



**IMPACT ASSESSMENT OF CONFLICT ON CHILDREN IN
SRINAGAR, RAJOURI & POONCH DISTRICTS,
JAMMU AND KASHMIR**

2014



Child Nurture & Relief (CHINAR)

Abbreviations

APL	Above Poverty Line
AAV	Antoyadaya Card
BPL	Below Poverty Line
CG	Children's Groups
CPC	Child Protection Committees
FIR	First Information Report
IED	Improvised Explosive Device
NGO	Non Governmental Organisation
SHRC	State Human Rights Commission
SC	Save the Children
SC/ ST	Scheduled Caste/Scheduled Tribe
UN	United Nations

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CHINAR

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EXECUTIVE SUMMARY

Jammu And Kashmir is experiencing a difficult, if peculiar situation: as a result of decades of civil unrest, communities are experiencing shock but without material damage to infrastructure like housing, capital or human stock, as is generally the case in post-disaster or post-conflict situations. Here, losses are related to issues like loss of economic activity, of income, of access to and quality of public services; these are inherently more difficult to capture and quantify than physical damage.

The study “**Impact Assessment Of Conflict On Children In Srinagar, Rajouri & Poonch Districts in Jammu And Kashmir**” focuses on social impact of civil unrest and strife on human development: health, education, employment and livelihoods, poverty and social safety nets, and social cohesion and gender on children, families, orphans, youth and labour/wage earning classes, especially since the most adversely affected among the marginalized are unskilled laborers and those in informal or irregular work.

Issues were also not uniform across the study area: while threat to life in districts like Poonch and Rajouri - which are closer to the Line of Control (LoC) - is more imminent because of cross-border shelling, land mines and IEDs, it is civil strife, unrest, *hartals* and *bandhs*, stone pelting, bullets, pellets, tear gas shells, etc., indiscriminate firing and detentions which have had a telling impact on the psyche of most communities living in the Kashmir valley. Whatever be the reason, there is no doubt that the conflict has impacted severely on children’s overall development and made them vulnerable to frequent violence and disruption of normal life as they know it. More importantly, it has directly and significantly impacted quality of education received by children across the region.

Sadly, too many youth have lost their limbs to bullets, pellets, mine and/or IED injuries and are thus disabled for lifetime. Whole families lost their bread earners, with the widows and orphan children left behind even more vulnerable to exploitation financial instability. Children are made orphans, separated from their parents and subjected to sexual abuse and exploitation, suffer from trauma and deprived of education and healthcare. Particularly damaging for future generations is the impact of conflict on girls: disadvantaged even in peacetime, girls undergo sexual abuse, rape, enslavement and other tribulations during continued civil strife and unrest. When efforts are undertaken to relieve suffering, the particular needs and special concerns of girls tend to be forgotten, not the least because of the lack of systematic knowledge of these needs in specific cultural and social contexts.

While there is growing awareness and the will to tackle the issue of the rights, well-being and protection of children who are being directly affected by conflict, response is often hobbled in part by significant gaps in our knowledge. It is to assess the overall impact of conflict on children that “**Impact Assessment Of Conflict On Children In Srinagar, Rajouri & Poonch Districts in Jammu And Kashmir**” in the three districts of Jammu & Kashmir –Srinagar, Poonch and Rajouri – was carried out. The findings of the study will help Save the Children frame future strategies and program interventions for these three districts on behalf of children affected by conflict. The study’s broad scope is also meant to engage the interest of diverse constituencies working on children and conflict, and function as a catalyst for the development of further research in the field.

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1. INTRODUCTION

The **Kashmir conflict** is a territorial dispute between the Government of India, Kashmiri insurgent groups and the Government of Pakistan over control of the Kashmir region (an area that includes the Indian-administered state of Jammu and Kashmir which consists of Jammu, Kashmir Valley, and Ladakh region), Pakistan-administered territories of Azad Kashmir and Gilgit-Baltistan, and Chinese-administered regions of Aksai Chin and the Trans-Karakoram Tract). While an inter-state dispute over Kashmir has existed between India and Pakistan since the Indo-Pakistani War of 1947¹ an internal conflict between Kashmiri insurgents (some favouring Kashmiri accession to Pakistan, and some favouring Kashmir's complete independence²) and the Government of India has been the source of violence in the region since 2002.

India and Pakistan have fought at least three wars over Kashmir, including the Indo-Pakistan Wars of 1947, 1965 and 1999 and since 1984 the two countries have also been involved in several skirmishes over control of the Siachen Glacier. India claims the entire state of Jammu and Kashmir and administers approximately 43% of the region, while Pakistan controls approximately 37% of Kashmir, namely Azad Kashmir and the northern areas of Gilgit-Baltistan.^[3] ^[4]

The roots of the conflict between Kashmiri insurgents and the Indian Government are tied to a dispute over local autonomy⁵. Democratic development was limited in Kashmir until the late 1970s and by 1988 many democratic reforms by the Indian Government had been reversed and caused a dramatic increase in support for insurgents advocating violent secession from India⁶. In 1987, a disputed State election⁷ created a catalyst for the insurgency. In July 1988, a series of demonstrations, strikes and attacks on the Indian Government began the Kashmir Insurgency which during the 1990s escalated into the most important internal security issue in India.

The turmoil in Jammu and Kashmir has resulted in thousands of deaths, but has become less deadly⁸ in recent years.⁹ There have been protest movements in Indian Administered Kashmir since 1989 to voice Kashmir's disputes and grievances with the Indian government. Elections held in 2008 were generally regarded as fair by the United Nations High Commissioner for Refugees, had a high voter turnout in spite of calls by militants for a boycott, and led to the pro-India Jammu & Kashmir National Conference forming the government in the state^[10]^[11]. According to Voice of America, many analysts have interpreted the high voter turnout in this election as a sign that the people of Kashmir have endorsed Indian rule in the state¹². However Sajjad Lone, a prominent separatist leader in Kashmir,

¹[Uppsala Conflict Data Program](#) Conflict Encyclopedia, Conflict Summary, Conflict name: India: Kashmir, Type of incompatibility: Territory, Interstate/intrastate dimension: Intrastate, Conflict status: Ongoing, Date of first stated goals of incompatibility: 29 May 1977, viewed 2013-05-29, http://www.ucdp.uu.se/gpdatabase/gpcountry.php?id=74®ionSelect=6-Central_and_Southern_Asia#

² *Social Studies S5 Ab*, Pearson Education. p. 70. ISBN 978-981-4114-72-1.

³Choudhury, Salah Uddin Shoaib (8 October 2010). "Pakistani rogue policy on Kashmir". *Sri Lanka Guardian*. Retrieved 29 May 2013.

⁴ Durrani, Atiq (4 February 2013). "PAK-INDIA Dialogue: Single-Point-Agenda: KASHMIR". PKKH. Retrieved 18 August 2013.

⁵ [Uppsala Conflict Data Program](#) Conflict Encyclopedia, Conflict Summary, Conflict name: India: Kashmir, "Roots of Conflict and the emergence of Kashmir Insurgents, viewed 2013-05-29, http://www.ucdp.uu.se/gpdatabase/gpcountry.php?id=74®ionSelect=6-Central_and_Southern_Asia#

⁶ [Uppsala Conflict Data Program](#) Conflict Encyclopedia, Conflict Summary, Conflict name: India: Kashmir, "Roots of Conflict and the emergence of Kashmir Insurgents, viewed 2013-05-29, http://www.ucdp.uu.se/gpdatabase/gpcountry.php?id=74®ionSelect=6-Central_and_Southern_Asia#

⁷ "Elections in Kashmir". Kashmirlibrary.org. Retrieved 6 January 2013; "India Pakistan | Timeline", BBC News. Retrieved 2 February 2010;

"Kashmir: A History Littered With Rigged Elections (by Mushtaq A. Jeelani) – Media Monitors Network". Mediamonitors.net. Retrieved 2 February 2010; Hussain, Altaf (14 September 2002). "South Asia | Kashmir's flawed elections". BBC News. Retrieved 2 February 2010.

⁸ Trofimov, Yaroslav (15 December 2008). "A New Tack in Kashmir". *The Wall Street Journal*. Retrieved 2 February 2010.

⁹ Emily Wax (28 August 2008). "Peaceful Protests in Kashmir Alter Equation for India". *The Washington Post*. Retrieved 23 November 2010.

¹⁰ "Freedom in the World 2009 – Kashmir (India)". UNHCR. 16 July 2009. Retrieved 1 May 2010.

¹¹ "Pro-India parties win majority in Kashmir elections". CNN. 28 December 2008. Retrieved 1 May 2010.

¹² "Regional Party Enters Talks for Coalition Government in Jammu and Kashmir". [Voice of America](#). 29 December 2008. Retrieved 9 May 2010.

claims that "the high turnout should not be taken as a sign that Kashmiris no longer want independence¹³. In 2009 and 2010 unrest erupted again.

India continues to assert their sovereignty or rights over the entire region of Kashmir, while Pakistan maintains that it is a disputed territory, that the status quo cannot be considered as a solution and insists on a UN-sponsored plebiscite. Many neutral parties to the dispute have noted that the UN resolution on Kashmir is no longer relevant¹⁴. The European Union has viewed that the plebiscite is not in Kashmiris' interest¹⁵. The report notes that the UN conditions for such a plebiscite have not been, and can no longer be, met by Pakistan¹⁶. The Hurriyat Conference observed in 2003 that a "plebiscite [is] no longer an option"¹⁷. Besides these options, there is a third faction who supports independence and withdrawal of both India and Pakistan.

In a 2001 report titled "Pakistan's Role in the Kashmir Insurgency" by RAND Corporation noted that "the nature of Kashmir conflict has been transformed from what was originally a secular, locally based struggle (conducted via the Jammu Kashmir Liberation Front – JKLF) to one that is now largely carried out by foreign militants and rationalized in pan-Islamic religious terms." Most militant organisations are composed of foreign mercenaries, mostly from Pakistani Punjab¹⁸. In 2010, with the support of its intelligence agencies, Pakistan has again been 'boosting' Kashmir militants, and recruitment of mujahidin in the Pakistani state of Punjab has increased.^{[19][20]} In 2011, FBI revealed that Pakistan's spy agency ISI paid millions of dollars into a United States-based NGO to influence politicians and opinion-makers on the Kashmir issue²¹.

The Freedom in the World 2006 report categorised Indian-administered Kashmir as "partly free", and Pakistan-administered Kashmir, as well as the country of Pakistan, as "not free". A MORI survey found that within Indian-administered Kashmir, 61% of respondents said they felt they would be better off as Indian citizens, with 33% saying that they did not know, and the remaining 6% favouring Pakistani citizenship. However, this support for India was mainly in Ladakh and Jammu regions, not the Kashmir Valley, as only 9% of the respondents from the Kashmir Valley said they would be better off with India²². A survey by the Chatham House in both Indian and Pakistani administered Kashmir found that support of independence was at 43% and 44%, respectively²³.

However, at the heart of this conflict is a confrontation between two nationalisms²⁴. For Pakistan, Kashmir has to be won to justify the religious moral significance of Pakistan's nationhood²⁵. India's identity, in contrast, hinges on a strong belief in secularism and Kashmir gives credence to its secular

¹³ ["Regional Party Enters Talks for Coalition Government in Jammu and Kashmir". *Voice of America*. 29 December 2008. Retrieved 9 May 2010.](#)

¹⁴ [Kickstart Kashmir – *The Times of India*](#)

¹⁵ [EU: Plebiscite not in Kashmiris' interest](#) – 30 November 2006, Pak Observer

¹⁶ [REPORT on Kashmir: present situation and future prospects](#); Committee on Foreign Affairs Rapporteur: [Baroness Nicholson of Winterbourne](#)

¹⁷ [Plebiscite no longer an option; Kashmir row must be resolved within two years' - Hurriyat Conference Chairman, Mr Abdul Gani Bhat, *The Hindu*, 1 July 2003](#)

¹⁸ [Pakistan's Role in the Kashmir Insurgency by Peter Chalk, RAND, 2001-09-01](#)

¹⁹ [Why Pakistan is 'boosting Kashmir militants', BBC, 3 March 2010](#)

²⁰ [Why Pakistan is 'boosting Kashmir militants', BBC, 3 March 2010](#)

²¹ Swami, Praveen (20 July 2011). ["ISI paid millions to influence U.S. on Kashmir". *The Hindu* \(Chennai, India\). Retrieved 20 July, 2011](#)

²² The Milli Gazette, OPI, Pharos Media. ["Full Text of the MORI Survey on Kashmir". Milligazette.com. Retrieved 2 February 2010.](#)

²³ http://www.chathamhouse.org/sites/default/files/public/Research/Asia/0510pp_kashmir.pdf. Retrieved 6 January 2013.

²⁴ Kamal Cheno, "Contending Nationalisms," 24,

<<http://proquest.umi.com/pqdweb?did=1191682541&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

²⁵ Shakti Bhatt, "State Terrorism vs. Jihad in Kashmir," 216-217.

<<http://proquest.umi.com/pqdweb?did=356112101&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

beliefs²⁶. Kashmir has thus "become hostage to these bitterly contending nationalities"²⁷. Thus, Pakistan's fight over Kashmir has legitimized military dictatorship and draconian anti-terror laws in the country hardening the stance against India²⁸. Simultaneously, India has introduced sweeping anti-terror laws, making Kashmiris feel more alienated²⁹. Youth, in particular, turn to Islamic militancy as a venue for addressing their grievances and as recourse for their political dissatisfaction³⁰.

Meanwhile, militant attacks and low intensity conflict has led the Indian government to deploy over 600,000 soldiers in the state. The population of Kashmir is 13 million, making this the highest troop to population concentration in the world (in 2003)³¹. Violations by the army further perpetuate entrenched distrust of Indian government³² and fuel resentment. Security forces occupy 90,000 acres of farm and orchard land and 1500 buildings and the quest for land continues to grow. Over 20 years, 70,000 people have died, 60,000 are in detention, 20,000 have been tortured, 8,000 have simply disappeared and 60,000 people have been denied a passport. In addition to increased resentment, the separatist sentiment was consolidated by transfer of land to the Amarnath board, occupation of civilian land by security forces and economic blockade by the Jammu agitation³³.

Tackling human rights abuses is another important goal. With the excessive crimes against humanity that have taken place during this conflict, there is a need for a venue to adequately handle grievances and provide justice for those who have suffered. As long as people feel they have been wronged and see no legal way to deal with the consequences they are likely to turn to more desperate measures in order to handle their grief. By accepting human rights law and humanitarian law, and shaping national laws accordingly, there would be more room for legal resolutions to problems, preventing them from fuelling the conflict³⁴. These intermediate goals will by no means resolve the conflict or ensure that it ends. Instead, they would serve to steer the conflict on a course that is less violent and destructive and that could potentially lead to constructive change.

Ultimately, the Kashmir conflict embodies a complex amalgamation of religious, nationalist and political factors which are deeply rooted in history. This history dates back to the time when India, Pakistan and Bangladesh were one, a time when the British colonizers adopted their policy of 'divide and rule' to create artificial boundaries between people, instigating the religious violence that continues to plague many parts of India today. The result has been a conflict that has created immense volatility in the entire South Asian region and - because both India and Pakistan possess nuclear weapons - in extension also poses a grave threat to security and peace in the world at large.

Human Rights Abuses By Security Forces

²⁶ Ibid.

²⁷ Kamal Chenoy, "Contending Nationalisms," 24, <<http://proquest.umi.com/pqdweb?did=1191682541&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

²⁸ Kamal Chenoy, "Contending Nationalisms," 25, <<http://proquest.umi.com/pqdweb?did=1191682541&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

²⁹ Ibid.

³⁰ Shakti Bhatt, "State Terrorism vs. Jihad in Kashmir," 221, <<http://proquest.umi.com/pqdweb?did=356112101&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

³¹ Shakti Bhatt, "State Terrorism vs. Jihad in Kashmir," 219, <<http://proquest.umi.com/pqdweb?did=356112101&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

³² Shakti Bhatt, "State Terrorism vs. Jihad in Kashmir," 219, <<http://proquest.umi.com/pqdweb?did=356112101&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

³³ Gautam Navlakha, "Resentment Persists in Kashmir," *Economic and Political Weekly*, Vol. 43, No. 06, February 09 - February 15, 2008, 13-14, <<http://epw.in/uploads/articles/11744.pdf>>.

³⁴ Kamal Chenoy, "Contending Nationalisms," 27, <<http://proquest.umi.com/pqdweb?did=1191682541&Fmt=3&clientId=48347&RQT=309&VName=PQD>>.

Claims of human rights abuses have been made against the Indian Armed Forces and the armed insurgents operating in Jammu and Kashmir. Since 1989, over 50,000 and by some reports nearly 100,000 Kashmiris are claimed to have died during the conflict³⁵. Some human rights organisations have alleged that Indian Security forces have killed hundreds of Kashmiris by indiscriminate use of force and torture, firing on demonstrations, custodial killings, encounters and detentions³⁶. The Government of India denied that torture was widespread³⁷. It stated that some custodial crimes may have taken place but stated "these are few and far between"³⁸. According to one human rights report in Kashmir there were more than three hundred cases of "disappearances" since 1990³⁹. State Human Rights Commission (SHRC) has found 2,730 bodies buried into unmarked graves scattered all over Kashmir believed to contain the remains of victims of unlawful killings⁴⁰ and enforced disappearances⁴¹ by Indian security forces⁴². SHRC stated that about 574 of these bodies have already been identified as those of disappeared locals⁴³. SHRC also accused Indian army of forced labour⁴⁴.

The official stance of the Indian Army was that, according to its own investigation, 97% of the reports about the human rights abuse have been found to be "fake or motivated"⁴⁵. However, there have been at least one case where civilians were killed in 'fake encounters' by Indian army personnel for cash rewards⁴⁶.

The violence was condemned and labelled as ethnic cleansing in a 2006 resolution passed by the United States Congress⁴⁷. It stated that the Islamic terrorists infiltrated the region in 1989 and began an ethnic cleansing campaign to convert Kashmir to a Muslim state. According to the same, since then nearly 400,000 Pandits were either murdered or forced to leave their ancestral homes⁴⁸. According to an op-ed published in BBC journal, the emphasis of the movement after 1989, "soon shifted from nationalism to Islam." It also claimed that the minority community of Kashmiri Pandits, who had lived in Kashmir for centuries, were forced to leave their homeland. This act of ethnic cleansing was initially taken by the Jammu & Kashmir Liberation Front and the Hizbul Mujahideen, who were trained, armed and motivated by the ISI. The separatists in Kashmir deny these allegations. But the majority of the Pandits, who have been living in pitiable conditions in Jammu, believe that, until insurgency ceases to exist, return is not possible. Reports by Indian government state 219 Kashmiri Pandits were killed and around 140,000 migrated due to militancy. The local organisation of pandits in Kashmir, *Kashmir Pandit Sangharsh Samiti* claimed that 399 Kashmiri Pandit were killed by insurgents⁴⁹. The CIA has reported that at least 506,000 people from Jammu and Kashmir are internally displaced, about half of which are Hindu Pandits⁵⁰.

Several international agencies and the UN have reported human rights violations in Jammu and Kashmir. In a recent press release the Office of the High Commissioner for Human Rights said it was concerned about the recent violent protests in Jammu and Kashmir⁵¹. A 1996 Human Rights Watch report accuses the Indian military and Indian-government backed paramilitaries of "committ[ing] serious and widespread human rights violations in Kashmir." There have been claims of disappearances by the police or the army in Kashmir by several human rights organisations⁵². Human rights organisations have asked Indian government to repeal the Public Safety Act⁵³, 1978, since "a detainee may be held in administrative detention for a maximum of two years without a court order." The Armed Forces Special Powers Act (AFSPA⁵⁴) grants the military wide powers of arrest, the right to shoot to kill and to occupy or destroy property in counter insurgency operations. Indian officials claim that troops need such powers because the army is only deployed when national security is at serious risk from armed combatants.

³⁵ Brad Adams, Asia director at Human Rights Watch (13 September 2006). "[India: Impunity Fuels Conflict in Jammu and Kashmir](#)". Human Rights Watch.

³⁶ "[Document – India: Torture continues in Jammu and Kashmir](#)". Amnesty International; "[CONTINUING REPRESSION IN KASHMIR – Abuses Rise as International Pressure on India Eases](#)" (Press release). August 1994; United Nations High Commissioner for Refugees (1 January 1996). "[Refworld | Amnesty International Report 1996 – India](#)". UNHCR; "[The Kashmir tinderbox](#)". Human Rights Watch. 20 August 2008.

³⁷ "[Document – India: Torture continues in Jammu and Kashmir](#)". Amnesty International.

³⁸ "[Document – India: Torture continues in Jammu and Kashmir](#)". Amnesty International.

³⁹ "[Behind the Kashmir Conflict – Abuses in the Kashmir Valley \(Human Rights Watch Report, July 1999\)](#)". Human Rights Watch; Brad Adams, Asia director at Human Rights Watch. (9 February 2009). "[India: Hold Abusers in Kashmir Accountable](#)". Human Rights Watch.

⁴⁰ "[Thousands lost in Kashmir mass graves](#)". Amnesty International. 18 April 2008.

⁴¹ Cathy Scott-Clark (9 July 2012). "[The mass graves of Kashmir | World news](#)". *The Guardian* (London).

⁴² "[India must investigate unidentified graves – Amnesty International Australia](#)". Amnesty.org.au. 8 April 2008.

⁴³ Asia and the Pacific. "[Amnesty International | Working to Protect Human Rights](#)". Amnesty International.

⁴⁴ GreaterKashmir.com (Greater Service) (16 October 2012). "[ARMY CHALLENGES SHRC JURISDICTION Last update: Tue, 16 Oct 2012 18:30:00 GMT](#)". Greaterkashmir.com.

⁴⁵ "[Why Kashmiris want the hated AFSPA to go](#)". *Daily News & Analysis*.

⁴⁶ "[Fake encounter at LoC: 3 arrested, probe ordered](#)". 29 May 2010.

⁴⁷ "[Expressing the sense of Congress that the Government of the Republic of India and the State Government of Jammu and Kashmir should take immediate steps to remedy the situation of the Kashmiri Pandits and should act to ensure the physical, political, and economic security of this embattled community. HR Resolution 344, United States House of Representatives, 15 February 2006](#)

⁴⁸ "[PALLONE INTRODUCES resolution CONDEMNING HUMAN RIGHTS VIOLATIONS AGAINST KASHMIRI PANDITS](#)". U.S. House of Representatives.

⁴⁹ Azad Essa. "[Kashmiri Pandits: Why we never fled Kashmir – Kashmir: The forgotten conflict](#)". Al Jazeera; GreaterKashmir.com (Greater Service) (20 June 2011). "[399 Pandits killed since 1990 KPSS Lastupdate:- Mon, 20 Jun 2011 18:30:00 GMT](#)". Greaterkashmir.com.

⁵⁰ "[CIA – The World Factbook](#)". Cia.gov; [Ka Leo The Voice – Kashmir: The Predicament](#).

⁵¹ "[OHCHR calls for restraint in Indian-administered Kashmir](#)". 27 August 2008.

⁵² "[India](#)". State.gov. 6 March 2007; "[World | Kashmir's extra-judicial killings](#)". BBC News. 8 March 2007.

⁵³ "[Behind the Kashmir Conflict: Undermining the Judiciary \(Human Rights Watch Report: July 1999\)](#)". Human Rights Watch; "[India: Repeal the Armed Forces Special Powers Act](#)". Human Rights Watch. 20 November 2007.

⁵⁴ "[Amnesty International criticises 'tough' Kashmir law](#)". BBC News. 21 March 2011.

Many human rights organisations such as Amnesty International and the Human Rights Watch (HRW) have condemned human rights abuses in Kashmir such as "extra-judicial executions", "disappearances", and torture⁵⁵. A 2008 report by the United Nations High Commissioner for Refugees determined that Jammu and Kashmir was only 'partly free'⁵⁶. A recent report by Amnesty International stated that up to 20,000 people have been detained under in Jammu and Kashmir⁵⁷.

Human Rights Abuses By Militants

During eruption of armed rebellion, the militants claimed to have specifically targeted Kashmiri Pandits minority and violated their human rights⁵⁸. Reports by Indian government state 219 Kashmiri Pandits were killed and around 1,40,000 migrated due to militancy while over 3000 stayed in the valley⁵⁹. Reports from Amnesty International, Human Rights Watch and the International Commission of Jurists confirmed Indian reports of systematic human rights violations by Pakistan-backed militants⁶⁰.

According to a resolution passed by the United States Congress in 2006, Islamic terrorists infiltrated the region in 1989 and since then nearly 400,000 Pandits were either murdered or forced to leave their ancestral homes⁶¹. These groups, which received weapons and other support from Pakistan, targeted Hindus in the Kashmir valley, forcing an estimated 100,000 to flee and an estimated 350,000 are displaced since 1990⁶². The Hizb-ul-Mujahideen, which was founded in 1980's as a militant wing of Jamaat-e-Islami in conjunction with Lashkar-e-Tayyiba, carried out a massacre of 23 people including women and children in Wandhama and two years later massacred 35 Sikh men in Chattisinghpora⁶³. Pakistan-backed paramilitary groups have also been accused of using children as young as 10 to act as messengers and spies. They have also used children to throw grenades at security forces and to plant explosive devices⁶⁴. Militant groups have also kidnapped journalists, tortured and killed them and have intimidated newspapers into not publishing stories on human rights abuses⁶⁵.

PURPOSE AND SCOPE OF STUDY

In addition to issues of interests, identities, rights and resources, fear is central to this conflict. The plight of children in war is particularly heart-rending: because they are entirely innocent, extremely vulnerable and disproportionately affected by conflict, and because no-one can restore to them the childhoods stolen by war. Children have lost their homes, have been traumatized, have had their education violently disrupted. It is only one aspect of the suffering caused by conflict, but its long-term impact on children is impossible to understate. It causes severe physical injury to growing bodies; psychological trauma that lasts a lifetime. Because of taboo and social stigma, people and communities have not talked about it enough nor have we shouldered our responsibilities as we should.

This study seeks to address some of these issues by underscoring the brutal consequences of civil unrest and conflict on children, families and whole communities through comprehensive and collection of information of the many ways in which children are affected by armed conflict. The overall objective is to assess the overall impact of conflict on children in the three districts of Poonch Srinagar and Rajouri in Jammu and Kashmir so as to guide Save the Children in framing future strategies and programme interventions for these three districts.

The specific objectives of the study are:

- To assess the field situation and impact of conflict on children in study districts of J&K

⁵⁵ "[Behind the Kashmir Conflict – Abuses in the Kashmir Valley](#)". Human Rights Watch. 20 April 1998.

⁵⁶ "[Thousands lost in Kashmir mass graves](#)". Amnesty International. 18 April 2008.

⁵⁷ "[Behind the Kashmir Conflict: Undermining the Judiciary \(Human Rights Watch Report: July 1999\)](#)". Human Rights Watch; "[Behind the Kashmir Conflict – Abuses in the Kashmir Valley](#)". Human Rights Watch. 20 April 1998; <http://www.amnesty.org/en/library/asset/ASA20/024/1997/en/15411f3b-aa77-11dd-b05d-65164b228191/asa200241997en.pdf>; "[Amnesty International criticizes 'tough' Kashmir law](#)". BBC News. 21 March 2011.

⁵⁸ "[Paradise lost](#)". BBC News.

⁵⁹ "[Front Page : '219 Kashmiri Pandits killed by militants since 1989'](#)". Chennai, India: The Hindu. 2010-03-24; "[219 Pandits Killed in J&K Since 1989](#)". news.outlookindia.com.

⁶⁰ Forsythe, David P. (2009). *Encyclopedia of human rights, Volume 1*. Oxford University Press. p. 306. ISBN 978-0195334029.

⁶¹ "[Pallone introduces resolution condemning human rights violations against kashmiri pandits](#)". U.S. House of Representatives.

⁶² Catherwood, Christopher; Leslie Alan Horvitz. *Encyclopedia of War Crimes and Genocide* (1st ed.). Infobase. p. 260. ISBN 978-8130903637.

⁶³ Kushner, Harvey W. (2003). *Encyclopedia of Terrorism*. Sage. pp. 171–172. ISBN 0-7619-2408-6.

⁶⁴ Hartjen, Clayton; S. Priyadarsini (2011). *The Global Victimization of Children: Problems and Solutions* (2012 ed.). Springer. p. 106. ISBN 978-1461421788.

⁶⁵ Karatnycky, Adrian (2001). *Freedom in the World: The Annual Survey of Political Rights and Civil Liberties*. Transaction. p. 616. ISBN 978-0765801012.

- To review existing strategies and mechanisms (Government and non-government) for providing support to children affected by conflict / landmines
- To assess effectiveness and sustainability of existing mechanisms for providing support to children affected due to conflict
- To come up with strategies to address children's issues in conflict / border areas

METHODOLOGY

To assess the impact of conflict on children, a standard customized methodology was implemented consisting of both Random Sampling and Snowball Sampling. The logic behind using both sampling methods was to assess both categories of children affected by conflict viz: children directly affected by conflict like injured, disabled etc. as also those who had lost their parent/s (who were more suitable for Snowball sampling). Random Sampling was adopted for the children who were indirectly affected by conflict on a daily basis, such as those who had stopped going to school, financial instability, those suffering from mental stress and anxiety, etc.

The methodology was developed as per scope of assessment shared by Save the Children in its Terms of Reference.

Sampling

The sample size for each district was determined at 500 children, three government functionaries, three non-government representatives, five teachers, three lawyers and two psychiatrists. Also, village heads, *Mohalla* heads, religious leaders, health workers, etc. were also randomly selected for assessment.

Study Framework

The study comprised primary data collection as well as reviewing secondary literature:

1. **Desk Review:** A detailed desk review of the overall conflict situation in Jammu and Kashmir, issues of children living in conflict and border areas, UN Child rights framework, various existing laws in India, protecting the rights of children etc. was undertaken. Desk review also included, published research, case studies where life histories were elicited of children in conflict, evaluation and baseline reports, and other documents required to fulfil the study.
2. **Field Visits:** The consultant (s) undertook field visits as per sample plan in three districts of J&K to record impact of conflict on children and existing mechanisms to address the issue(s).
3. **Interview key stakeholders:** The consultant also interviewed key stake holders that included:
 - Children and adult members of the community in sample villages
 - Children affected by conflict (injured children, children living in border areas and those affected by land mines, etc.)

- Opinion leaders in sample villages (religious leaders, Village education Committees (VEC), and local government functionaries like policemen, teachers, *Anganwadi*⁶⁶ Workers (AWW), medical professionals, etc.)
- Staff of NGOs working in these three districts
- Adolescent girls and women in sample villages
- In-depth interviews of officials of Government departments like Social Welfare, Education, etc.
- Members of District Child Protection Advisory from block to district level
- Members of Child Protection Committees and *panchayat*⁶⁷ at district /state level
- Project staff of Save the Children

Assessment Methodology

The methodology for the assessment is described below:

- Project planning
- Survey /assessment development
- Survey / assessment deployment
 - a. Field visits
 - b. Interviews
 - c. Focus groups
- Data analysis
- Desk review of support (govt and non-govt) to children like policies, research papers, etc.
- Final report

1. Desk Review

As part of the assessment, a definite time period was allocated to review the conflict situation in Jammu and Kashmir, understanding issues of children living in conflict / border areas, UN Child Rights framework, existing laws protecting rights of children, etc. Desk review also included perusing published research, case studies of children in conflict, evaluation and baseline reports and any other document that adds value to the overall assessment framework.

2. Project Planning

⁶⁶ The word **Anganwadi** means "courtyard shelter" in Hindi. They were started by the Indian government in 1975 as part of the Integrated Child Development Services program to combat child hunger and malnutrition. It is a part of the Indian public health-care system. Basic health-care activities include contraceptive counselling and supply, nutrition education and supplementation, as well as pre-school activities. These centres provide supplementary nutrition, non-formal pre-school education, nutrition and health education, immunization, health check-up and referral services of which later three services are provided in convergence with public health systems.

⁶⁷ **Gram Panchayats** are local self-governments at the village or small town level in India.

Project planning enabled identification of resources required to efficiently complete the assessment in the stipulated time period and had clear deadlines for all team members involved. It also lay down roles and responsibility of each person involved in the project along with expected deliverables.

3. Survey Toolkit

Survey toolkit focused on designing and developing tools for the assessment, including survey forms, questionnaires, FGD frame work, etc. The tools were developed in a manner which helped gather detailed information on children living in land mine and border areas- like Poonch and Rajouri – as also in urban areas like Srinagar city.

The survey forms had clear sections on losses due to conflict, incentives, current support provided and capacity gaps in existing interventions by different government and non-government organizations, educational status, challenges, livelihood opportunities and psycho-social set up of children living in these districts.

4. Deployment for Survey

Deployment of trained and oriented project staff to conduct the survey was ensured along with equipping all participants with appropriate survey tools for data collection through primary and secondary means. The survey team not only collected and compiled data on issues of the assessment, but also interviewed multiple stakeholders including government and NGO functionaries, village or *mohalla* committee members, village elders, religious leaders, school teachers, etc. for an in-depth analysis of challenges and framing future interventions.

The survey team also conducted Focus Groups Discussions (FGD) with children, including injured children and those living in land mine / border areas to analyse their current status and frame a mitigation plan based on children's suggestions.

5. Data Analysis / Review

Primary and secondary data was compiled into Excel sheets for analysis. To ensure deadlines are honoured, data analysis was conducted on a daily basis. The data analysis led to breaking up relevant data into identified categories as per the survey form. Each section had a corresponding graph for presentation purposes and for translation of data into an action plan in the form of intervention(s).

6. Final Report

The final report containing qualitative and quantitative analysis was submitted to Save the Children along with sections on findings, conclusions, recommendations, lessons learnt, etc.

2. DATA ANALYSIS & INTERPRETATION

DISTRICT RAJOURI

1. DATA FROM INTERVIEW OF INJURED CHILDREN

A. Total Number of Injured Children Interviewed: 31

B. Type of Family

Nuclear	Joint	Other
28	3	0

C. Ration Card

APL	BPL	AAY
7	23	1

All respondents had ration cards; 74 per cent had Below Poverty Line⁶⁸ (BPL) cards, 22 per cent had Above Poverty Line⁶⁹ (APL) cards, while three per cent had Antyodaya⁷⁰ (AAY) cards, respectively. A majority of respondents were living Below the Poverty Line.

D. Nature of Injury

45 per cent respondents were injured due to cross border shelling, 29 per cent had received bullet injuries while 25 per cent were injured by stepping on landmines, respectively. Further, 56 per cent of injured children were seriously injured, 35 per cent of injured children had dropped out of school and 9 per cent had become permanently disabled, respectively. Moreover, 51 per cent of children were hospitalized in District Hospital, Rajouri; 29 per cent were hospitalized in Sub District Hospital, Nowshera; six per cent were hospitalized in Sub District Hospital, Sundarbani and Sub District Hospital, Bakri, and 12 per cent in Government Medical College, Jammu. 41 per cent of injured children were referred for advanced treatment to Government Medical College, Jammu, and PGIMER, Chandigarh, while 58 per cent did not need further treatment.

E. Hospitalization Related

Three per cent of injured children were hospitalized for less than a week, 30 per cent for 7-15 days, 35 per cent for 15-30 days and 32 per cent for more than 30 days, accounting for the total number of respondents as 1, 9, 11 and 10, respectively. Moreover, 64 per cent of children had to undergo surgery/surgeries and 11 per cent did not undergo any surgery. Further analyzing the data, it was

⁶⁸ **Below Poverty Line** is an economic benchmark and poverty threshold used by Government of India to indicate economic disadvantage and to identify individuals and households in need of government assistance and aid. It is determined using various parameters which vary from state to state and within states.

⁶⁹ As S Subramanian writes in The Poverty Line "A poverty line is identified in monetary units as the level of income or consumption expenditure required in order to avoid poverty." The consumption expenditure in order to avoid poverty is set at Rs 816 per person per month in the rural areas and Rs 1,000 per person per month in the urban areas. For a family of five people, this amounts to Rs 4,080 per month in rural areas and Rs 5000 per month in urban areas. These numbers were set by the report of the expert group to review methodology for estimation of poverty. The report was released in November 2009 (Also known as Tendulkar Committee report).

⁷⁰ Antyodaya ration cards are issued to such families who have the income of less than Rs. 250 per capita per month. Under the expanded Antyodaya Anna Yojna, exclusive AAY cards are also issued to Senior Citizens who have no regular means of subsistence or support, widows and families headed by widows, terminally ill and physically handicapped even if they are not in possession of any APL or BPL card.

found that 40 per cent of children underwent one surgery, 30 per cent had undergone two surgeries, 15 per cent had undergone three surgeries and 15 per cent had undergone more than three surgeries.

The data also revealed that all respondents were treated very well by the doctors. Moreover, 10 per cent of children had faced problems in getting admitted to hospitals, like non-availability of transport, low financial resources, etc. while 90 per cent children said they did not face any problems during admission to hospitals. Furthermore, 12 per cent of children said their families had spent INR 10,000-25,000 on medical treatment, 22 per cent had spent INR 25,000-50,000, 29 per cent had spent INR 50,000-75,000 while 35 per cent said their families had spent more than INR 75,000 on treatment so far, accounting for the total number of respondents as 4, 7, 9 and 11 respectively. Moreover, 31 per cent children said their parents had taken loans for meeting the cost of treatment, 43 per cent said their parents had sold assets like gold ornaments, land and livestock to meet cost of treatment, 17 per cent said their parents had taken loan **and** sold assets, while 9 per cent said their parents had not taken any loan or sold any asset for meeting the cost of their treatment.

Analysis showed that 60 per cent of children / families had received support from their neighbours, relatives and friends, 12 per cent had received support from the Indian Army, 11 per cent had received support from local *Panchayat* Committees, NGO's and Government departments, while 17 per cent had not received any support at all.

F. Estimated Amount (in INR) Required for Treatment of Injured Children

The table above shows estimated amount required for treatment of injured children: 75 per cent children were still undergoing treatment while 25 per cent were not undergoing any treatment currently. 48 per cent injured children were of the view it would take more than eight months to recover fully, 22 per cent felt they needed 4-8 months for recovery while three per cent said they may take 1-4 months to recover. During the course of study it was found that six per cent of children/families felt they will need INR 10,000-50,000 to cover the cost of treatment, 10 per cent felt they will need INR 50,000-1,00,000 for treatment while 58 per cent felt they will need more than INR 1,00,000 to cover cost of treatment. Moreover, study also found that six per cent parents of injured children had lost 8-15 days of employment, 20 per cent had lost 16-30 days while 36 per cent had lost more than 30 days of employment, which was an indirect cost to these families.

G. Top Three Challenges Faced By Injured Children

All 31 (100 per cent) respondents reported financial problems. 25 respondents (80 per cent) were not able to access health care services, 25 respondents (74 per cent) faced problems in accessing education services, 20 respondents (64 per cent) said they were suffering from psycho-social problems.

Further analysis of data showed that 64 per cent respondents relied on assistance from the community, 16 per cent relied on their family as a coping mechanism, 9 per cent had received assistance from the Army, while 9 per cent did not have any mechanism to help them cope with vicissitudes of life.

H. Changes Witnessed After Injury

A vast majority of injured children (83 per cent) reported change in themselves after injury. Of the total respondents, 68 per cent said they faced psychological problems, 65 per cent faced physiological problems and 16 per cent felt they had been (unjustly) stigmatized by society. Analysis showed that 20 per cent children felt that their injury has changed the attitude of their friends/community members (friends rarely talk to them, stay away from them), while 80 per cent felt there was no change in the attitude of their friends/community members towards them (friends and community members were very supportive and cooperative).

I. School Days Lost Due To Injury

16 per cent of injured children had lost 1-3 months of schooling due to injuries while 84 per cent had lost more than three months of schooling due to their injuries. Data also revealed that 74 per cent of injured children felt they had not dropped out of school due to injury while 25 per cent felt they had. Similarly, almost 75 per cent injured children felt that because of weak economic circumstances of their family, they were not able to continue their studies, 50 per cent felt they dropped out due to physiological problems, 37 per cent felt they had dropped out due to mental depression and anxiety while 25 per cent respondents felt they had stopped going to school out due to social stigma.

Analysis also showed that injury had affected the learning ability of children: 41 per cent of injured children felt injury had affected their ability to learn new things in school, 29 per cent felt their learning ability had not been affected due to the injury and 29 per cent had already left their studies. Moreover, all injured children (100 per cent) felt police had not lodged any complaint against them since they were injured due to cross border shelling or stepping on landmines, etc. and not because they were involved in any protests against the State. 87 per cent children said they did not face harassment from friends, relatives or by the Army.

J. Assistance Received

26 per cent children were of the view they/their families had received cash assistance from National Development Foundation (NDF), Government organizations and from the Indian Army, while 74 per cent felt they/their families had not received any assistance. Moreover, it was seen that 30 per cent of respondents had applied for relief and rehabilitation package of the State Government while 70 per cent had not applied for relief from Government. Further, 89 per cent of respondents had applied for relief under recommendation of State Human Rights Commission while 11 per cent had applied had applied for relief through various schemes of Social Welfare Department. Moreover, 38 per cent of respondents had not applied for relief because of lack of medical records and 35 per cent were not aware of any scheme(s).

2. INTERVIEWS OF INJURED ADULTS

The total number of interviewed injured adults in Rajouri district was 93 and the average age of adults interviewed was 42 years.

Of the total respondents, 72 were male and 21 were females. Thus, the conflict in the district had impacted a large chunk of male population (77 per cent were male and 23 per cent female population, respectively).

A. Type of Family

Nuclear	Joint	Other
75	18	0

A majority of respondents (81 per cent) were living in nuclear families and 19 per cent in joint families. Data on injured adults showed that 92.5 per cent were living in *Kuchha* (mud and wattle) homes while 7.5 per cent lived in *Pucca* (concrete) homes.

B. Type of Ration Card

APL	BPL	AAY
22	68	3

Data analysis showed that all respondents had ration cards; 73 per cent possessed BPL, 24 per cent APL and 3 per cent had AAY ration cards, respectively.

C. Nature of Injury

59 per cent of respondents said they were injured due to shelling, 31 per cent due to land mines, 7 per cent by cross border firing and 3 per cent by IEDs. 63 per cent respondents reported receiving serious injuries, 24 per cent said they were permanently disabled due to injuries and 13 per cent had to stop going to work temporarily due to injuries.

All respondents said they were treated very well by doctors and hospital staff. 8 per cent respondents said they had faced problems like unavailability of transport, doctors, etc. while being admitted to hospitals and 92 per cent said they had not faced any problems in getting admitted in hospitals.

D. Occupation

Most respondents (65 per cent) were farmers, three per cent were in business, 15 per cent were housewives and one per cent were labourers. 49 per cent of injured adult respondents reported an income between INR 1000- 3000, followed by 25 per cent respondents who earned between INR 3000-6000, 14 per cent who earned between INR 6000-9000 and eight per cent who earned up to INR 10000; one per cent respondents reported an income more than INR 9000 and three per cent said they had no source of income currently.

E. Hospitalization Related

11 per cent of injured respondents were hospitalized for less than a week, 14 per cent for 7-15 days, 33 per cent for 15-30 days and 42 per cent for more than one month.

All respondents said they were treated very well by doctors at the time of emergency and the entire hospital staff was very cooperative. Moreover, no respondent faced any problem while being admitted to hospital.

F. Livelihood Lost Due To Injury

54 per cent respondents had lost 2-3 months' livelihood due to injury, 27 per cent had lost one months' livelihood, 13 per cent had lost 4-6 months' livelihood and 6 per cent had lost between seven months to a years' wage due to injury. This data clearly reflects the impact of conflict on day-to-day life of people.

Further, 17 per cent respondents said relatives/friends or family members who stayed with them in a hospital had lost less than a week of wages, 13 per cent said relatives/friends or family members who stayed with them in hospital lost 7-15 days of wages, 35 per cent said relatives/friends or family members who stayed with them in hospital lost between 15-30 days of wages while 34 per cent said relatives/friends or family members who had stayed with them in hospital lost more than 30 days of wages. This data validates the fact that conflict has not only led to human and material loss but also resulted in decline of family incomes.

Data reveals that injuries impacted the incomes of almost all respondents: 57 per cent said they were still in debt and 37 per cent had been forced to sell assets to cope with expenditure. 6 per cent respondents said the education of their children had been affected and children were not able to concentrate on studies. 47 per cent respondents' children had not attended school for more than three months because of parents' injury, 23 per cent had not attended school for one month and 30 per cent were still unmarried.

It was found that 67 per cent respondents were of the view they were unable to provide nutritious food to their children and 33 per cent felt conflict had not affected day-to-day food consumption pattern of their children. However, 95 per cent respondents felt their injury will impact on the future of their children because they will **not** be able to support the family, as a result of which their children may have to dropout from school.

G. Assistance Received

37 per cent of respondents were of the view they had received cash assistance from NGO/Government while 63 per cent had not received any assistance. Moreover, 39 per cent respondents had applied for relief and rehabilitation package of the State Government and 61 per cent had not applied for relief from Government. Further, 81 per cent respondents had applied for relief under recommendation of the State Human Rights Commission and 19 had applied for relief through various schemes of the Social Welfare Department of the State Government. 48 per cent respondents had not applied for relief because of lack of proper medical records while 35 per cent were not aware of such schemes.

3. INTERVIEWS WITH GENERAL CONFLICT AFFECTED FAMILIES

The total number of general information interviews conducted in Rajouri district was 127; the average age of respondents was 58 years.

Of the total number of respondents, 81 were males and 46 females (64 per cent and 36 per cent of total respondents, respectively.)

A. Type of Family

Nuclear	Joint	Other
102	25	0

A majority of respondents (80 per cent) lived in nuclear families while 20 per cent of respondents lived in joint families. 88 per cent respondents reported living in Kuchha houses and 12 per cent in Pucca houses.

B. Ration Card Held

APL	BPL	AAY
18	102	7

99 per cent respondents had one of the three ration cards: 80 per cent possessed BPL, 14 per cent APL and 6 per cent AAY ration cards, respectively.

C. Impact of Conflict on Day To Day Life

Ajay (name changed), 35, from Choti Makri, district Rajouri, sits in a dark room with his 18-month-old baby girl, Palak. Ajay still curses the day when a shell from across the border hit his kuchha house, injuring him and killing his wife and six-day-old baby. "I had just entered the room at noon for lunch. My wife was feeding our six-day-old baby when a shell fell on the roof of our house, instantly killing both my wife and the baby. I also received splinter injuries on my right arm", says Ajay, adding "I felt so helpless because I was lying in a pool of blood and could not help my wife and baby, who were under the debris of the house". My wife and my baby were killed on the spot and I was rushed to hospital by family members", he says with tears in his eyes. Ajay says "My right arm was amputated in SDH Naushera because it was badly injured by splinters".

Ajay now takes his cattle for grazing only because he cannot work in the fields. He has remarried and lives with his wife Bulbul Devi, three-year old son, Danish Kashyap, and 18-month old daughter, Palak. "I am not able to do normal work and cannot cope up with my household expenditure. I deserve to be helped but nobody is listening; even my family members do not take care of me. I want to live a normal life like every human being," says Ajay, wiping tears away with his left hand.

All respondents were of the view that the state of Jammu and Kashmir was a conflict-affected state and conflict had affected their everyday life, especially due to continuous ceasefire violations along the border. Most respondents living along LoC between India and Pakistan said they suffered due to unprovoked shelling and firing across the border.

D. Impact of Conflict On Children's Education

District Rajouri, FGD Analysis

In all the five (5) Focused Group Discussions held in different areas of Rajouri district, it was found that people were living a life of fear and misery. Villages where FGD's were conducted were all located near the ALC (Actual Line of Control) between India & Pakistan. Most suffering was caused due to unprovoked ceasefire violations along the border. People were getting killed/injured, properties were being damaged, education of children was affected, fields lay barren or un-harvested and women were constantly worried about the safety of the men folk of their house. In all areas visited, it was found that Government intervention was minimum and people lacked basic facilities like electricity, healthcare, drinking water facilities and less ration supply at CAPD Stores. It was also seen that people wanted pro-active support of their Government to put an end to their grievances and be able to access atleast life's basic facilities.

Border fencing emerged as a major problem faced by villagers. People had to cross more than four Army gates in order to reach to their houses and had to deposit their Identity Cards at these gates. While interacting with elders, it was found that the Army had sown land mines without any markings or signs, which was a very real threat to the life and limb of people in these villages. In fact, many had even migrated from their native villages out of fear of mines, leaving their properties behind. People said they had to go to their fields after 07:30 am in the morning and report back to the Army gates by 05:00 pm in the evening, due to which their work was suffering significantly. In many areas located very close to the ALC, people complained of regular harassment by the Army. People were of the view that Army searched their homes twice a week, and there was the very real threat of being labeled a "terrorist" at any time. Children complained they had to switch off lights by 9:30 in the evening, thus affecting their education studies; as a result, many drop out of schools. Even girls were dropping out of schools in large numbers due to the threat of the Army and poor access to schools. The research team was able to identify 313 cases of school dropouts who had left school only due to conflict.

Majority of respondents listed their problems as: (i) schools remained closed due to shelling (ii) children were dropping out of schools (iii) parents were not able to afford educating children (iv) syllabus was rarely covered (v) lack of Government supervision (vi) attention deficit (vii) not interested in going to school, and (viii) inadequate infrastructure and low quality of education.

District Srinagar

1. INTERVIEW OF INJURED CHILDREN

A. Total Number of Injured Children Interviewed: 49

The average age of respondents was 17 years.

B. Type of Family

Nuclear	Joint	Other
41	8	0

C. Ration Card

APL	BPL	AAY
28	16	3

96 per cent respondents had ration cards; 34 per cent had Below Poverty Line (BPL) cards, 60 per cent had Above Poverty Line (APL) cards, while 6 per cent had Antyodaya (AAY) cards, respectively.

D. Nature of Injury

A majority of children - 43 per cent - were injured due to tear gas shelling, 25 per cent received bullet injuries while 16 per cent were injured by pellets and another 16 per cent by stone pelting, respectively. Further, 92 per cent of injured children were seriously injured and six per cent injured children had dropped out of school and 2 per cent had received mild injuries and did not need to be hospitalised.

86 per cent respondents were hospitalized immediately after injury, of which 47 per cent were hospitalized in SMHS, 29 per cent in SKIMS Soura, 12 per cent in Bone and Joint Hospital, 6 per cent in JVC Bemina, Gousia hospital and JLNH hospitals, respectively, while 14 per cent did not need further treatment. Of the 55 per cent respondents referred to different hospitals for advanced treatment, 45 per cent were referred to SKIMS Soura, 18 per cent to SMHS, 22 per cent to Bone & Joint Hospital Barzulla and JVC Bemina, and 15 per cent to AIIMS Delhi, PGIMER Chandigarh and Modern Hospital. The remaining 45 per cent were not referred to any other hospital for advanced treatment.

E. Hospitalization Related

45 per cent of injured children were hospitalized for less than a week, 18 per cent for 7-15 days, 17 per cent for 15-30 days and 20 per cent for more than 30 days, accounting for the total number of respondents as 22, 9, 8 and 10, respectively. 70 per cent of children underwent one surgery, 20 per cent had undergone two surgeries, three per cent had undergone three surgeries and seven per cent had undergone more than three surgeries, respectively.

Sain Gulab Din, is 75-years old and has been bed ridden for the past five months. He cannot identify anyone except his wife. Sain Gulab is in deep shock since Ramadan in July 2013, when there were multiple ceasefire violations along the border between Indian and Pakistan during the holy month. Says Abdel Begum, Sain's wife "Sain was coming back home after offering Asar Namaz when a shell exploded in the lawn of our house and he was injured. He received splinter injuries on his body, and has been shell-shocked since, and soon, he became bed ridden".

Sain Gulab is unable to talk and react to anything. "We live in miserable conditions because he was the bread earner of the family; we now have no one in the family who can earn a living. I, along with my daughter, Idreesa Akhter, work in the fields in order to put some food on the table for everyone. Both my sons are living separately and they never bother to enquire whether we are alive or dead. I cannot afford the treatment of my husband as his condition has worsened from last November," says Abdel Begum. "Whenever he hears a loud voice, he starts crying and says, 'Save me' (**Bachao**) and his whole body starts to shake. Doctors confirm he is in deep mental shock and should get treatment as early as possible, but because we have no money, we cannot afford the expense", she says quietly.

The data also revealed that 98 per cent respondents said they were treated very well by the doctors while two per cent did not feel so because there were no doctor available at the time of emergency. Moreover, 86 per cent of children did not face any problem in getting admitted to hospitals while 14 per cent children faced problems during admission due of restrictions and unavailability of doctors. Furthermore, 12 per cent of children said their families had spent INR 10,000-25,000 on medical treatment, 37 per cent had spent INR 30,000-60,000, four per cent had spent INR 60,000-90,000 while 35 per cent said their families had spent more than INR 90,000 on treatment, while 12 per cent said they had no idea about the amount of money spent on their medical treatment. Moreover, 21 per cent of children said their parents had taken loans for meeting the cost of treatment, 27 per cent said their parents had sold assets like gold ornaments, land and livestock to meet cost of treatment, 23 per

cent said their parents had taken loan **and** sold assets, while 29 per cent said their parents had not taken any loan or sold any asset for meeting the cost of their treatment.

Analysis showed that two per cent respondents had received support from their neighbours, relatives and friends, 19 per cent had received support from reputed NGO's, four per cent from government, six per cent from *Mohalla* (locality) Committees while six per cent did not share any information.

F. Estimated Amount (in INR) Required for Treatment of Injured Children

The table above shows estimated amount required for treatment of injured children: a majority of children i.e. 75 per cent were still undergoing treatment while 12 per cent of injured children did not need further treatment. Eight per cent of injured children were of the view that it would take less than six months to recover fully, 14 per cent felt they needed about one year to recover, 27 per cent felt it would take them more than one year to recover and 51 per cent were not aware of the time needed to recover fully. During the course of study it was found that 16 per cent of children/families felt they will need INR 10,000-50,000 to cover the cost of treatment, 12 per cent felt they will need INR 50,000-1,00,000 for treatment while 29 per cent felt they will need more than INR 1,00,000 to cover cost of treatment; 43 per cent did not know how much money would be required for treatment.

Parents had to remain with their injured children during hospitalization, thus losing their livelihood even if temporarily. Thus, 18 per cent respondents said they had lost less than a week of work, 33 per cent said they lost 16-30 days of work, 27 per cent lost up to three months work and 22 per cent had lost more than three months work due to injury of their children. It is obvious from data that the conflict has severely affected the livelihood of many families as a result of injury sustained by their children.

G. Top Three Challenges Faced By Injured Children

Challenges	Responses
Financial	49
Medical	43
Psycho-social	33

All respondents reported financial problems. 67 per cent respondents faced psycho-social problems, 51 per cent faced problems related to their education and 88 per cent faced medical problems. Further analysis of data showed that 16 per cent respondents relied on assistance from the community, 53 per cent relied on their family as a coping mechanism, 6 per cent received support from NGOs, while 20 per cent did not have any mechanism to help cope with vicissitudes of life.

H. Changes Witnessed After Injury

"On June 26, 2008, I was returning back to my home after purchasing milk from the market. As I neared Kawdara Chowk, there were heavy clashes between local youth and security forces. The forces chased them and directly fired on them and in the chaos, a bullet hit me on my left leg. Some youth tried to rescue me but the security forces chased them away. I was left screaming for help, drenched in blood, while the security forces kicked and abused me and dragged me from Kawdara Chowk to Rajouri Kadal and left me in a pile of garbage. I suffered massive blood loss and almost died on the spot. The security forces tried to put me in their vehicle, but some policemen managed to rescue me. I was rushed to the nearby SMHS Hospital, where I was immediately referred to Bone and Joint Hospital, Barzulla, where emergency surgery on my leg was carried out. I remained in hospital for almost three months. Till date, I have undergone five surgeries, which have cost us more than INR 12,00,000," says Zeeshan, adding "I have not yet fully recovered and cannot walk without the support of a stick. Doctors have advised me yet another surgery. I belong to a marginal family and cannot afford another surgery. We have already sold some valuables and the local Masjid Committee has also supported my treatment."

Zeeshan's sister says "My brother had left school because we could not afford it anymore. He was also supporting our family through odd jobs, but that fateful day changed everything and shattered our dreams. *Assi hez pyow soreey sonn kununn, yus myani khaander khaetri osukh onmut, beyi kor assi Mahalle Committee ti madad. Mahlikyow ladkow ti sombraew poensi jaayi jaayi gatchith* (we had to sell gold that was bought for my marriage and Mohalla Committees also helped us. Many boys of the area also collected money from various places)". She says she always prays for the speedy recovery of her brother so he can be normal once again and help support the family.

A vast majority of injured children (84 per cent) felt their injury had affected their family and friends and 16 per cent felt otherwise. 27 per cent respondents said their injury had affected their family economically, because of which they had to work to supplement family income, 83 per cent felt their family was in debt due to their injury, 2 per cent felt their friends did not like them due to their injuries, while 10 per cent did not have a definite answer. 10 per cent respondents felt their injury had changed the attitude of their friends/community members (friends rarely talk to them, stay away from them) while 90 per cent felt there was no change in the attitude of their friends/community members towards them (friends and community members were supportive and cooperative). 86 per cent, thus, felt they had changed themselves after injury. Of the total respondents, 36 per cent said they faced psychological problems, 43 per cent faced physiological problems and 14 per cent felt they had been (unjustly) stigmatized by society, seven per cent were unable to study properly and had a fear of police/paramilitary forces, accounting for total number of responses as 18, 15, 6 and 3, respectively. **Significantly, none of the injured children had received any legal aid whatsoever.**

I. School Days Lost Due To Injury

Two per cent of injured children had lost a week of school due to injury, 25 per cent had lost 8-30 days of school due to injury, eight per cent had lost 1-3 months of schooling due to injuries while 37 per cent had lost more than three months of schooling due to their injuries while the question was not applicable to 28 per cent respondents.

Data also revealed that 63 per cent of injured children felt they had not dropped out of school due to injury while 37 per cent felt they had. Similarly, almost 61 per cent injured children said that because of weak economic circumstances of their family, they were not able to continue their studies, 53 per cent said they dropped out due to physiological problems, 61 per cent said they had dropped out due to mental depression and anxiety while 39 per cent respondents said they had stopped going to school out due to social stigma.

Analysis also showed that injury had affected the learning ability of children: 57 per cent of injured children felt that injury had affected their ability to learn new things in school, 24 per cent felt their

learning ability had not been affected due to the injury and 19 per cent were not able to remember their lessons and suffered from depression.

J. Any FIR lodged

Yes	No
16	33

33 per cent respondents were of the view that police had lodged complaints against them while 67 per cent felt there was no complaint lodged against them. 75 per cent respondents said police accused them of stone pelting and lodged false complaints against them while 25 per cent said they were accused of taking part in unlawful activities. Moreover, 15 per cent respondents faced harassment after injury and 83 per cent did not; 2 per cent did not share any information.

K. Assistance Received

Yes	No
37	12

L. Applied for Relief & Rehabilitation Packages

<i>Under SRO 43</i>	<i>Recommendations of SHRC</i>	<i>Under ex-gratia</i>	<i>Any Other</i>
0	1	3	5

Two per cent respondents had applied for relief and rehabilitation package under recommendation of the State Human Rights Commission (SHRC), six per cent under ex-gratia, 10 per cent under different schemes of Social Welfare Department while 82 per cent had not applied for any relief and rehabilitation. The data shows that 26 per cent respondents faced problems in applying for relief and rehabilitation because of FIR's lodged against them, four per cent felt they faced threat of arrest in applying for Government assistance, 12 per cent felt they belonged to a particular group because of which they faced problems in getting assistance from Government, 21 per cent felt they faced problems in applying for relief because of unavailability of medical records, while 37 per cent respondents were unaware of relief and rehabilitation packages offered by Government.

76 per cent children felt they/their families had received assistance while 24 per cent had not. Moreover, it was seen that 57 per cent of respondents had applied for relief from NGOs and 43 per cent had received assistance from State Government/local *Mohalla* Committees. 57 per cent respondents had received cash assistance, 3 per cent had received in-kind assistance, 16 per cent had received assistance in the form of referral and 19 per cent had received assistance in the form of strengthening livelihood options, educational assistance, etc.

2. INTERVIEWS OF INJURED ADULTS

The total number of interviewed injured adults in Srinagar district was 93 and the average age of adults interviewed was 29 years. Of the total respondents, 86 were male and 7 were females, respectively.

A. Type of Family

Nuclear	Joint	Other
70	23	0

Majority of respondents (75 per cent) were living in nuclear families and 25 per cent in joint families. Data on injured adults showed that 28 per cent lived in *Kuchha* (mud and wattle) homes while 72 per cent lived in *Pucca* (concrete) homes.

B. Type of Ration Card

APL	BPL	AAY
62	23	8

Data analysis showed that all respondents had ration cards; 25 per cent possessed BPL, 66 per cent APL and 9 per cent had AAY ration cards, respectively.

C. Nature of Injury

40 per cent respondents said they were injured because of teargas shelling by police and paramilitary forces, 34 per cent said they had received bullet injuries, 9 per cent said they were injured by pellets and 17 per cent said they were injured during stone pelting and beating by paramilitary forces. 82 per cent respondents reported receiving serious injuries, 12 per cent said they had to stop going to work temporarily due to injuries and were thus suffering from shortage of essential commodities, while two per cent said they were permanently disabled due to injuries.

D. Occupation of Injured Youth

The study showed that 18 per cent respondents had their own business, 25 per cent worked as laborers, one per cent were working as Government employees, 24 per cent said they were idle and not doing anything, while 32 per cent said they worked as drivers, sales men and street vendors.

Seven per cent respondents were of the opinion that their monthly income before injury was between INR 500-1000, four per cent said their monthly income was between INR 1000-1500, 10 per cent said their monthly income was between INR 1500-2000 and 43 per cent said their monthly income was above INR 2000 before injury. Moreover, data showed that eight per cent respondents were of the opinion that following injury, their family income had declined to INR 500-1000, eight per cent said their income declined to INR 1000-1500, 13 per cent said their income after injury was INR 1500-2000, 33 per cent said their income after injury was above INR 2000 rupees, and 38 per cent did not share details of their income. Data shows a declining trend in monthly income of injured respondents due to injury.

Imran (name changed), 19, was injured during the unrest by security forces in Zoonimar, Srinagar, when he was hit by pellets. He received abdominal injuries on the fateful day of August 19, 2010. He has undergone two major surgeries because his spleen was totally damaged due to pellets and had to be removed immediately. Besides, he has lung injuries on both sides and multiple perforations in the stomach. So far, the treatment has cost his family more than INR 3,00,000. He belongs to a poor family and his father is a skilled daily wage labor.

Imran sits in the veranda of his house and narrates the incident. "On August 19, I was going for tuitions as examinations were around the corner. The separatist leaders had given a call for a "Shopian March" and the entire city was under siege. As I neared Zoonimar Chowk, there were heavy clashes between the protesting youth and the security forces. The protesting youth were trying to march towards Shopian but the forces chased them and fired tear smoke shells, pepper gas and pellets. In the meantime, a pellet from the opposite side hit me on the abdomen. I fell on the road crying and screaming for help and some few youth rescued and rushed me to hospital, where I was operated upon immediately. Till date, I have undergone two surgeries which have cost us more than INR 3,00,000," he says.

"*Assi pyow soorie kunun imranis elaajas bapat* (we had to sell our assets for the sake of Imran's treatment)", says Shameema, his mother, tears rolling down her cheeks.

E. Hospitalization Related

22 per cent respondents who were injured were taken to hospital by family members, 15 per cent by their friends and 63 per cent were accompanied to hospital by their neighbors. 39 per cent of injured respondents were hospitalized for less than a week, 14 per cent for 7-15 days, 25 per cent for 15-30 days and 22 per cent for more than one month, accounting for the total number of respondents as 36, 13, 23 and 21, respectively.

All respondents said they were treated very well by doctors and hospital staff. However, five per cent respondents said they faced problems due to curfew and strikes, etc. while some respondents mentioned they faced problems because of lack of resources during admission; however, more than 95 per cent said they faced no problems in getting admitted to hospitals. 50 per cent respondents were of the view that they were still undergoing treatment, out of which 34 per cent felt it will take them more than one year to recover fully, 8 per cent said they will still require atleast one year to recover and 58 per cent had no idea about the time required for a full recovery.

33 per cent respondents said the approximate expense for treatment was more than INR 90,000, 29 per cent said the amount was between INR 10,000 – 90,000 and 38 per cent said they had no idea about the estimated amount. Furthermore, about 29 per cent respondents said they had sold assets like gold ornaments, shops, houses and even copper utensils to cover the cost of their treatment, 17 per cent said they had taken loans, 17 per cent said they had taken loans **and** also sold their assets to cover treatment costs, while 37 per cent said they had not taken any loan nor sold any assets to cover their treatment costs.

F. FIR Lodged

Yes	No
31	62

33 per cent respondents said that FIRs were lodged against them while 67 per cent said there was no FIR against them. 91 per cent respondents said the police had lodged FIRs against them for being part

of stone pelting crowds, three per cent said the police had lodged FIRs against them for damaging public/Government property and six per cent did not share any information. Furthermore, it was found that 25 per cent respondents felt there was harassment by the security forces and 75 per cent felt there was no harassment.

G. Livelihood Lost Due To Injury

During the study it was found that 30 per cent respondents had lost one month of livelihood/wages due to injury, 32 per cent lost 2-3 months' livelihood/wages, 18 per cent had lost 4-6 months' livelihood/wages and 20 per cent had lost between 7 months and one years' wages due to injury. This data clearly reflects the impact of conflict on day-to-day life of people.

Further, 17 per cent respondents said relatives/friends or family members who stayed with them in a hospital had lost less than a week of wages, 13 per cent said relatives/friends or family members who stayed with them in hospital lost 7-15 days of wages, 35 per cent said relatives/friends or family members who stayed with them in hospital lost between 15-30 days of wages while 34 per cent said relatives/friends or family members who had stayed with them in hospital lost more than 30 days of wages. This data validates the fact that conflict has not only led to human and material loss but also resulted in decline of family incomes.

87 per cent respondents said their injury had affected their household in one form or the other. 14 per cent said they were not able to cope with household expenditure and were in debt, 13 per cent said their family income had declined due to their injury and they had to sell household assets, six 6 per cent respondents said their spouses and children were traumatized because of their injuries.

Moreover two per cent respondents felt the education of their children had been disturbed and they are not able to concentrate on studies, 11 per cent respondents' children had lost one month of schooling, 6 per cent had lost between 2-3 months of schooling due to their parents' injury, seven per cent had lost between 4-6 months of schooling, eight per cent had lost 7 months to one year of schooling and 69 per cent said they could not answer the question either because they were unmarried and did not have children. Moreover, it was also found that 15 per cent respondents felt that their injury had affected the daily food consumption of their children, 18 per cent felt their injury had **not** affected daily food consumption of their children, while 67 per cent said they could not answer the said question.

H. Assistance Received

Yes	No
50	43

54 per cent respondents had received cash assistance while 46 per cent had not received any assistance. Moreover, 39 per cent respondents had applied for relief and rehabilitation package of the State Government and 61 per cent had not applied for relief from Government. Further, 43 per cent had received assistance from reputed NGOs and 57 per cent had received assistance from Government as well as from local *Mohalla* Committees. 57 per cent respondents had received cash assistance, three per cent had received in-kind assistance, 13 per cent had received assistance in the

form of referrals and 27 per cent had received assistance in the form of strengthening livelihood options, educational assistance, etc.

I. Applied for Relief & Rehabilitation Packages

Under SRO 43	Recommendations of SHRC	Under ex-gratia	Any Other
0	15	8	25

16 per cent of respondents had applied for relief and rehabilitation package under recommendation of the State Human Rights Commission (SHRC), nine per cent had applied for rehabilitation package under ex-gratia, 27 per cent had applied for relief and rehabilitation under different schemes of Social Welfare Department and 48 per cent had not applied for any relief and rehabilitation.

It was also seen that 20 per cent respondents had faced problems in applying for relief and rehabilitation because of FIRs lodged against them, 13 per cent felt they faced the threat of arrest in applying for assistance from Government, 19 per cent felt they belonged to a particular group due to which they faced problems in getting assistance from Government, 29 per cent said they faced problems in applying for relief because of unavailability of medical records and 19 per cent respondents were unaware of any relief and rehabilitation package offered by Government.

3. INTERVIEWS WITH GENERAL CONFLICT AFFECTED FAMILIES

The total number of general information interviews conducted in Rajouri district was 108; the average age of respondents was 42 years.

Of the total number of respondents, 94 were male and 14 female, respectively.

A. Type of Family

Nuclear	Joint	Other
86	22	0

A majority of respondents (80 per cent) lived in nuclear families while 20 per cent of respondents lived in joint families. 28 per cent respondents reported living in *Kuchha* houses and 72 per cent in *Pucca* houses.

B. Ration Card Held

APL	BPL	AAY
86	12	10

All respondents possessed one of the three ration cards: 11 per cent possessed BPL, 80 per cent APL and nine per cent AAY ration cards, respectively.

C. Impact of Conflict on Day To Day Life

Ninety nine per cent respondents were of the view that the state of Jammu and Kashmir was a conflict-affected state and conflict had affected their everyday life.

D. Impact of Conflict On Children's Education

Majority of respondents felt that schools remained closed for months due to prolonged strikes, curfews and stone pelting. Parents could not afford to educate their children because of declining incomes. Due to prolonged strife, syllabus was rarely covered as a result of which children were losing interest in going to school. Many schools lacked adequate infrastructure and proper supervision. Children were not able to go to schools due to continuous restrictions and curfews. 81 per cent children said they were not able to go to school for more than a month, while 15 per cent said they had not gone to school for two months or more; the question was not relevant for four per cent of respondents.

E. Fear for Life

Almost 80 per cent respondents said they feared for their lives and only 20 per cent said they did not fear for their life. This fear was because people were not allowed to move or walk in groups, fear of security forces and/or harassment by local police, stone pelting and regular strikes, fear of arrest, false FIRs by police etc. 95 per cent respondents felt conflict had affected their families and livelihoods; 84 per cent respondents felt their family income had declined, 47 per cent said they were not able to cope with rising expenditure during civil strife and curfews, 36 per cent said they were in debt because of declining incomes due to frequent unrest, 27 per cent said they had sold their assets to cope with challenges and eight per cent said they were unable to go to work due to curfew and strikes, which was also impacting the diet and consumption of food by their family members. Two per cent respondents felt conflict had not affected their lives in any way and three per cent did not share information on this issue.

Adil (name changed), 27, was injured in a firing incident in 2008, and narrated his five-year old painful story. Adil 's family lives at Khwajabazar Nowhatta in Old City, Srinagar, and has spent a whopping of INR 19,00,000 on his treatment, selling off their house, goldsmith shop and personal jewellery, "I am disabled for rest of my life. I have stopped dreaming now", says Adil, sporting a thin beard and looking very weak.

Adil was injured on October 10, 2008 near Islamia College at Hawal in the old city in a firing incident. The bullet hit him in his stomach. He was in coma for six months, and is living on artificial intestine implanted in his abdomen at a cost of about INR 2.5 lakh. "My left leg is getting weaker by each passing day. Medicines are my life line now", says Adil. "I was carrying some money and some jewellery when I was shot. I had to deliver it to a customer and also take more ornaments from a shop in Hawal. But I do not know what happened to the cash and jewellery. I lost it all", says Adil.

According to family members, Adil was operated upon four times at SKIMS. Ever since, Adil has been sitting idle at home as the family battles poor finances as best as it can. Adil also has two small children and is very worried about them because he fears his injury will have a serious impact on them. Adil's father earns some money from fur work so that he can cater to the basic needs of the family, but the money is never enough to meet ends meet. Adil says for the sake of his children, he wants to do something again and wants to restart his business in gold once again. But because of poor finances, he has not been able to do so and all the income of his family is spent on medicines.

The study found that family members of 54 per cent of respondents had been arrested while 46 per cent of respondents said their family members had never been arrested or detained. Further, it was seen that eight per cent of respondents were detained for less than a week, seven per cent respondents had been detained for 7-15 days, 10 per cent had been detained for 15-30 days, five per cent were detained for more than a month and 70 per cent respondents did not share information about arrest or detention.

F. Priorities

Priority	Response
Education	108
Medical	108
Financial	108
Family reunion	93
Psychological	96
Any other	28

MEETING COMMUNITY HEADS

The average age of community heads in Srinagar was 58-years. Each Mohalla committee had about 5-20 members, except the Mohalla committee of Soura (Anchar), which had 70 members from three mohallas (localities). These Mohalla committees perform different functions like providing relief to destitute families, orphans and women headed families; then there were other committees like the TAZIAT COMMITTEES, INTIZAMIYA and FALAH-AAM COMMITTEES, most of who work for the legal rights of the residents of their locality. According to community heads, there are almost 30 families in each community affected directly or indirectly by conflict. Similarly, there were about 20 youth and adults who had been injured and detained due to conflict, whose injuries were mostly moderate to severe and the causes ranged from stone pelting, tear gas shelling to bullet and pellet injuries or/and beating by security forces.

Besides, there were about 15 women-headed families in 10 different communities and about 25 orphans in 11 communities; most orphans had lost their parents either in the conflict or of natural causes. The orphans were being rehabilitation in the community itself while the women were earning a livelihood from spinning charkha and weaving pashmina shawls, etc. According to community heads, most families lived in very miserable conditions. They were of the view that children were major victims of conflict because they were easy targets and also had the carelessness and courage to face the army and police boldly. There was also huge damage to properties in almost all areas of Srinagar, but mostly in downtown areas, which were more prone to stone pelting, continuous raids by police and CRPF, etc. Countless window panes of homes, *masjids* (mosques) and schools had been broken and vehicles ransacked many times.

Most respondents said everyone in the community was mentally stressed; continuous strife had affected livelihoods and ruined the education of many children - there are about seven dropout children in each community and the reasons were attributed to continuous strikes, restrictions, no classes, etc as well as families who were too weak financially to afford to educate their children. Especially, girls and women had become mentally stressed and hesitated in moving out of their homes; in fact, they said they felt insecure even inside their homes.

The community heads felt the Government and NGOs should help families financially so they can live normal lives. There should also be increase in schemes for widows and old age people and the differently-abled. They were also of the opinion that awareness programmes should be organized in every community about different programmes and policies related to above issues.

All respondents gave first preference to education, medical and financial needs, followed by 89 per cent respondents who gave preference to psychological needs, 86 per cent preferred family reunion, and 26 per cent had other priorities like transport facilities, CAPD stores, recreational parks for children etc. Moreover, 29 per cent respondents said they had witnessed very aggressive behaviour in their children, 23 per cent were of the view that their children were suffering from anxiety, 54 per cent felt there was an increase in absenteeism from school loss of concentration in studies. Because schools remained closed for days on account of unrest or strife, the lost teaching days/syllabus was covered by schools in many ways: 24 per cent respondents said schools had organized extra classes to cover the syllabus, five per cent said zero session was declared because syllabus had not been completed in time, 11 per cent said school sessions were extended to cope with the problem of syllabus completion and five per cent said incomplete syllabus in the schools meant that whole classes were promoted arbitrarily.

It helps to note that the impact of the conflict has been disproportionately brutal⁷¹ on the women⁷² of the valley: according to a report, 17,000 people mostly women have committed suicide⁷³ during the last 20 years in the Valley. According to a study by the Médecins Sans Frontières, "Women in Kashmir have suffered enormously since the separatist struggle became violent in 1989–90. Like the women in other conflict zones, they have been raped, tortured, maimed and killed. A few of them were even jailed for years together. Kashmiri women are among the worst sufferers of sexual violence in the world. Médecins Sans Frontières conducted a research survey in 2005. The survey states that 11.6% of the interviewees who took part in the study responded that they had been victims of sexual abuse since 1989. Sexual violence has been routinely perpetrated on Kashmiri women, with 11.6% of respondents saying they were victims of sexual abuse⁷⁴, says the report. At the beginning of the insurgency there were 1200 patients in the valley's sole mental hospital. The hospital is now overcrowded with more than 100,000 patients.

G. Restrictions On Children & Women

Kashmir women lead suicidal tendencies

Wednesday, 01 February 2012: With the state of conflict still fresh in the backdrop of their minds and increase in the cases of domestic violence, females in Kashmir are reportedly said to be more prone to suicides than ever before.

A study conducted by a prominent sociologist at the University of Kashmir, Dr. B A Dabla reveals that in Kashmir while the female suicide rates are increasing immensely, it is men who have more suicidal tendencies in the rest of India. "Contrary to Kashmir, in the rest of the country, men are found to be more suicidal especially in Maharashtra and Uttar Pradesh (UP) where maximum number of farmer suicides has taken place", Dr. Dabla told The Kashmir Monitor.

As per Dr. Dabla, the conflict situation has given rise to such social tendencies among females which directly or indirectly leads them to suicide. "As compared to the other societies elsewhere in India, female suicide cases have seen an alarming rise here in the valley. The main reason could be that females being more physically weak towards handling stress, fail to resolve the problem", added Dr Dabla.

Interestingly, Dr. Dabla reveals that literate and educated people being very sensitive are more prone to committing suicides. Twenty eight year old Shazia Majeed who put an end to her life on November 9 last year by hanging herself from a ceiling fan was educated and employed at the Islamic University of Science and Technology as a librarian. This illustrates Dabla's statement.

Shazia's family still believes their daughter's death to be a pure case of domestic violence. Experts claim that Domestic violence and family disputes play a vital role in making the females take the extreme step.

Moreover, two age groups among females between 17-35 and 35-50 are said to have more suicidal tendencies than others. Feroz Ahmed Malla, a counsellor at an NGO that works for mental healthcare, Kashmir Lifeline said, "Owing to the day today stress and personal life crisis, more youngsters are seen committing suicides and females have surely outnumbered the males".

As per reports, the two premier hospitals of the valley Sher-i- Kashmir institute of medical sciences (SKIMS) and Shri maharaja Hari Singh (SMHS) hospital registered 1029 cases of attempt to suicide in the previous year.

(Source: Kashmir Dispatch. <http://www.kashmirdispatch.com/headlines/01027890-kashmir-women-lead-suicidal-tendencies.htm>)

⁷¹ "Kashmir women lead suicidal tendencies". kashmirdispatch. Retrieved 2012-09-11.

⁷² "Two Kashmiri women die by suicide, third battling for life". freepresskashmir. Retrieved 2012-09-12.

"Woman poisons two daughters, kills self". greaterkashmir. Retrieved 2012-09-11.

"Oppression driving women in Kashmir to suicide". tehelka. Retrieved 2012-09-11.

⁷³ "Increasing cases of suicide in Kashmir". Milligazette. Retrieved 2012-09-2012.

⁷⁴ "Médecins Sans Frontières – Kashmir: Violence and Health" (PDF). Retrieved 6 January 2013.

62 per cent respondents said they restricted the movement of their children while 10 per cent said there was no change and 28 per cent did not share their view. Parents were putting restrictions on the movements of children because they felt insecure, there was a real threat of their children being arrested without any reason, or because no one could predict what would happen from moment to moment given the tense situation.

The prolonged conflict in Srinagar city had also altered the relationship of parents with their children in last 2-3 years. Six per cent respondents said their relationship with their children had worsened since children showed more aggression while 40 per cent said their relationship with their children had not changed or worsened. They added they were more concerned about their children than ever before.

12 per cent respondents said their children had witnessed long episodes of illness during curfews or strife while 41 per cent did not share their view.

80 per cent respondents said during unrest were not able to access medical facilities because they were not able to move out from their houses, 70 per cent said curfew passes were demanded regularly by security forces, 60 per cent they received delayed medical attention due to unrest. Moreover, doctors were also not available because of which people had to suffer. Nine per cent respondents said they had sought professional medical help for mental health problems of their children and 27 per cent said they did not seek professional help because of financial constraints and lack of awareness.

District Poonch

1. DATA FROM INTERVIEW OF INJURED CHILDREN

A. Total Number of Injured Children Interviewed: 30

The average age of respondents was 13 years.

There were 16 male and 14 female children (53 per cent male and 47 per cent female respondents, respectively.)

B. Type of Family

Nuclear	Joint	Other
30	0	0

All respondents lived in nuclear families. 93 per cent respondents lived in Kuchha houses while seven per cent respondents lived in Pucca houses.

C. Ration Cards

APL	BPL	AAY
7	20	3

All respondents had ration cards; 67 per cent had Below Poverty Line (BPL) cards, 23 per cent had Above Poverty Line (APL) cards, while 10 per cent had Antyodaya (AAY) cards, respectively.

D. Nature of Injury

A majority of children - 53 per cent - were injured due to cross border shelling, 33 per cent due to land mines, seven per cent received bullet injuries and seven per cent were by IEDs, respectively. Further, 93 per cent children were seriously injured and admitted to hospital for treatment, two per cent received mild injury and did not have to be hospitalised and five per cent were permanently disabled. 90 per cent respondents were hospitalized immediately after injury, 80 per cent were referred for advanced treatment and 20 per cent did not need further treatment. 66 per cent of respondents were referred to Government Medical College, Jammu, for advance treatment, nine per cent to District Hospital, Poonch, five per cent to District Hospital, Rajouri, and 20 per cent referred to Sub District Hospital, Mendhar.

E. Hospitalization Related

Seven per cent of injured children were hospitalized for less than a week, three per cent for 7-15 days, 27 per cent for 15-30 days and 63 per cent for more than 30 days. 95 per cent children had one surgery, five per cent underwent two surgeries.

The data also revealed that **all** respondents said they were treated very well by the doctors at the time of emergency. Moreover, 50 per cent children faced problems in getting admitted to hospitals; of these, 91 per cent faced problems in getting admitted to hospital due to lack of transport, seven per cent faced problems in getting admitted because of financial constraints and two per cent facing delays in getting admitted to hospital due to shelling.

Furthermore, 17 per cent children said their families had spent INR 10,000-25,000 on medical treatment, 20 per cent had spent INR 30,000-60,000, 63 per cent had spent more than INR 60,000-90,000 on their medical treatment. 16 per cent children said their parents had taken loans for meeting the cost of treatment, 66 per cent said their parents had sold assets like gold ornaments, land and livestock to meet cost of treatment, 13 per cent said their parents had taken loan **and** sold assets, while only five per cent said their parents had not taken any loan or sold any asset for meeting the cost of their treatment.

Analysis showed that 63 per cent respondents had not received any support from anyone, two per cent respondents had received support from their neighbors, relatives and friends, 19 per cent had received support from reputed NGO's, four per cent from government, six per cent from panchayat committees while six per cent did not share any information.

F. Estimated Amount (in INR) Required for Treatment of Injured Children

The table above shows estimated amount required for treatment of injured children: a majority of children i.e. 95 per cent were still undergoing treatment while five per cent of injured children do not need further treatment.

Eight per cent of injured children were of the view that it would take less than six months to recover fully, 14 per cent felt they needed about one year to recover, 27 per cent felt it would take them more

than one year to recover and 51 per cent were not aware of the time needed to recover fully. During the course of study it was found that 17 per cent children/families felt they will need INR 10,000-50,000 to cover the cost of treatment, 20 per cent felt they will need INR 50,000-1,00,000 for treatment while 47 per cent felt they will need more than INR 1,00,000 to cover cost of treatment; 15 per cent did not know how much money would be required for treatment.

Parents had to remain with their injured children during hospitalization, thus losing their livelihood even if temporarily. Thus, 18 per cent respondents said they had lost less than a week of work, 33 per cent said they lost 16-30 days of work, 27 per cent lost up to three months work and 22 per cent had lost more than three months work due to injury of their children. It is obvious from data that the conflict has severely affected the livelihood of many families as a result of injury sustained by their children.

G. Top Three Challenges Faced By Injured Children

Challenges	Responses
Financial	30
Psycho-social	30
Education	25

All (30) respondents reported financial and psycho-social problems (30), while 83 per cent faced problems related to education.

Further analysis of data showed that 16 per cent respondents relied on assistance from the community, 53 per cent relied on their family as a coping mechanism, 6 per cent received support from NGOs, while 20 per cent did not have any mechanism to help cope with vicissitudes of life.

H. Changes Witnessed After Injury

A vast majority of injured children (84 per cent) felt their injury had affected their family and friends and 16 per cent felt otherwise. 27 per cent respondents said their injury had affected their family economically, because of which they had to work to supplement family income, 83 per cent felt their family was in debt due to their injury, 2 per cent felt their friends did not like them due to their injuries, while 10 per cent did not have a definite answer.

10 per cent respondents felt their injury had changed the attitude of their friends/community members (friends rarely talk to them, stay away from them) while 90 per cent felt there was no change in the attitude of their friends/community members towards them (friends and community members were supportive and cooperative). 86 per cent, thus, felt they had changed themselves after injury.

Of the total respondents, 43 per cent said they faced psychological problems, 43 per cent faced physiological problems and 14 per cent felt they had been (unjustly) stigmatized by society, accounting for total number of 13, 13 and 4 responses, respectively. **Significantly, none of the injured children had received any legal aid whatsoever.**

I. School Days Lost Due To Injury

27 per cent of injured children had lost a week of school due to injury and 73 had lost 1-3 months of schooling due to injuries.

Data also revealed that 77 per cent injured children felt they had not dropped out of school due to injury while 23 per cent felt they had. Similarly, almost 81 per cent injured children said that because of weak economic circumstances of their family, they were not able to continue their studies, 33 per cent said they dropped out due to physiological problems, 61 per cent said they had dropped out due to mental depression and anxiety while 39 per cent said they had stopped going to school out due to social stigma.

Analysis also showed that injury had affected the learning ability of children: 37 per cent of injured children felt injury had affected their ability to learn new things in school. Many children were not able to remember their lessons and suffered from depression.

J. Any FIR lodged

Yes	No
0	30

No FIR had been lodged against any child nor was any child facing harassment by police/security forces.

K. Assistance Received

63 per cent of respondents had received assistance and 37 per cent had not received any assistance. 57 per cent respondents had received assistance from reputed NGOs and 43 per cent had received assistance from Government, local *Panchayat* Committees and the Indian Army. Moreover, 47 per cent respondents had received cash assistance, 29 per cent had received assistance in kind, and 24 per cent had received assistance in forms such as strengthening livelihood options, educational assistance, etc.

L. Applied for Relief & Rehabilitation Packages

<i>Under SRO 43</i>	<i>Recommendations of SHRC</i>	<i>Under ex-gratia</i>	<i>Any Other</i>
0	11	3	5

37 per cent respondents applied for relief and rehabilitation package under recommendation of the State Human Rights Commission (SHRC), six per cent under ex-gratia, 10 per cent under different schemes of Social Welfare Department while the rest had not applied for any relief and rehabilitation.

Data shows that 26 per cent respondents did not face any problem in applying for relief and rehabilitation, four per cent felt they faced threat of arrest in applying for Government assistance, 33 per cent felt they faced problems in applying for relief because of unavailability of medical records, while 37 per cent respondents were unaware of relief and rehabilitation packages by the Government.

2. INTERVIEWS OF INJURED ADULTS

The total number of interviewed injured adults in Poonch district was 64 and the average age of adults interviewed was 40 years. Of the total respondents, 47 were male and 17 were females, respectively.

A. Type of Family

Nuclear	Joint	Other
60	4	0

94 per cent respondents lived in nuclear families and six per cent in joint families. All respondents in Poonch district lived in *Kuchha* (mud and wattle) homes.

B. Type of Ration Card

APL	BPL	AAJ
5	46	13

Data analysis showed that 96 per cent respondents had ration cards; 73 per cent possessed BPL, eight per cent APL and 19 per cent had AAJ ration cards, respectively.

C. Nature of Injury

42 per cent respondents were injured because of cross-border shelling, 13 per cent received bullet injuries, seven per cent said they were injured by IEDs. 89 per cent respondents reported receiving serious injuries, two per cent said they had to stop going to work temporarily due to injuries, three per cent received mild injuries while six per cent were permanently disabled due to injuries.

D. Occupation of Injured Youth

56 per cent respondents worked as labourers, 22 per cent were farmers, 17 per cent were housewives and five per cent said they were unemployed currently.

13 per cent respondents were of the opinion that their monthly income before injury was between INR 500-1000, 11 per cent said their monthly income was between INR 1000-1500, 20 per cent said their monthly income was between INR 1500-2000 and 50 per cent said their monthly income was above INR 2000 before injury.

The question was not applicable to six per cent of respondents. After injury, 41 per cent respondents were of the opinion their family income had declined to INR 500-1000, 12 per cent said their income declined to INR 1000-1500, 20 per cent said their income after injury was INR 1500-2000, 3 per cent said their income after injury was above INR 2000 rupees, and 13 per cent did not share details of their income.

E. Hospitalization Related

Three per cent of injured respondents were hospitalized for less than a week, three per cent for 7-15 days, 33 per cent for 15-30 days and 61 per cent for more than one month, accounting for the total number of respondents as 36, 13, 23 and 21, respectively. Furthermore, it was found that no FIR was lodged against any injured youth in Poonch district.

Shazia (name changed), 5, lives in Qasba village in Poonch district. Shazia was injured when she was hit by a shell in her lumber on right side during shelling in October 2013, when she was playing with others children in their fields. Shazia was rushed to district hospital, Poonch, for immediate treatment from where she was referred to Government Medical College, Jammu, for further treatment. She was admitted for almost 2-months in hospital; the family spent INR 100,000 on her treatment, after which doctors advised further surgery because a small piece the shell was still in her body and had to be removed. Shazia's family went through severe financial stress as they were already impoverished and had to resort to selling whatever family assets they had to meet the treatment costs.

Her father, Khadam Hussain, says the family has suffered a lot to arrange such huge amounts of money for treatment. He said that since Shazia has lost her mother in 2012, she was already very lonely. Khadam said he had received INR 5000 from Deputy Commissioner, Poonch, and with the help of relatives and neighbors had managed for arrange for funds for his daughter's immediate treatment but now he needs INR 100,000 for Shazia's surgery. Shazia's father also said that since the incident, the whole family had been going through psychological problems, like stress, sleep disturbance, anxiety and depression. He says that Shazia's behavior had also changed after the incident and she was more violent with other members of the family.

All respondents said they were treated very well by doctors and hospital staff. However, 61 per cent respondents said they faced problems because of lack of transport facility/ambulance services.

F. Livelihood Lost Due To Injury

During the study it was found that due to injuries caused by bullets, shelling and land mines, 28 per cent respondents had lost one month of livelihood/wages due to injury, 47 per cent lost 2-3 months' livelihood/wages, 19 per cent had lost 4-6 months' livelihood/wages and six per cent had lost between 7 months and one years' wages due to injury. This data clearly reflects the impact of conflict on day-to-day life of people.

Further, 17 per cent respondents said relatives/friends or family members who stayed with them in a hospital had lost less than a week of wages, 13 per cent said relatives/friends or family members who stayed with them in hospital lost 7-15 days of wages, 35 per cent said relatives/friends or family members who stayed with them in hospital lost between 15-30 days of wages while 34 per cent said relatives/friends or family members who had stayed with them in hospital lost more than 30 days of wages. This data validates the fact that conflict has not only led to human and material loss but also resulted in decline of family incomes.

87 per cent respondents said their injury had affected their household in one form or the other. 57 per cent said they were in debt, 37 per cent said they had to sell household assets and six per cent felt the education of their children had been disturbed and they are not able to concentrate on studies.

47 per cent respondents' children had lost 2-3 months of schooling due to their parents' injury, 23 per cent had lost a month of schooling while 30 per cent respondents were un-married or did not have children.

Moreover, 67 per cent respondents felt their injury had affected the daily food consumption of their children, while 33 per cent felt their injury had **not** affected daily food consumption of their children.

All respondents were of the opinion that their injury will impact the future of their children because they will not be able to support the family properly; as a consequence, their children may have to drop-out of school at a future date.

G. Assistance Received

Yes	No
24	40

38 per cent respondents had received cash assistance while 62 per cent had not received any assistance. 53 per cent had received assistance from reputed NGOs, 47 per cent had applied for relief and rehabilitation package of the State Government and local *panchayat* Committees. 47 per cent respondents had received cash assistance, 23 per cent had received in-kind assistance and 30 per cent had received assistance in the form of strengthening livelihood options, educational assistance, etc.

H. Applied for Relief & Rehabilitation Packages

Under SRO 43	Recommendations of SHRC	Under ex-gratia	Any Other
0	31	3	5

48 per cent respondents had applied for relief and rehabilitation package under recommendation of the State Human Rights Commission (SHRC), five per cent had applied for rehabilitation package under ex-gratia, eight per cent had applied for relief and rehabilitation under different schemes of Social Welfare Department and 39 per cent had not applied for any relief and rehabilitation.

It was also seen that 36 per cent respondents had not faced any problem in applying for relief and rehabilitation and four per cent felt they faced the threat of arrest in applying for assistance from Government, 33 per cent said they faced problems in applying for relief because of unavailability of medical records and 37 per cent respondents were unaware of any relief and rehabilitation package offered by Government.

3. INTERVIEWS WITH GENERAL CONFLICT AFFECTED FAMILIES

The total number of general information interviews conducted in Rajouri district was 156; the average age of respondents was 41 years.

Of the total respondents, 132 were male and 24 female, respectively.

A. Type of Family

Nuclear	Joint	Other
132	24	0

A majority of respondents (85 per cent) lived in nuclear families while 15 per cent of respondents lived in joint families. 88 per cent respondents reported living in *Kuchha* houses and 12 per cent in *Pucca* houses.

B. Ration Card Held

APL	BPL	AAY
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37	106	13
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All respondents possessed one of the three ration cards: 68 per cent possessed BPL, 24 per cent APL and eight per cent AAY ration cards, respectively.

C. Impact of Conflict on Day To Day Life

Ninety nine per cent respondents were of the view that the state of Jammu and Kashmir was a conflict-affected state and conflict had affected their everyday life; only one per cent respondents felt it was not so.

D. Impact of Conflict On Children's Education

Due to prolonged conflict, income of families had declined significantly. There was increase in the number of cases of mental stress, anxiety and fatigue reported by most respondents. A majority of people said they were unable to cope with rising expenditure, children's education was suffering very significantly and schools were not able to cover syllabus most times. Also, there was the constant fear of undue harassment by police/security forces and people were wary of the complications arising out of border fencing in the area.

Most respondents felt that schools remained closed for months due to prolonged strikes, curfews and stone pelting. Parents could not afford to educate their children because of declining incomes. Due to prolonged strife, syllabus was rarely covered as a result of which children were losing interest in going to school. Many schools lacked adequate infrastructure and proper supervision. Children were not able to go to schools due to continuous restrictions and curfews. 81 per cent children said they were not able to go to school for more than a month, while 15 per cent said they had not gone to school for two months or more; the question was not relevant for four per cent of respondents.

Major Findings

- Across the three districts of Srinagar, Rajouri and Poonch, the average age of injured children was 13 years.
- About 49 per cent children were injured were due to cross border shelling, 45 per cent due to tear gas shelling, 29 per cent were injured by stepping on landmines, 28 per cent had received bullet injuries, 16 per cent due to pellets and 16 per cent by stone pelting.
- 80 per cent children were seriously injured, six per cent had been permanently disabled, 14 per cent of injured children had dropped out of school, respectively. Moreover, 77 per cent children had to be hospitalized; 59 injured children had to be referred for advanced treatment to Medical Colleges/hospitals out of Jammu and Kashmir.
- 18 per cent injured children were hospitalized for less than a week, 17 per cent for 7-15 days, 26 per cent for 15-30 days and 38 per cent for more than 30 days, respectively.

- 76 per cent injured children had to undergo atleast one surgery, 12 per cent had undergone two surgeries, three per cent had undergone three surgeries and seven per cent had undergone more than three surgeries. Two percent did not need any surgery.
- All respondents were treated very well by the doctors.
- 21 per cent injured children faced problems in getting admitted to hospitals, like non-availability of transport, low financial resources, etc. 79 per cent children said they did not face any problems during admission to hospitals.
- 14 per cent children said their families had spent INR 10,000-25,000 on their medical treatment, 26 per cent had spent INR 25,000-50,000, 31 per cent had spent INR 50,000-75,000, 23 per cent said their families had spent more than INR 75,000 on treatment so far.
- 23 per cent children said their parents had taken loans for meeting the cost of treatment, 45 per cent said their parents had sold assets like gold ornaments, land and livestock to meet cost of treatment, 28 per cent said their parents had taken loans **and** sold assets, while four per cent said their parents had not taken any loan or sold any asset for meeting the cost of their treatment.
- Analysis showed that 25 per cent of children / families received support from neighbours, relatives and friends; seven per cent received support from Government departments/Indian Army; eight per cent received support from local *Panchayat* Committees; 19 received support from NGO's, 29 per cent had not received any support and 12 did not share information.
- 82 per cent injured children were still undergoing treatment while 18 per cent were not undergoing any treatment currently. Of these, 34 per cent were of the view it would take more than eight months to recover fully, 17 per cent felt they needed 4-8 months for recovery while six per cent said they may take 1-4 months to recover. 13 per cent children/families felt they will need INR 10,000-50,000 to cover the cost of treatment, 14 per cent felt they will need INR 50,000-1,00,000 for treatment while 45 per cent felt they will need more than INR 1,00,000 to cover cost of treatment. 28 children could not estimate the amount of money needed to cover treatment costs.
- 14 injured children said their parents had lost 8-15 days of wages/employment, 29 per cent said their parents had lost 16-30 days worth of wages/employment, 30 per cent said their parents had lost more than 30 days of employment, while 15 per cent children their parents had lost more than three months' wages/employment as a result of their hospitalisation, which was a huge indirect cost to these families. The minimum wages fixed for various categories of workers (vide SRO No.304 dated 1-10-2009, Department of Labour and employment, Government of Jammu and Kashmir⁷⁵) have been determined as under:

1. Skilled ----- 225/day

⁷⁵ <http://jklabouremp.nic.in/acts.html>

2. Semi-Skilled -----	175/day
3. Unskilled -----	150/day
4. Ministerial/Supervisory/Accountancy -----	200/day

Thus, the monetary losses incurred by parents/families of injured children could range from INR 1400 over seven days to INR 16,000 for 90 days (for semi-skilled worker), while for skilled workers, the losses could range from INR 1600 to INR 20,000, or more over a 90-day period.

- **The top three challenges reported by injured children were** financial, education and psycho-social problems.
- 32 per cent children said they relied on support of the community, 41 per cent relied on their family as a coping mechanism, seven per cent sought support of NGOs, while 16 per cent did not have any coping mechanism.
- 84 per cent injured children reported change in themselves after injury. Of the total, 49 per cent said they faced psychological problems, 36 per cent faced physiological problems and 15 per cent felt they had been (unjustly) stigmatized by society. Analysis shows that 21 per cent children felt that their injury has changed the attitude of their friends/community members (friends rarely talk to them, stay away from them), while 79 per cent felt there was no change in the attitude of their friends/community members towards them (friends and community members were very supportive and cooperative).
- 41 per cent of injured children had lost 1-3 months of schooling due to injuries while 49 per cent had lost more than three months of schooling due to their injuries, while the rest could not say. About 28 per cent of injured children said they had dropped out of school due to injury.
- Overall, as a result of lost livelihood opportunities by parents, 72 per cent of all children who were respondents blamed weak economic circumstances of families for discontinuing their studies.
- Out of all injured children, 45 per cent injured children said they dropped out of school due to physiological problems, 37 per cent felt they had dropped out due to mental depression and anxiety while 18 per cent respondents said they had stopped going to school out due to social stigma.
- Specifically for Srinagar city, 75 per cent respondents said police had accused them of stone pelting and lodged false complaints against them while 25 per cent said they were accused of taking part in unlawful activities. Moreover, 15 per cent respondents faced harassment after injury and 83 per cent did not; 2 per cent did not share any information.
- Analysis also showed that injury had affected the learning ability of children: 31 per cent injured children felt injury had affected their ability to learn new things in school.

INJURED ADULTS

- The average age of adults interviewed was 42 years. There were 205 male respondents and 45 female respondents.
- 30 per cent were APL ration card holders, 39 per cent were BPL card holders and 31 were AAY card holders.
- 23 per cent respondents were injured because of cross-border shelling, 18 per cent received bullet injuries, 20 per cent were injured by mines/IEDs, 17 per cent by stone pelting, 13 per cent by tear gas shells and nine per cent by pellets.
- 43 per cent respondents were farmers, 10.5 per cent were in business, 16 per cent were housewives and 28 per cent were labourers, one per cent were Government employees, 14.5 per cent were unemployed and 16 per cent were salesmen, etc.
- 29.5 per cent adult respondents reported an income between INR 1000- 3000, 25 per cent earned between INR 3000-6000, 14 per cent who earned between INR 6000-9000 and eight per cent earned more than INR 10000. The rest said their monthly income varied.
- 11 per cent of injured respondents were hospitalized for less than a week, 14 per cent for 7-15 days, 33 per cent for 15-30 days and 42 per cent for more than one month.
- **All** respondents said they were treated very well by doctors at the time of emergency and the entire hospital staff was very cooperative. Most respondents did not face any problem while being admitted to hospital.
- More than 50 per cent respondents had lost 2-3 months' livelihood due to injury, 27 per cent had lost one months' livelihood, 16 per cent had lost 4-6 months' livelihood and six per cent had lost between seven months to a years' wage due to injury.
- Further, 18 per cent respondents said relatives/friends or family members who stayed with them in a hospital had lost less than a week of wages, 15 per cent said relatives/friends or family members who stayed with them in hospital lost 7-15 days of wages, 30 per cent said relatives/friends or family members who stayed with them in hospital lost between 15-30 days of wages while 35 per cent said relatives/friends or family members who had stayed with them in hospital lost more than 30 days of wages.
- Data reveals that injuries impacted the incomes of almost all respondents: 49 per cent said they were still in debt and 34 per cent had been forced to sell assets to cope with expenditure, 17 per cent said they were still unmarried.
- 17 per cent respondents said education of their children had been affected and children were not able to concentrate on studies, 47 per cent respondents' children had not attended school for more than three months because of parents' injury, 17 per cent had not attended school for one month. The rest believed their children were going to school sporadically.

- 50 per cent respondents were of the view they were unable to provide nutritious food to their children. 95 per cent respondents felt their injury will impact on the future of their children because they will **not** be able to support the family, as a result of which their children may have to dropout from school.
- 43 per cent of respondents said they had received cash assistance while 57 per cent had not received any assistance. Moreover, 48 per cent respondents had applied for relief and rehabilitation package of the State Government under recommendation of the State Human Rights Commission, and seven per cent under Government ex-gratia payments, 18 per cent under various schemes of the Social Welfare Department of the State Government and 27 per cent through NGOs etc.

Challenges and Constraints

The environment of civil unrest posed particular challenges for safe and scientifically accurate research involving children, families and communities. Facilitators had to take steps to anticipate challenges to minimise any potential risks. Restrictions of movement, breakdown of communications, lack of security and a general atmosphere of mistrust and suspicion made the practicalities of meeting and working with children and their families especially challenging.

1. To a certain extent, the gender of researchers and participants was a particular challenge and carried its own risks. For example, male researchers were constrained in approaching or speaking directly to women or young girls without the presence of females of the household or female colleagues. Similarly, female researchers could face harassment and threats from families and community members; ultimately, researchers themselves bore responsibility to both her/himself and the participants to avoid situations of physical or mental harm.
2. Researchers had to always aware that their presence could affect the dynamics within the community by potentially bringing in unfamiliar practices or attitudes. Their presence could – and did - draw attention to not only themselves but also `to those children and families who have volunteered to be part of the survey activity, thereby arousing suspicion and potentially creating risk. Even for those who are less visible – as locals from the community– there are risks involved simply for participating in the survey.
3. Though the situation is largely peaceful in the state, concerns still existed about any interest, if any, that local political or security-related actors were likely to evince in the survey activities in the backdrop of suspicion and vigilance against anything that was out-of-the ordinary in the community. Did the survey include issues or queries that participating children, their families/communities, and political-security apparatus might consider inappropriate? Was it possible to conduct the survey in a manner that ensured security and privacy without raising suspicion? As a result, researchers from the local NGO sought and obtained up-to-date and accurate information about the survey location(s) and also elicited vital support from local community leaders, NGO members, local masjid (mosque)/mohalla (locality) committee

members etc. as to suitability of particular method(s), time and location, family and community sensitivities and in some cases, even the most appropriate way to raise specific issues (for example, on child abuse, etc.)

4. Given sensitivities around any research/survey in the more orthodox areas of Srinagar city as well as rural areas, the researcher had to also consider the consequences of young people's participation in relation to their position within the family and community. By pursuing an approach that encouraged children to express their views, reflect upon their situation and articulate their aspirations, there was an element of risk that the researcher(s) may well be challenging the status quo, since in local culture, the prospect of young people speaking up and voicing their issues in the presence of parents/elders was not considered appropriate. In simple terms, research that was participatory in nature may be viewed as encouraging children to become disrespectful or unruly, resulting in undue backlash against the researchers. Thus, to avoid this, researcher(s) had to work carefully to assuage local concerns and fears as they arose, by ensuring transparency about methods and aims of survey and taking families, children and communities into confidence.
5. In situations where children and their families are faced with a severe struggle simply to survive, the issue of payment for survey/research becomes particularly acute. This was particularly common in Srinagar city, where there was expectation of reward for participating in the survey by some individuals. In such instances, researchers had to tread carefully and clear the air that there was no reward for anyone in sharing information or participating in the survey/research in any manner. This was done by making transparent the criteria for participation and the reasons for non-payment/reimbursement of any rewards to any individual in a manner that avoided fuelling tension or resentment amongst the community.
6. The gender dimensions of the intended research had to be considered in advance. If the researcher was male and intended to work with female children, he had to make sure he was accompanied by a female colleague, given the conservative culture in Srinagar where social interaction between the sexes can be highly constrained. This precaution was also useful given the fact that adolescent girls and boys would feel more comfortable talking about personal issues with someone of the same sex.
7. In some localities, access to girls and young women was particularly difficult to gain. In such circumstances, particular care had to be taken to ensure that the interview process was carefully facilitated to allow girls to share their experiences and views in a manner that best suited their circumstances. For this, the local NGO partner had to orient and sensitise the researcher(s) to be patient and sensitive to both the girls' and parents' views during the interview process. In fact, the researchers were also trained to show similar consideration to differently-abled children and for those whose lives did not fit with local ideals (like alleged drug addicts or those with alleged criminal backgrounds, for example), children who had dropped out of school, those living on the street or those from families of marginalised or disadvantaged socio-economic standing.

8. Confidentiality and anonymity were especially crucial and had to be ensured by the researchers at all costs. Photographs and video material raise obvious challenges since they make identification much easier, so prior consent in the use of cameras for research purposes and in the employment of materials produced was, therefore, mandatory and given particular care to ensure that participants had full confidence in the confidentiality of the shared data/information.
9. Despite precautions, issues/queries like death of family members, sexual or physical abuse of a child or difficult financial circumstances of a family involved the recollection of difficult memories, thus triggering considerable anguish which many researchers did struggle to deal with. Thus, despite making certain that parents or children are not be placed in a situation where they are compelled to reveal information or express private concerns that did not feel comfortable, there is always a need to carefully assess the situation for **every family** before an interview.
10. At every stage of the research process it was important to take serious account of local cultural values of communities in which the survey was to take place, despite the fact that all researchers were local inhabitants who were very familiar with most local customs and traditions. However, given the sensitivity of the questionnaire and the sensitivities of local communities on the issue of child abuse, issues that could be explored, the ways in which questions were phrased, the composition of groups and the timing and location of activities were all concerns that all researchers had to be **constantly aware** of.
11. Aside from the impact of landmines in terms of physical injury to young people and those around them, it is also important to consider the socio-economic effects of living in a heavily contaminated environment. Access to education, play, and leisure opportunities and to normal economic activities are all liable to severe disruption due to the presence of explosive devices in the immediate vicinity. In general, far less attention has been given to these matters than to the consideration of direct physical impact and its consequences.
12. In societies experiencing armed conflict all children and adolescents are inevitably affected. While only a proportion of young people suffer directly through casualty, death or the destruction of their homes and communities, none are spared the effects of the militarisation of the society as a whole. The diversion of resources from provision of health and education is a common outcome of this process. To date, however, the **impact of such diversion of resources** on the health, education and general wellbeing of children in specific conflict-affected regions like Kashmir have not been studied in detail in this study.
13. It is widely believed and asserted that armed conflict leads to an increase in child abuse, including within the domestic realm. Although an increase in abuse would appear a likely result of the social breakdown that commonly accompanies conflict, the evidence from this survey fails to demonstrate this convincingly for two main reasons. First, there is lack of any baseline data against which to verify that levels of abuse have risen. Second, comparative studies in other communities or areas of the state which have not experienced conflict directly are generally absent. Without denying that conflict may lead to greater abuse within the

home, careful research is needed to understand the relationship between these two phenomena.

14. The abuses of children and adolescents by government forces at times of conflict are numerous. They include the harassment, arrest, and torture of young people who are related to known or suspected members of the enemy camp – actions that are in clear contravention of Articles 2, 37, and 38 of the CRC. Under-18-year-olds are allegedly arrested and held, often without charge, in large numbers alongside adults. However, it is likely that the majority of abuses of this nature rarely come to light, not least because the young victims and their families are intimidated into silence. In any event, data about the age of those arrested and detained is often incomplete or unreliable. There is thus a need to research these matters more intensively to arrive at scientifically validated conclusions than just reporting anecdotal data.
15. Although not confined exclusively to females, sexual violence as a weapon and consequence of war particularly affects girls. Several commentators have noted that boys could be as vulnerable to this as girls. However, the particular stigma that often applies to male victims of rape leads to under-reporting of such cases. Those who suffer sexual violence in the context of armed conflict must live not only with the psycho-emotional effects but often with social alienation as well, shunned by their families and community. This research needs to explore such issues in more detail while obviously taking into account the understandable reluctance of young people to speak openly about their experiences for fear of further adverse consequences.
16. Similarly, levels of disability tend to rise sharply in communities affected by conflict, due directly to violence and indirectly to poor nutrition and disruptions in health service provision. The struggle simply to maintain basic healthcare and education for the majority of young people in conflict-affected areas generally leads to the low prioritisation of the specific additional needs of a sizeable minority. However, it appears that the particular needs of children and adolescents with disabilities and research into their experiences and needs in conflict situations have been seriously overlooked in this document. Accounts which convey the social experience of young people themselves are notably missing. Yet, it is through stigmatization and marginalization as much as through physical challenges that disabled young people are liable to suffer greatly.
17. The impoverishment of households as a consequence of conflict and displacement commonly leads to dietary deficiency. In addition, the ability of communities to feed themselves through farming, fishing or hunter-gathering may be constrained by security considerations or prohibitions imposed by military authorities. Separated children forced to fend for themselves and children in homes with a sole parent may be especially vulnerable to undernourishment and malnutrition. Where men leave to fight, are captured or killed, mothers are often compelled to take paid employment, but in orthodox societies like in Jammu and Kashmir, even this is not usually an option since women generally are discouraged from seeking employment outside their homes. As a subject of enquiry the strategies of children and adolescents to obtain food for themselves and their households has been little researched.

The issue of food entitlement according to age and gender has generally been neglected. Also, anecdotal evidence suggests that cultural factors may lead to an unequal distribution of rations within a household such that, for example, adolescent girls suffer micronutrient deficiencies not found amongst their male siblings. This issue highlights the need for a more nuanced, contextualized exploration of the subject.

Lessons Learnt and Conclusion

This document is in no sense intended to provide a comprehensive picture of impact of conflict on children and adolescents. Rather, it seeks to offer a brief overview of some key issues in the field and provoke thoughts about possible areas of research. It also indicates some of the ongoing debates and concerns around specific issues and directs the reader to relevant literature. Given the considerable obstacles to the collection of data in conflict settings, such figures should be taken as rough guides. Nevertheless, they do point to the massive impact of conflict on children and adolescents. Given the considerable obstacles to the collection of data in conflict settings, such figures should be taken as rough guides. Nevertheless, they do point to the massive impact of conflict on children and adolescents.

The study leverages both survey data and documented national and international research to underscore the scale and consequences of conflict in the state of Jammu and Kashmir, which has now moved from remote border areas to the very heart of the state's villages, towns, and cities. Children, families and communities have now become inextricably involved in the spiral of civil strife, unrest, protests and crackdowns, which has had a serious and long-term impact on their psyche and resulted in considerable physical, emotional and psychological suffering.

The findings of this research project confirmed that there still exist tremendous gaps in both knowledge of, and action towards the needs of children and young people affected by armed conflict, especially in the area of child protection. There is a need for stakeholders working with children affected by armed conflict, research organizations/NGOs that participated in this project and Save the Children to continue gathering – and strengthening - child-focused information on affected children in order to effectively influence appropriate program and policy developments.

Region or community-specific child protection policies and programs need to be developed not only with the actors involved in this research and affected children themselves, but also with stakeholders with influence in advocacy and policy making, such as international NGOs, state human rights commissions, etc.

Data and scientific validation should drive all policy advocacy and programmatic interventions on child protection. Thus, it is absolutely important that data collection initiatives on the situation of children affected by armed conflict specifically be prioritized and strengthened across all interventions, as this is still very under-researched. Very little quantitative or qualitative data and analysis has been documented regarding the effect of the conflict on communities, particularly with regards to children. Furthermore, while there is a desire to address the situation of children affected by armed conflict, as evidenced by the great interest local and regional organizations expressed in this research, child activists and advocates have been unable to develop effective protection strategies due to the lack of

basic information and analysis. All the more reason to develop and conduct comparative studies in both project intervention and non-intervention areas across the state to provide evidence of change and impact of project interventions, which will go a long way in rolling out more efficient, contextual and relevant interventions based on sound child-focused research.

Finally, there is an imperative need to support research processes with children and young people in the context of ongoing conflict situation and support the linkage of such research with funding for long-term program support.