

**NATIONAL CONSULTATION ON
ADOLESCENT SEXUALITY,
HEALTH AND THE LAW:
MAPPING INTERVENTION
RELATED CHALLENGES AND
STRATEGIES**



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Venue: TISS, Deonar Campus, Mumbai

Partners for Law in Development in partnership with CEHAT and RCI-VAW, TISS organized a two day consultation to understand how policies and programmes relating to adolescents interact with each other to impact adolescents in self-arranged sexual relationships.¹ 50 participants from 30 organizations working with adolescents across domains of health, education, sexuality and the law, came together to discuss the specificities of challenges and opportunities presented by laws and State programmes, and the approaches they adopt to navigate such challenges.



Opening remarks by Madhu Mehra, Executive Director, PLD

¹The terms consensual and self-arranged are used by different organizations to refer to sexual relationships willingly entered into by parties involved.

INTRODUCTION

Setting the context for the consultation, Madhu Mehra, Executive Director, PLD (on behalf of all three organisers), called for taking stock of the impact of criminalization of adolescent sexuality with the increase in age of sexual consent from 16 to 18 years. To map experiences of practitioners from different domains – of law, crisis intervention, health and education – this consultation aimed to map the impact of the law on lives of adolescents in self-arranged relationships. In a conscious effort to break-away from the thematic silos that limit our understanding to one or the other field of life of the adolescent, this consultation sought to holistically make the inter-linkages between different domains, by taking stock of the ways the laws and policies worked within each domain, and specifically, looking at the impact if any of the increase in age of sexual consent on all dimensions of the lives of adolescents.

At the outset, Madhu flagged two aspects that were sought to be specifically explored through this consultation. The first related to whether sexuality was understood as a critical area for building the capacities, agency and self-awareness of adolescents by the practitioners, and reasons for whatever position they took in relation to this. The second question was whether it was useful to view adolescents as a distinct category, worthy of distinct understanding and responses, and the reasons for doing so. These two threads were intended to run through the different sessions – to explore the thoughts, experiences and understandings of all of us at this consultation who work with the young.

While this consultation sought to look at sexuality in the context of sex arranged or consensual explorations by adolescents, it was mindful and aware of the dimensions related to sexual abuse – and sought to explore the inter-linkages between the two. Particularly in the context of taboos and cultural silence around sexuality, which get compounded with the criminalization of all sexual expression by those under 18 years (without regard to their evolving capacities), the policy framework does not distinguish between positive and negative expressions of sexuality. This blurring of distinction between what is consensual and that which is abuse, as well as those that fall in between – ultimately creates guilt or secrecy about sexuality, reducing availability of sexuality related information and services, and stigmatizing access to these. Each of these constraints diminishes the ability to distinguish between harm and good, or indeed, seek protection against harm. It is for this reason, that the consultation sought to understand how practitioners were seeing and experiencing the criminalization of sexual consent for 16-18 years, in their work.

Dipta Bhog, an expert in the domain of gender, education and pedagogy, facilitated the first session of the consultation. In this session, participants were divided into four groups; two of those working as resource groups and two of those working with adolescents at the community level. They were asked to discuss the following:

- The relevance of the category of ‘adolescence’ in one’s own area of work
- Current perspectives being employed for talking about adolescents; usefulness of the lens of ‘sexuality’
- Meaning of ‘positive sexuality’; linkages between early marriage and health, harm/prevention, law, redressal mechanisms



Group Work

SUMMARY OF POINTS RAISED IN THE GROUP DISCUSSIONS:

Dipta Bhog and Sheila Ramaswamy, NIMHANS summarized the group presentations made after the first session. Dipta pointed out that an adolescent girl is the most disempowered within the familial structure as her ability to give or withdraw consent is never acknowledged. In this situation, marriage becomes a highly contested category. She also added that there is a need to take into account the violence and sexual abuse faced by adolescents in their natal homes, as this aspect is often ignored in the discussion focused on child marriage.

Sheila highlighted that the adolescent brain develops till the age of 25 and young adults are susceptible to peer influence and substance abuse in the background of already present sexual norms. Thus, a framework needs to be created through which adolescents can engage in consensual sexual activity. She also made a distinction between manufactured consent and informed consent, given that consent can be manipulated, especially in cases of abuse faced by adolescents.

Following are some of the other points that were brought up in group presentations:

- ◆ **‘Adolescent’ as a category** is defined and understood differently by different stakeholders in the legal, health and policy sector. People from different sectors had different views on who exactly could be categorised as an adolescent, depending upon their own understanding and experiences of interacting with young individuals.
- ◆ The **debate around age of consent** took into account the fact that 16-18 years is in fact a transitory phase between adolescence and adulthood. While some participants advocated for a combination of age with other factors to determine adolescents’ capacity to engage in sexual contact, others believed that criminal law *per se*, is not capable of accommodating such fluid standards.

- ◆ Concerns were raised around the **terminology used with respect to adolescents**, both in English and Hindi. E.g. Participants objected to use of the word *nabali* in Hindi and instead expressed preference for the terms *kishore* and *kishori*.
- ◆ Community based organisations highlighted the need to look at **informed consent** - can adolescents be treated as full grown adults? Can the society provide them with sufficient life skills and practical experience by the age of 15 or 16 for them to take significant decisions in their life? They critically called into question protectionist attitudes, emphasizing the need for a framework that accommodates the inquisitiveness of children and adolescents around the issue of sexuality.
- ◆ The discussions highlighted the **inevitable nature of marriage** and the role it played in one's life. Use of terms like 'pre-marital sex' highlighted the importance given to marriage and the way sex/ relationships outside marriage are perceived. Participants stressed the need to question the narrative of marriage as the primary aspiration for adolescent girls.
- ◆ Questions were raised around the **definitions of 'harm'**. Why is there always a rush to connect sex with sexuality, and sexuality with pregnancy? There is a need to emphasize affirmative sexuality, which calls for moving beyond the risk perspective employed – to include within the scope issues of desire, curiosity, gender identities, relationships, expressions - all of which are aspects of sexuality. Suggestions were also made around addressing sexual abuse by promoting affirmative sexuality among adolescents.
- ◆ The need to look at disability, mental health, well-being, and the effect of caste, class and religion within the prism of sexuality was raised. The perspective on sexuality remains incomplete as it is understood and analysed only under the categories of health, law and POCSO.
- ◆ **Lack of knowledge about sexual and reproductive health** often resulted in adolescent girls seeking unsafe abortion putting their health at risk; or instance of taking contraceptive pills after kissing as they feared that pregnancy results from kissing.
- ◆ Adolescents, especially boys, have easy **access to pornographic materials** these days, online or otherwise which does not always provide them with correct information about sex. In face of this reality, it is extremely important to talk about sex, sexuality and gender without stigmatising these issues for children and adolescents – yet, there is no space to do so. This leaves the young prone to incorrect information peddled by online/offline sources.
- ◆ It was felt that violence and harassment faced by girls in their marital homes receives disproportionate importance, with little attention to **violence inflicted by natal family**- especially against adolescent girl exercising her sexual agency. Both these require an equal amount of scrutiny and critique.
- ◆ The vulnerability of adolescents to **peer pressure** was also an important factor in influencing their decision-making. Substance abuse among young individuals was another critical issue to consider.

Key Takeaways

- The category of adolescents is context specific. Stakeholders in different sectors such as legal, health, education, sports, define this category differently, depending upon the objective of the categorisation. There was a broad consensus that adolescents in the age group of 16-18 years should be treated as a separate category for the

purposes of sexuality and marriage.

- Sexuality is a critical, although one among many other lenses, through which we understand adolescent health, early marriage, and girls' education. Even within this lens, there's a need to look at disability, mental well-being and effect of caste, class and religion in determining the experiences of adolescents.
- While an understanding of positive sexuality may be instrumental in empowering children and adolescents against sexual abuse, there are several obstacles to building this understanding – such as lack of access to positive information and marginalisation faced due to location, gender, and class. It was also highlighted that this can be only one kind of intervention to tackle sexual abuse, which in fact, requires many other kinds of interventions, because the extent of harm and abuse that adolescents suffer is multi-faceted. Positive sexuality can be one among a broad spectrum of interventions necessary within which awareness about positive sexuality can only be one.

PANEL ON EDUCATION



L to R: Sunanda (*Sahiyar*), Jaya (*UNFPA*), Snehal (*Akshara*)

JAYA FROM UNFPA presented the findings of an evaluation of government's Adolescence Education Program (AEP) conducted in 100 schools during 2016-17. The main objective of the assessment was to understand the preparedness of the education system to conduct such programs and the way forward with respect to the initiative. As per this study, residential schools seemed to be more receptive to Adolescent Reproductive and Sexual Health (ARSH) education than the day schools. The study found exposure and knowledge about relationships, sexuality and sexual identity ranging from 40-73 percent within various sub-categories for 9th and 10th grades, 37-89 percent for 11th and 12th grade and 46-93 percent for teachers. The study also emphasized that while teachers feel comfortable in conveying information about anemia, menstruation, etc, they tended to skip sections on sexual health.

Jaya also highlighted the lack of understanding amongst adolescents on attraction and consent, and pointed out that puberty among boys is less discussed than among girls.

SUNANDA FROM SAHIYAR shared her observations from Sahiyar's work with two groups of girls belonging to different age groups-11-14 years and 15-19 years in Vadodra, Gujarat. She reported that girls as young as 13 years were often married off by their parents and this was one of the primary reasons for a high drop-out rate. The girls often reported being subjected to violence by their fiancés after engagement. Furthermore, as school fee was required to be paid class 10 onwards, many parents preferred to not send their daughters to school. Girls in both age groups did not get to choose their partners. Boys' early and easy access to technology as compared to denial of access to technology to girls was also highlighted.

Sunanda also brought up the general aversion towards sex education from schools and decision making authorities. Principals and parents discourage sex education in schools, finding it inappropriate, and fearing that it will encourage adolescents to become sexually active.

SNEHAL FROM AKSHARA suggested that comprehensive sexuality education should be introduced from early childhood itself wherein parents can be actively involved with their child. Eventually, a curriculum can be developed where the child can directly participate in questions regarding sexuality. She also communicated the findings of a pilot survey conducted with 170 youth in an urban area. The survey showed that 68 percent of young people came to know about sex from their friends, 58 percent from pornography and 11 percent from their parents. It was observed that access to digital media and technology had eased access to pornographic content. With respect to contraceptives, most participants knew about condoms, were unaware of other contraceptives. The survey also highlighted issues of body image, skin tones, desires, etc faced by both boys and girls. Snehal also presented innovative ideas like *melas* (fairs) that can be organized in communities and colleges to touch upon the concepts of gender, sexuality and relationships.

Key Takeaways

- Participants were of the view that comprehensive sexuality education can be instrumental in building an understanding of positive sexuality, as currently, the level of awareness about reproduction, and prevalence of myths around sex, masturbation, pregnancy etc amongst adolescents is poor.
- The panel highlighted the challenges in implementing CSE in schools, and the various forms of resistance to it. Some schools don't even teach the chapter on reproduction in biology classes, as it is believed that knowledge about reproduction will encourage students to engage in sexual activities.
- The discussion highlighted the need to integrate CSE into school curriculum as a separately evaluated and tested subject in order to ensure that it is given as much importance as other subjects. However, there was no consensus on whether CSE should be a separate subject, or whether it should be integrated

into life skills education.

- Given high-dropout rates, and resistance from schools, teachers and parents to CSE, it was suggested that there should be alternative spaces for the dissemination of such information.

PANEL ON HEALTH



L to R: Ramki (SAATHI), Sanjida (CEHAT), Nandita (Chair, Akshara), Deepa (SAMA)

SANJIDA FROM CEHAT shared experiences gained in the process of assisting women and girls who have been subjected to domestic and sexual violence. She highlighted that dynamics of intimate relationships of adolescent girls should be understood in the context of perceived purity of adolescent girls and its association with family's honour. She also stated that CEHAT had come across a large number of consensual elopement cases involving adolescent girls. The most common reasons for elopement were found be parents' disapproval of the relationship and abuse within the natal family. It was noted that very few of these girls reported using any forms of contraceptives.

CEHAT also found that attitude of health care professionals is often coloured by the marital status of the girl. Doctors don't feel the need to collect evidence if the girl is married and are unaccommodating of sexually active unmarried girls. In some cases, requirement of consent from guardian prevents the girl from accessing essential healthcare services, such as abortion. Sanjida pointed out the contradiction between government policy and law with respect to the *Rashtriya Kishor Swasthya Karyakram (RKSK)*(National Adolescent Health Care Program) programme and the Prevention of Children from Sexual Offences (POCSO) Act. While the program has envisaged provision of a safe space for adolescents to enable health services, POCSO criminalises their sexual relations and mandates reporting which serves as an impediment.

DEEPA FROM SAMA discussed the RKSK scheme and pointed out that the public health system is currently in bad shape and the move towards greater privatisation is likely to further restrict access to health care for marginalised populations. She said that implementation of RKSK had only recently begun and therefore, it would be difficult to assess the quality of the implementation. Even so, RKSK as a programme is essentially a space for very basic services such as distribution of sanitary pads, weekly Iron/ Folic Acid tablets for nutrition, etc. It is largely a referral unit given that it looks at peer educators, rather than health care providers. However, community level workers in healthcare are already struggling in light of lack of institutional support and funding. It was also pointed out that RKSK treated adolescents as a homogeneous category and was ignorant of the needs of adolescents belonging to specific communities and regions.

L. RAMAKRISHNAN FROM SAATHI discussed the problems faced by Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) adolescents in accessing healthcare, especially sexual and reproductive healthcare. LGBTI adolescents experience violence, stigma and discrimination in all settings. Un-prescribed hormone pumping, electro treatment, ‘curative rape’ of lesbians, etc are some of the common practices in the country. Moreover, LGBTI adolescents are often excluded from HIV prevention programmes. The NALSA judgment’s recognition of access to Sex Reassignment Surgery (SRS) only through parental consent for persons below 18 makes gender recognition process for adolescents even more difficult.

Unavailability of information heightens vulnerability to violence and abuse and so does dismissal of sexual violence faced by others. It was pointed out that the health care system needs to take into account both physical and mental health needs. Drawing from SAATHI’s work, Ramki suggested that age appropriate information should be disseminated through the use of digital technology mediums like inter-webs/ apps/ Interactive Voice Response System (IVRS).

Key Takeaways

- It was suggested that small modules be prepared for gender in medical education. Domain specific information on sex, gender, sexuality in medical, nursing and in undergraduate curriculum in Continuing Medical Education (CME) should be included to tackle the discriminatory attitudes of healthcare providers.
- Most of the participants agreed that mandatory reporting of adolescent sexual contact under POCSO and IPC poses grave risks to their access to healthcare and other services, thus necessitating law reform.
- Use of social media, including dating applications such as Tinder to disseminate information around sexual and reproductive health was suggested. This should be done in the context of gendered access to the online world.

PANEL ON CRISIS INTERVENTION



L to R: Taranga and Divya (RCI, TISS), Madhu (Chair, PLD), Paromita (CHSJ), Bharat (Vishakha)

PAROMITA FROM CENTRE FOR HEALTH AND SOCIAL JUSTICE (CHSJ), KOLKATA discussed her experience of working with sex workers' children and homeless children in Kolkata. She pointed out that children of sex workers and homeless children were the most vulnerable to abuse, and the likelihood of encountering sexual violence is very high for them. The peer pressure on most of them to engage in sexual acts is very high along with the possibility of facing sexual abuse from *babus* (their mothers' partners).

She talked about *Amra Padatik*, a collective for children of Female Sex Workers in Kolkata, which has now become a safe space for children and adolescents. A lot of children understand early marriage as a way to fulfil their desires and leave the brothels. Peer educators have successfully prevented 15 early marriages in their community. She also raised the issue of understanding consent with respect to adolescents in sexual relationships and the possibility of manipulation, given high vulnerability of adolescents in that age group.

BHARAT FROM VISHAKHA, RAJASTHAN shared his experience of working at a one stop crisis centre, highlighting the large number of elopement cases received at the centre. Using a psycho-social model of intervention, he emphasized that counselling around the issue of sexuality must involve a discussion around intimacy, body image and desires of the adolescents. Therefore, there was a need to introduce CSE from an early age in order to

negate the stigma and taboos around adolescent sexuality. There is also a need to examine violence faced by adolescent girls in their natal homes.

However, Bharat pointed out that even the counsellors at one stop crisis centres are not entirely devoid of biases while dealing with adolescents, and are often influenced by class and caste dimensions of an elopement case. Counsellors also find it difficult to work with sexually active adolescents, especially the ones with multiple partners.

TARANGA AND DIVYA FROM RESOURCE CENTRE FOR INTERVENTIONS ON VIOLENCE AGAINST WOMEN (RCI – VAW, TISS), MUMBAI discussed their experience of working with adolescents and running 29 special cells in police stations. It was mentioned that in some homes, sexual abuse was pervasive and perpetrated against both the mother and daughter. The presentation emphasized upon the difference between self-arranged and consensual relationships. They emphasized the need to avoid looking at consent as an isolated event, as gendered power relations affect the vulnerability of the stakeholder.

They also highlighted the important to recognize that an adolescent girl could be subjected to abuse both before and after in a self arranged match. She discussed the manner in which adolescents were counseled at the Special Cells to prevent institutionalization and to ensure that girls are in a position to respond to violence in the future.

The impact of caste and religion within the self arranged relationships of adolescents was also noted. Interventions in self-arranged inter-religious cases are treated in a different manner as the Police and the survivor are generally found to be not interested in filing cases under POCSO. Police attribute lack of awareness about the law as the reason and the adolescent fears getting stigmatized and feeling responsible and guilty for putting someone known to them in the jail.

Key Takeaways

- In what way should we understand consent from the perspective of adolescents, who are often unable to differentiate between consensual and non-consensual activities, especially when the sexual contact is accompanied with feelings of pleasure?
- Concerns were raised about adolescent boys and their issues, given that most of the discussions in the development sector revolve around the rights of girls.
- It was highlighted that violence and rejection from the natal family often makes adolescents look for affection outside the home and hence it is important to develop strategies to work with families.

PANEL ON LAW



L to R: Monica (Chair, TISS), Saumya (PLD), Audrey (Majlis Law), Bharati (HAQ), Nagma (Rubi Social Welfare Board)

SAUMYA FROM PARTNERS FOR LAW IN DEVELOPMENT (PLD), NEW DELHI presented PLD's research on cases involving the use of POCSO and Protection of Children from Child Marriage Act (PCMA). She highlighted how most of the cases appearing in courts were of self-arranged relationships. Litigants in these cases were found mostly to be the parents of the girl, who sought to punish the girl's partner. On the other hand, the number of cases where marriages had been arranged by parents was found to be very low.

Cases of forced marriage were found to be absent from the legal system. Marriages were invalidated in PCMA only when parents pressurized. In such cases, POCSO and IPC were used to punish the husband under charges of kidnapping, rape and solemnization of marriage with a minor. PLD's research also shows that option of repudiation was being used by boys and not girls to nullify marriages under PCMA. This illustrates that girls were found to have no access to the legal system.

In custody proceedings, High Courts seemed amenable and allowed the girls to exercise their choice in determining their place of residence – father's home/ husband's home/ shelter home, especially if the girls are above 15 years of age. Similarly, the husbands/ partners are acquitted in most cases involving self arranged marriage/ sexual contact of a girl aged 15 and above. Unfavorable decisions of convictions/ forcing the girl to stay with her parents seemed more likely in cases where the girl was under the age of 15 at the time of marriage. Thus, the courts seem to be responding differently to the category of older adolescents, without invoking the term 'evolving capacities.'

There is a need for legal system to appreciate the agency of girls when asserted, and respect the statements made by them. It is observed that there is a tendency to disbelieve the statement of the girl, in a consensual case or a non-consensual case.

NAGMA FROM RUBI SOCIAL WELFARE BOARD, NAGPUR talked about her organization's work within the Muslim Community in Nagpur. They handle cases of girls between 17-18 years of age who wish to apply for divorce. These girls had been married off as soon as they reached puberty. The organization has also been successful in preventing child marriages within the Muslim community. They discovered that the Police was often biased towards the girls, blamed them and didn't file the F.I.R. The girls are also put under a lot of pressure during the investigations conducted by the Police.

They have also dealt with several cases of early marriage where young girls had gotten married, had two to three children by the time they were 17-18 years of age and were later abandoned by their husbands. In one case, a married minor girl and her three-year-old child were abandoned by the husband, who was later found to have married someone else. The police refused to help in this case and asked the young girl to seek help through Muslim Personal law.

AUDREY FROM MAJLIS, MUMBAI spoke about *Raahat*, a program that provides social as well as legal support to victims of rape. Their organization found that 80 percent of the cases received in this program were of children, which makes it clear that very few women choose to enter and access the criminal justice system. It was highlighted that children, on the other hand have been forced into the system because of POCSO Act and through the Criminal Law Amendment (CLA) Act as well.

Audrey looked at 23 cases registered under Section 376 of the IPC and POCSO between January, 2017 and August 2017 in Mumbai. The age of the victims ranged from 14-19 years, the maximum cases (7) received had been of victims aged 16 years. The age difference in maximum number of cases was 6-9 years of age between the accused and victim.

Audrey raised the question of consent of the victims in cases of self-arranged/ consensual relationships. She noted that the majority of accused in these cases were known to the victim (friends, cousins, family members including father in some cases). Consent also remained a question in cases where promise of marriage was made to the victim by the accused. It was also found that young girls often faced abuse at homes, and therefore tried to get out of the home (either through marriage or otherwise), whereas, without any family support, girls face more violence.

In certain cases, where victims were pressurized to make complaints, the victims either withdrew complaints in the middle of the investigation or turned hostile during the trial (victims in these cases discovered later that they were pregnant and 40 percent of the pregnant victims were between 14-16 years of age). Such cases were then termed as 'false cases' in the judgement.

Audrey believes that ‘mandatory reporting’ under POCSO has given rise to the number of cases being registered, as victims are more willing to report abuse. Mandatory reporting sense has created awareness as well as pressure on schools, police and the general public to register cases of abuse.

BHARTI FROM HAQ - CENTRE FOR CHILD RIGHTS, NEW DELHI talked about the restricted perception of sexuality in the law. The legal system looks at sexuality either through the lens of marriage or through abuse and is very limited when it comes to exploring sexuality as a choice (consent). Parents and society in general lack an understanding of sexuality and hence according to her, an attempt to include adolescent sexuality in the compass of law may only create further confusion.

Bharti also highlighted the anomalies present in the current laws related to children. Under POCSO, if an adult male has sexual relations with a minor, then the male partner will be deemed as the abuser. In a case where both the partners are minor, it becomes difficult to ascertain who will be deemed as the victim and who will be deemed as the abuser. Generally, it is the minor male partner who is charged guilty. Under PCMA, if the minor married girl gets pregnant, then the child born is considered legitimate. However, according to POCSO, the husband in a similar case will be accused of having sexual relations with a minor girl (wife).

She added that mandatory reporting under POCSO has helped particularly in those cases where schools were mandated to take full responsibility of child sexual abuse cases, but has not been helpful for the rest. She also noted that sexuality has not been included within training curricula of the Police and Judges. She further highlighted that while dealing with bail orders, the girl’s objection against the order is not given due consideration and only the girl’s mother’s opinion is considered. It was also observed that despite the victim having the right to have his/her own lawyer under POCSO, no lawyers are provided to the victims. Even when legal aid lawyers are brought in, they lack understanding of sexuality, and will hardly present the child’s perspective to the Court.

Bharti also raised critical questions around shelter homes where victims are usually sent. She said that there have been cases where girls who have been sexually abused are kept away from the other girls. She added that while it is the responsibility of policymakers to protect rights of children, we must collectively make sure that this protection does not include punishment and criminalization of children.

MONICA SAKHRANI, MUMBAI-BASED ADVOCATE discussed a case from the Kerala High Court where both the victim and perpetrator were minors. A 17-year-old girl had stated that she became pregnant because of a 12-year-old boy. The Police booked two cases against both the girl and the boy. This according to her raises serious questions about who is being protected by whom under the law, as both the girl and the boy are simultaneously being called victims and perpetrators.

Key Takeaways

- Laws such as POCSO and IPC that affect adolescent sexuality are primarily being used by parents of girls to criminalise the actions of the partner/husband.
- PCMA is also increasingly being used by parents, along with Hindu Marriage Act, to invalidate the marriage of minor girls in self-arranged relationships and marriages. These laws, by not respecting the evolving capacities of children, lend themselves to misuse by parents.
- Participants highlighted the increasing surveillance of couples in some states, and posited this as one of the many ways in which sexuality is policed. They also highlighted the continuum in the treatment of minor adolescent girls and young adult women.
- While 'mandatory reporting' provision in POCSO might appear to be helpful, it only has limited benefits, particularly in the context of schools. Its application in relation to counsellors and health services denies the young access to safe and confidential health services.

CONCLUSION

The concluding discussion brought forth various definitions of abuse and consent; that these are not homogenous or distinct, often overlapping and shifting categories. The discussion further highlighted the need to pay attention to our intervening capacities as practitioners because adolescence is an age of experimentation and exploration of one's sexuality. Adolescents' understanding of sexuality is very limited and so is their requisite experience to take decisions w.r.t. sexuality. The need for practitioners to become sensitive towards evolving capacities of adolescents and de-stigmatise sexuality to be able to ensure scientifically accurate and unbiased information was reiterated.

NEXT STEPS SUGGESTED

- Conduct trainings on sexuality education (as distinct from sex education which is biology centric) for government officials and employees.
- Need to pay greater attention to develop terminologies used in the discourse around adolescent sexuality.
- Organisations should come together as a coalition to articulate common concerns across different sectors they occupy and collaborate for advocacy. An online portal and digital communication can be ways of publicizing positions, perspectives, and and undertaking advocacy.
- Need to create awareness among adolescents on legal rights, POCSO and other socio-legal aspects of their lives.
- Make digital interventions using mobile phones. There is a need to address digital gender gap as girls have a very limited access to mobile phones and other technologies in comparison to boys.
- There are many vexed issues to be tackled around these themes such as sexual consent, mandatory reporting, sexuality education, for all the organisations working

directly in the field. Given this, there was a felt need for practitioners to advocate for other strategies, so as to de-centre the law in order approach which is heavy handed and penalizes the young adults and a need for amplifying the risks and drawbacks/harm to adolescents as a result of these issues.



Group Picture of Participants at the National Consultation

AFTER-THOUGHTS

The discussion on who is youth was very interesting and even to reach to an understanding that it is fine to have different milestones for different interventions was good. Listening to organizations working across the country with young people using diverse approaches and lenses was quite enriching as well.

Archana Dwivedi, Nirantar, New Delhi

The discussions gave me ideas about how we can nuance discussions of consent and agency in our training programmes by bringing 'promise of marriage', and highlighting natal family violence as a factor in girls' decisions to elope or want to get married 'early'.

Prabha Nagaraj, TARSHI, New Delhi

My own knowledge about the issue of sexuality was limited but now I find that there are needs and opportunities to address these issues at the community level.

Sumit Chavan, Jan Sahas, Madhya Pradesh

I lead an organisation working on the issue of child sexual abuse and violence and it was important to realize that we need to get out of the legal framework at times and understand better the social and health consequences involved in cases. There is also a need for awareness and change within all sectors on issues of sexuality.

Pritarani Jha, Peace & Equality Cell, Gujarat

