

BETWEEN WORK, RESCUE, AND CARE: GENDERED WELL-BEING AND ILL-BEING ACROSS THE LIFE PHASES OF TRAFFICKED CHILDREN IN INDIA

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Abstract

Applied psychology and public health research commonly assess children's well-being through indicator-based outcomes such as school enrolment, withdrawal from labour, and institutional compliance. While valuable for population-level monitoring, such approaches offer limited insight into how children themselves evaluate well-being and ill-being across different phases of their lives, particularly within institutional care. This article reconceptualises well-being and ill-being as relational experiences, drawing on qualitative fieldwork with children residing in state-recognised Child Care Institutions in Delhi. Using in-depth narrative interviews, participant observation, and a phase-based analytic approach, the study traces children's evaluations of well-being and ill-being across five life phases: parental homes, mobility, workplaces, rescue, and institutional care. The analysis reveals distinct gendered pathways. Boys' evaluations foregrounded work, autonomy, and social recognition, with ill-being concentrated around rescue and institutional disruption. Girls' accounts located ill-being primarily in earlier domestic contexts marked by constraint and abuse, while institutional care was more often evaluated as offering relative safety and future stability, albeit under regulation.

The article makes three contributions. First, it introduces a life-phase analytic framework that enables comparative analysis of well-being across time rather than at single intervention sites. Second, it demonstrates how children actively evaluate protection, care, and harm relationally and comparatively, challenging outcome-based models of well-being. Third, it conceptualises rescue and institutional care as temporal interventions that reorder children's lives through waiting, suspension, and redirected futures. By foregrounding children's evaluative perspectives, the study advances applied psychological and public health understandings of child protection beyond indicator-driven approaches.

Keywords: child well-being; child ill-being; child trafficking; institutional care; gender; governmentality; public health; rescue; India

A. CONCEPTUAL FRAMEWORK – WELL-BEING, ILL-BEING, AND INSTITUTIONAL CARE

Well-being as a Shared, Applied Concept

Well-being has emerged as a central concept across public health, psychology, and social policy, precisely because it draws attention to how people live with and experience interventions intended to improve their lives. According to the World Health Organization, well-being extends concern beyond survival and morbidity to encompass functioning, safety, and quality of life within public health frameworks (WHO, 1948; 1998). Within applied psychology, well-being has increasingly been understood not simply as an internal mental state, but as an evaluative experience shaped by social relations, institutional contexts, and future orientation (White, 2017). Rather than belonging exclusively to any one discipline, well-being operates here as a shared applied concept, linking objective conditions and policy interventions with lived psychological experience.

Child¹ Well-Being and Ill-Being in Public Health

Within public health and social policy, child well-being has most commonly been conceptualised through indicator-based frameworks designed to monitor population-level outcomes. This approach is associated with the child indicators movement, which sought to render children's lives measurable across multiple domains in order to support policy evaluation, comparison, and accountability (Ben-Arieh, 2008, pp. 3-5). More specifically, population-level assessments of child well-being within public health and child protection commonly rely on indicators such as school enrolment and attendance, withdrawal from paid or hazardous labour, access to nutrition and healthcare, residential stability, and exposure to violence or risk (Ben-Arieh, 2008; Bradshaw & Richardson, 2009).

¹ For the purposes of this study, the term "child" refers to any person below the age of 18 years, in accordance with the Juvenile Justice (Care and Protection of Children) Act, 2015 (Government of India).

In institutional contexts, compliance with routines, regular schooling, and behavioural stability are often treated as implicit markers of rehabilitation and well-being. While these indicators are valuable for monitoring broad trends and policy outcomes, they offer limited insight into how children themselves experience safety, care, constraint, recognition, or future possibility within institutional settings. As a result, children may appear “well” according to population metrics while simultaneously experiencing forms of relational or temporal ill-being that remain largely unmeasured. Composite indices developed within this tradition aggregate diverse indicators into summary measures intended to capture children’s overall quality of life at national or regional levels (Bradshaw & Richardson, 2009, pp. 322-324). For instance, global knowledge on child labour is most prominently produced through large-scale estimation exercises led by the International Labour Organization (ILO), which rely on household surveys and statistical classifications to track prevalence and trends by age, gender, and sector (ILO, 2013; 2017).

At the same time, indicator-based approaches obscure important dimensions of children’s lived experience. Composite measures necessarily prioritise certain dimensions over others but struggle to capture relational, institutional, and experiential aspects of children’s lives (Ben-Arieh, 2008 pp. 3-5, 8-11; Bradshaw & Richardson, 2009, pp. 319-323). In contexts such as institutional care, measurable outcomes may coexist with experiences of constraint, loss, or moral regulation that remain largely invisible to indicators. This study treats well-being and ill-being together, not as opposing states, but as coexisting and shifting experiences produced within specific social and institutional contexts.

Well-Being and Ill-Being as Governed Experiences

To engage with children’s evaluative accounts of well-being and ill-being, the analysis adopts an applied psychological perspective grounded in public health concerns. Rather than treating well-being as an internal psychological state to be captured through fixed questionnaires or scores, the study examines how children themselves interpret care, constraint, work, rescue, and institutional life across time. From this perspective, well-being and ill-being are understood as evaluative experiences that emerge through relationships, institutional practices, and temporal uncertainty, rather than as static outcomes of intervention.

Within child protection systems, well-being operates not only as a descriptive concept but also as a regulatory framework through which children’s lives are organised, assessed, and governed. Institutional definitions of safety, rehabilitation, emotional stability, and “normal” development inform everyday routines, surveillance practices, and judgements of progress or failure. Drawing on analyses of governmentality, this perspective understands power as operating through norms, classifications, and everyday practices rather than through coercion alone (Foucault, 1991). This attention to how care, harm, and authority are embedded in routine institutional practices resonates with anthropological accounts of how power and authority are lived through the ‘ordinary’, rather than through exceptional events (Das, 2007). Categories such as well-being, vulnerability, and risk therefore do not merely describe children’s conditions; they actively shape what forms of childhood are recognised as legitimate and what kinds of conduct are encouraged, corrected, or constrained.

Applied to institutional care, this lens highlights how rescue and protection can simultaneously generate care and control. Global child welfare regimes have shown a tendency to frame children as universally vulnerable and in need of standardised intervention, often obscuring children’s prior labour histories, family responsibilities, and moral worlds (Nieuwenhuys, 2007, pp. 149-152, 156-159). Within such settings, ill-being may arise not only through harm or deprivation, but through restriction, moral judgement, prolonged waiting, and the narrowing of recognised life possibilities. Well-being and ill-being are thus treated here as coexisting and shifting experiences, produced through governance as it is lived and negotiated in everyday institutional encounters.

Relational dimensions of well-being and ill-being

Relational approaches to well-being emphasise that experiences such as care, harm, and flourishing are produced through social relationships rather than located solely within individuals. From this perspective, well-being and ill-being emerge through everyday interactions with family members, employers, peers, caregivers, teachers, and institutional authorities, as well as through the norms and expectations embedded within these relationships (White, 2017, pp. 121-123, 128-131). Within institutional care settings, children’s evaluations of well-being are often shaped less by the formal provision of services than by how they are treated, recognised, or disciplined in routine encounters. Feelings of fairness, belonging, trust, or exclusion acquire particular psychological salience in contexts where children have limited control over daily life.

Temporal dimensions of well-being and ill-being

Temporal perspectives on well-being highlight that children’s evaluations of their lives are shaped by past experiences and anticipated futures, not only by present conditions. In contexts of labour, migration, rescue, and institutional care, well-being and ill-being are closely tied to uncertainty, interruption, and externally imposed transitions, rather than unfolding along linear or predictable trajectories.

Within institutional settings, authorities often assess children’s well-being through projected futures such as schooling, rehabilitation, or reintegration, while children themselves emphasise the experiential consequences of waiting and suspended decision-making. Prolonged uncertainty about duration, outcomes, and control over time frequently emerged as a source of ill-being, even in the absence of immediate material deprivation. A temporal lens thus reveals well-being and ill-being as shifting and contingent experiences, shaped by how children interpret their pasts and imagine possible futures. In this sense, ill-being does not manifest primarily as psychological

disorder but as constrained agency, moral dislocation, or prolonged uncertainty within regulated institutional contexts.

Conceptual Positioning of the Study

Well-being and ill-being are thus understood in this study as dynamic and co-existing, shaped through institutional practices, social relationships, and orientations toward the future (Summerfield, 1999, pp. 1449-1453, 1456-1459). The conceptual framework established here provides the basis for analysing children's experiences of work, rescue, and care in the sections that follow. It informs the interpretation of empirical findings and grounds the discussion of how institutional care produces gendered forms of both well-being and ill-being for trafficked and rescued children.

This study makes three interrelated contributions to scholarship on child labour, trafficking, and child protection. First, it introduces a phase-based analytic approach that traces children's own evaluations of well-being and ill-being across five life phases – parental homes, mobility, workplaces, rescue, and institutional care – rather than analysing these sites in isolation. This allows protection to be examined as a process experienced over time, rather than as a discrete intervention. Second, the study reconceptualises well-being and ill-being as evaluative practices through which children assess care, harm, and purpose relationally and comparatively across life phases. Rather than treating well-being as an outcome of rescue or rehabilitation, the analysis foregrounds children's own judgements of what constitutes safety, recognition, and meaningful life trajectories under conditions of constraint. Third, the study advances a temporal understanding of rescue and institutional care, showing how child protection interventions reorder children's lives through waiting, suspension, and the deferral of futures. By analysing rescue as a temporal intervention, the paper reveals how institutional care can simultaneously produce safety and new forms of ill-being. Together, these contributions extend existing work on child labour and protection by centring children's perspectives on governance, time, and evaluation within institutional contexts.

B. Study Context, Methodology, and Ethical Approach

Study Context: Rescue, Institutional Care, and Child Protection in India

This study is situated within the contemporary child protection landscape in India, where children identified as trafficked, exploited, or engaged in hazardous labour are commonly “rescued” through police raids, labour inspections, or NGO-state collaborations, and subsequently placed in state-recognised Child Care Institutions. These institutions are governed under the Juvenile Justice (Care and Protection of Children) Act (JJA) framework and are intended to provide temporary or long-term care, education, and rehabilitation for children deemed to be in need of care and protection.

The present analysis draws on my doctoral fieldwork conducted between 2012 and 2015, involving sustained engagement with two Child Care Institutions in Delhi, extensive participant observation, and repeated interviews with children and institutional actors (Anand, 2017). At the time of fieldwork, JJA 2000 was in force; references to JJA 2015 are used to situate the findings within the current child protection framework.

While rescue and institutional placement are framed in policy discourse as protective interventions, prior research has shown that institutional care constitutes a complex social environment shaped by bureaucratic regulation, moral expectations, and everyday practices of care and control (Foucault, 1991; Nieuwenhuys, 2007, pp. 149-152, 155-157; Balagopalan, 2008, pp. 268-274, 276-281). For children, entry into institutional care often marks a rupture from previous family, work, and community contexts, while simultaneously inaugurating new forms of dependency, surveillance, and future uncertainty.

The present study engages with this context not as a background setting, but as a governed institutional space within which children's experiences of well-being and ill-being are produced and negotiated. The focus is on how children themselves make sense of rescue, care, and everyday institutional life, rather than on evaluating institutional effectiveness against policy benchmarks.

Research Design and Analytical Orientation

The study adopts a qualitative research design to examine how children evaluate care, constraint, and future possibility within institutional contexts. Rather than measuring well-being as a predefined construct, the research seeks to understand how children evaluate their lives, relationships, and futures within institutional care.

Data were generated through in-depth, semi-structured interviews, allowing participants to narrate their experiences in their own terms while still engaging with key thematic areas relevant to child protection, work, care, and future aspirations. This approach aligns with public health traditions that emphasise lived experience and meaning-making in contexts of vulnerability, while also allowing for systematic thematic analysis.

The analytical orientation of the study was inductive and interpretive. Rather than applying predefined categories of well-being or testing specific hypotheses, analysis began with close engagement with children's narratives of work, rescue, and institutional life. Patterns and themes were identified through repeated reading of interviews, with attention to how children themselves evaluated care, constraint, and future possibility. These themes were subsequently interpreted in relation to the conceptual framework, allowing well-being and ill-being to be understood as relational and contextually embedded experiences rather than as fixed outcomes.

Participants and Institutional Setting

The study was conducted across two state-recognised, child-friendly Child Care Institutions in Delhi: a Child Care Institution for Girls (CCI-G) and a Child Care Institution for Boys (CCI-B). Both institutions operated under the

same statutory child protection framework but catered to different populations, sex-wise. CCI-G functioned as a non-custodial, long-stay home where children could also stay longer till attaining adulthood based on the Order by the Child Welfare Committee Members. The CCI-B, on the other hand, was a short-stay home that restored children to their parents as soon as possible. Twenty in-depth interviews were conducted with children (primary research participants) comprising ten girls and ten boys residing in the respective CCIs (see Table 1).

Table 1. Detailed Profile of the Children (Primary Research Participants)

Characteristic	Girls (CCI-G, n = 10)	Boys (CCI-B, n = 10)
Age range at interview	12-18 years	14-18 years
States / districts of origin	Jharkhand (Latehar, Simdega, Godda, Garhwa); Assam (Dibrugarh, Tezpur, Barpeta); Rajasthan (Dausa); Haryana (Rewari)	Uttar Pradesh (Bijnor, Hardoi); Bihar (Purnia, Nalanda, Samastipur, Bhojpur); Delhi (North-East district)
Primary reasons for trafficking / entry into work	Domestic labour; forced marriage; prostitution; begging; rag-picking	Bakery work; shoe factory work; carpentry; hospitality work; multi-site industrial labour
Family background	Small/marginal farmers, tea garden workers, agricultural labourers, casual labour; parental absence or illness in some cases	Casual labourers, small vendors, rickshaw pullers, artisans; some parental death or instability
Educational status prior to Child Care Institution	No schooling to Class 7 (mostly Class 3-5)	Class 2 to Class 10 (mostly Class 6-9)
Family size	3-8 members	3-16 members
Workplace location prior to rescue	Urban households; private homes; informal workplaces; streets	Bakeries; shoe factories; carpentry sites; hotels; multi-city industrial sites
Time spent working prior to rescue	Few days to 10 years (mostly 1-4 years)	Few months to over 7 years
Remuneration prior to rescue	Mostly unpaid or negligible; food/shelter instead of wages	₹2,500-₹7,500 per month, sometimes with overtime or advances
Process of rescue	Walked out; police rescue from stations/workplaces; third-party reporting	Formal rescue operations directly from factories/worksites
Status of rehabilitation at fieldwork	Restored to family or residing in CCI-G	Restored to family in all cases
Institutional placement	Child Care Institution for Girls	Child Care Institution for Boys
Educational/vocational engagement during stay at the Child Care Institution	Enrolled in formal schooling and vocational training	Enrolled in vocational pathways

In addition to these in-depth interviews with children, the study involved considered interactions with institutional staff and systematic observation of routine administrative processes within the two Child Care Institutions, including staff meetings and everyday practices through which children's cases were reviewed and decisions regarding care, movement, and restoration were made. This also included engagement with Child Welfare Committee (CWC) members during proceedings whenever each of the twenty children were produced before the concerned Bench. What was interesting to note was that while both CWCs operated under the same statutory framework, variations in interpretation of the law, discretion, and procedural emphasis were evident. Such administrative differences shaped children's experiences of institutional life, influencing the pace of decision-making, access to schooling or work opportunities, and perceptions of uncertainty or waiting. Rather than treating CWCs as uniform legal bodies, the study attends to how these institutional practices formed part of the governing context within which children evaluated care and intervention.

The deep engagement with children were complemented by extensive informal conversations and participant observation within both Child Care Institutions, involving a much larger number of staff and children than those formally interviewed. This multi-sited and multi-actor engagement enabled analytic triangulation and provided a robust institutional context for interpreting children's narratives of work, rescue, care, and well-being.

Data Collection: Interviews and Narrative Accounts

Interviews were conducted in a language familiar to the participants, with sensitivity to age, emotional comfort, and institutional constraints. The interview guide was flexible and open-ended. Interviews explored children's experiences across both key locations and critical processes, including:

- parental and natal homes (experiences of family life, care, obligation, and early work)
- processes of being trafficked or moved to the city (experiences of transition, deception, coercion, or accompaniment);
- workplace environments in the city (labour conditions, skills, discipline, remuneration, and gendered expectations);
- processes of rescue and entry into institutional care (interactions with authorities, emotions surrounding rescue, and immediate aftermath);

• life within Child Care Institutions (everyday routines, relationships, rules, schooling, and future aspirations). This distinction between experiences tied to specific locations and those shaped by transitional processes informed the analysis, allowing attention to how well-being and ill-being were produced not only in particular settings, but also through moments of movement, rupture, and institutional entry.

Rather than treating interviews as instruments for extracting factual information, they were approached as narrative encounters, in which children actively interpreted and evaluated their experiences through different life phases. Attention was paid not only to what children said, but to how they framed their stories – what they emphasised, justified, or left ambiguous. This approach recognises children as interpretive agents, whose accounts are shaped by institutional norms, moral expectations, and strategic self-presentation, as discussed in section A. As such, narratives were analysed as ‘situated expressions’ rather than transparent reflections of internal states.

Ethical Considerations and Reflexivity

Research with children in institutional care raises significant ethical concerns related to vulnerability, consent, and power asymmetries. Ethical approval was obtained through appropriate institutional processes, and permission to conduct the study was secured from the relevant child protection authorities and institutional administrators. Informed consent (assent for children) was obtained in a manner appropriate to participants’ age and circumstances, with careful explanation of the study’s purpose, the voluntary nature of participation, and the right to withdraw at any point. Interviews were conducted with attention to emotional safety, and no participant was asked to recount traumatic events in detail unless they chose to do so. Importantly, the study adopts a non-pathologising ethical stance, informed by public health critiques of trauma-centred approaches. Distress was not assumed to be evidence of psychological disorder, nor was silence interpreted as absence of experience. Ethical reflexivity extended beyond procedural consent to include ongoing attentiveness to how research participation itself might intersect with institutional surveillance or expectations of compliance.

Analytic Process and Thematic Development

Data analysis proceeded through multiple stages of close reading and thematic coding. The analysis was grounded in detailed, verbatim transcripts of all interviews, with codes developed iteratively across complete case narratives prior to abstraction. Initial coding focused on recurring narrative elements related to safety, care, restriction, relationships, schooling, and future orientation. Through iterative comparison across interviews, these codes were refined into broader analytic categories that captured how children experienced and evaluated their lives across different phases.

The final analytic structure was not imposed in advance but emerged through sustained engagement with the data, guided by the conceptual framework established in the first section. Particular attention was paid to moments where experiences of well-being and ill-being coexisted or conflicted – for example, where children expressed gratitude for safety alongside feelings of confinement, or hope through education alongside anxiety about post-institutional life.

Positioning the Findings

By situating children’s narratives within the institutional, relational, and temporal dimensions outlined in section A, this methodological approach enables a nuanced analysis of how rescue and care produce complex experiences of well-being and ill-being. The findings presented in the next section should therefore be read not as evaluations of institutional success or failure, but as accounts of how children live, interpret, and negotiate institutional care. Together, sections A and B establish the conceptual and methodological foundations for the discussion that follows, in which the empirical themes are analysed in relation to governance, gender, labour histories, and future-making within child protection systems.

Fieldwork challenges and Limitations

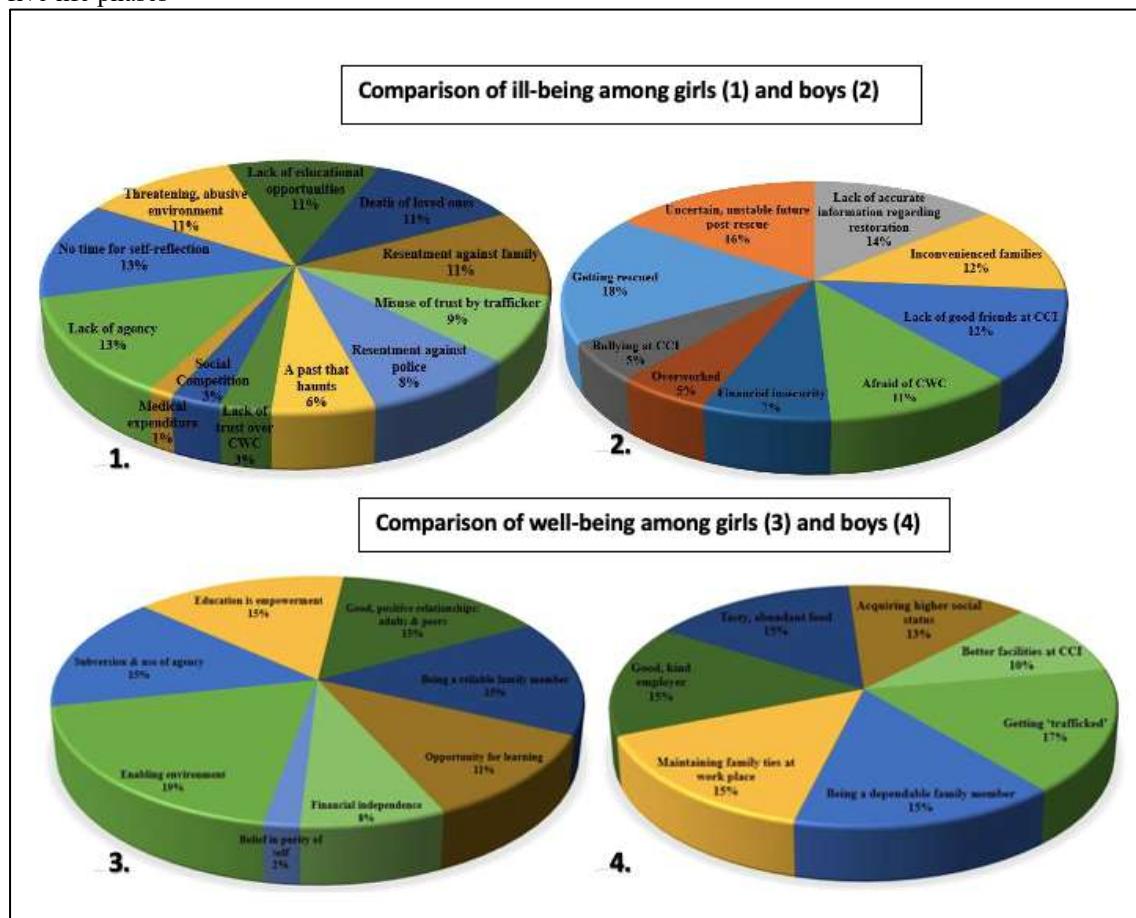
Conducting fieldwork within institutional child protection settings posed specific practical and ethical challenges. Access to children was mediated through institutional authorities, shaping the conditions under which interviews and observations could take place. Institutional routines, surveillance, and administrative oversight influenced both children’s willingness to speak and the temporal rhythm of fieldwork. These constraints did not invalidate children’s accounts, but they structured how experiences of care, rescue, and waiting were articulated, requiring analytic attention to context when interpreting narratives of well-being and ill-being.

The study has several limitations that should be acknowledged. First, findings are based on qualitative data from two Child Care Institutions and are not intended to be statistically generalisable. Second, children’s accounts reflect experiences narrated within institutional contexts and may differ from retrospective accounts produced after exit. These limitations are intrinsic to qualitative research in regulated institutional settings and do not detract from the study’s analytic aim of understanding how children experience and interpret well-being and ill-being within systems of rescue and care.

C. Findings: Gendered Pathways of Well-Being and Ill-Being Across Phases of Rescue and Care

This section analyses children's narrated experiences of well-being and ill-being across five life phases – parental home, movement and trafficking, workplace, rescue, and institutional care – through a comparative, gendered lens. Figure 1 presents an aggregated visual summary of the factors girls and boys themselves associated with well-being and ill-being across these phases. Rather than depicting outcomes at a single site, the figure synthesises children's evaluative judgements across their life trajectories, allowing shared domains and gendered divergences to be examined together. The discussion that follows uses Figure 1 as an analytic entry point, situating these aggregate patterns within phase-specific experiences and institutional encounters. As mentioned earlier, well-being and ill-being are treated not as oppositional states but as coexisting and shifting experiences, produced relationally and through governing practices.

Figure 1: Comparative distribution of perceived ill-being (1, 2) & well-being (3, 4) among girls and boys across five life phases



Reading Patterns, Not Episodes: An Analytic Orientation to the Findings Across Five Life Phases

The findings are organised around patterns that emerge across five analytically distinct life phases – parental homes, mobility, workplaces, rescue, and institutional care – rather than as episodic or linear narratives. This phase-based approach allows comparison across children's accounts while retaining attention to how experiences of well-being and ill-being shift relationally and temporally. Figure 1 summarises children's evaluative assessments across these phases and is used as an analytic guide rather than a descriptive tally. The analysis that follows draws selectively on children's narratives to illustrate recurring logics and contrasts, rather than presenting exhaustive life histories. Quotations are therefore used strategically to illuminate shared patterns, points of divergence, and gendered differences in how children interpreted work, rescue, and institutional care, without treating any single account as representative or complete.

Phase I: Parental Homes as Unequal Starting Points

Children's recollections of life at their parental homes reveal that well-being and ill-being were unevenly distributed even before migration, work, or rescue entered their lives. For both boys and girls, the parental home was rarely remembered as a space of uncomplicated care. However, the dominant sources of ill-being differed sharply by gender, shaping how children later interpreted mobility, work, and state intervention.

For a majority of girls, the parental home was recalled primarily as a site of relational constraint and emotional vulnerability. Girls spoke of neglect, verbal hostility, physical violence, and, in several cases, sexual abuse within the household or extended family. These experiences were often compounded by expectations of early marriage, withdrawal from schooling, and heavy domestic responsibilities. For such girls, leaving home was not narrated as

an act of deviance or escape from discipline, but as a strategy to survive untenable conditions. As Rani explained in her story, her parents, especially her father, really beat her up on the slightest of pretexts, even “held a knife to her throat.” Likewise, Priti was also forced to do household chores at home and endure an abusive, alcoholic step-mother. So in this sense, the parental home functioned less as a protective space and more as an environment from which girls sought relief, even if that relief was uncertain and temporary.

Boys’ accounts, by contrast, were dominated less by narratives of abuse and more by economic precarity and moral obligation at parental home, like for Azhar or Amit. Most boys described growing up in households marked by chronic poverty, debt, crop failure, illness of adult family members, or lack of stable parental employment. Their movement into work was framed not as coercion alone, but as a contribution to family survival and a means of acquiring social value. Several boys expressed pride in having supported their families financially, even when acknowledging the hardships of work. The parental home, in these accounts, was not necessarily hostile, but it was experienced as a place where needs exceeded resources, making migration for work appear necessary and, in some cases, inevitable.

These gendered differences are critical for understanding how children later interpreted subsequent phases of their lives. Girls, who left homes associated with harm, often evaluated institutional care and schooling through the lens of relative safety and stability, even when these were accompanied by some restriction. Boys who left homes associated with economic responsibility evaluated rescue and institutional placement through the lens of interruption, as these interventions disrupted their capacity to work and fulfil familial obligations. Thus, the parental home did not function as a neutral baseline from which rescue uniformly improved children’s lives. Instead, it constituted an unequal starting point that shaped children’s aspirations, expectations, and assessments of well-being across all later phases.

Phase-II: Mobility, Work, and the Meaning of Leaving Home

Children’s movement away from parental homes was not experienced uniformly as loss, coercion, or victimhood. Instead, mobility emerged as a gendered and morally inflected transition, shaped by children’s prior circumstances and by how work was imagined within their social worlds. For both boys and girls, leaving home marked a decisive break from childhood as conventionally defined, but the meanings attached to this break diverged sharply. For a majority of boys, mobility was narrated as a purposeful and future-oriented decision, even when facilitated by intermediaries or employers. Boys described travelling to the city as a means to earn, learn skills, and assume responsibility within their families. Movement was associated with growth, competence, and the acquisition of social value, rather than with victimhood alone. Several boys spoke of their journeys with a sense of pride, recalling their ability to navigate unfamiliar spaces, adapt to work routines, and send money home. In these narratives, work functioned as a marker of maturity and masculine responsibility, repositioning boys not as dependents but as contributors, like for 17-year-old Aadarsh or Pawan, both of whom had joined small businesses in the city to support family.

Girls’ narratives of mobility, by contrast, were shaped primarily by escape from harm rather than pursuit of opportunity. Most girls did not describe leaving home as a calculated economic strategy, but as an urgent response to abuse, neglect, or imminent threats such as forced marriage. For instance, in the case of Arti, who felt betrayed and exploited by family and relatives (including sexually) right until the time she reached the Child Care Institution. The girls’ journeys were often solitary, improvised, and marked by fear and uncertainty. While they exercised agency in leaving, this agency was constrained by limited options and was retrospectively reclassified by institutions as evidence of vulnerability rather than resilience. Mobility that signified ‘competence and initiative’ in boys was more readily framed as ‘risk and exposure’ in girls.

These gendered interpretations of movement resonate with broader critiques of child protection and schooling regimes that treat children’s mobility as inherently suspect when it deviates from normative trajectories of education and family dependence. In this study, mobility did not uniformly signal exploitation; rather, it functioned as a transitional strategy through which children sought dignity, safety, or contribution under constrained circumstances. How this movement was later interpreted – by employers, rescue teams, and administrative bodies – played a decisive role in shaping children’s subsequent experiences of well-being and ill-being.

Phase III: Workplaces and Gendered Experiences of Recognition and Harm

Children’s experiences in workplaces illustrate how well-being and ill-being were produced through relationships and everyday practices, rather than determined solely by the presence or absence of labour. While exploitation was common across accounts, boys and girls described workplaces differently, shaping how they later evaluated rescue and institutional care.

For many boys, workplaces were remembered as spaces of conditional recognition. Despite long hours, low wages, and difficult working conditions, boys often emphasised learning skills, earning income, and gaining a sense of competence. Work structured daily life and affirmed their role as contributors to family survival. As a result, employment was frequently understood not simply as exposure to harm, but as necessary and meaningful, even when it involved physical risk or uncertainty. This aligns with another research from India showing that children engaged in agricultural labour actively negotiate risk in relation to family obligation and livelihood needs, rather than simply avoiding hazardous work (Morrow & Vennam, 2012). Several boys contrasted the discipline

and purpose of work with the perceived stagnation of institutional care, describing employment as meaningful because it allowed them to remain productive. While ill-being at work was acknowledged, it was often framed as temporary or manageable when compared to the disruption caused by rescue.

Girls' experiences at workplaces were dominated by isolation, surveillance, and abuse, particularly in domestic labour and sexually exploitative contexts. Worksites doubled as living spaces, erasing boundaries between labour and rest and intensifying dependence on employers like for Sunidhi, who lived with her employers as domestic help since her childhood, or for Priti, who remembered working from 7am-2am every day (19 hours!). Overall the girls described restricted mobility, constant monitoring, verbal degradation, physical violence, and sexual coercion in different permutations and combinations. Unlike boys, girls rarely described work as conferring dignity or social value. Instead, employment amplified their vulnerability and reinforced asymmetrical power relations that left little room for negotiation or exit.

These contrasting experiences shaped children's retrospective evaluations of work in critical ways. For boys, work was often remembered as simultaneously exploitative yet meaningful while for girls, work was overwhelmingly associated with fear and harm. This divergence helps explain why rescue was experienced as a profound disruption by many boys, but as a potential relief by several girls, even when followed by somewhat restrictive institutional regimes even at the non-custodial CCI-G.

Phase IV: Rescue, Re-trafficking, and Administrative Encounters

Rescue emerged as one of the most consequential and contested phases in children's narratives, particularly for boys. Contrary to policy framings that position rescue as an unambiguous moment of protection, a dominant pattern among boys was the experience of rescue as a sudden and disorienting disruption. Removal from workplaces was often described as forceful and unexpected, accompanied by feelings of criminalisation and loss of control. For many boys, rescue interrupted not only their income but also their sense of purpose, competence, and contribution to family survival. As discussed elsewhere drawing on the same doctoral fieldwork, rescue often operated not only as a protective intervention but also as a governing practice that produced fear, disruption, and new forms of vulnerability for children (Anand, 2015).

Following rescue, a majority of boys characterised institutional stay as a period of prolonged waiting – waiting for production before administrative authorities, waiting for decisions to be made on their behalf, and waiting for permission to return home. This phase was experienced less as a transition and more as temporal suspension, marked by uncertainty and restricted agency. Within this suspended time, many boys expressed a strong desire to resume work as soon as possible. While such aspirations are frequently described in policy discourse as re-trafficking, boys themselves framed them as attempts to restore normalcy, responsibility, and social value rather than as a return to harm. These accounts complicate assumptions that removal from labour necessarily aligns with children's own understandings of well-being.

Girls' experiences of rescue followed a markedly different trajectory, shaped by the invisibilisation of their labour and by gendered calibrations of harm within households and informal economies. For many girls, rescue did not occur through proactive enforcement actions, but through processes that required persistence, risk, and initiative on their part. Several girls described situations in which employers, clients, or intermediaries were unwilling to release them precisely because their labour – often domestic or sexual – was rendered socially invisible and economically valuable. In these contexts, police or administrative intervention was delayed, inconsistent, or contingent on girls' own attempts to escape or seek help.

Rani's case illustrates the precariousness of such encounters. After approaching the police to report her situation, she was handed back to her agent, effectively returning her to exploitation. Swati's experience similarly reflects the self-initiated nature of many girls' exits: she attempted to leave exploitative conditions independently, with institutional intervention occurring only after she had already taken steps to flee. In these accounts, rescue was not experienced as a dramatic extraction, like in the case of boys, but as an interception that followed girls' own acts of decision-making and movement. Although the moment of rescue itself was often frightening and confusing, it was retrospectively evaluated as a turning point insofar as it created distance from immediate harm. This did not imply uncritical acceptance of state intervention. Rather, rescue was assessed in relative terms – as preferable to the abusive or coercive conditions girls had already sought to escape.

Across both groups, administrative encounters – particularly appearances before Child Welfare Committees – played a decisive role in shaping experiences of ill-being. Children's accounts highlighted how discretion, tone, and procedural delays mattered as much as formal outcomes. Encounters characterised by moral judgement, intimidation, or prolonged uncertainty intensified distress, while more empathetic or transparent interactions mitigated anxiety without necessarily altering decisions. Taken together, rescue did not function as a singular corrective moment. Instead, it operated as a differentiated and gendered governing intervention that reordered children's time, constrained their agency, and redefined their futures – sometimes reducing harm, sometimes producing new forms of ill-being.

Phase V: Institutional Care, Time, and the Regulation of Futures

Children's experiences of institutional care further underscore how well-being and ill-being were produced through temporal and relational regulation rather than through provision of services alone. For both boys and girls,

Child Care Institutions were sites of safety, surveillance, routine, and constraint, but their meanings diverged sharply along gendered lines.

For a majority of boys, institutional care was experienced as temporary containment. Boys frequently described their stay at Child Care Institutions as something to be “endured” until restoration to their families became possible. Daily routines, schooling, and vocational activities were often perceived as irrelevant interruptions rather than opportunities, particularly when they did not align with boys’ immediate economic responsibilities. The future, for many boys, remained oriented towards work, and institutional care was evaluated negatively insofar as it delayed that return. Well-being in this phase was therefore limited and fragile, shaped more by anticipation of exit than by engagement with institutional life.

Girls’ experiences of institutional care were more experienced as relative relief under regulation, and, in some cases, cautiously positive. For several girls, Child Care Institutions offered relative stability, predictability, and access to schooling – resources that had been unavailable or unsafe in earlier phases of their lives. Participation in daily routines and relationships with staff sometimes enabled girls to imagine alternative futures, even as institutional life imposed certain rules and curtailed autonomy. Well-being here was conditional and regulated, emerging through compliance with institutional expectations and alignment with normative trajectories of education and future stability.

D. DISCUSSION AND CONCLUSION

This study examined children’s experiences of well-being and ill-being across multiple phases of parental homes, mobility, work, rescue, and institutional care. Rather than treating rescue or institutional placement as endpoints of protection, the analysis traced how children evaluated these interventions relationally and over time. The findings demonstrate that well-being and ill-being were not produced as linear outcomes of policy intervention, but emerged through everyday practices of care, control, recognition, and waiting within families, workplaces, and institutions.

The originality of this study lies not in demonstrating that children’s experiences of work, rescue, and institutional care are complex – a point well established in existing literature – but in showing how children themselves comparatively evaluate these experiences across time. By tracing children’s assessments of well-being and ill-being across multiple life phases, the analysis reveals dimensions of protection that remain obscured in site-specific or outcome-based studies. In particular, the findings show that rescue and institutional care are experienced not only as spatial relocation but as temporal interventions that interrupt, suspend, and redirect children’s sense of purpose and future possibility.

The analysis advances a relational understanding of well-being by foregrounding children’s own evaluative accounts, consistent with White’s conceptualisation of well-being as socially produced rather than individually possessed. Children’s assessments of care and harm were shaped by relationships with family members, employers, caregivers, and officials, as well as by the degree of recognition and purpose afforded to them within these relationships. Experiences of ill-being were not limited to exposure to abuse or deprivation, but also arose through misrecognition, moral judgement, and restricted autonomy, even in contexts designed to provide protection.

The findings also extend analyses of governance by showing how child protection operates as a lived and temporal practice rather than solely a legal or administrative framework. Drawing on Foucauldian notions of governmentality, the study illustrates how norms of safety, rehabilitation, and “appropriate” childhood were enacted through routine institutional practices, classification, and discretionary decision-making. Children’s experiences of care varied not only by legal status but by how institutional authority was exercised in everyday interactions, producing uneven experiences of well-being and ill-being within the same regulatory regime. This attention to governance as lived practice resonates with anthropological accounts of power embedded in the ordinary, highlighting how institutional care can simultaneously provide safety and generate new forms of constraint.

Gendered patterns across the findings further demonstrate that children’s evaluations of protection were anchored in their prior life histories and future orientations. Boys’ early incorporation into economic responsibility shaped their experience of rescue and institutionalisation as temporal suspension, particularly when interventions curtailed their ability to work and contribute to family survival. Girls’ experiences, by contrast, were shaped by prior exposure to abuse and constraint, rendering institutional care comparatively safer, though still highly regulated. These findings align with Nieuwenhuys’ critique of universalised child protection frameworks by demonstrating how standardised interventions obscure the moral economies and social responsibilities that structure children’s lives. For some children, particularly boys, the desire to return to work reflected not failure of rehabilitation but a search for purpose, recognition, and continuity.

From an applied psychology and public health perspective, the study contributes an approach to well-being that moves beyond outcome-based measurement toward an analysis of lived experience within institutional contexts. Future research could extend this approach by examining post-institutional trajectories and exploring alternative forms of care that better accommodate children’s diverse aspirations, responsibilities, and life courses.

REFERENCES

1. Anand, S. (2017). Reconstructing child trafficking and rescue through the perceptions of well-being and ill-being
2. of children: A study of shelter homes in Delhi (Unpublished PhD thesis). Jawaharlal Nehru University, New Delhi, India.
3. Anand, S. (2015). Need to study perceptions of well-being and ill-being of trafficked and rescued children. *Social Action*, 65(4), 337-350.
4. Balagopalan, S. (2008). Memories of tomorrow: Children, labor, and the panacea of formal schooling. *Journal of the History of Childhood and Youth*, 1(2), 267-285. <https://doi.org/10.1353/hcy.0.0005>.
5. Balagopalan, S. (2014). Inhabiting “childhood”: Children, labour, and schooling in postcolonial India. London: Palgrave Macmillan.
6. Ben-Arieh, A. (2008). The child indicators movement: Past, present, and future. *Child Indicators Research*, 1, 3-16.
7. <https://link.springer.com/article/10.1007/s12187-007-9003-1>.
8. Bradshaw, J., Richardson, D. An Index of Child Well-Being in Europe. *Child Indicators Research* (2), 319-351 (2009). <https://doi.org/10.1007/s12187-009-9037-7>.
9. Das, V. (2007). Life and words: Violence and the descent into the ordinary. Berkeley: University of California Press.
10. Foucault, M. (1991). Governmentality. In G. Burchell, C. Gordon, & P. Miller (Eds.), *The Foucault effect: Studies in governmentality* (pp. 87-104). London: Harvester Wheatsheaf.
11. ILO. (2013). Marking progress against child labour: Global estimates and trends 2000-2012. Geneva: International Labour Organization.
12. https://www.ilo.org/sites/default/files/wcmsp5/groups/public/%40ed_norm/%40ippec/documents/publication/wcms_221513.pdf.
13. International Labour Organization. (2017). Global estimates of child labour: Results and trends, 2012-2016. Geneva: ILO.
14. https://www.ilo.org/sites/default/files/wcmsp5/groups/public/%40dgreports/%40dcomm/documents/publication/wcms_575499.pdf
15. Morrow, V., & Vennam, U. (2012). Children’s responses to risk in agricultural work in Andhra Pradesh, India. *Development in Practice*, 22(4), 549-561.
16. <https://doi.org/10.1080/09614524.2012.672955>.
17. Nieuwenhuys, O. (2007). Embedding the global womb: Global child labour and the new policy agenda. *Children’s Geographies*, 5(1-2), 149-163.
18. <http://dx.doi.org/10.1080/14733280601108312>.
19. Summerfield, D. (1999). A critique of seven assumptions behind psychological trauma programmes in war-affected areas. *Social Science & Medicine*, 48(10), 1449-1462. [https://doi.org/10.1016/S0277-9536\(98\)00450-X](https://doi.org/10.1016/S0277-9536(98)00450-X).
20. The Child and Adolescent Labour (Prohibition and Regulation) Amendment Act, 2016. New Delhi: Ministry of Labour and Employment. Government of India. <https://labour.gov.in/en/childlabour/child-labour-acts-and-rules/1000?utm>.
21. The Juvenile Justice (Care and Protection of Children) Act 2000. Government of India. https://www.ncpcr.gov.in/uploads/165648704562bbfc85b1b06_juvenile-justice-care-and-protection-of-children-act-2000.pdf?utm.
22. The Juvenile Justice (Care and Protection of Children) Act 2015. Government of India. <https://www.indiacode.nic.in/bitstream/123456789/2148/1/a2016-2.pdf?utm>.
23. White, S. C. (2017). Relational wellbeing: Re-centring the politics of happiness, policy and the self. *Policy & Politics*, 45(2), 121-136. <https://doi.org/10.1332/030557317X14866576265970>.
24. World Health Organization (1948). Constitution of the World Health Organization. Geneva: WHO. <https://www.who.int/about/governance/constitution?utm>.
25. World Health Organization. (1998). WHOQOL: Measuring quality of life. Geneva: WHO. <https://iris.who.int/server/api/core/bitstreams/4c5cd94a-599e-450f-9141-4a21a7b74849/content>