to employment or income-generating programmes, to enhance local capacities to improve household security on a self-reliant and sustainable basis.
- Health professionals must be advocates of the rights of the child. CSO in collaboration with professional, humanitarian and human rights organizations, should- encourage paediatricians and all other doctors and health workers to disseminate child rights information and to report rights violations encountered in the course of their work.
- More mental health professional to work towards community based reintegration of the children amongst the displaced.
- Early prevention of the children indulging in various anti social activities through various interactive approaches and building their mind in positive way of looking the life.
- Involving more community leaders to work towards rebuilding the community harmony and societal development.



• The issue of north-eastern IDPs deserves the special attention and care of the larger civil society and the Indian state. In the absence of a clear-cut IDP regime in India, one can look to the "UN Guiding Principles on Internal Displacement" in order to address the human/democratic rights of internally displaced persons in the northeast and in India.

The only development and rebuilding of the ethnic children of North East, is through early prevention of children's entry in arms struggle, and imparting right information and creating vision for a meaningful life. Other indirect means could be creating platform to rebuild the lost confidence that should be the first and foremost priority in building children in conflict situation. North East children and young needs such step today to share their view and learn from various mistakes done by vested interest people and not to repeat the same. Through organizing collective voices and allowing them to express their grievances and frustration in larger forum of main society so that they feel not isolated and definitely makes them feel acceptance and their voices being heard. Looking into the grim problems of adolescent's involvement in the militancy in the region we need to initiate such finding in order to rebuild the confidence of young generation in bringing societal change in the region. By rebuilding generation in confidence it could also build children into tomorrow's societal harbinger agent of societal change.



References:

- 1. Impact of Women Health on Conflict Situation Ford Foundation Research study
- 2. A Study of Tribal- Non Tribal Violence in Kokrajhar, Assam by Institute of Peace Research and Action
- 3. Psychological Impact of Children in conflict situation in Nepal Save the Children Norway
- 4. UNICEF report on Impact of Arms Conflict on Child Development Report
- 5. UNFPA Study on Impact of Arms Conflict on Women and Girls Report
- 6. UNFPA report on Sexual Violence on Conflict and Beyond
- 7. Internally Displaced Person in North East India Journal Report
- 8. Study On Child Abuse Report Govt. of India Report
- 9. Combating Child Trafficking Parliamentarian Report UNICEF
- 10. Militants Recruitment in Pakistan
- 11. NHRC Human Trafficking Report
- 12. Conflicting Nation in North East India Report- Economic and Political Weekly.
- 13. Protecting Children and Adolescent during and after Conflict International Rescue Committee (IRC)



Annex 1:

Interview Questionnaire

Instructions (for researcher and to be explained to respondents)

We are from Kokrajhar. We are trying to understand the situation, difficulties, needs and aspirations of children living in the camps due to the conflict. We will talk to you and ask some questions about your background, experiences, health and future aspirations. This understanding will help us record your experiences, concerns and needs and share the same with various stakeholders who are responsible for developing programmes, policies and schemes for well being of children and such communities affected by conflict.

We will ask you some questions in this regard, some of which are quite personal in nature. We assure you that the information gathered from you would be treated as strictly confidential. We seek your cooperation and assistance for this study and thank you in advance for the same.

Respondent Number Name of the District Name of the Camp
1. Personal Profile:
1.1 Name (Optional):
1.2 Age: 1.3. Sex (M/F)
1.4. Address:
1.5 Religion: 1.6 Tribe/Ethnicity: (specify)
1.7 Mother Tongue:
1.8 Education: a. Currently Studying □ If so, which school and class are you studying in currently?
b. Currently out of school □ If so, which class did you attend last? Reasons for leaving the school
c. Never attended School \Box If so, reasons for not attending the school
1.9 Marital Status (assuming marriages take place at an early age – before 18? Is it right?):

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a. Married □ If so, age at marriage; c. Divorced/Separated □	b. Unmarried: d. Widow:			
2. Socio economic background:				
2.1 Who do you live with? Mother Father Both	Others (Specify)			
If not living with both the parents, specify re	asons			
2.2 How many siblings do you have?				
 2.3 Family income and Source a. Monthly Family Income: b. Who contributes to the family income? - Self If so, where do you work and what is your of Monthly income 	ccupation?			
- Mother If so, her occupation:				
- Father Occupation:				
- Siblings Occupation				
- Others 🔲 (Specify)			
3. Living conditions at the camp				
3.1 Residing in the Camp				
3.1.1 Since when have you been living at this	s camp?			
3.1.2 Do you know who brought you to this of	camp?			

- Father
- Mother
- Relatives
- Friends
- Police
- Army
- Any other specify

3.1.3. In your knowledge, do you know where did you live before coming to this camp? Why did you leave this place?



3.1.4 What is the reason for residing in this camp?

3.1.5 What do you like about this camp/residential area? (such as play ground, community services/facilities, friends, people, ec.)

3.1.6 Is it a matter of advantage or disadvantage living in the camp?

a. Advantage b. Disadvantage c. Cant' Say Give reasons

3.2 Facilities at the camp

3.2.1 Where do you take water to drink from?

- Hand pump
- Dug-well
- Stream
- Any other source (specify)

3.2.2 Where do you go for defecation usually?

- Toilet inside your house in the camp
- Jungle areas
- Near the road
- Public toilet (outside the camp)
- Other places outside the camp, specify

3.2.3 Where do you usually go for taking bath?

- River side
- Bathroom inside the camp
- Outside the camp, Specify (such as pond, lake river etc.).....

3.2.4 Usually who provides you your meals?

- Father
- Mother
- You yourself buy it?
- NGO/Organization
- Government institution/organization
- Religious organization (church/temple etc.)
- Any other, specify

3.2.5 Is there a school within the camp area or in the vicinity? If not, how far is the school from the camp?

3.2.6 Is there a college within the camp area or in the vicinity? If not, how far is the college from the camp?



3.2.7 If you or any other family member fall ill, where do you go?

- Government Dispensary
- Local doctor/compounder (quack)
- Government Hospital
- Private Doctor/Clinic
- Any other (specify)
- No facility available, if so what is done in case of sickness/illness?

3.2.8 Is there a place to play in the camp/in the vicinity?

3.2.9 What do you do for recreation? What facilities are available?

3.2.8 Is there anything else you would like to tell us about your camp? Specify

4. Experiences in school (if the child has not been to the school, skip this question)

4.1 For how many years have you been in school?

4.2 What do you like about your school? (such as good infrastructure/building, garden, playground, teachers, extra-curricular activity?)

4.3 Do you attend the school regularly/daily? If no, why not? Specify reasons

5. Experiences at work (if the child is not working, skip this question)

5.1 What is the nature of work you are doing currently?

i. Agriculture/daily wage worker
ii. Domestic help / servant
iii. Tea Kiosk/restaurant/dhaba
iv. Construction work
v. Rice-oil-floor-mill helper
vi. Soldier /army
vii. Militant group how do we word these??
viii. Any other, please specify

5.2. Do you like the work/job you are doing right now? Yes \square No \square Whether yes or no, specify reasons

5.3 If you have the chance to change the work you are doing, what would you like to do? Specify reasons for selecting the answer:

i. Study

- ii Work in another place/occupation; if so, specify where would you like to work
- iii. Spend time at home
- iv. Have not thought about its
- v. Any other, please specify



6. Children working as soldiers / with militant group? (skip this question if the child is not in this occupation)

6.1 For how long have you been working in this occupation?

6.2 Did you select this profession by choice? a. Yes 🛛 No 🗋

- a. If yes, what was the reason for selecting this occupation?
- No other option
- Motivation to do something for my people
- Was forced to take this decision (why?)
- Peer influence/pressure
- Anger/frustration at what had happened
- Revenge
- Any other, specify

b. If no, can you recall and tell us who had initially suggested this work?

- Father/Mother
- Other relatives
- Neighbor/community members
- Friend/peers
- Members of the same group/army
- Any other (please specify)

6.3 Do you like working in this area/occupation? Yes 🗌 No

Whether yes or no, specify reasons

7. Physical Abuse (due to conflict)

Sometimes someone older to us scold, beats, or treats us or our loved ones harshly. We would like to know such experiences from you.

7.1. When you were a young child, did anyone beat you or physically hurt you? Yes \square No \square

If yes,

- a. Who beat or physically hurt you most frequently?
- Within the family (Specify).....
- Outside the family (specify)

b. Please describe an incident that you can easily recall

- c. What was the common method used?
- Pushed
- Slapped
- Kicked
- Beat with stick
- Hurt with sharp edged weapon

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- Gun

- Any other (specify).....

d. How often did you experience this beating?

- Within the family: i. Once	ii. Severely	iii. Frequently
- Outside the family: i. Once	ii. Severely	iii. Frequently

e. Did you require medical treatment for the beating ever (plaster, stitches, surgery etc)?

f. Till which age do you remember it happened?

g. How do you feel about it?

- Its ok, not significant now
- Anger
- Frustration/helplessness
- Revenge
- Depressed
- Lack of sleep
- Lack of appetite
- Any other.....

7.2 When you were a young child, did anyone in your family/ neighbourhood/ relative/loved one got beaten or physically hurt?

Yes 🗌 No 🗌

If yes,

- Within the family (Specify).....
- Outside the family/other community (specify)

a. Who did they get beaten or physically hurt by?

b. Please describe an incident that you can easily recall

- c. What was the common method used?
- Pushed
- Slapped
- Kicked
- Beat with stick
- Hurt with sharp edged weapon
- Gun
- Any other (specify).....

d. How often did he/she experience this physical harm? i. Once ii. Severely iii. Frequently Cry Fellowship Report; Digambar Narzary



a. Who was it?

e. Did it require medical treatment (plaster, stitches, surgery etc)?

f. Till which age do you remember it happened?

g. How do you feel about it now?

- Its ok, not significant now
- Anger
- Frustration/helplessness
- Revenge
- Depressed
- Lack of sleep
- Lack of appetite
- Any other.....

8. Emotional Abuse (due to conflict)

8.1 When you were a child/younger, did anyone call you by foul or dirty names, or humiliate you in any way?

Yes 🗌	No	
-------	----	--

If yes,

- a. Who was it?
- Within the family (Specify).....
- Outside the family/other community (specify)

b. Who belittled or humiliated him/her most frequently?

c. Please describe an incident that you can easily recall

d. How often did such treatment was experienced?i. Once ii. Severely iii. Frequently

e. Till which age do you remember it happened?

- f. How do you feel about it now?
- Its ok, not significant now
- Anger
- Frustration/helplessness
- Revenge
- Depressed
- Lack of sleep
- Lack of appetite
- Any other.....

8.2 When you were a child/younger, did anyone call your family member/ relative/ loved one by foul or dirty names, or humiliate them you in any way? Cry Fellowship Report; Digambar Narzary



Yes 🗌 No 🗌

If yes,

a. Who belittled or humiliated him/her most frequently?

- Within the family (Specify).....
- Outside the family (specify)

b. Please describe an incident that you can easily recall

c. How often did he/she experience	this humiliation?	
- Within the family: i. Once	ii. Severely	iii. Frequently
- Outside the family: i. Once	ii. Severely	iii. Frequently

d. Till which age do you remember it happened?

- e. How do you feel about it?
- Its ok, not significant now
- Anger
- Frustration/helplessness
- Revenge
- Depressed
- Lack of sleep
- Lack of appetite
- Any other.....

f. Did you require medical treatment for emotional disturbance ever (for lack of sleep/appetite etc).

8.3 Did you ever talk to someone about these experiences and emotions? Yes \square No \square

If yes, a. Who did you talk with?

b. Was it helpful? How?

If No,

- a. Why not?
- b. Would you like to talk about it?
- c. Who do you think can help?

9. Substance Use

Sometime people enjoy taking alcohol and other drugs. 9.1 In your knowledge, do any of your friends take any of these: Yes \Box No \Box

If yes, a. What is it? i. Alcohol Cry Fellowship Report; Digambar Narzary



- ii. Rice beer
- iii. Marijuana/heroin/smack/brown sugar
- iv. Any other (specify)
- b. What is the Reason?
 - i. Enjoyment:
 - ii. Habit:
 - iii. Peer pressure:
 - iv. Any frustration/depression/emotional factor:
 - v. Nothing else to do
 - vi. Easily available
 - vii. Other (Specify)

9.2 Have you consumed alcohol or drugs ever? Yes 🛛 No 🗋

9.2.1 If yes, are you currently using/rice beer alcohol or drup? Yes D No

If yes,

- a. What is it?
 - i. Alcohol:
 - ii. Rice beer
 - iii. Marijuana/heroin/smack/brown sugar
 - iv. Any other (specify)
- b. What is the Reason?
 - i. Enjoyment:
 - ii. Habit:
 - iii. Peer pressure:
 - iv. Any frustration/depression/emotional factor:
 - v. Nothing else to do
 - vi. Easily available
 - vii. Other (Specify)

c. During last one month, how many times have you used rice beer alcohol / drugs?

d. From where do you and your friends get this substance/drug/alcohol from?

- From parents/family members
- Neighbours/community members
- Neighbourhood vendors
- Drug peddlers/ supplier
- Any other (specify)

e. Where do you and your friend get money for buying the drug/alcohol?

- From parents/family members
- Neighbours/community members
- Cry Fellowship Report; Digambar Narzary



- From your earning

- Any other (specify).....

f. Does the consumption of drugs/alcohol cause any problem for you? If so, what is the nature of problem:

- Emotional (depression, hyperactive behaviour, anger etc.)
- Mental (loss of memory/amnesia/forgetfulness etc.)
- Social/behavioural (fights with others, leave from work, lying etc.)
- Any other (specify)

g. Do you feel like giving up this habit? Whether yes or no, give reasons

f. What kind of help you need to be able to give up this habit?

9.2.2. Have you ever carried alcohol/drugs ever to some place and to deliver these to some person?

Yes 🗌 No 🗌

If yes,

- a. What is it?
 - Alcohol
 - Local beer
 - Marijuana/heroin/smack/brown sugar
 - Any other (specify)

b. Were you asked by some one to do this? If so, Who asked you:

- Father/mother
- Relative
- Neighbour/community member
- Sibling
- Friend / peer pressure
- Drug peddler
- Any other, specify
- c. How often do you do this? Daily weekly monthly

occasionally

d. Do you get money for doing this? If yes, how much money?

10. Sexual Abuse (due to conflict)

10.1 Do you know of anyone towards whom any dirty remark or obscene gesture was made?

10.2 Can you recall any such incidence easily in the camp?

10.3 Do you recall any of the following ever being done to a relative/ friend/ neighbour/loved one:

- Someone making a dirty remark at him/her
- Anyone making an obscene gesture before him/her



- Did anyone try to show naked or dirty picture to him/her?
- Did anyone expose his or her private body parts to him/her/
- Did anyone forcefully try to kiss him/her
- Did anyone ever force him/her to expose his/her private body?
- Did anyone touched or tried to touch his/her private parts?
- Was he/she ever forced to touch someone's body parts?
- Did anyone ever tried to put an object or his/her private organs inside his/her private parts?

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- Any other experience of similar nature you may be aware of? Please specify ------
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If any of the above is yes,

a. Who was the person and from whose community.....

- Within your family (specify, if willing to do so).....
- Outside the family (specify, if willing to do so).....

b. Are you aware of the person who did this to him/her? Can you tell us?

- Was he/she from within the family? (specify, if willing to do so).....
- Was he/she from outside the family? (specify, if willing to do so).....
- Was he/she from outside the camp? (specify, if willing to do so).....

c. Did you tell or talk to anyone about this? If yes, who did you talk to:

- Father
- Mother
- Sibling
- Friend
- NGO
- Any other care giver
- Community member/neighbour
- Teacher
- Any other, specify

If no, why:

- Was scared
- Did not know whom to talk to
- The other person had shared the experience with you, so did not feel the need to talk to some else about it
- Any other, specify

10.4 Do you recall any of the following?

- Someone/community making a dirty remark at you
- Anyone making an obscene gesture before you?
- Did anyone try to show naked or dirty picture to you?
- Did anyone expose his or her private body parts to you?
- Did anyone forcefully try to kiss you?
- Did anyone ever force you to expose your private body parts to him or her?
- Did anyone touch or tried to touch your private parts and or force you to touch his/her body parts?



- Did anyone ever tried to put an object or his/her private organs inside your private parts?
- Any other experience of similar nature? Please specify

If any of the above is yes,

- a. Who was the person who did this to you the first time? Can you tell us? (specify, if willing to do so):
- Father
- Mother
- Sibling
- Friend
- Any other care giver
- Community member/neighbour
- Teacher
- Someone else from within the camp, (specify, if willing to do so).....
- Any other, (specify, if willing to do so).....

c. Did you tell or talk to anyone about this? If yes, who did you talk to:

- Father
- Mother
- Sibling
- Friend
- NGO
- Any other care giver
- Community member/neighbour
- Teacher
- Any other, specify

If no, why:

- Was scared
- Did not know whom to talk to
- Felt guilty
- Felt ashamed /embarrassed
- Any other, specify
- d. Did the experience happen afterwards also?
- If yes,
- How often did it happen?
- Till what age did it happen?
- Was it the same person who repeated the act?
- Was it someone else who did it again to you? Can you specify (if willing to do so)
- e. How do you handle about it?
- Its ok, not significant now
- No feeling
- Anger
- Fear
- Frustration/helplessness
- Revenge
- Cry Fellowship Report; Digambar Narzary



- Depressed
- Lack of sleep
- Lack of appetite
- Any other.....
- f. Would you like to talk about it to someone?
- g. Who do you think can help?

11. Future Aspirations and Support Services

11.1 Whom do you feel close to in your surroundings/who you can look up to for guidance and support? Specify reason for your response

- Mother
- Father
- Sibling
- Uncle/ Aunt
- Any other relative (specify).....
- Neighbour
- Friends
- Any other person in the camp (specify).....
- Nobody

11.2 What are your ambition and aspirations for future?

11.3 What do you wish to do when you grow up?

11.4 Overall, how do you feel about your situation in the camp? Specify reason?

- Happy and satisfied
- Dissatisfied
- Angry
- Frustrated
- Revengeful
- Helpless
- Lonely
- Any other (specify).....

11.5 Are there any support services available to you who you can seek help/ guidance from:

- Local NGOs
- Community leaders
- Cry Fellowship Report; Digambar Narzary



- Student Union
- School teachers
- Government programs or schemes
- Village Development Committees
- Women's group
- Any other (specify).....

11.6 How much do you think the conflict is responsible for your situation?

- 11.7 What do you think needs to be done for stopping/solving the problem of conflict?
- 11.8. What needs to be done for the welfare and wellbeing of children in such situations of conflict?

