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Ipsos

STUDY ON

Utilisation of Public Spaces by Young Children, their Caregivers and Pregnant Women

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Title

Study on Utilisation of Public Spaces by Young Children, Their Caregivers and Pregnant Women

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Executive Summary

Children are an important demographic group, constituting about 34% of urban population in India, but still their interests and their developmental needs are usually not kept in mind while developing urban infrastructure. Absence of infrastructure related to young children, restricts their movement and growth. Government of India is currently working on various projects to develop child-friendly urban infrastructure through its ongoing missions. However, because of unsafe and restricted urban spaces, young children are forced to stay indoors and are unable to play with peer groups in natural environments. Therefore, it is important to understand the issues surrounding the use of such spaces by young children, their caregivers and pregnant women to find appropriate solutions. ICLEI South Asia (SA), with support from Ipsos Research Pvt. Ltd, conducted an independent study to understand the usage of public spaces by young children, their caregivers and pregnant women. The study has been funded by the Van Leer Foundation and has also been reviewed regularly by a technical advisory group (TAG) comprising experts from the sector.

The study was conducted in 18 identified cities using household surveys by assessing and evaluating trends in utilizing urban public spaces by young children their caregivers and pregnant women. In order to make the study geographically representative, surveys were conducted in northern, southern, eastern, western, central and north eastern cities of India covering population sizes of all ranges i.e. greater than 40 lakhs, between 10 lakhs- 40 lakhs and less than 10 lakhs. The identified cities for conducting the study included Delhi, Chennai, Kolkata, Mumbai, Indore, Bangalore, Lucknow, Vijayawada, Raipur, Surat, Chandigarh, Guwahati, Jaipur, Shimla, Bhubaneshwar, Jhansi, Shillong and Dimapur. The conceptualization of the study focused on the following:

- Literature review
- Multi-city survey
- Demographic representation
- Survey tools- household surveys, in-depth interviews with city officials
- Household sample size- 10,800 excluding the pre test surveys and pilot surveys
- Development of questionnaires
- Selection of study partners
- Data analysis and development of recommendations/ strategies
- Knowledge Dissemination through in person workshops and webinars

Prior to the main household surveys, the pretesting and pilot exercise helped to refine the questions and survey responses, check language errors, time taken to conduct the surveys, understand field level changes needed. The study team developed reports documented learnings from pre-test and pilot surveys.

The household surveys focused on identifying the reasons for increased or decreased usage of public spaces by young children, their caregivers and pregnant women showcasing the importance, status, location, accessibility etc. of the public spaces. The household surveys were conducted with the help of field staff who were trained through training programs. The field staff used CAPI tool to document the responses from households as well as municipal staff. The household surveys indicated that in most of the cities the availability of public spaces was not an issue, though the quality of public space was considered an issue due to poor accessibility, safety, inadequate lighting etc. The suggestions from the household respondents included the need for safe spaces for pedestrians, adequate parking areas outside public spaces, easy to access more bus stops, separate sideways and walkways etc. should be provided.

The respondents were chosen randomly but it was ensured that each respondent was a caregiver of a young child or a pregnant lady. In addition to the household surveys with primary caregivers, one to one interview with city officials, municipal councilors were conducted to understand the ongoing and upcoming programs specific to development of public spaces with a focus on young children, their caregivers and pregnant women. A guide was also prepared to guide the field team while conducting interviews of municipal officers.

The findings of the surveys indicated that the respondents for the household surveys majorly (i.e. 85%) belonged to the age group of 22 to 40 years. It was reported that on an average the caregivers spend 8 hours per week with their young children, and more than 50% respondents spend 1-3 hours outdoors with their young children in a week. The surveys also focused on getting the views of the respondents about the availability of public spaces. The data showed that 83% of the respondents felt that there are sufficient public spaces including hospitals available for them and their young children, while 6% of the respondents stated that their young children played in informal spaces such as garages, terraces, parking areas etc. majorly due to the absence of accessible public spaces around their localities.

The surveys also specified that there was an average of two parks and playgrounds available for young children within 10-15 minutes of walkable distance from their home in all the cities. The data also showed that the majority of the caregivers visit creches every day to drop and pick their young children in order to introduce them to surroundings, before the beginning of the formal schooling though the usage of parks and playgrounds by young children is based on the choice of the caregiver. The surveys have also specified that walking is a preferred mode and hence more than 80% of the respondents said that they walked to reach parks, playgrounds, creches, anganwaadi's etc. while more than half of the respondents also walked to reach hospitals.

The usage of public transport to access public spaces has been reported very less probably due to unavailability of comfortable public transport in all the cities. The pattern of transport is similar across all the cities, though it varied while accessing hospitals/ medical facilities. The respondents also expressed their views regarding the availability of functional footpaths which seemed to be a major issue, as only less than half the respondents had access to functional footpaths majorly due to the existing broken or encroached footpaths. Safety of the young children and their caregivers in public spaces was also been noted as an issue during the study majorly due to inadequate lighting, absence of CCTV cameras, security personnels, broken fencing/ walls, uncontrolled vehicular traffic etc.

City	Availability	Accessibility	Safety	Feature and Comfort
Chennai				
Kolkata				
Delhi				
Bengaluru				
Indore				
Jaipur				
Mumbai				
Lucknow				
Vijayawada				
Raipur				
Surat				
Shimla				
Shillong				
Bhubaneswar				
Guwahati				
Chandigarh				
Dimapur				
Jhansi				

The above figure shows the perception of the respondents in each city against the parameters of availability, accessibility safety, feature and comfort ranging from positive to negative. The darker shade indicates the most positive perception. Through the surveys, the study has also attempted to capture the usage of digital devices by the young children and the impact on their behavior and also to understand the difference between the usage of digital gadgets of working mothers and non-working mothers of the young children.

The household surveys were followed by in-depth interviews with city officials during which it was found that the cities are mostly focusing on developing open spaces for teenagers such as football basketball courts etc. The discussions with city officials indicated the need of community engagement for all projects and also building the capacity of city staff to cater to the needs of young children.

As a part of these discussions and the study, existing barriers and opportunities were identified at city level which was followed by development of strategies/ recommendations to increase the usage of public spaces by young children and caregivers. The study has noted detailed cases from the cities where surveys were conducted and highlighted the perception of the users towards public spaces, challenges faced by them and their expectations. The strategies formulated as a part of the study focused on the following:

- Need for integration of national level policies at state and city level
- Access to funding- Apart from government budget, cities should explore opportunities under CSR funds for developing dedicated public spaces for young children, their caregivers and pregnant women.
- Planning and designing- mapping, optimally designing/ redesigning safe public spaces at city level and neighborhood level
- Infrastructure improvement- upgradation of pedestrian infrastructure, adequate public transport, improving last mile connectivity
- Monitoring and evaluation- development of a low cost easy to operate measuring monitoring framework
- Initiating the change- identification of lighthouse cities to enable replication by other cities
- Engaging with communities- identification of active citizens, youth, community champions for engaging with them
- Awareness regarding dedicated areas for young children, their caregivers and pregnant women- Such initiatives should be conducted for community as well as for city officials who are involved in project planning and executing stage.

The study recommendations based on the analysis aim to facilitate the policymakers in India to take informed decisions on public space design addressing the needs of children and their caregivers. A wide dissemination of the findings through in person workshops (domestic and international platforms) and webinars was organized as a part of the study as per the following schedule:

1. Domestic workshops were organized at Guwahati, Kochi, Delhi and Panaji
2. International dissemination was done through separate sessions organized at Asia Pacific Climate Week and COP28 Dubai

The dissemination was done amongst the city officials, partners in order to seek their views on the study recommendations and also to validate the ground inferences and findings.

Since this is an independent study, first of its kind covering considerable parameters and aspects specific to the target group, it is envisioned that the study will help the cities and decision makers and also practitioners to use and validate the existing situation and usage of their public spaces. It is also important to agree that cities need encouragement and inspiration, hence support from visionary partners, agencies will help them initiate and continue their work in the right direction to make our cities responsive to the needs of this focus group.

1.0 Introduction

1.1 Background

Children account for around 34% of the urban population in India[1]. There are around 472 million children (0-18 years) overall in the country, making up about 39% of the total population (NIUA, 2018); 138.9 million or 29.4% are in the age group of 0-5 years (NIUA, 2018). Around 37.2% of the children i.e. 26.6 million, live in urban areas, and 28.5% of them are under five years old (NIUA, 2018).

They are an important demographic group, but the interests of children and their developmental needs are not usually kept in mind while developing urban infrastructure. According to one study by the World Research Institute[2], children are often under-prioritized or even disregarded in urban planning and design.

The Government of India is working on various projects to develop child-friendly urban infrastructure. As of now, the lack of child-friendly infrastructure hampers their movement and growth in the required manner. Young children construct an understanding of the world around them based on external stimuli. However, because of unsafe and restricted urban spaces, they are forced to stay indoors and are unable to play with peer groups in natural environments that encourage a diversity of experiences and aid brain development[3]. Therefore, it is important to understand the issues surrounding the use of such spaces by young children and to find appropriate solutions. ICLEI South Asia (SA), with support from Ipsos Research Pvt. Ltd., (Ipsos) conducted an independent study to understand the usage of public spaces by young children, their caregivers and pregnant women. The study has been funded by the Van Leer Foundation and has also been reviewed regularly by a technical advisory group (TAG) comprising experts from the sector.

1.2 Conceptualisation *of* the Study

The focus of the study involves the following aspects:

- ### How children use public spaces
  Household surveys were conducted to understand what the caregivers of young children thought about public spaces, how often they use them, what worries they have, and whether they feel the spaces are safe and well-equipped. The study also looked at understanding how public spaces such as parks, playgrounds and sidewalks etc., serve the needs of ITCs[4] in India. The survey results were used to understand how young children, their caregivers and pregnant women use public spaces. One-to-one interviews with city officials were also conducted to understand the existing and upcoming programs specific to the development of public spaces for young children and their caregivers.

- ### Multi-city survey
  Eighteen cities located in different regions in India were shortlisted for the survey, to allow for a holistic understanding of the issue.

» Demographic representation

The shortlisted cities, which represented all tiers of Indian cities based on population size, were: Delhi, Bangalore, Kolkata, Mumbai, Chennai, Indore, Lucknow, Vijayawada, Raipur, Surat, Chandigarh, Guwahati, Jaipur, Bhubaneswar, Shillong, Jhansi, Dimapur and Shimla.

» Survey Tools

The survey use two tools to record the responses of caregivers of young children and pregnant women:

- Household surveys
- In-depth interviews (ID) with city officials/ representatives

» Deciding the sample size

A sample size of 10,800 households was proposed in order to have a comprehensive sample. Extra pre-test and pilot surveys were planned to make the study more thorough and to check the questionnaire.

» Selecting Partners

ICLEI SA identified the following study partners for support in project activities.

- A Technical Advisory Group that would provide regular technical inputs.
- Ipsos that would conduct all research and ground work.

» Data Analysis and Recommendations

In order to create liveable and inclusive cities in India, it is vital to acknowledge children as an equally important demographic section and to include their specific needs in the design of urban spaces. Hence, the study recommendations (included in this report) are meant to help Indian policymakers to take informed decisions on designing public spaces that meet the needs of children and their caregivers.

» Sharing Information and Findings

As part of the study, it was decided to widely share the findings through workshops and webinars. The findings were shared with city officials for validation, and for their feedback on the study recommendations.

1.3 Study Objectives

Based on the above-mentioned aspects, ICLEI SA finalized the study's objectives as:

To conduct a national sample survey to collect and collate current data on 0-5 year old children and how they use public spaces with caregivers.

To understand how young children and their caregivers use public spaces in Indian cities.

To identify, assess, and evaluate the factors that make it easy or hard for young children and their caregivers to use public spaces in the country.

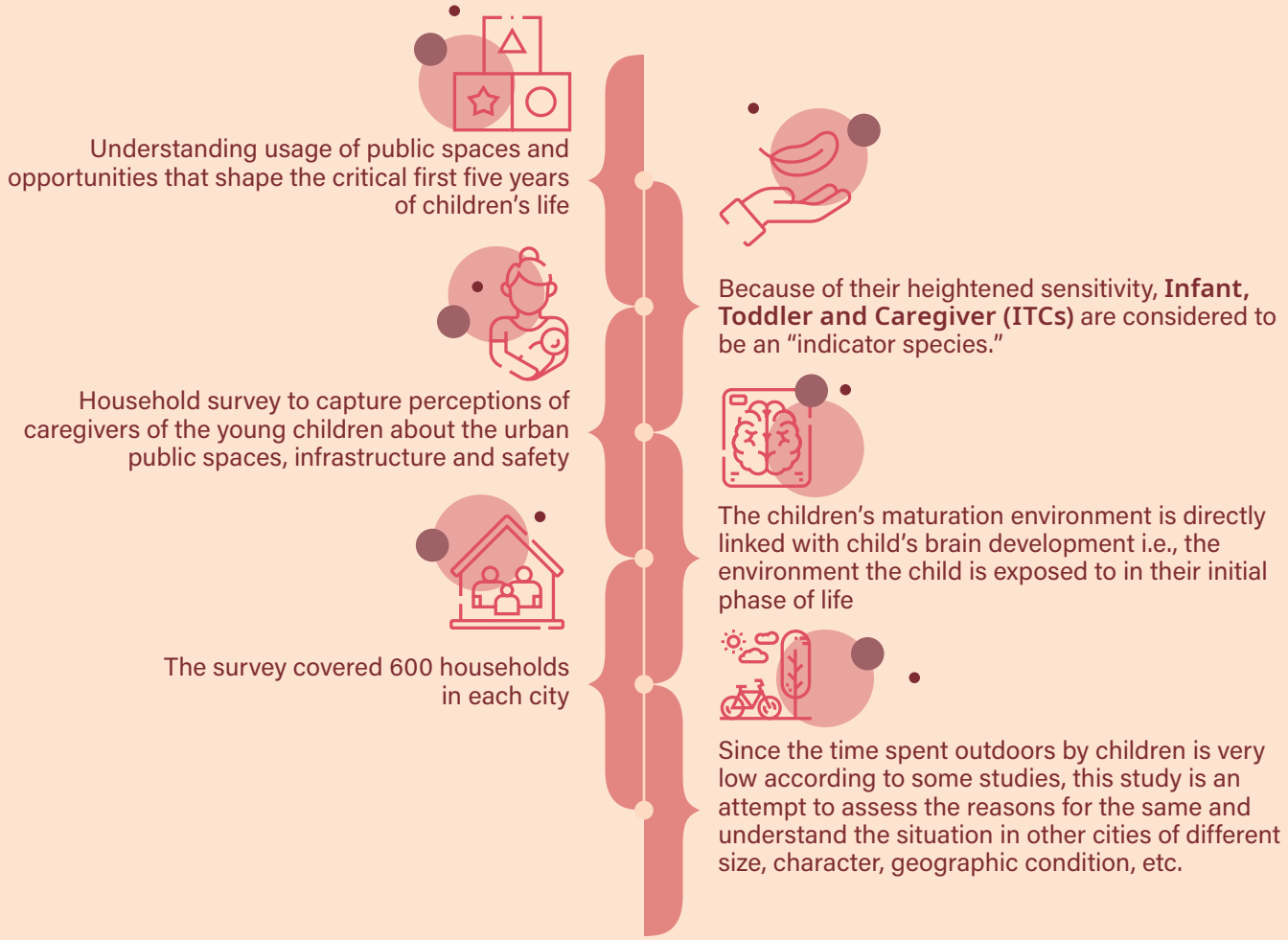
To understand and learn from best practices that would help to promote the use of public spaces by young children and their caregivers.

To provide recommendations, including localized solutions, for increasing the use of urban spaces by young children and their caregivers.

To provide possible and localised project solutions to improve urban space utilisation by young children and their caregivers.

The figure below summarises specific details about the study.

FIGURE 1 // DIFFERENT ASPECTS OF THE STUDY



1.4 The Study Team

After planning the study, ICLEI SA identified more partners to support the study. ICLEI SA managed and supervised the whole study, worked with the partners, and helped with the final analysis and in developing the recommendations/ strategies. The management team from ICLEI SA included:

Mr. Emani Kumar	Project Director
Mr. Ashish Rao Ghorpade	Project Coordinator
Ms. Avantika Arjuna	Project Manager

Ipsos supported ICLEI SA in finalizing the study approach and in conducting the ground activities for the household surveys and interactions with city officials. The research team from Ipsos included:

Dr. Srikant Patel	Project Advisor
Dr. Mridula Mishra	Team Leader
Ms. Pragya Jain	Research Manager
Mr. Pamu Saiteja	Research Support
Ms. Nikita Kumar	Research Support

Additionally, the Ipsos team was supported by field managers, field coordinators, supervisors and investigators.

ICLEI SA also set up a technical advisory group (TAG) comprising experts with experience of working with young children and knowledge of urban design.

The TAG members included:

Dr. Anubha Rajesh	Former Chair Professor, Centre for Early Childhood Development and Research, Jamia Millia Islamia University, New Delhi
Dr. Ajay Khera	Country Representative, Engender Health
Dr. Arunava Dasgupta	Professor, Department of Urban Design, Coordinator, Centre for Urban Design Innovation, School of Planning and Architecture, New Delhi
Dr. Andrei Roman *(involved till methodology stage)*	CEO, AtlasIntel, Brazil
Mr. Prakash Kumar Paul	Senior Advisor, Van Leer Foundation

1.5 Literature Review

1.5.1 Various Definitions *of* 'Public Spaces'

For the purpose of the study, it is important to understand what 'public space' means. Therefore, the study team carried out an extensive literature review of various definitions of public spaces. These definitions were used to understand the challenges, needs, and concerns with respect to the raising of children under the age of 5 in urban areas.

The team found several definitions in the literature review, varying on the basis of what the public area is meant for and the objective behind the definition. For the study, the team picked five definitions based on the reliability of the source:

TABLE 1 // DEFINITIONS OF PUBLIC SPACES

The Van Leer Foundation

Places such as streets, parks, sidewalks, plazas, and playgrounds are safe, accessible, comfortable, healthy and stimulating for babies, toddlers and their caregivers.

Read more: https://bernardvanleer.org/solutions/urban95/

World Bank

Public spaces, include parks, plazas, squares, and gardens, but also temporary or informal spaces such as streets and sidewalks. These are essential ingredients for a successful urban environment and a healthy, connected and prosperous city.

Read more: www.worldbank.org/genderinclusivecities

UNESCO

A public space refers to an area or place that is open and accessible to all people, regardless of gender, race, ethnicity, age or socio-economic level. These are public gathering spaces such as plazas, squares and parks. Connecting spaces, such as sidewalks and streets, are also public spaces.

Read more: http://www.unesco.org/new/en/social-and-human-sciences/themes/urban-development/migrants-inclusion-in-cities/good-practices/inclusion-through-access-to-public-space/

Legislative Department, Ministry of Law & Justice, GoI

"Public space/public place" means a road, street, way or other place, whether a thoroughfare or not, to which the public have a right of access, and includes any place or stand at which passengers are picked up or set down by a stage carriage.

Read more: https://legislative.gov.in/sites/default/files/A1988-59.pdf

Gehl Institute

A public space refers to an area or realm with conditions that support people moving through spaces and interacting with one another.

Read more: https://issuu.com/gehlinstitute/docs/20160128_toolkit_2.0

For the purpose of the study and after discussions with TAG, the project team collected definitions from all sources to prepare a new definition, as shown below.

> "Public places cover formal and informal public spaces such as parks, playgrounds, neighbourhood streets, sidewalks, spaces around housing areas, parking areas, pre-primary schools, *anganwadi* centres, health centres and crèches."

In line with this definition and the profiles of the target group, the following public spaces were considered for this study and tools were prepared. Additionally, the following definitions were adopted in relation to parks and playgrounds:

Playground

A playground is a piece of land in school or in a public area, where children can play. It is an area used for outdoor play or recreation, especially by children and often contains recreational equipment such as slides and swings[5].

Park

A large area of land with grass and trees usually surrounded by fences or walls, and specially arranged so that people can walk in it for pleasure or children can play in it[6].

1.5.2 Issues in the Current Urban Neighbourhoods

It is important to understand the common issues and challenges in urban spaces to appreciate the importance of the study. Following the literature review, the current situation, needs, issues and challenges of young children and their caregivers in the urban areas were noted to be:

- **Indian city neighborhoods do not have uniform layouts and are overwhelmingly car-centric**
  Spaces such as open spaces and enclosed parking areas are not evenly laid out in most neighbourhoods; parking is a big issue; and because open spaces are filled with parked vehicles, there is little space for children to play or do outdoor activities.

- **Footpaths in neighborhoods are filled with obstacles, making them unsafe**
  Footpaths, designed for people to walk safely alongside main roads, are often encroached upon by with street vendors, parked two-wheelers, garbage, potholes, and more in urban

areas. This leaves no room for pedestrians to walk or for parents to push strollers with their children. Moreover, these footpaths are not well-maintained and do not have enough space for children and caregivers to play or walk without running into obstacles.

- **Footpaths, play areas and other public facilities are not well maintained due to lack of investment**
  The condition of public areas and public facilities deteriorates because the government or other responsible agencies do not spend enough on maintaining them.

- **Limited access to public facilities due to encroachment**
  Public spaces in many residential areas are taken over by parked vehicles, street vendors, stalls and so on. This not only ruins the look of the area, but also leaves little open space for use by children.

- **Constant risk of crime such as theft and assault, especially for women**
  Women, especially those with small children, often avoid public spaces fearing crimes like kidnapping of children and theft. There are additional safety concerns such as heavy traffic and stray animals.

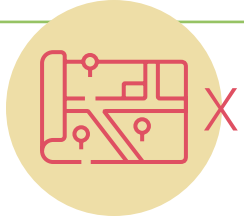
- **Misplaced priorities of public investment (e.g., giving importance to looks rather than functional use of green spaces):**
  Typically, cities prioritize making public areas look good, rather than maintaining and improving them for people to use. Additionally, there is also an issue of not having enough convenient transportation options for reaching public spaces in cities, due to limited last-mile connectivity.

The chart in Figure 2 shows some of the issues being faced by young children and their caregivers, which make them avoid public spaces or use them minimally.

FIGURE 2 // COMMON ISSUES FACED BY YOUNG CHILDREN AND THEIR CAREGIVERS IN PUBLIC SPACES

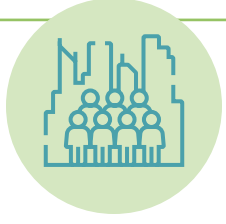
Non-Availability of Open Spaces

Non-availability of sufficient open spaces hampers the mobility of young children to play and explore



Poor Accessibility

Poor accessibility based on limited or absence of PT especially for last-mile connectivity



Parents/Caretakers Concern for Right Kind of Environmental Exposure to Child

Sometimes caregivers refrain from using public spaces to avoid exposure of young children in gatherings

Accident-Prone Areas

Many accidents occur due to faulty designs or improper spacing and arrangements at public spaces

Fear of Security

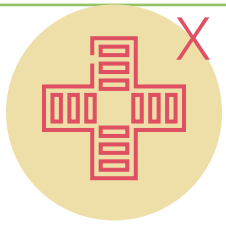
Not all informal and formal public spaces are child-friendly hence leading to fears amongst the caregivers

No Arrangements for Caregivers/Children With Special Needs

Currently there are negligible or very limited arrangements for young children and caregivers suffering from disabilities

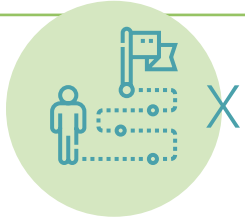
Fear of Stray Animals

Fear of stray animals while visiting public spaces creates an unsafe environment for the users



Lack of Pedestrian Walkways

Lack of pedestrian walkways, broken or too high to climb



Absence of Walkways

In the absence of walkways, young children their caregivers and pregnant women are forced to walk on road which is unsafe

Absence of Utilities

Absence of utilities like drinking water or toilets in public spaces

Safety With Respect to Bullying, Abduction, Abuse and Violence

Not all informal and formal public spaces are child-friendly

1.5.3 Important Terminologies

Over 80% of a baby's brain, including the neural connections that mould verbal, cognitive and sensory abilities are developed by the age of three. These early years have a huge, enduring impact on a person's future health and emotional well-being [7].

The two most crucial elements for a child's well-being during this phase are regular, affectionate, and responsive interactions with caring adults, and safe, engaging physical environments that they can explore[8]. One aspect of ensuring their health and wellbeing is to ensure that they get opportunities to play in safe surroundings that are free from the dangers of urban chaos and traffic accidents.

Living Conditions and Sanitation

According to the 2011 Census data on housing conditions, 68.4% of urban households are said to be living in good condition[9], while 28.7% of urban households continue to live in uninhabitable or decaying homes (2.9 per cent) (NIUA, 2018). The evidence suggests that adequate housing in densely populated cities can shield children and families from contagious and chronic diseases, accidents and injuries, and provide access to necessary infrastructure and services (NIUA, 2018). The homes of the urban poor usually have poor ventilation, excessive congestion, and insufficient natural light (NIUA, 2018).

Many urban poor in cities still rely on public toilets because of adequate sanitation at home. Even worse, many public toilets either lack water supply or are not connected to the city's sewage system (NIUA, 2018).

Child Play

Any form of play is a crucial part of a child's healthy growth. It helps in the development of the brain, and of the child's thinking, social and motor skills. Young children need spaces where they can crawl, climb, touch and interact with their surroundings. Playing helps them to stay physically active, improve their motor skills, and relax. It also boost their creativity, intelligence and social skills. But in today's cities, children often miss out on these play experiences because there are not enough playgrounds, they might be unsafe, or the right kind of play equipment is not there (NIUA, 2018). Additionally, the need for parking spaces has taken away open spaces where children could have played. (NIUA, 2018). Earlier, the neighbourhood streets acted as playgrounds for kids and public areas for adults; these are now crowded with traffic and parked vehicles (NIUA, 2018).

Road Safety and Infrastructure

The state of public transportation and infrastructure has an impact on children. Young children, who are 95 cm tall or less[10], are often not seen by drivers of motor vehicles, especially large cars. This puts them at greater risk of getting hurt or killed in a motor accident[11].

A new central-level policy that enforces making spaces safer for children is needed, especially, those living in poor urban neighbourhoods. They face greater risks because they have to cross unsafe areas to reach public spaces[12]. Most city streets in India are designed for adults and prioritize cars. (NIUA, 2018). Children, especially those with disabilities, miss out on safe

experiences in the city because there aren't well-designed footpaths, pedestrial crossings, lights, and enough shade. (NIUA, 2018). The abundance of cars also makes it more dangerous for kids to ride bikes, walk, or play outside. (NIUA, 2018). Cities must be planned in a way that keeps children safe. The environment that infants and toddlers are in and the opportunities they get to explore it directly impact their early development. The structures around them also matter because they influence how infants and toddlers and their caregivers interact[13]. If the environment is stressful, the caregiver will be stressed and that might affect how well they connect with the children, or even pass that stress on to them (ITDP & BvLF, 2022). Therefore, one of the most crucial variables for the development of babies and toddlers is their relationship with their caregivers.

Caregivers

An infant or toddler's well-being depends on that of their caregiver. As mentioned earlier, one of the most crucial elements for young children's growth is having regular, friendly and responsive interactions with caring people[14].

A method called "serve and return", which involves interacting with and responding to infants and toddlers, is essential for the development of a baby's brain, especially for emotions and language development (ITDP & BvLF, 2022). Things like hugging, making eye contact and using gestures, all help create a strong bond and help children to understand the world around them (ITDP & BvLF, 2022). These interactions can happen during both indoor and outdoor play, which help children to learn problem-solving, social skills and stay physically healthy. Also, caregivers are responsible for ensuring that their wards are safe, clean, healthy and disciplined without being violent[15].

Some services, such as parks, public spaces, primary healthcare and childcare are used more frequently by pregnant women, caregivers, infants and toddlers than others. How good these services are, and how easy it is for caregivers to access them will determine the well-being of infants, toddlers, and caregivers (ITDP & BvLF, 2022). The layout of our neighbourhoods and cities, as well as the transportation options, affect how well a caregiver can take care of infants and toddlers (ITDP & BvLF, 2022). The availability of services, opportunities and goods, as well as the available transportation options and the state of our urban areas, all play a role in meeting the needs of infants and toddlers.

Environment and Pollution

Although it is beyond the scope of the study, this section briefly discusses urban pollution and its impact on children as a factor in holistic urban planning.

Newborns and toddlers breathe faster (30–60 breaths per minute), taking in more harmful chemicals, and making them more sensitive to environmental factors such as poor air quality, noise pollution and road safety (Reuter, Moser, & Baack, 2014; ITDP & BvLF, 2022). Poor air quality, in particular, can seriously impact a child's lung function and neurological and cognitive growth[16]. Noise pollution is also linked to lower cognitive abilities, difficulties in focusing, and

increased feelings of anxiety and helplessness in infants and young children (Viet, Dellarco, Dearborn, & Neitzel, 2014). More than three million children under the age of 5 die each year from environment-related issues (NIUA, 2018) and 60,000 of those deaths are due to diseases and infections caused by air pollution (UNICEF, 2016).

A study on ambient air quality, respiratory symptoms, and lung function by the Central Pollution Control Board (CPCB) in Delhi found that children are more vulnerable to environmental pollutants than adults. (NIUA, 2018).

According to a UNICEF report published in 2017, 17 million infants under the age of one who lived in areas where the outdoor pollution was six times higher than recommended by air quality guidelines were at risk of brain damage (Rees, 2017). It also said that around 12 million of these babies were from South Asian nations (Rees, 2017). The report also highlighted the impact of air pollution on a fetus's brain development (Rees, 2017). It is time that decision-makers and urban planners considered these environmental factors, especially when designing cities for the well-being of children.

2.0 Approach *and* Methodology

A mix of methods was adopted to conduct the study. A questionnaire (attached in the Annexure) was prepared for collecting data , covering caregivers of children under the age of 5 and pregnant women in selected public spaces. A guide (in Annexure) for holding discussions with and collecting data from ward/city-level officials was also prepared. The TAG was consulted for checking if these tools were suitable. Face-to-face interviews using computer-assisted personal interviews (CAPI) method were held to collect data; qualitative tools were used separately. Ward/city-level officials were interviewed to understand how they prepare plans for the city, and the factors they consider to make the city friendly for infants, toddlers, young children and caregivers.

TABLE 2 // TARGET RESPONDENT PROFILE

TYPE OF TOOL	TARGET RESPONDENTS
Quantitative tool	Caregivers of young children (0–5 years); Pregnant women
Qualitative tool	Ward/City officials

2.1 Pre-Test and Pilot Surveys

After TAG's approval of the quantitative tool was received, a pre-testing exercise was carried out by the field staff to:

- Refine the questions and response options and to figure out the best methods.
- Check if the language of the questionnaire is easy to understand.
- Test how well the CAPI version of the questionnaire works.
- Estimate how long it takes to do interviews and the overall time and resources needed for the main survey.
- Understand the field-level challenges in carrying out the study and find ways to deal with them.
- A pre-test was conducted in Delhi-NCR with 30 people. Table 2 shows the profile and number of the people covered in the pre-test.

TABLE 3 // PRE-TEST SAMPLE SIZE

RESPONDENT PROFILE	SAMPLE ACHIEVED
Caregiver	20
Pregnant Women	15
Total	**35**

After collecting data of the pre-test, a report was prepared with the learnings and suggestions to improve the quantitative tool. The report was discussed with TAG and VLF and changes made to the tool. After that, pilot surveys of the tool were conducted for:

- Testing if the survey questions and answer choices work well;
- Checking if the language is easy to understand;
- Testing how well the CAPI version of the questionnaire works;
- Estimating how long it would take to do the interviews and the overall time and resources needed to complete the main survey.
- Understanding the challenges that might arise during the study and finding ways to deal with them.

The pilot surveys were done in Mumbai, Chennai and Bhubaneswar with a targeted sample size of 100 from the three cities. Tables below show the sample sizes:

TABLE 4 // CITY-WISE ACHIEVED SAMPLE SIZE FOR PILOT SURVEYS

CITY	SAMPLE ACHIEVED
Mumbai	38
Chennai	36
Bhubaneswar	39
Total	**113**

TABLE 5 // RESPONDENTS PROFILE COVERED IN THE PILOT SURVEY

RESPONDENT PROFILE	SAMPLE ACHIEVED
Caregiver	97
Pregnant Women	16
Total	**113**

A report was prepared on the learnings from the pilot survey and suggestions to improve the quantitative tool. It was shared and discussed with the TAG members and VLF and changes were incorporated into the tool.

2.2 Sampling

Selection of Cities

Cities from all six regions of India were selected for the main survey, in order to have more accurate geographically representative samples. The cities were further grouped into three broad categories, based on population (Census 2011) and zone.

The population categories were:

- Cities with more than 40 lakh people
- Cities with a population of 10 to 40 lakhs
- Cities with less than 10 lakh people

TABLE 6 // CITIES AND POPULATION CATEGORIES

REGION	CITIES—POPULATION CATEGORIES		
	< 10 L	10L–40 L	> 40L
Central	Jhansi		Indore
East	Bhubaneswar	Raipur	Kolkata
North-East	Shillong Dimapur	Guwahati	
North	Shimla	Chandigarh Lucknow	Delhi
South		Vijayawada	Chennai Bengaluru
West		Surat* Jaipur	Mumbai

*Surat has more than 40 lakh people, but its selection provides a better representation of the West zone.

Sample Size

To obtain valid and reliable results, it is important to have a sufficient number of respondents in the survey. The desired sample size for each city was calculated using the following formula:

$$n = \frac{DZ^2P_1P_2}{E^2}$$

- Where, n = Desired Sample Size
- D = 2.2 (Design Effect)
- Z = Critical Value and a Standard Value for the Corresponding Level of Confidence
- (At 95% Confidence Interval or 5% Level of Significance it is 1.96)
- P1 = Proportion Estimated (80%)
- P2 = 1 – P1
- E = 0.05 (Margin of Error)

Based on the above-mentioned assumptions, it was calculated that a sample size of 541 was needed to get statistically valid and reliable results that would account for any differences and diversity. It was then decided to have a sample size of 600 for each city in the study.

Table below gives the city-wise distribution of the total sample size for quantitative and qualitative surveys:

TABLE 7 // CITY-WISE SAMPLE SIZE QUANTITATIVE SURVEY

CITY	TARGETED SAMPLE	ACHIEVED SAMPLE
Chennai	600	613
Kolkata	600	628
Delhi	600	618
Bengaluru	600	651
Indore	600	648
Jaipur	600	614
Mumbai	600	615
Lucknow	600	601
Vijayawada	600	603
Raipur	600	609
Surat	600	601
Shimla	600	601
Shillong	600	602
Bhubaneswar	600	712
Guwahati	600	647
Chandigarh	600	601
Dimapur	600	600
Jhansi	600	630
Total	**10,800**	**11,194**

Twenty-one in-depth interviews were done with officials who were willing and available. These officials came from various departments and had different designations, such as engineers, area inspectors, supervisors and horticulture officers.

TABLE 8 // NUMBER OF OFFICIALS INTERVIEWED

STATE	CITY	NO. OF OFFICIALS INTERVIEWED
Delhi	Delhi	2
Madhya Pradesh	Indore	2
Rajasthan	Jaipur	2
Uttar Pradesh	Lucknow	2
Andhra Pradesh	Vijayawada	2
Chhattisgarh	Raipur	2
Meghalaya	Shillong	2
Punjab/Haryana	Chandigarh	2
Nagaland	Dimapur	2
Uttar Pradesh	Jhansi	2
Tamil Nadu	Chennai	1
Total		**21**

2.3 Selection *of* Households and Respondents

The respondents were selected with the following process:

- The households and respondents were first randomly chosen for the quantitative survey.
- Then the respondents were asked if there were any pregnant women or children under 5 in the household. If the answer was yes, their consent was sought for participation in the interview.
- If there were more than one person from the target group in a household, separate interviews were held for each person. But the same target group was not covered more than once in one household.
- People who were available and willing to participate were selected for the qualitative survey.

2.4 Scope and Limitations *of* the Study

A comprehensive study was carried out, but a few limitations were identified by the project team.

- The study focused on five specific public spaces mentioned in its objectives. However, the usage of some of them were completely different. For example, a crèche or hospital are different from a park and playground. Neighbourhood streets are also used differently in each city. Since the scope of the study was limited, it did not cover all spaces used by children in detail. A more detailed study is needed to understand which public spaces children under 5 are more likely to use.
- Like any survey, this one depended on people willing to participate. Sometimes, the people in the target group were too busy taking care of a young child, especially nuclear families with children under the age of two. However, the team tried to handle this by including both men and women and other caregivers.
- In studies like these, participants may give answers they think are socially acceptable, not about their actual behaviour. This can affect the validity of the study and lead to social desirability bias. The team tried to handle this by asking direct and indirect questions and double-checking responses.
- People usually don't have many ideas for making better spaces for young children. They mostly want basic things like places that are well maintained and easy to get to. So they have limited demands.
- With changing lifestyles and exposure to technology, some caregivers consciously choose not to go to public spaces. But the study was not able to capture that. A comparative study needs

to be done to understand how access to technology has changed the way public spaces are used.

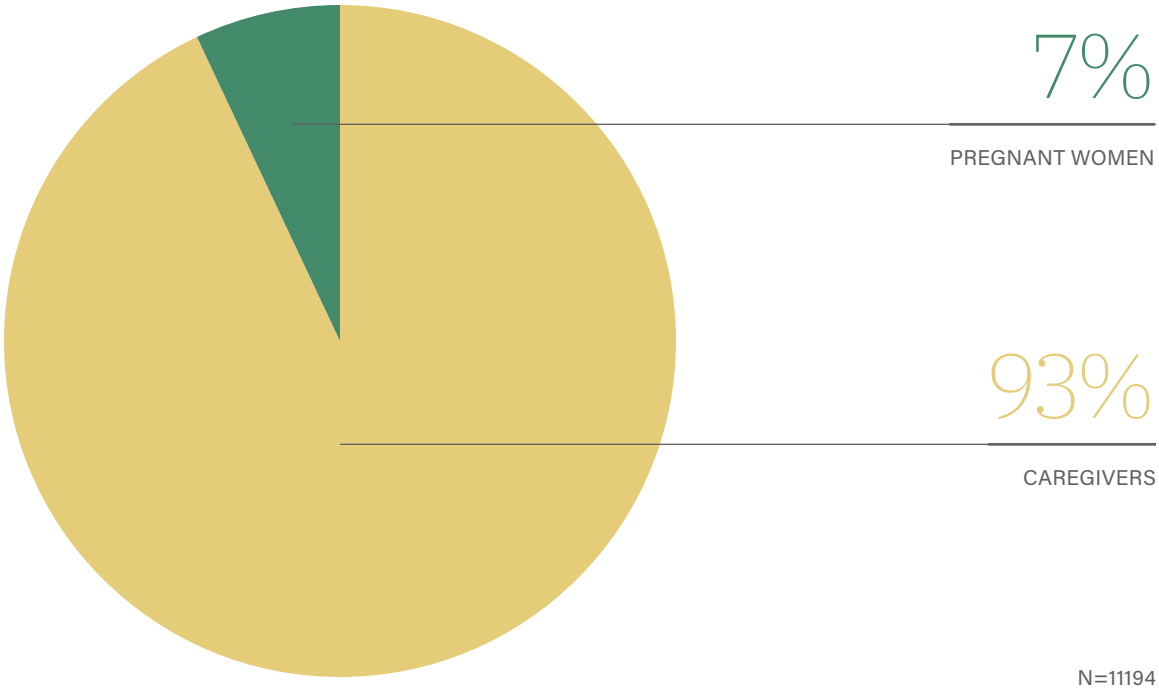
- The study also didn't look at how different types of disabilities might affect the use of public spaces, and the problems such people might face.
- It was also assumed that for young children, gender differences didn't matter when it came to using public spaces. Hence, there was no comparison as to how boys and girls use these spaces.
- Not many city officials participated in the study, and the ones who did shared their views extensively.

3.0 Findings *from* the Survey

3.1 Demographics

The quantitative survey aimed to get responses from caregivers of young children (0-5 years old) and pregnant women. Figure below shows the percentage distribution of the caregivers and pregnant women:

FIGURE 3 // RESPONDENT CATEGORIES



N=11194

Figure below shows the distribution of caregivers based on the age group of their wards. As expected, most caregivers are attending to children aged 3-5 years. It is challenging for families with very small children to participate in activities such as public surveys. However, a good number of people from other categories too have been included to get their viewpoints.

FIGURE 4 // DISTRIBUTION OF CAREGIVERS BASED ON AGE GROUPS OF THEIR WARDS

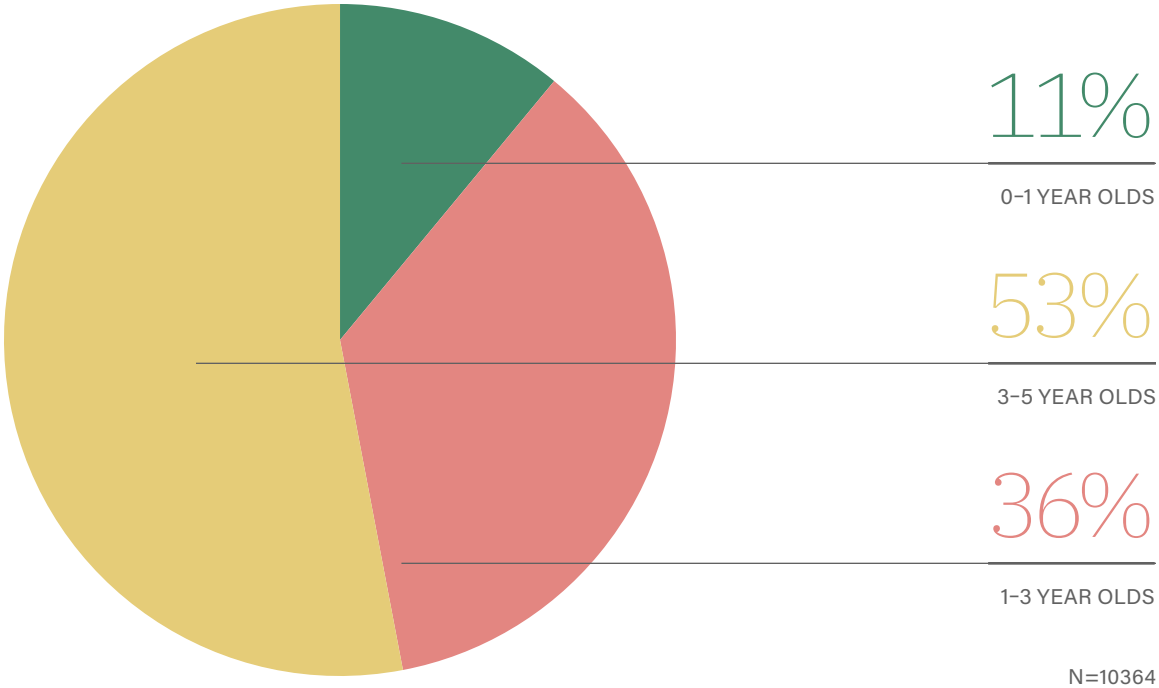


Figure below shows that a majority (85%) of the respondents are between 22 and 40 years old, and only 4% are more than 50 years old. The mean age of the respondents is 31 years.

FIGURE 5 // AGE DISTRIBUTION OF RESPONDENTS

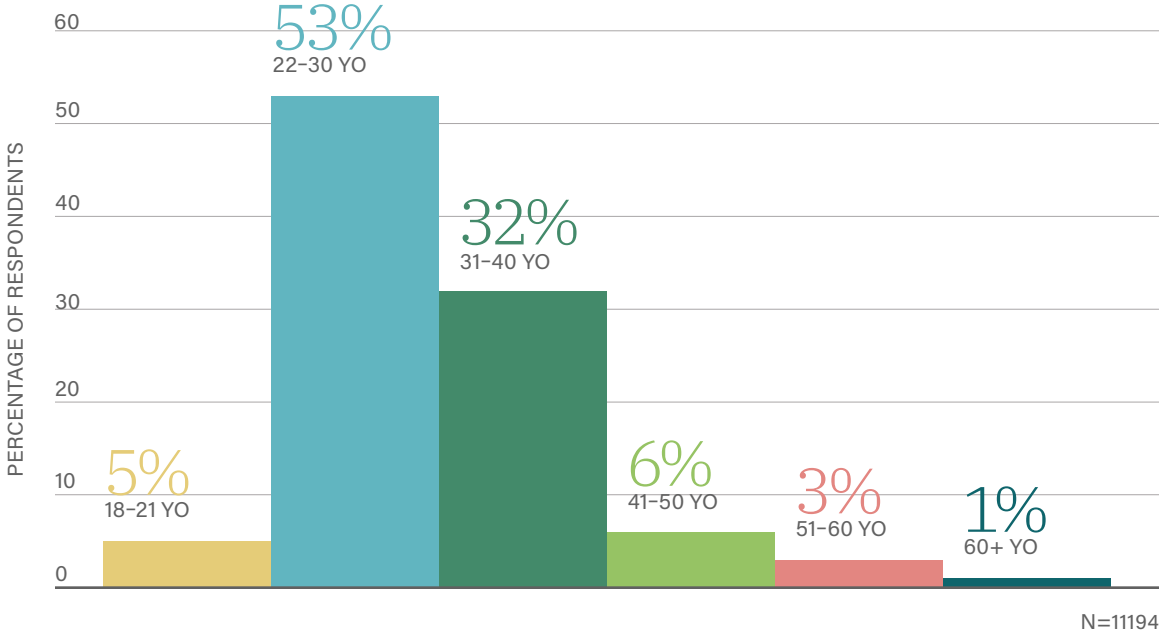
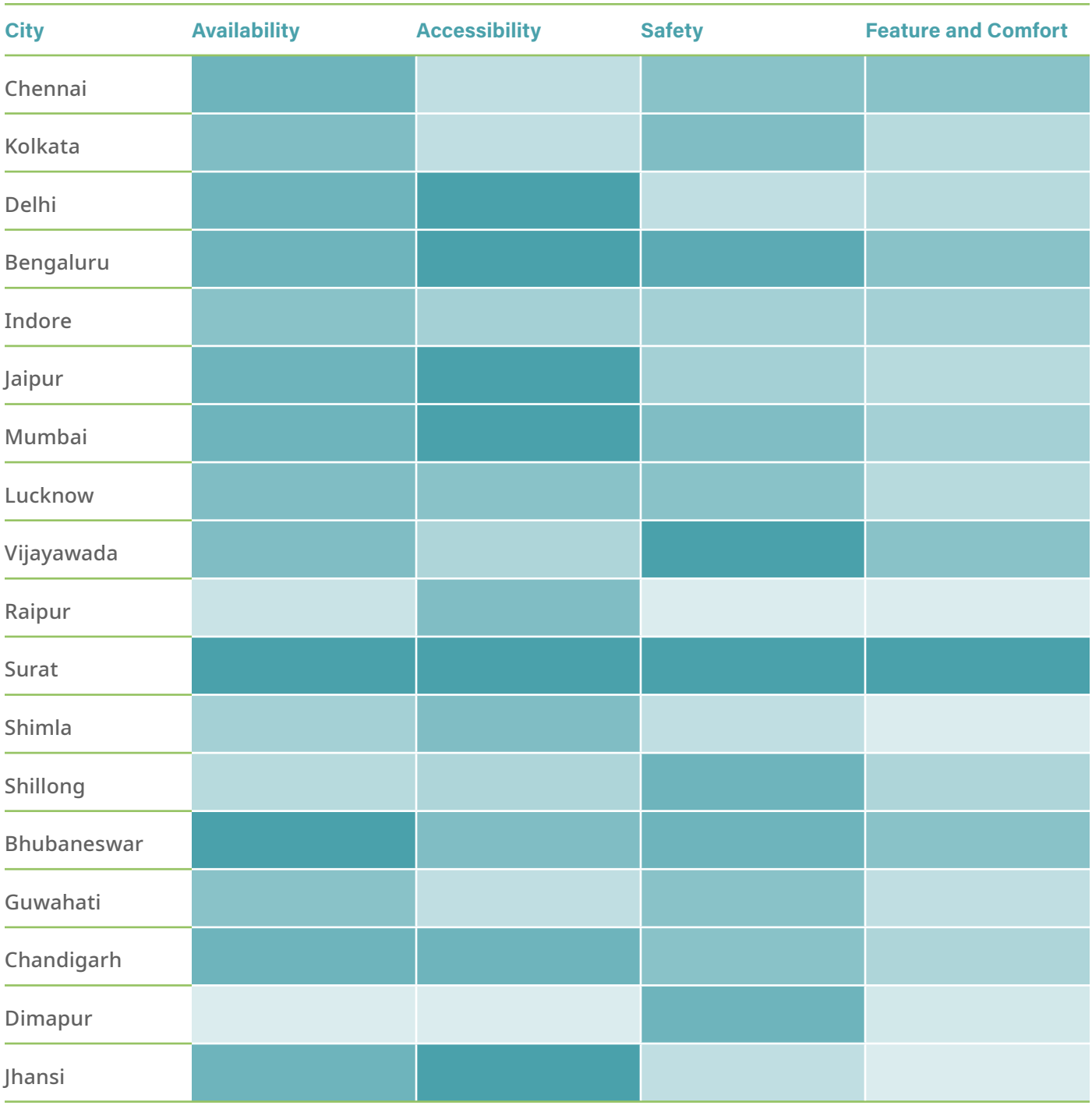


FIGURE 6 // PERCEPTIONS OF PEOPLE IN EACH CITY ON VARIOUS STUDY PARAMETERS



Note: The color gradient represents a spectrum of perceptions ranging from positive to negative, the darkest shade being the most positive.

Around 70% of the caregivers who responded were mothers, followed by fathers (16%) and grandparents (7%).

FIGURE 7 // PROFILES OF CAREGIVERS

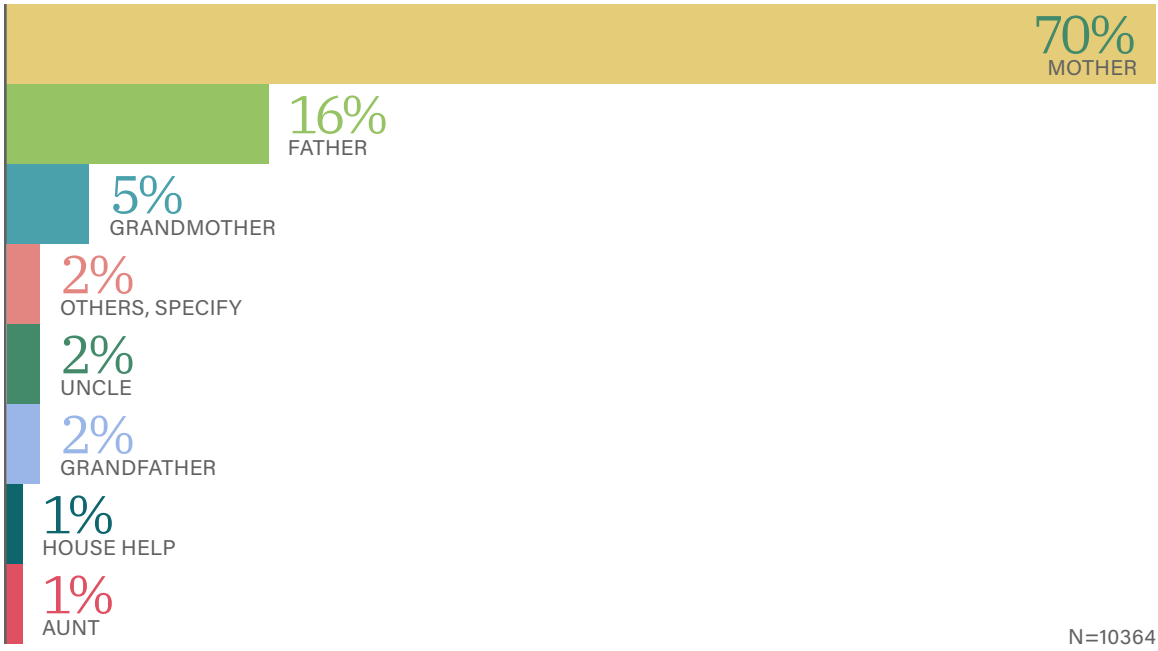
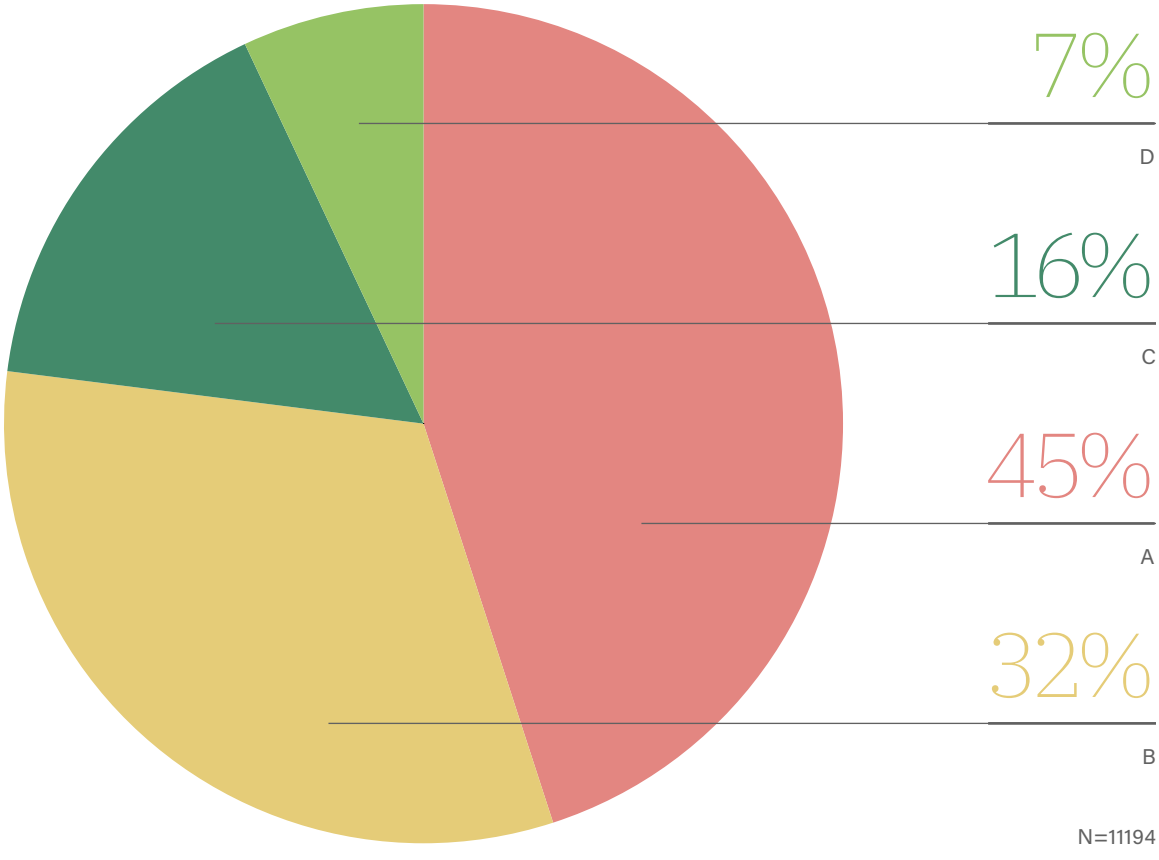
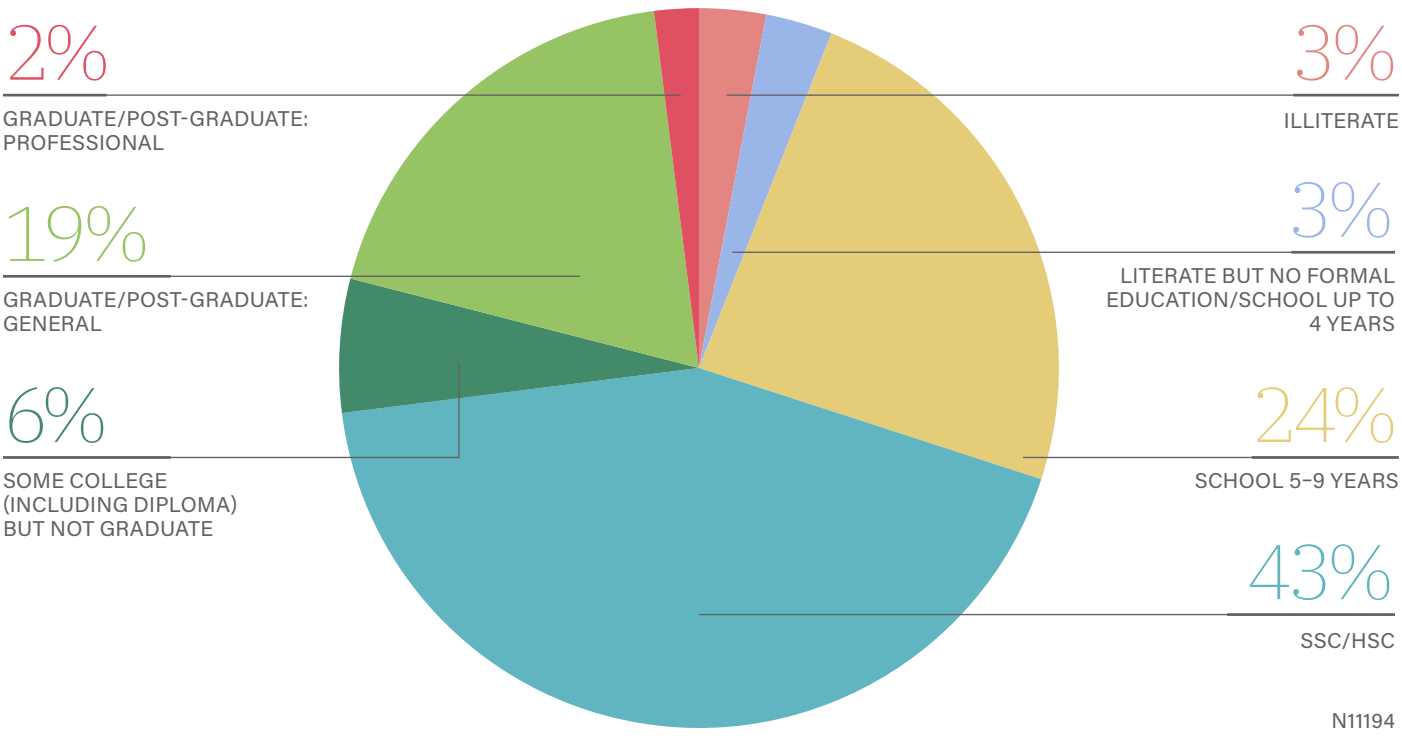


FIGURE 8 // SOCIO-ECONOMIC CLASSIFICATION OF THE RESPONDENTS



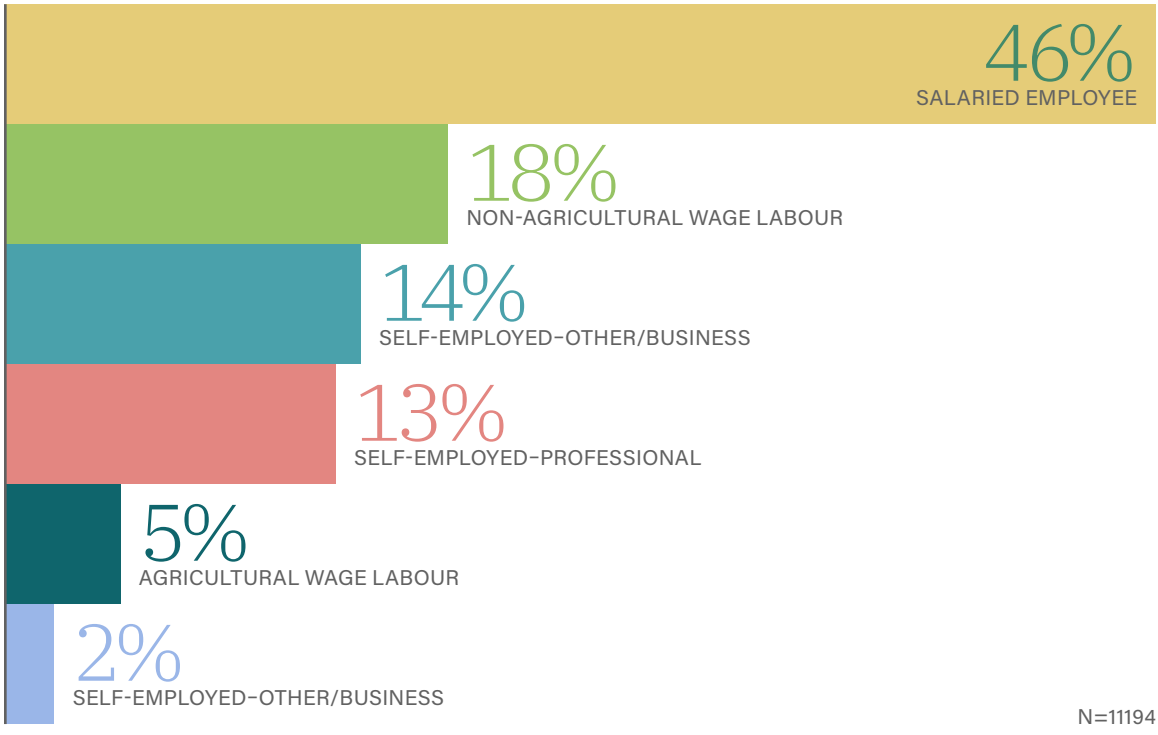
Note: This classification is done using the education qualification of chief wage earner and number of consumer durables owned by the family.

FIGURE 9 // SOCIO-ECONOMIC CLASSIFICATION OF THE RESPONDENTS



N11194

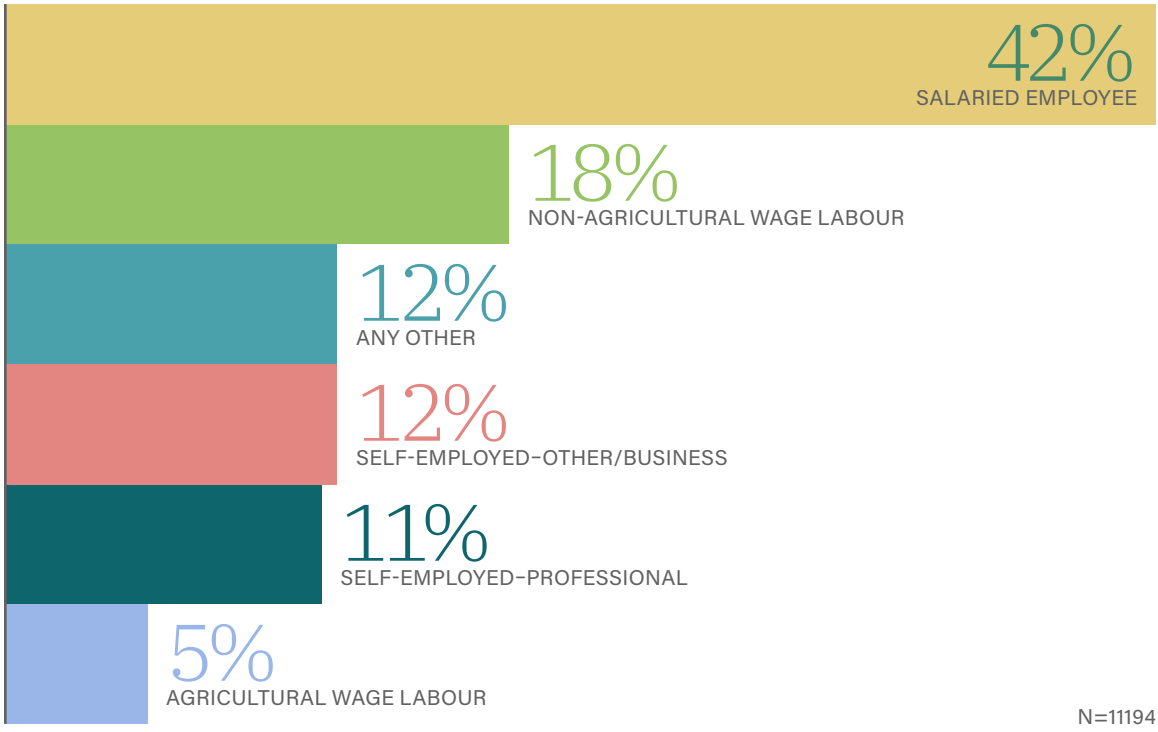
FIGURE 10 // OCCUPATIONS OF CHIEF WAGE EARNERS



N=11194

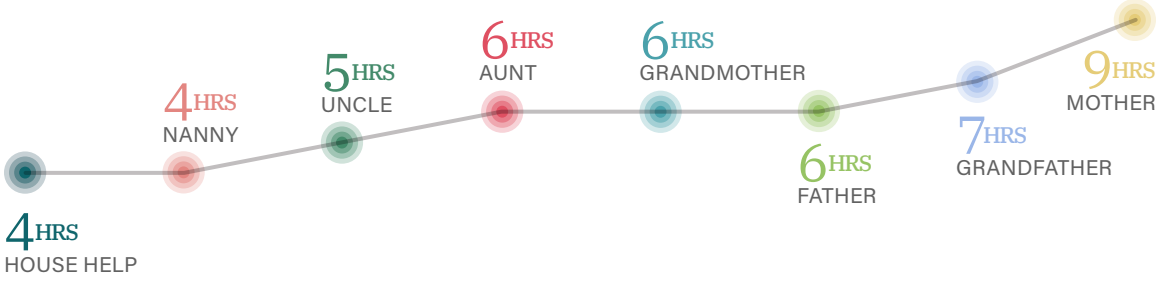
> Thirty percent of the mothers and pregnant women were employed; 65% of them were part of family businesses.

FIGURE 11 // OCCUPATIONS OF WORKING MOTHERS/PREGNANT WOMEN AS REPORTED



N=11194

FIGURE 12 // MEAN NUMBER OF HOURS CAREGIVERS SPENT IN A WEEK WITH YOUNG CHILDREN



> It was reported that, on average caregivers (0-1 years, 1-3 years and 3-5 years) spend 8 hours per week with young children.

FIGURE 13 //TIME SPENT OUTDOORS BY CAREGIVERS WITH YOUNG CHILDREN IN A WEEK

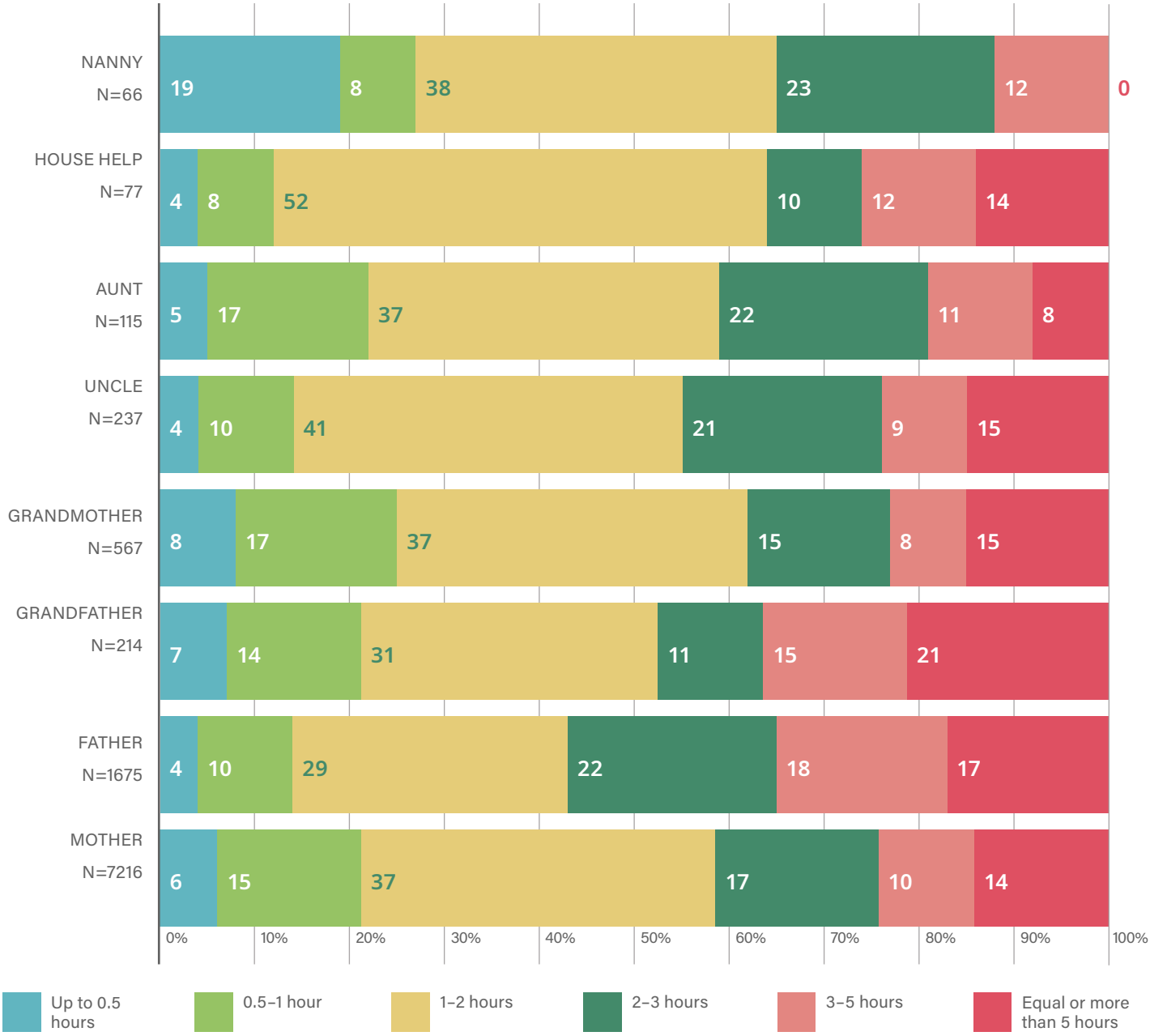
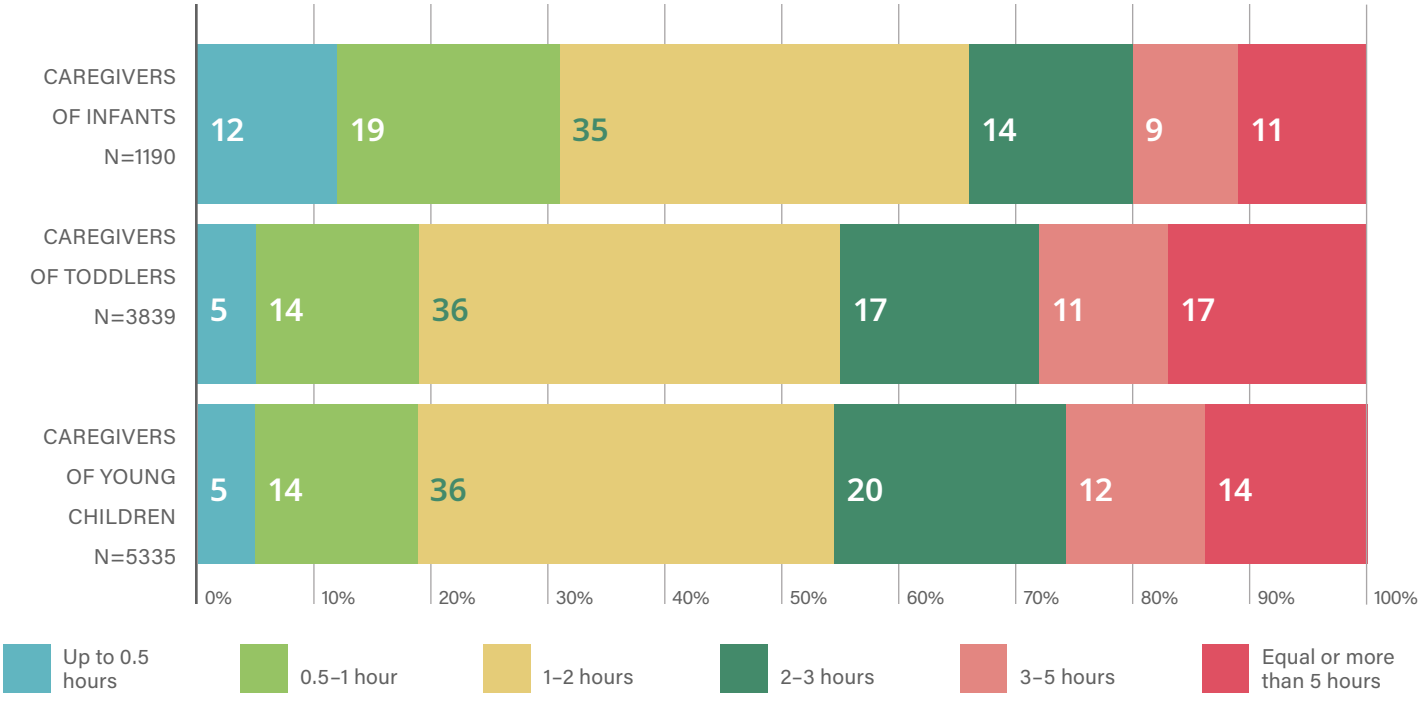


FIGURE 14 // TIME SPENT OUTDOORS BY CAREGIVERS WITH CHILDREN OF DIFFERENT AGE GROUPS IN A WEEK

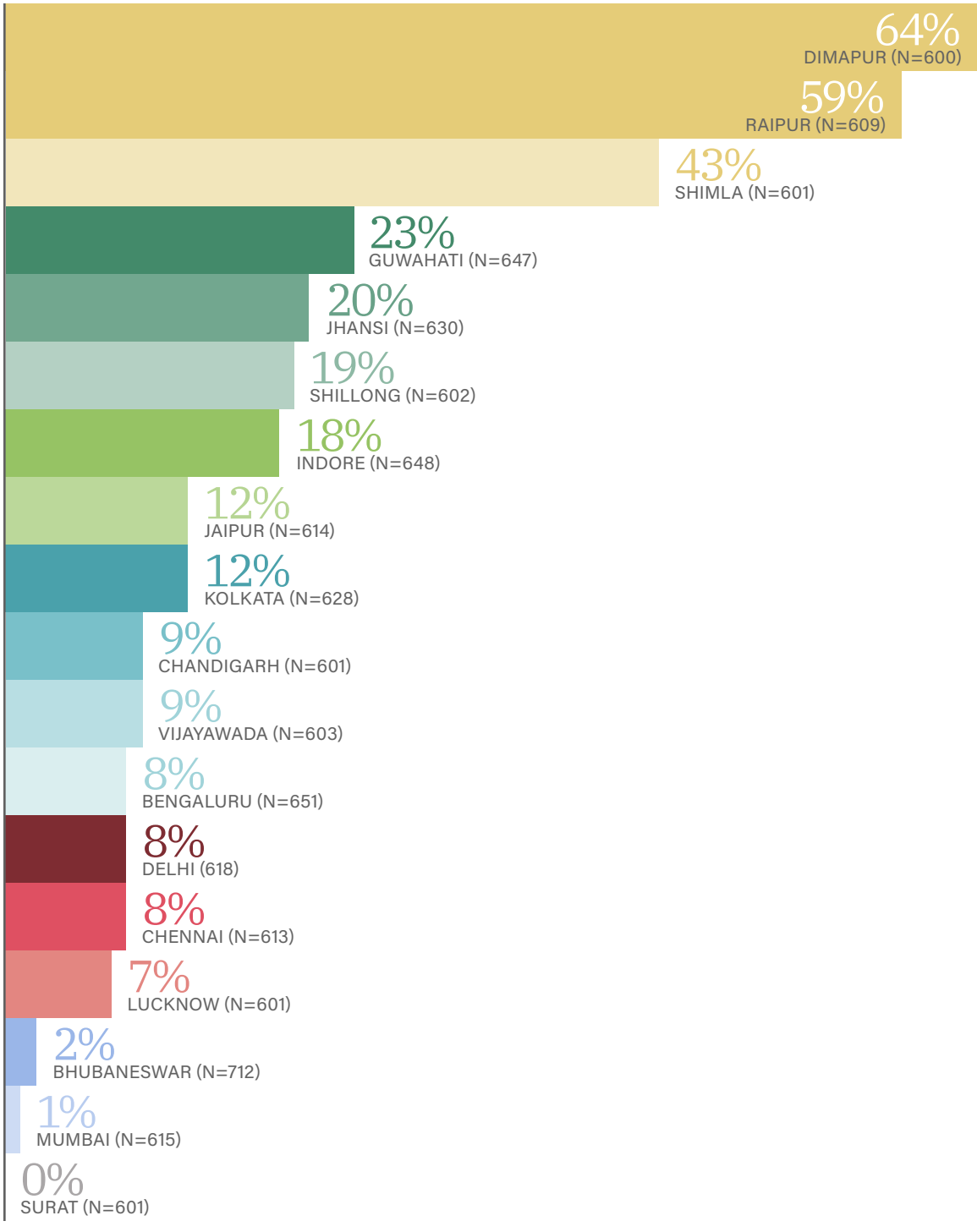


> More than 50% of the respondents were spending 1-3 hours outdoors with their young children in a week. **N=11194**

3.2 Availability *of* Public Spaces

The opinion of the people on the availability of public spaces in the neighbourhood was also recorded.

FIGURE 15 // PERCENTAGE OF PEOPLE WHO REPORTED INSUFFICIENT PUBLIC SPACES

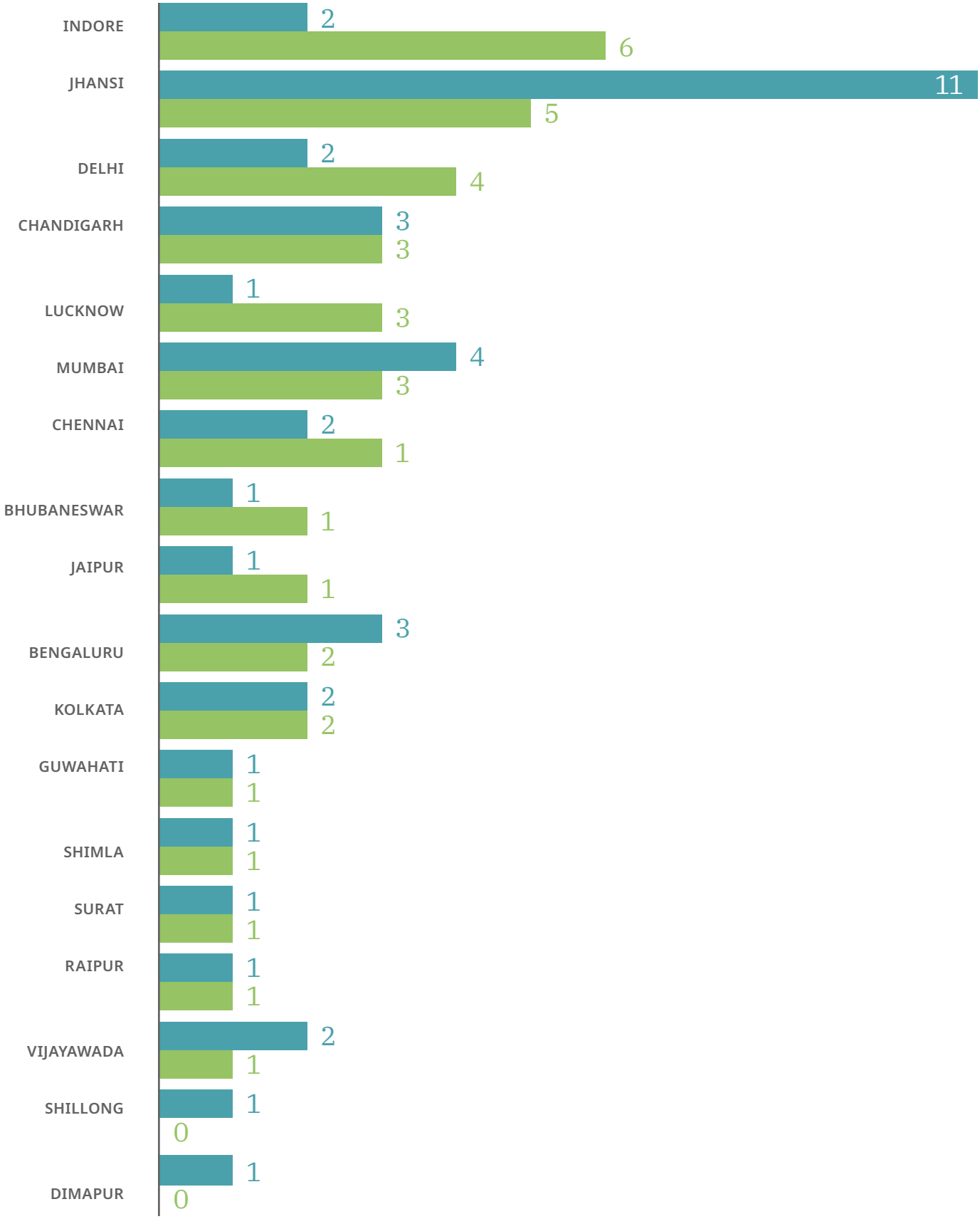


Overall, 17% of respondents (N=11194) felt that there are an insufficient number of public spaces in their locality.

> “Around 84% of the people (N=2998) said that there are enough hospitals in their residential areas.”

> “Six percent of all respondents (N=11194) stated that young children played in informal spaces such as garages, terraces and parking spaces. The highest number of respondents who stated this were from Raipur at 32% (N=609), compared to 10% or less in other cities. In the absence of accessible and proper public spaces, children are often forced to use informal spaces for play.”

FIGURE 16 // MEAN NUMBER OF PARKS AND PLAYGROUNDS AVAILABLE WITHIN 10-15 MINUTES OF WALKING DISTANCE (AS PER THE RESPONDENTS)

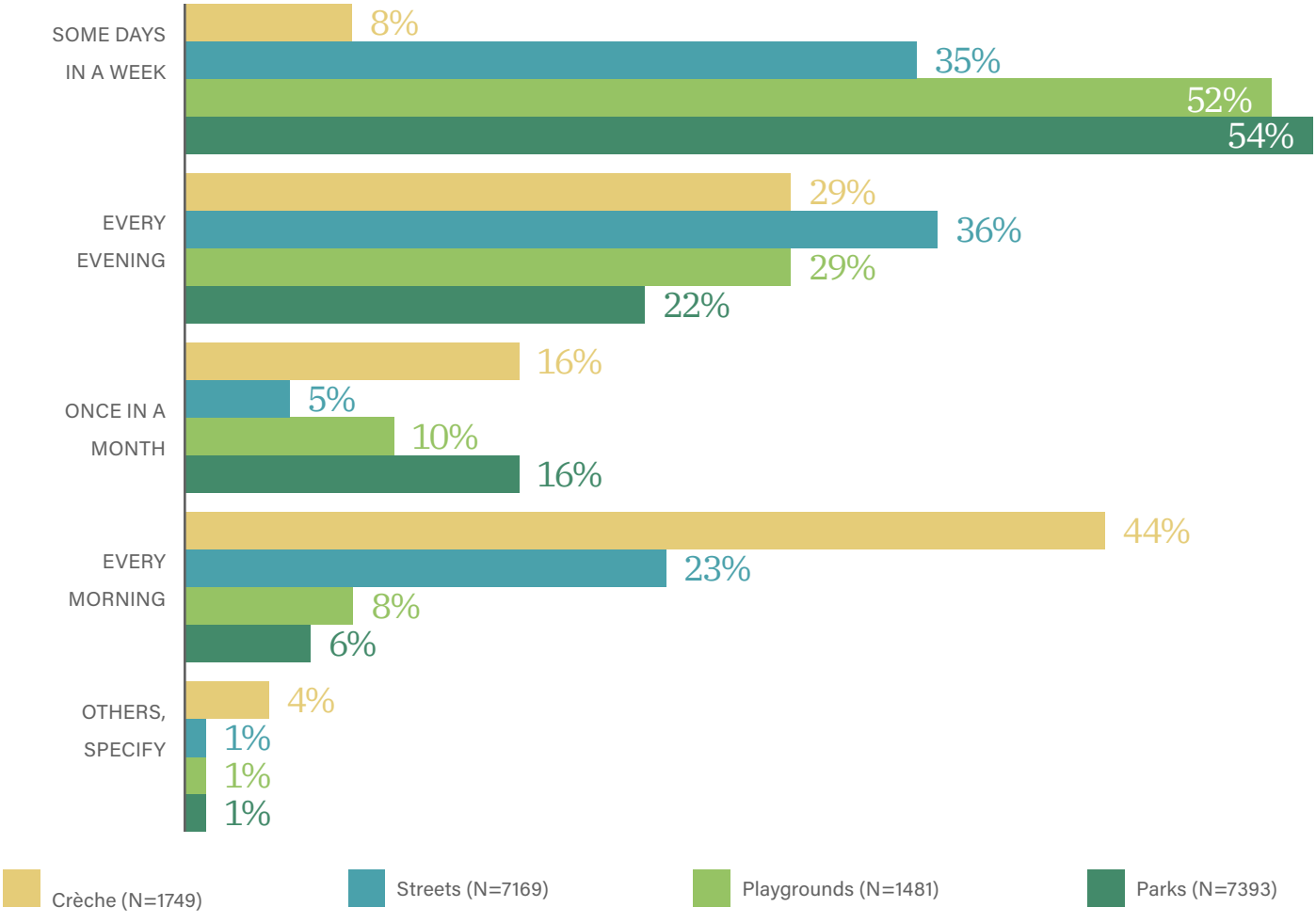


> “According to the respondents, there were an average of two parks and playgrounds within 10-15 minutes of walking distance from their homes across all the cities.
>
> It seems that while availability of parks is not an issue, there are other reasons why the respondents don’t use these public spaces (as analyzed in the following sections).”

3.3 Accessibility and Usage *of* Public Spaces

Figure below shows the frequency with which the respondents visited public spaces (parks, playgrounds, streets and creche). All of them were asked questions regarding the use of parks, playgrounds, and streets, but the questions about creches/ anganwadis were directed at caregivers only.

FIGURE 17 // HOW OFTEN PEOPLE VISIT PUBLIC SPACES SUCH AS PARKS, PLAYGROUNDS, STREETS AND CRECHES



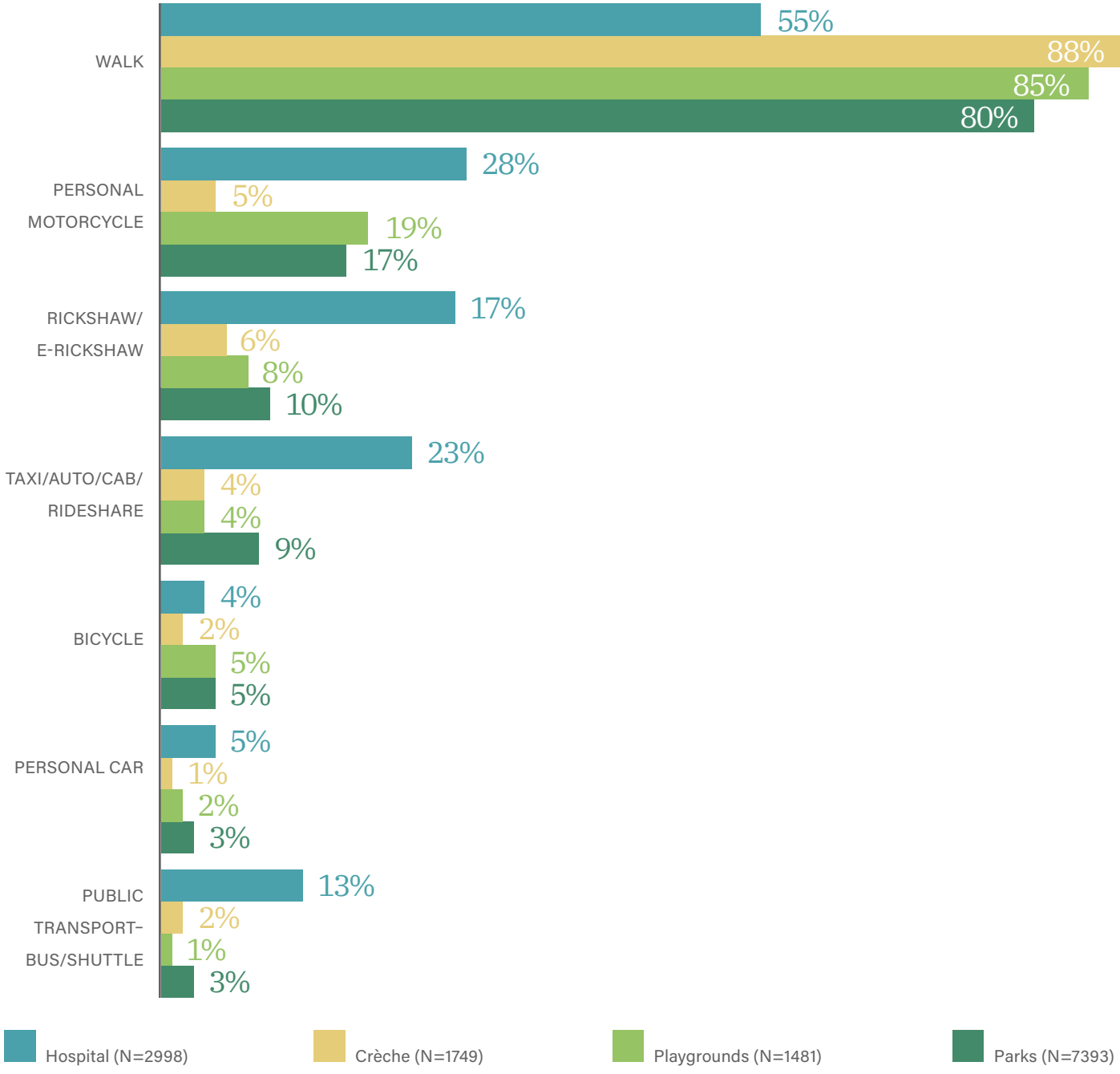
The chart shows that a majority of the caregivers visit creches every morning to help children build social skills and also to introduce them to a structured system of education before formal schooling begins. The use of parks and playgrounds is a choice made by the caregiver. The respondents who mentioned 'others' said that either they don't have access to public spaces, or they don't use them frequently.

Figure 18 shows that a majority of the respondents (more than 80%) said that they walked to parks, playgrounds and creches/ anganwadis, while only 55% went to hospitals on foot.

Less than 10% used public transport, i.e. bus/ shuttle, to travel to a public space, probably because it is difficult to travel in such transport with small children; while 13% used public transport to go to hospitals.

In all cities, people generally use similar transportation methods, but opinions vary when it comes to going to hospitals. The different ways in which people travel in each city are shown in the Annexure.

FIGURE 18 // HOW PEOPLE TRAVEL TO PUBLIC SPACES



“More than 90% (N=2998) of the people surveyed said they use government health facilities. This pattern was the same in all cities, but Vijayawada had the lowest usage at 8%.

The choice of using a public health facility depends on not just accessibility, but also cost and trustworthiness of medical practitioners. Hence, the quality of public spaces cannot be determined based solely on this information.”

“More than 80% of the respondents (N=1463) said they go to a mall at least once a week. This includes caregivers with young children and pregnant women.

Of them, 53% go in the evening, and 38% in the afternoon.

Almost 80% spend 1-3 hours in a mall per week.
Because children want to visit malls, many caregivers prefer a closed and weatherproof enclosed area with playful activities for them.”

Table below shows how people from the surveyed cities use various transportation methods to go to public places, based on the responses of at least 30% of the participants.

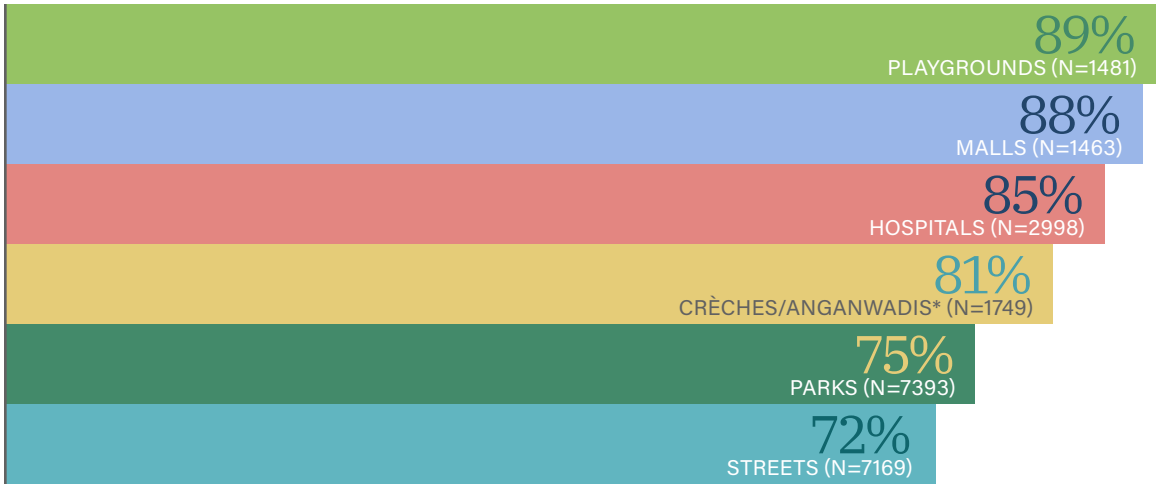
TABLE 9 // DIFFERENT WAYS OF TRAVELLING IN EACH CITY

Mode	City	Percentage Reported
Commuting to Parks (N=7393)		
Personal Motorcycle	Vijayawada	60%
	Surat	54%
	Chennai	35%
Auto-Rickshaw/Taxi	Shillong	65%
	Dimapur	33%
Playground (N=1481)		
Personal Motorcycle	Surat	78%
	Vijayawada	39%
Bicycle	Bhubaneswar	31%

3.4 **Safety While Using Public Spaces**

The survey asked people how safe they feel in public spaces. Figure 19 shows the general perception of safety; the trend in each city are detailed in the Annexure.

FIGURE 19 // THE PERCENTAGE OF PEOPLE WHO FEEL SAFE WHILE USING PUBLIC SPACES



*Only asked caregivers

"Only 43% (N=7169) of the people surveyed mentioned having proper footpaths in their streets.

The availability of functional footpaths is a major problem in cities, with less than 50% of the respondents having access to them. A majority of the people complained that not only are footpaths poorly maintained, but they are also often taken over by parked vehicles or street vendors.

The highest percentage of people in a city who said they had functional footpaths in their neighbourbodhood were from Surat at 95%, while Jhansi had the lowest at 8%."

The respondents who felt unsafe in public spaces cited the following reasons:

FIGURE 20 // REASONS FOR FEELING UNSAFE IN PARKS AND PLAYGROUNDS

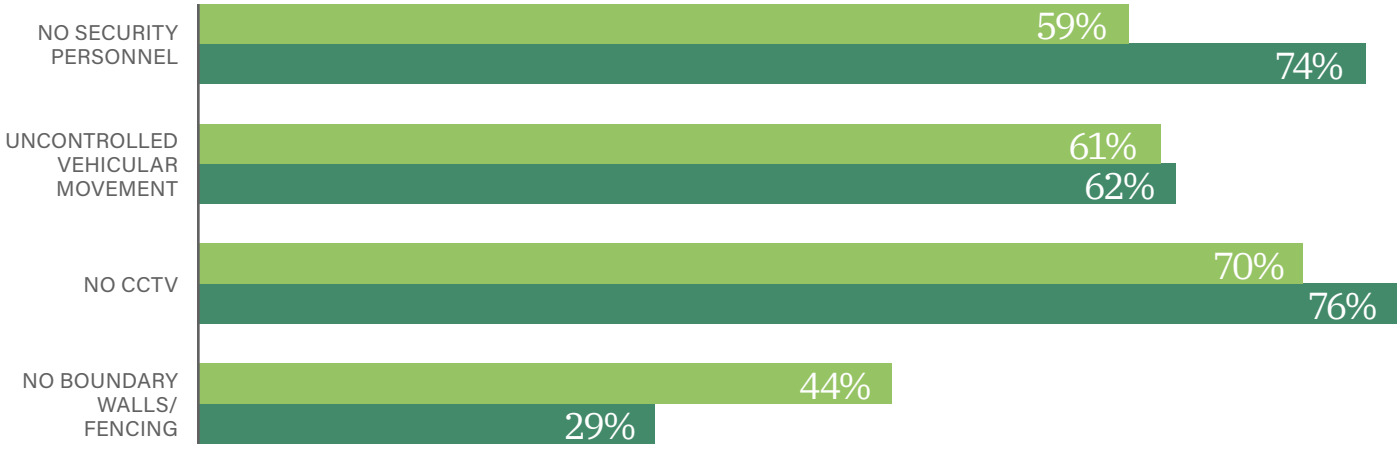
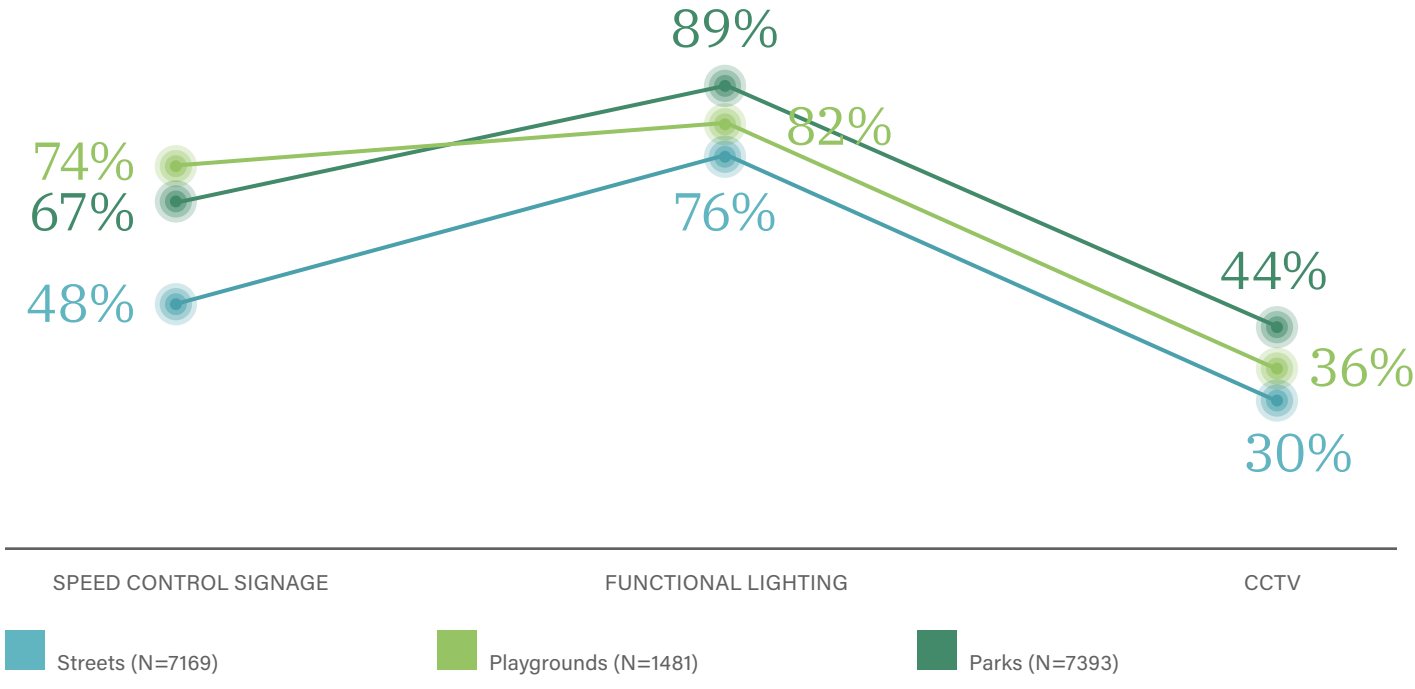


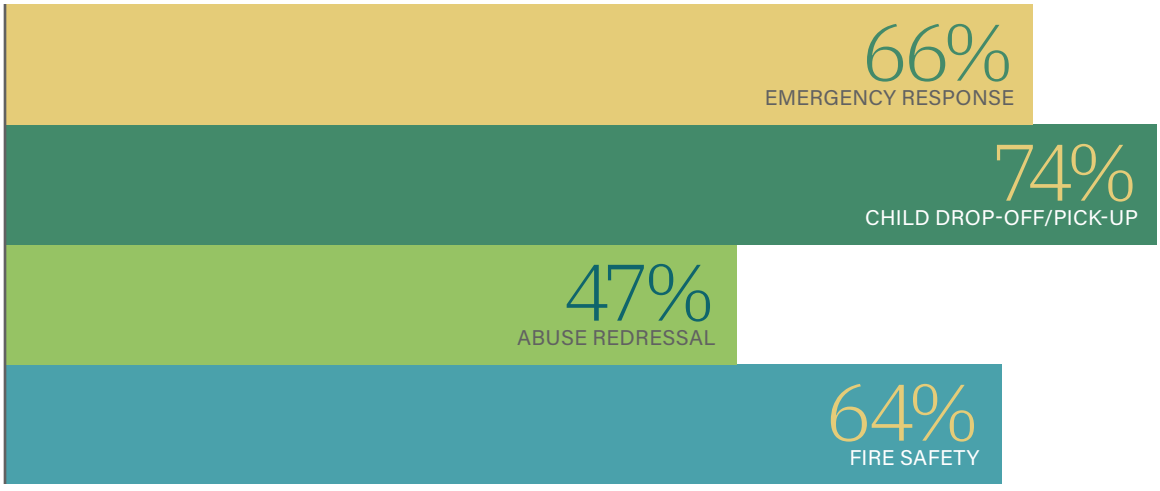
FIGURE 21 // SAFETY FEATURES IN PARKS, PLAYGROUNDS AND STREETS, AS PER THE RESPONDENTS



The reasons mentioned for safety concerns were similar across the cities. Most concerns were about city crime. The presence of security personnel and CCTV cameras made caregivers of young children and pregnant women feel secure. The availability of security features in public spaces were checked, and Figure below shows what the respondents said.

Additionally, the safety of the routes to public spaces was also asked about. More than 80% of the respondents felt safe about the route they took. The awareness of caregivers about the safety policies at the creches where they left their children was also checked; their responses are shown in Figure below.

FIGURE 22 // AWARENESS OF CAREGIVERS ABOUT SAFETY POLICIES OF CRECHES



(N=1749)

3.5 Comfort and other features in public spaces

This section focuses on what people think about facilities such as seating areas, walk ways, drinking water units, toilets and greenery in the public spaces they use.

FIGURE 23 // AVAILABILITY OF SEATING/ REST AREAS IN PUBLIC SPACES

The percentage of people mentioning the availability of seats in parks is about the same in all cities except Raipur (47%). For playgrounds, the lowest availability of seats was in Dimapur (32%), Shimla (38%), Raipur (39%) and Delhi (56%). In other cities, the trend was similar to the national average. Only 38% of the people reported having seats in streets, and this pattern was the same across all cities. However, 98% of the respondents in Surat and 71% in Chandigarh mentioned having seats in their streets. The survey also asked about the availability and functionality of play equipment in parks, playgrounds and creches/ anganwadis, particularly for children aged 0-5 years.

FIGURE 24 // AVAILABILITY AND FUNCTIONALITY OF PLAY EQUIPMENT IN PARKS, PLAYGROUNDS AND CRECHES

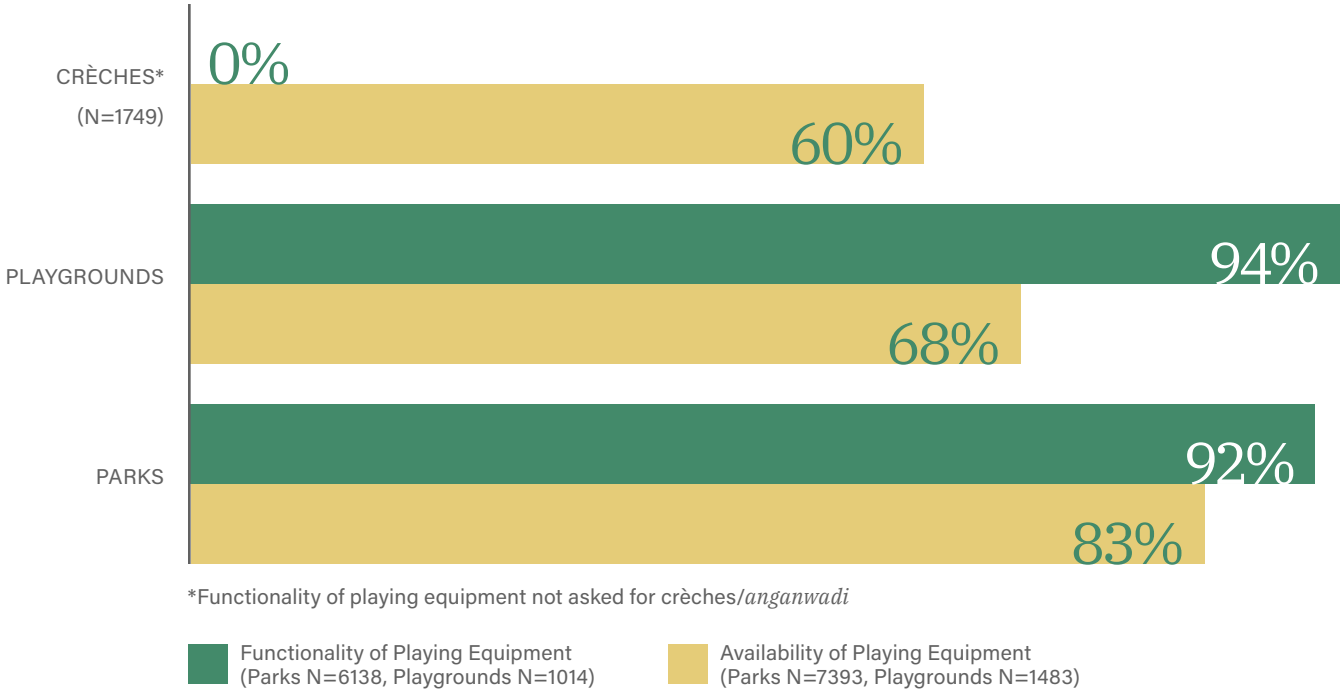


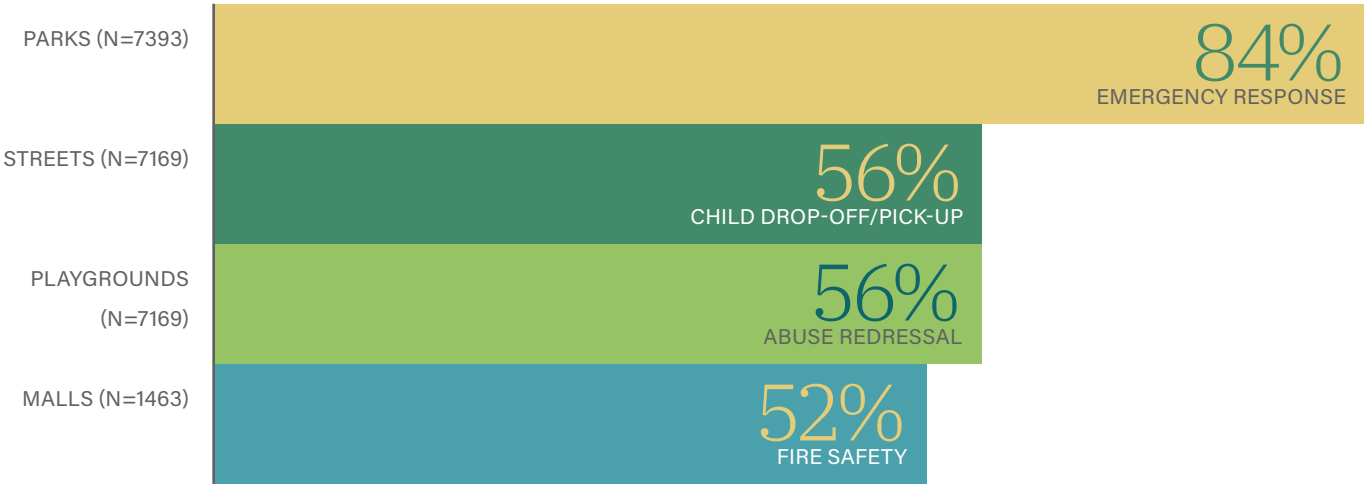
FIGURE 25 // AVAILABILITY OF FUNCTIONAL TOILETS AND DRINKING WATER IN PARKS AND PLAYGROUNDS

As shown in the figures above, a majority of the respondents said functional play equipment was available in parks. But when asked about playgrounds and creches, fewer people said they were available and functional. It can be inferred that while playgrounds have play equipment, they might be more suitable for older children than children under five years; the reasons for the state of creches needs to be studied further. Providing clean water to drink and toilet facilities in any public space are vital to avoid inconvenience to people. About 65% of the respondents said there are functional toilets and drinking water facilities in parks. City-wise, Surat, at 99%, reported the highest percentage of people who confirmed that there are toilets and drinking water facilities in parks, followed by Shillong and Bhubaneswar with 90% each, while Shimla and Delhi had the lowest percentages of 30% and 33%, respectively.

> “About 27% (N=7169) of the people surveyed said that it was hard to walk around streets, especially with a young child. The city where this difficulty was reported the most was Chandigarh (61%), followed by Jhansi (56%) and Shimla (52%).
>
> On the other hand, about 47% of the respondents said it is easy to move around in the streets of their city, with Vijayawada (83%) reporting the highest ease of movement, followed by Bhubaneswar (68%), Kolkata (64%), Shillong (59%), Chennai (54%) and Surat (53%).”

When it comes to playgrounds, 62% of the respondents said they have functional toilets and drinking water facilities. This is almost similar to parks. For playgrounds also, Surat tops the list with 90%, followed by Bhubaneswar with 86%, Vijayawada with 83% and Mumbai with 81%. At the bottom of the list stands Dimapur with only 13%, and Indore and Shimla with 29% of the respondents each confirming the availability of functional toilets and drinking water facilities. As cities grow, having green spaces in urban areas is important for people to relax. Figure 26 shows how much green space is available in parks, playgrounds, streets, and malls according to the people surveyed.

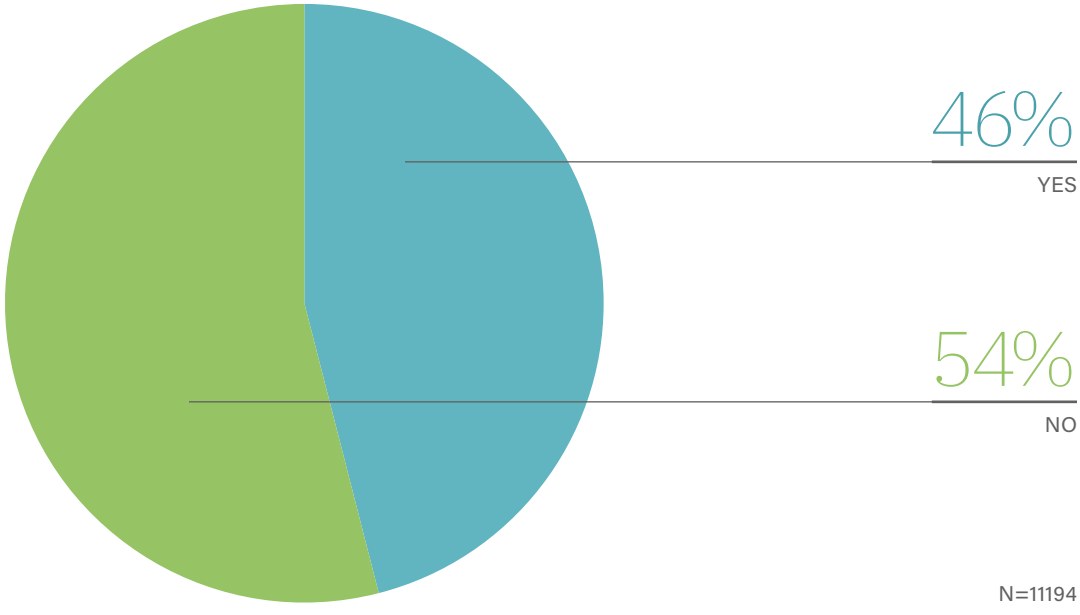
FIGURE 26 // AVAILABILITY OF GREEN SPACES IN PARKS, STREETS, PLAYGROUNDS, AND MALLS



3.6 Improvements, Challenges and Aspirations—Public Spaces

Only 46% of the respondents mentioned that there have been improvements in public spaces in their cities. The people's perception of these improvements in their cities is given in the Annexure.

FIGURE 27 // OVERALL PERCEPTION ON IMPROVEMENTS NOTICED IN PUBLIC SPACES



People's responses on the difficulties they face in public places were also recorded. According to 11194 responses, the top two challenges in terms of availability and accessibility of public spaces are the distance (66%) and transportation difficulties (51%). When it comes to maintenance, comfort and features, the top two difficulties are lack of cleanliness (63%) and not enough greenery (51%). City-wise figures on this issue are given in the Annexure.

The people were asked about suggestions for improving commuting and public spaces. Since many of them reported walking to public spaces, having safe walking spaces was one of the most common suggestions. The following figures show the top three wishes and suggestions from the respondents. The city-wise responses are given in the Annexure.

FIGURE 28 // SUGGESTIONS FROM THE RESPONDENTS TO IMPROVE PUBLIC SPACES

Suggestions on Overall Commute Experience (N=11194)

84%	67%	59%
Safe space for pedestrians to walk	Car/bike parking facilities outside public spaces	More bus stops to access these public facilities

Public Facilities That Must Be Available in the Locality (N=11194)

81%	78%	70%
More number of parks should be available around the locality	More greenery in the locality	Separate parking and walkways

Digital Exposure

Technology is an important part of our lives and the COVID-19 pandemic has made digital tools even more important. Given this fast changing situation, the survey tried to find out what caregivers thought about the use of digital devices by young children.

FIGURE 29 // USE OF DIGITAL DEVICES BY CHILDREN UNDER THE AGE OF 5

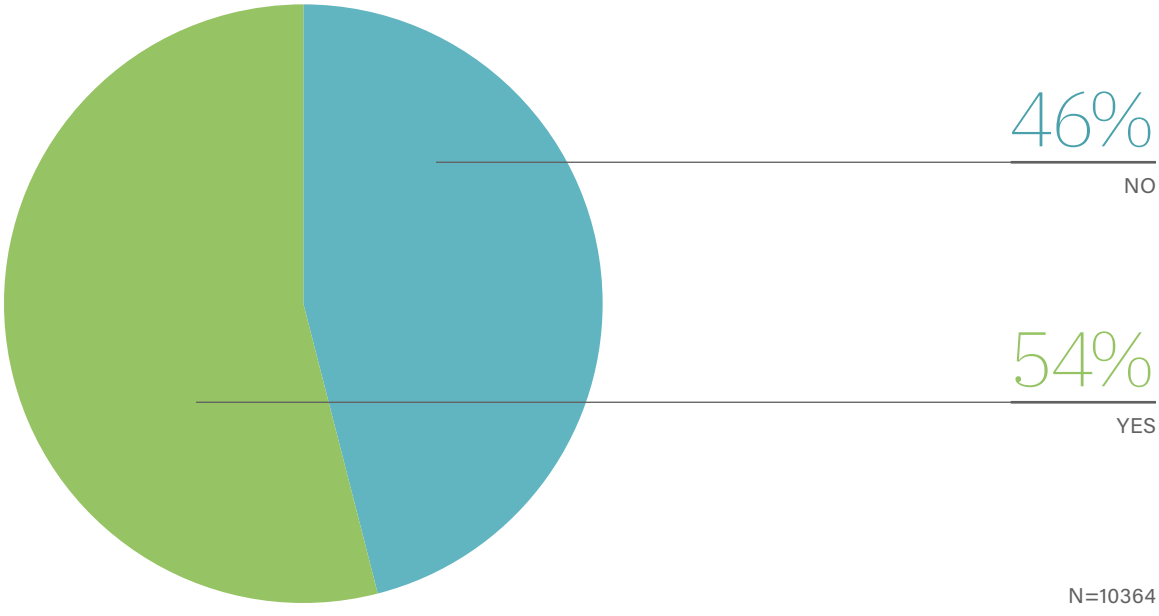


Figure above shows how children under the age of 5 use digital devices, as reported by the respondents. Most of the respondents who reported the use of smartphones are caregivers of children in the age group of 3 to 5. This trend is the same across all cities. Among those whose children use digital devices (N=5565), only 15% mentioned that they constantly monitored the child, while about 84% said that they check in on them sometimes.

> “About 48% of 5565 respondents said that young children spend one to three hours a day on using digital devices. Among the various applications, YouTube is the most popular, with 87% of the respondents mentioning it.”

The caregivers were asked about any behavioural changes, if any, in children after they were introduced to digital devices. The results are shown in Table 9. In general, the caregivers feel that there has been a positive impact. While there are some concerns, such as the risk of addiction or the potential impact on social skill development, the respondents believe that the benefits outweigh the risks.

TABLE 10 // CAREGIVERS' OPINION ON CHANGES IN CHILDREN'S BEHAVIOUR AFTER BEING INTRODUCED TO DIGITAL DEVICES

Response (N=5565)	Improves/Helps	Neutral	Damages
Socio-Emotional Development	66%	24%	10%
Vocabulary and Language Development	66%	27%	7%
Learning and Cognitive Development	72%	21%	7%
Physical Activity	59%	29%	12%
Sleep	50%	34%	16%
Behaviour	56%	31%	13%
Ability to Focus	60%	30%	10%
Parent-Child Interaction/Engagement	61%	30%	9%

The study team tried to understand if children of working women use digital devices more often. This is because digital devices are helpful for parents to keep children entertained when they are busy with work or other tasks. Working parents might let their children use these devices. Additionally, the study tried to understand how much time young children who use digital devices spend in public spaces. Table 10 shows that young children who use digital devices spend two hours less in public spaces as compared to those who don't use them.

TABLE 11 // RELATIONSHIP BETWEEN USE OF DIGITAL DEVICES AND TIME SPENT IN PUBLIC SPACES

		The Mean Number of Hours Spent Using Public Space in a Week
Use of Digital Gadgets By Young Children	Yes	7
	No	9

> “There is a noticeable link between the time young children spend on smartphones and the mean time spent in public spaces in a week. This connection might be one of the reasons why caregivers are spending less time in public spaces.
>
> *at 10% significance ”

Insights From City Officials

- In most of the surveyed cities, officials confirmed that there are no specific policies for child safety, and that if such policies exist, they are not aware of it due to lack of official communication.
- City officials said that the main focus in planning public spaces is on activities for teenagers, such as badminton and volleyball, and the elderly.
- Except for open spaces for general play, there’s no separate planning for children in the age group of 0-5 years in the development of public spaces.
- City officials mentioned that parks have play equipment and a sandbox for child safety.
- Since parks or playgrounds are mainly designed for neighbourhood use, city officials said that there is no requirement for drinking water units or toilets.
- Many officials noted that there is no public demand for specific changes to accommodate the needs of children under the age of 5 in their locality. This may be because the people aren’t aware of potential solutions, resulting in no action being taken for this age group.
- Officials suggested that community engagement is necessary for responsible use of public spaces.

4.0 Recommendations

Based on the surveys conducted, it has been observed that the availability of public spaces is not a pressing issue in most of the cities in India, however their access, quality, available amenities, safety etc. are the key concerns which impacts the level of usage of these public spaces by young children and their caregivers. As elaborated in the previous sections of the report and also based on additional analysis, the project team has developed a set of following recommendations have been arrived to improve the usage of public spaces by young children and caregivers in Indian cities. The team has also incorporated the suggestions given by different stakeholders during the dissemination stage while formulating the recommendations. It is suggested that each city should use these recommendations to delve deeper into their ongoing programs and formulate specific projects w.r.t local context in order to cater to the needs of young children, their caregivers and pregnant women:

4.1 Intervention Type: *Policy*

As of the present, the national government has taken for initiatives to develop National Policy For children 2013, National Early Childhood and Care Policy 2012 and National Education Policy 2020, however it is important to note that in spite of various departments working for young children and caregivers at national-level and state-level, these national policies have not started to make any impact on the ground in cities. Therefore, it is important that all these policies and related programmes and initiatives being taken by different ministries should be integerated to each other and a kind of guideline at city-level and state-level is available.

- **What**: State-level guideline should be developed that include provisions to be followed relating to national policies for improvement of public spaces and improving their usage, including impacts expected and indicators for success.

- **Who**: This initiative should be led by state government in association with NGO's and think tanks working on early child development issues and development for all.

- **Why**: This is needed because in the absence of any guideline or policy framework to guide public space design and maintenance with the focus on young children and caregivers as primary beneficiary it is difficult to realise change on ground.

4.2 Intervention Type: *Access to Funding*

As of the present, various urban development programmes and schemes such as Smart Cities, AMRUT etc., exist that can be leveraged to improve facilities and infrastructure in existing public spaces or even create new public spaces however very limited funding is available for regular upkeep and maintenance of existing public spaces.

- **What**: The government should work on the state-level CSR guidelines to include specific reference to public spaces with a focus on use by young children and caregivers.

- **Who**: This iniatitive should be led by state government in association with local NGO's and thinktanks working on early child development issues and development for all.

- **Why**: This intervention is important because in the absence of any funding provision for regular upkeep and maintenance of public spaces for young children and caregivers, city governments are dependent on funding opportunities from Urban Development programmes or funding resources from ULB budgets/elected representatives such as MLA etc.

4.3 Intervention Type: *Planning and Design*

The surveys indicate that the city officials in most of the cities are not aware about the need of planning and developing separate areas for young children, their caregivers and pregnant women. From the study team's discussions with the city representatives including the Councillors and Engineers, it is noted that there are more innovations for older children while no such considerations are in practice for the specific group of young children. It is important that the cities should start planning and include the concept of developing spaces with a perspective to cater to the needs of young children. The cities could initiate the following actions:

- **What**:
    - Map, identify and optimally design/redesign safe public spaces and their access at neighbourhood -level and encourage the target group to use the same.
    - Initiate a separate budget head by introducing a small amount which could be increased in the subsequent years based on the success of the projects.

- **Who**: This should led by the City government is association with local NGOs and think tanks working on early child development issues and development for all

- **Why**: This intervention is needed because in the absence of specific focus to the needs of young children and caregivers during planning or design stages of creation of public spaces seeing relevant changes on ground is unrealistic.

4.4 Intervention Type: *Infrastructure Improvement Relating to Public Spaces*

While adequate open spaces may exist in Indian cities, infrastructure that connects users to these spaces and infrastructure that improves the usage of these spaces remains a key constraint. At the infrastructure -level standards and guidelines that lay out clear requirements (required and desired) to be followed for public spaces need to be included in relevant state-level codes, standards and formats to address the needs of young children and caregivers

- **What**:
  - **Upgrading pedestrian infrastructure**: the survey indicates that walking is a preferred mode adopted by young children and their caregivers, therefore in order to enhance the usage of public spaces and also to provide easy and comfortable access to young children and their caregivers, the cities should plan for improving their pedestrian infrastructure such as maintaining footpaths, introducing missing footpaths on road stretches, pedestrian crossings, and street lighting. All such infrastructure should be developed with a gentle slope for easy movement of strollers and also for caregivers belonging to old age category. Adequate pedestrian infrastructure in cities will also encourage more people to walk and use public transport, thus reducing the number of cars on the road and improving air quality, which will again help in better health of young children. The cities should also:
    - Create an inventory of the city streets including details of the road section, presence of footpaths, pedestrian infrastructure
    - Identify critical spots such as accident-prone areas, existing parking areas.
    - Work together with local area citizen groups to identify the above spots and discuss the inventory with traffic management committee at city-level and ward-level with a focus on seamless mobility and promoting safer streets/roads for young children and their caregivers.
  - **Adequate public transport**: The survey indicated that a very less percentage (10%) of the respondents use public transport, majorly due to access issues i.e. difficulty in accessing bus stops with young children, poor conditions at the waiting stops as well the modes especially buses, inadequate frequency etc. Therefore, it is recommended that the cities should work on improving their existing public transport by taking up the following exercises:
    - Proper routes/rationalising the routes in order to cater to maximum population of the city
    - Redesigning the bus stops with adequate and comfortable seating spaces which would be easily accessible by the young children and their caregivers
    - Sufficient spaces for moving the stroller on the ramp at the alight areas
    - Introducing demarcation of seats for the caregivers travelling with young children
    - Conducting regular trainings and sensitisation of the PT operators with an aim to improve interactions with the target group and the operators
  - **Improving last mile connectivity**: It is also important to note that for covering shorter distances in order to access public spaces, adequate last mile connectivity

plays a major role. Therefore, it is suggested that based on the city typology and demand, cities should encourage adequate modes of intermediate public transport in order to cater to the needs of young children and their caregivers along with other citizens.

- **Who**: This should be led by state government in association with city governments and technical partners working on infrastructure standards and codes.

- **Why**: This is important as in the absence of clear codes, standards or frameworks accepted or introduced/included by the state government the infrastructure gaps identified in the study will not be addressed.

4.5 Intervention Type: *Monitoring and Evaluation*

The current study is one-of-a-kind exercise being undertaken that covered 18 cities across detailed parameters to understand the status of use of public spaces and reasons thereof. At individual city-level such assessments or studies are unheard of however it is important that local-level assessment and monitoring of public spaces is carried out with an outcomes approach—who uses, how much and why/why not.

- **What**:
    - Development of a low cost and easy to conduct measuring monitoring framework for use of public spaces especially with a focus on young children and caregivers that can be used to know the use case of public spaces in a city.

    - Also engage extensively with the local NGOs to sensitise citizens, youth, build capacity of the public representatives, city officials on the need of developing and maintaining public spaces for young children. It is crucial to educate the public on child safety and the importance of creating a safe and inclusive environment for young children, their caregivers and pregnant women. This can be achieved through awareness campaigns, community outreach programmes and educational initiatives targeting schools and other public institutions.

- **Who**: This should be led by the national-level think tanks working on early child development issues, and development for all etc. in association with local-level NGO's/community organisations.

- **Why**: This is needed because in the absence of uniform, easy to use and fast monitoring framework it is difficult to expect that any improvement will be sustained when not measured by local community.

4.6 Intervention Type: *Initiating the Change*

- **How**: Identifying and supporting a small cohort of lighthouse cities and partners for replication

  It is suggested that the national government in consultation with state governments should identify lighthouse cities and support them through various programmes for improving/renovating existing public spaces and developing new spaces in accordance with the needs of the young children identified in this study. Such cities should be identified from all categories of population with an equal focus on tier II and tier III cities in order to streamline growth and planning decisions of such cities.

4.7 Intervention Type: *Engaging with Communities*

- **How** : Identifying and supporting active citizen groups and individuals

    - It is suggested that in each city the city government should involve and engage with the active community groups to identify potential areas/spaces at local-level with an idea for developing spaces specifically for young children.

- The active citizens/youth from each ward should be identified and trained for sensitising the caregivers of the young children along with the pregnant women
- The government should also be involved with these groups at the time of planning and designing

> "The study has indicated the exposure of young children towards electronic gadgets which might affect their physical and mental health. This could be majorly due to nuclear families, working parents, easy access to electronic gadgets etc. As a part of the study it is advised that a deeper study should be conducted for this aspect and at the same time awareness programmes should be developed and conducted for the caregivers of young children."

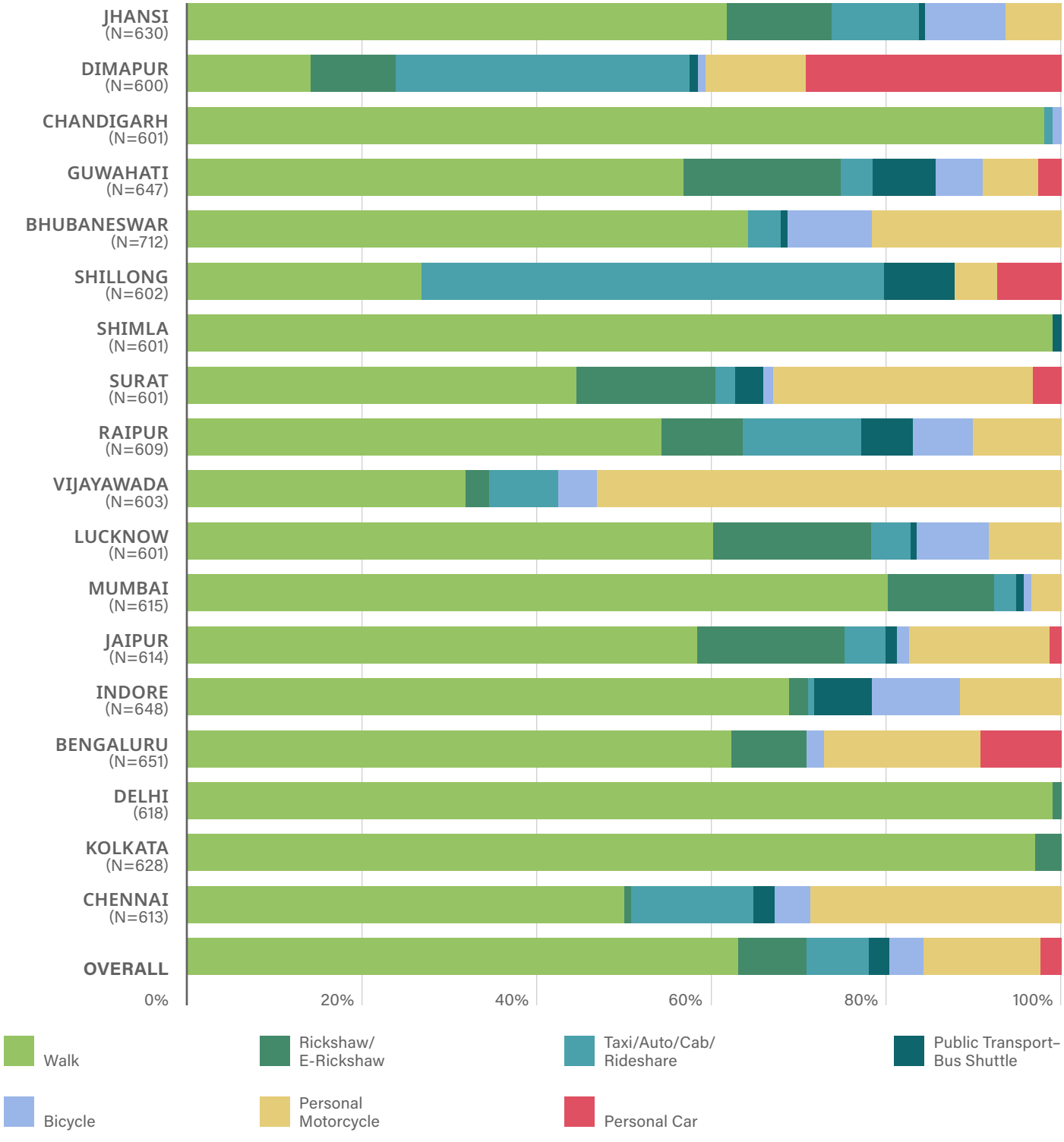
The above recommendations have been developed based on the household surveys conducted in 18 cities and in-depth interviews with city officials. The perception of the respondents (caregivers of the respondents, pregnant women, city representatives) from across different geographical regions, population sizes have served as a base to suggest actions for the decision makers in their planning process.

Further to the Government of India's initiatives for young children such as Nurturing Neighbourhoods, Streets for all, Early Childhood and Care Policy of 2012 etc., the project team through this study has made efforts to assess the status of public spaces in 18 Indian cities w.r.t their usage by the vulnerable groups- young children, their caregivers and pregnant women to provide a nationwide assessment on Urban public usage by young children and pregnant women. Since this is an independent study, first of its kind covering considerable parameters and aspects specific to the target group, it is envisioned that the study will help the cities and decision makers and also practitioners to use and validate the existing situation and usage of their public spaces. It is also important to agree that cities need encouragement and inspiration, hence support from visionary partners, agencies will help them initiate and continue their work in the right direction to make our cities responsive to the needs of this focus group.

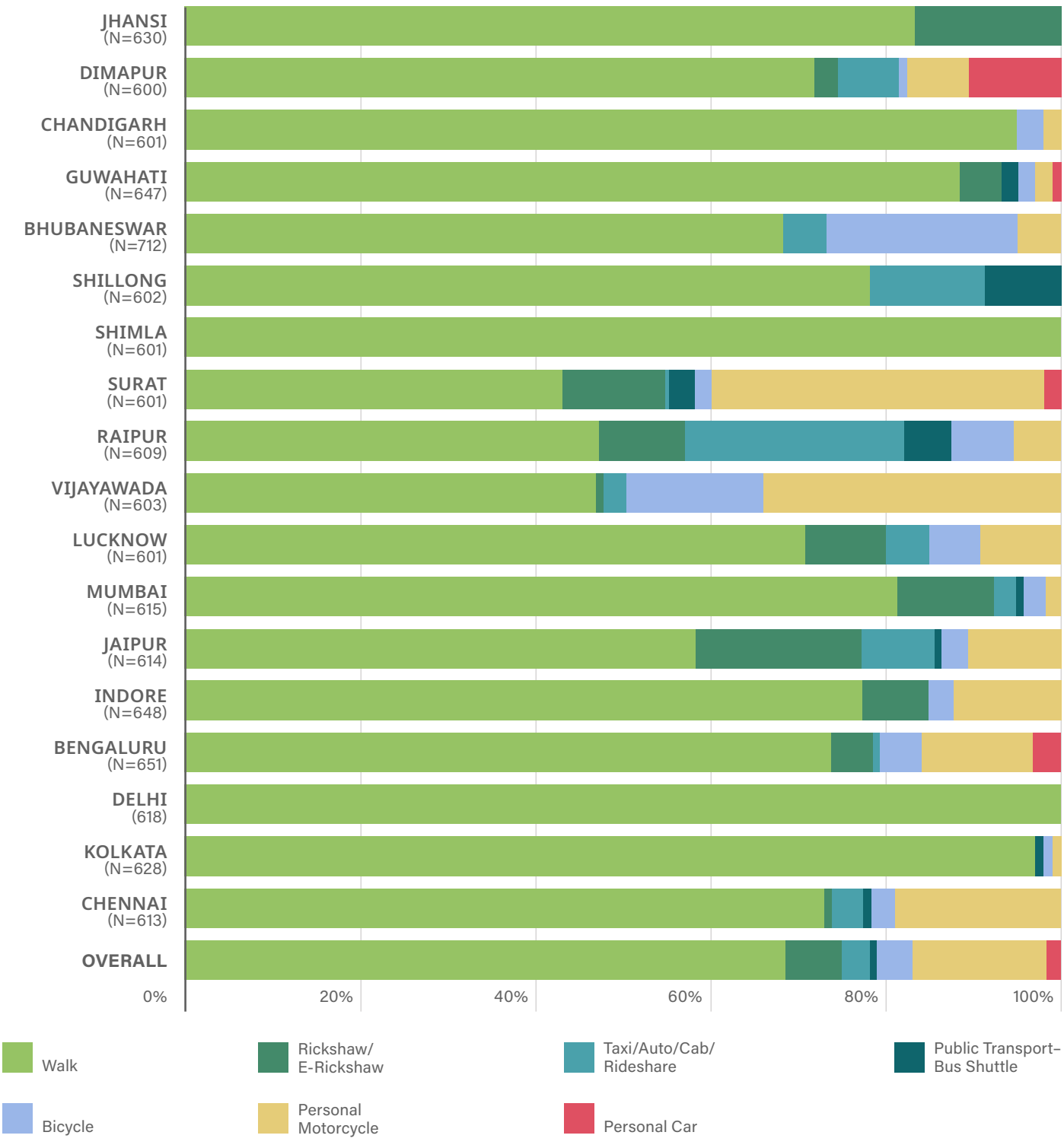
5.0 Annexures

Annexure 1 **Data Analysis**

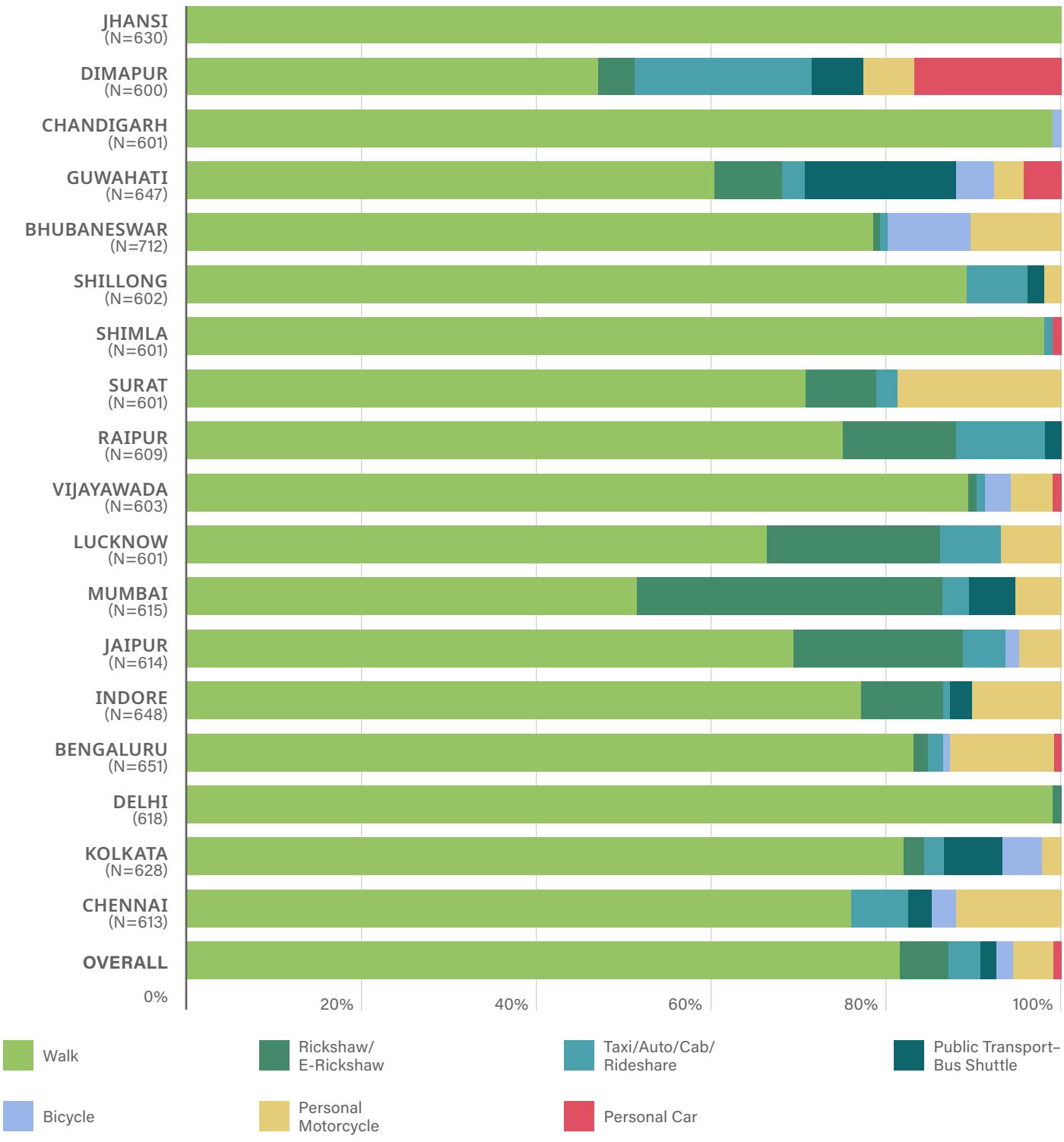
TRANSIT MODE USED TO ACCESS PARKS (% OF RESPONDENTS REPORTED)



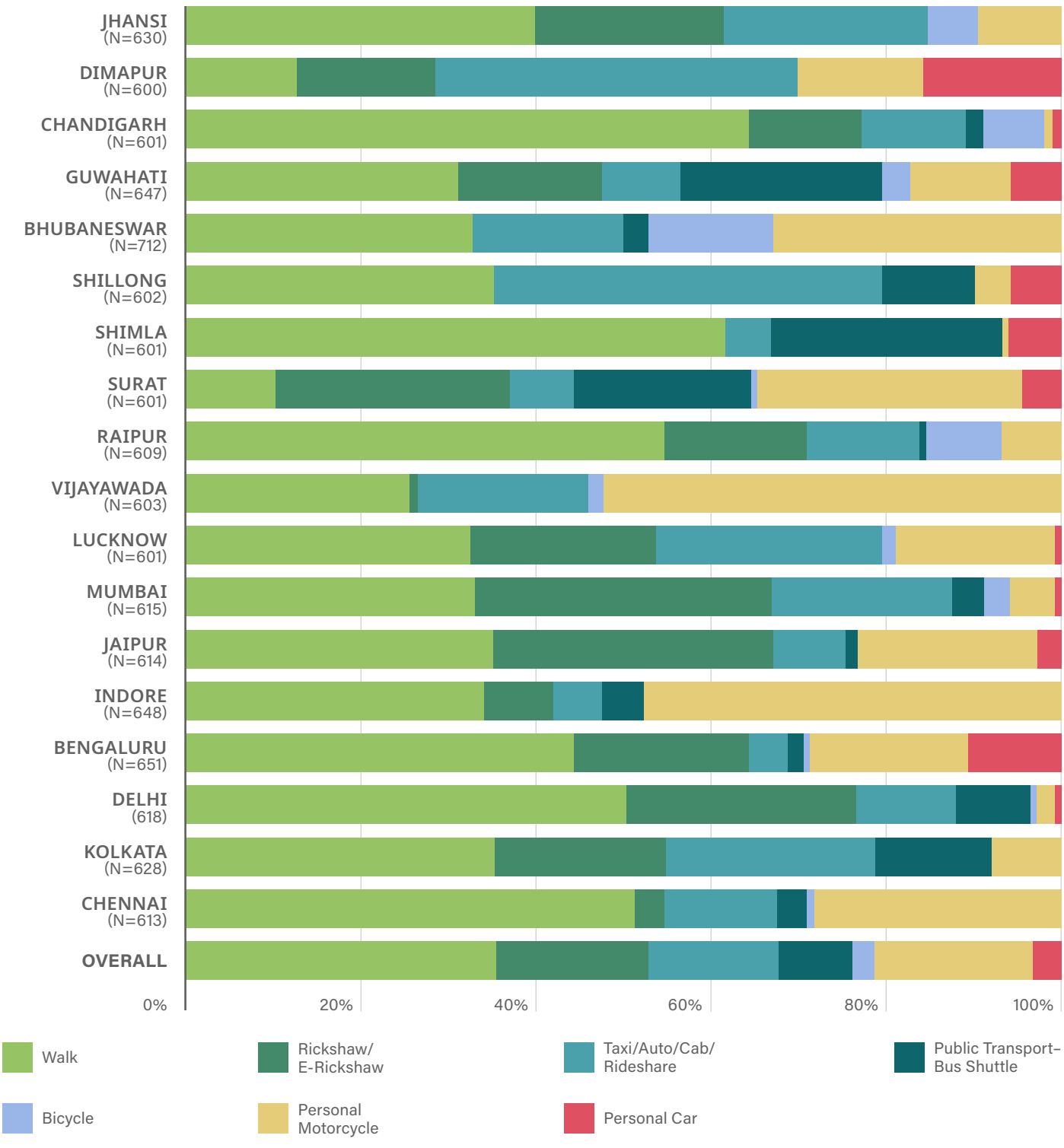
TRANSIT MODE USED TO ACCESS PLAYGROUNDS (% OF RESPONDENTS REPORTED)



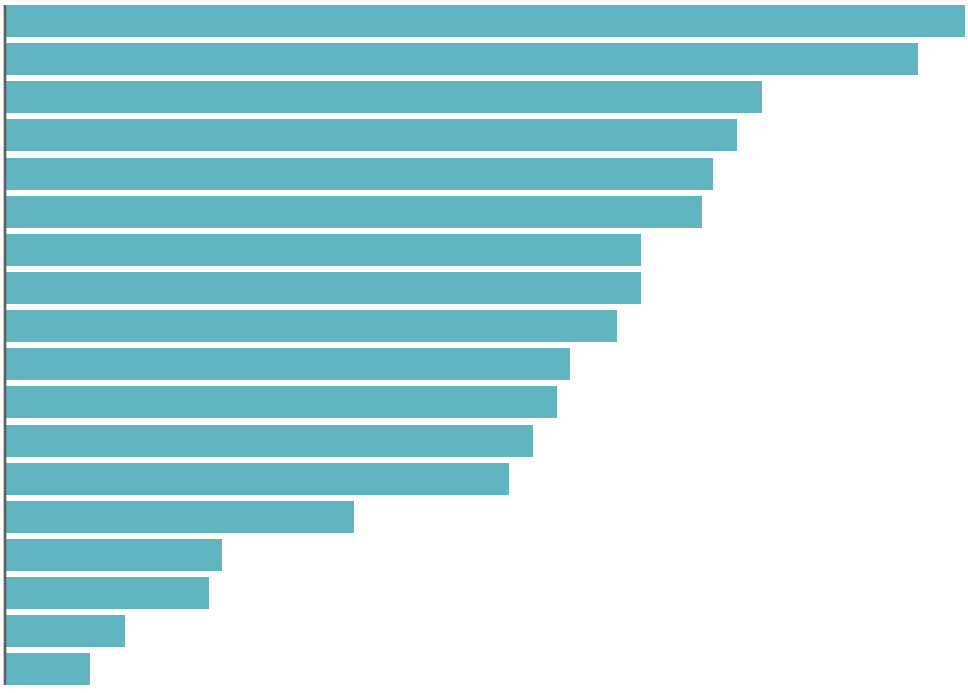
TRANSIT MODE USED TO ACCESS CRÈCHE (% OF RESPONDENTS REPORTED)



TRANSIT MODE USED TO ACCESS HEALTH FACILITIES (% OF RESPONDENTS REPORTED)

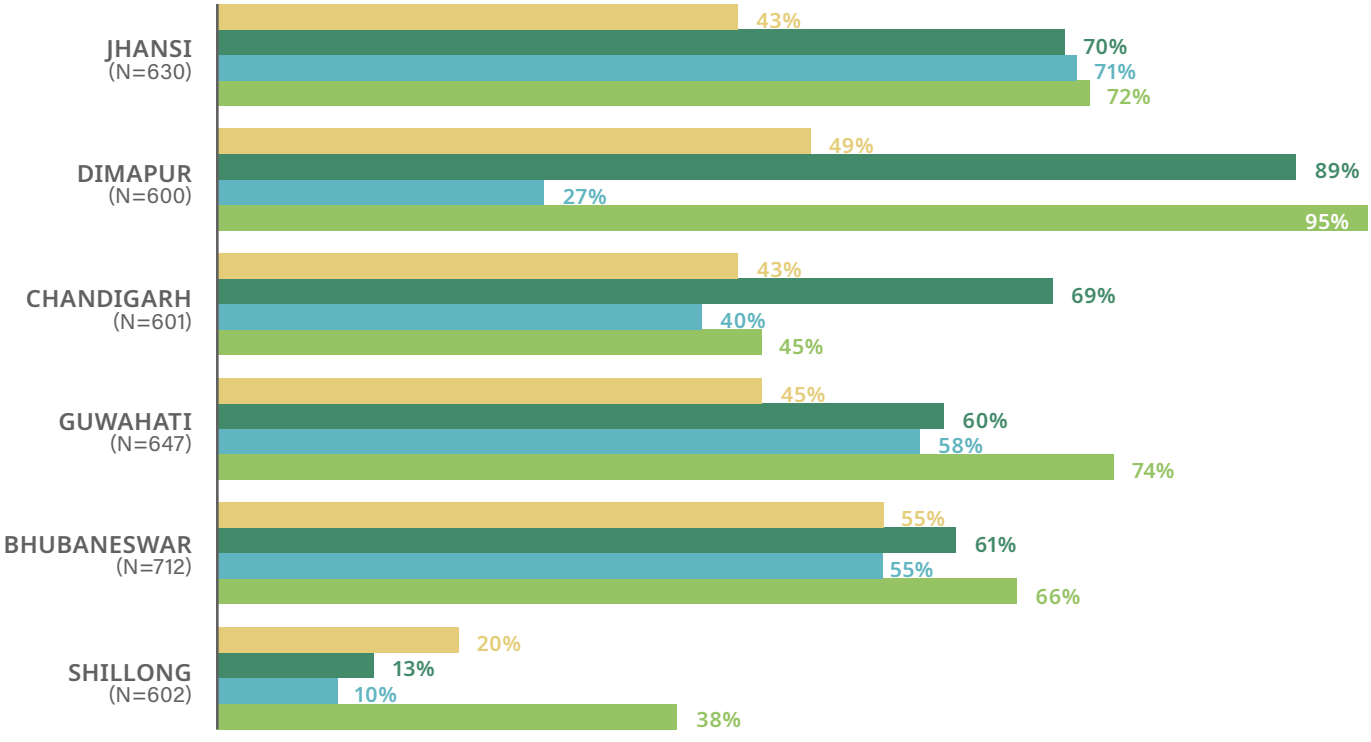


IMPROVEMENT IN THE CITY'S INFRASTRUCTURE IN THE LAST 1–2 YEARS



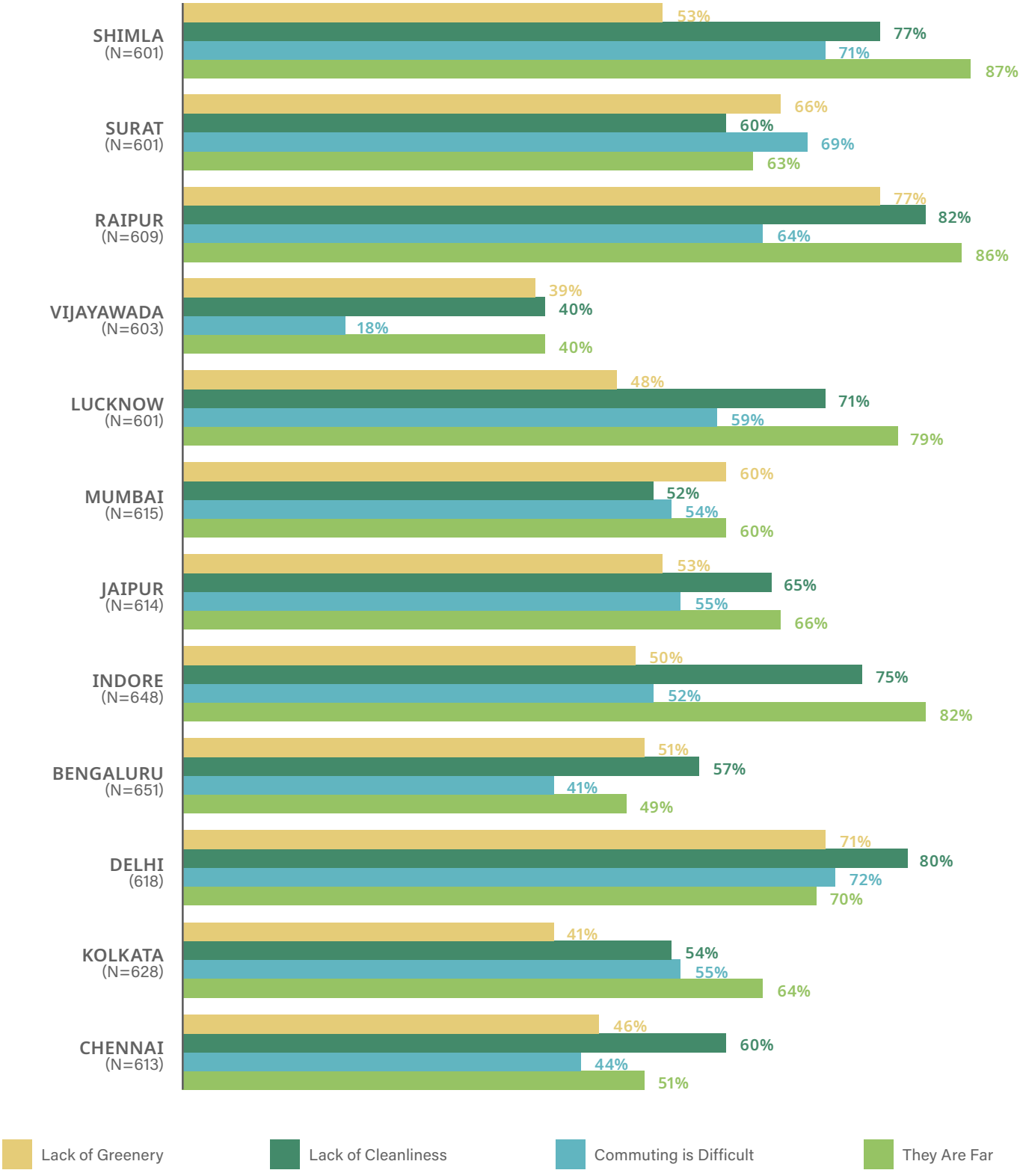
Percentage of Respondents Who Said "Yes"

CITY-WISE CHALLENGES REPORTED BY THE RESPONDENTS IN ACCESSING AND USING PUBLIC SPACES

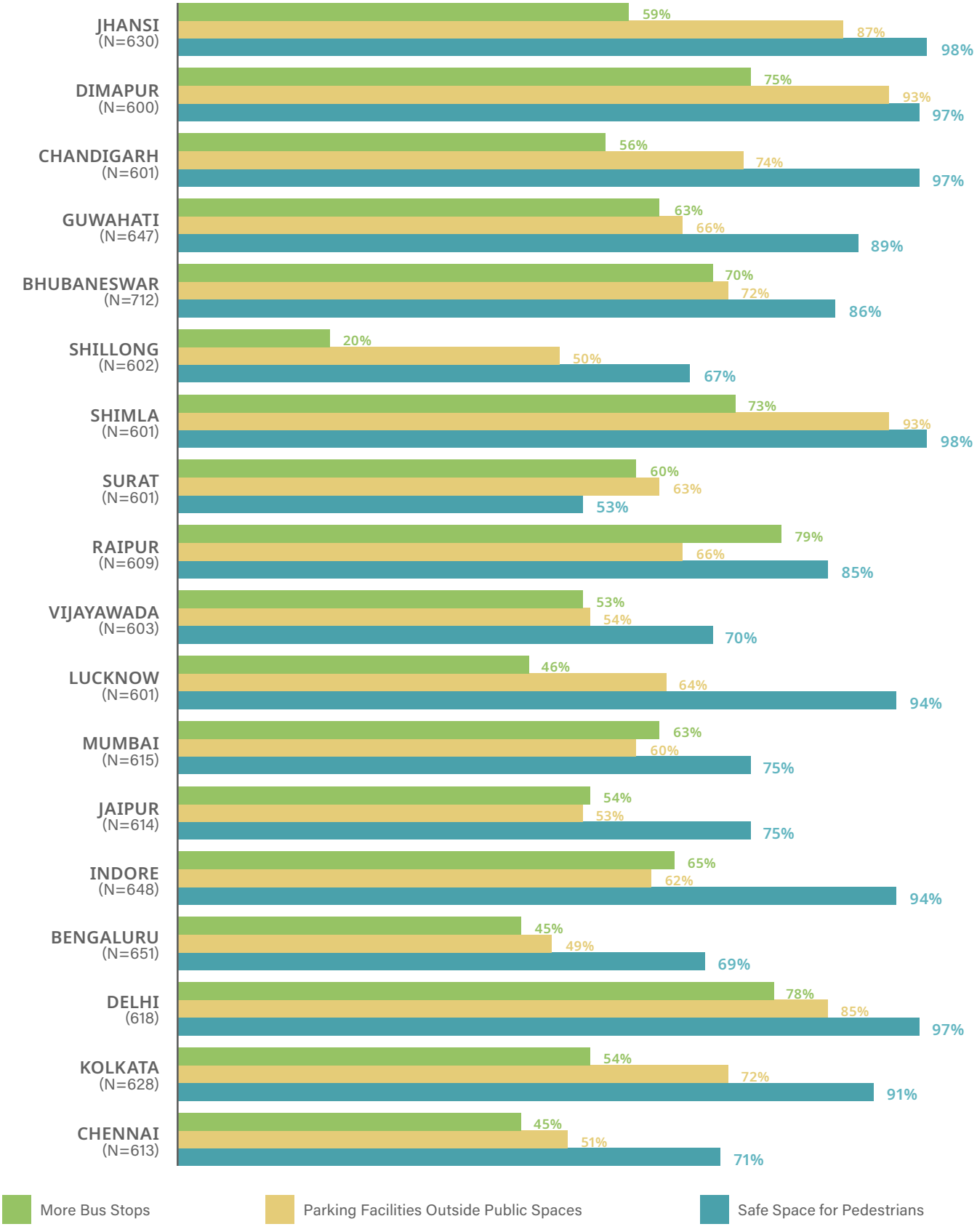


Continued »

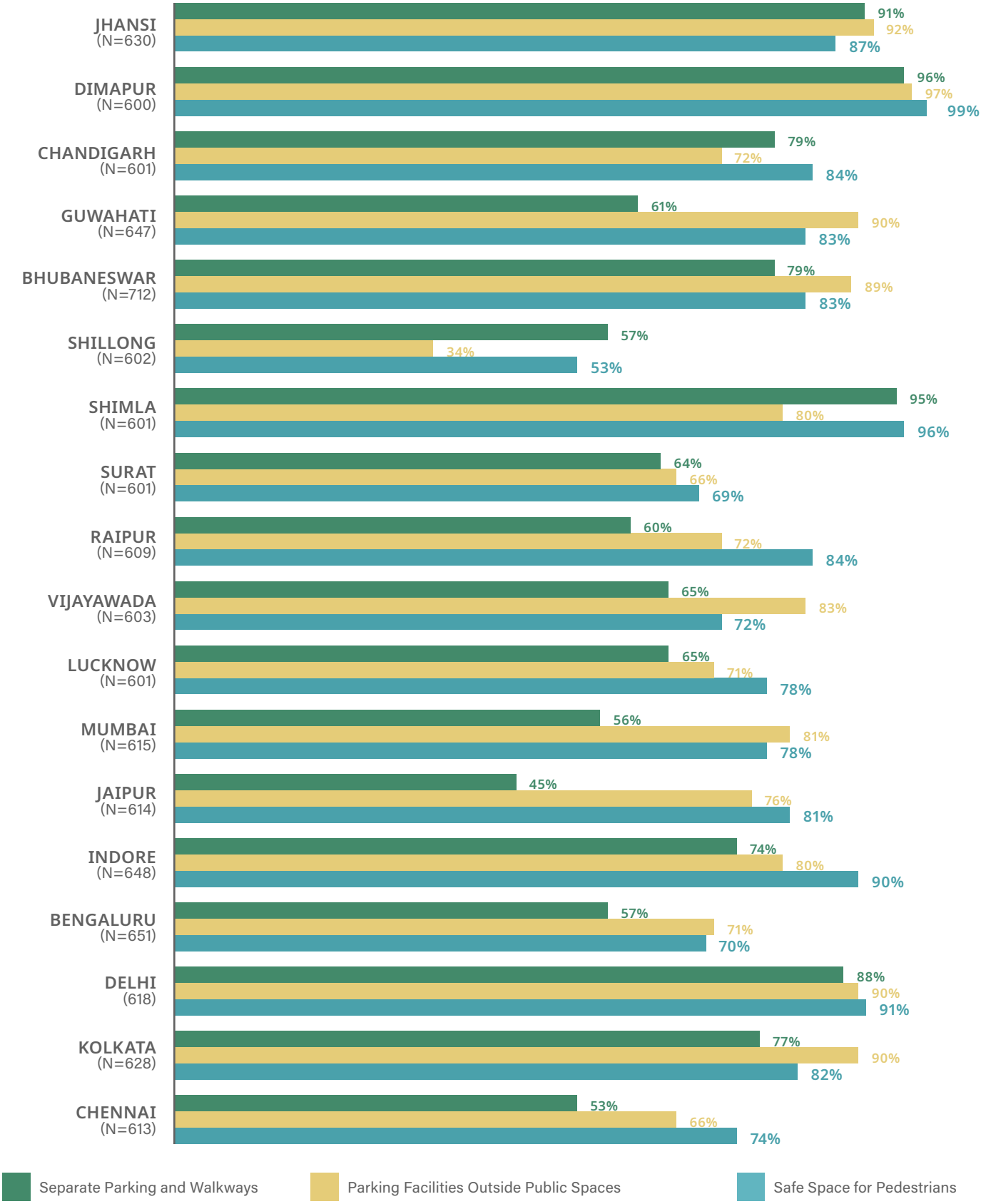
CITY-WISE CHALLENGES REPORTED BY THE RESPONDENTS IN ACCESSING AND USING PUBLIC SPACES (CONTINUED)



SUGGESTIONS RECEIVED FROM THE RESPONDENTS TO IMPROVE OVERALL COMMUTING EXPERIENCE IN THEIR RESPECTIVE CITIES



PUBLIC FACILITIES THAT MUST BE AVAILABLE IN THE LOCALITY AS PER THE RESPONDENTS



Annexure 2 **Household Questionnaire**

Survey Questionnaire: Quantitative

Screener Questions

Section 0: Consent

0.1 Informed consent form read out by interviewer

0.2 Consent received to interview

☐ Yes, willing to participate

☐ No, not willing to participate (end of the interview)

Section 1: Household Location Detail

1.1 Name of the city:

Delhi	Lucknow	Jaipur
Bengaluru	Vijayawada	Bhubaneswar
Kolkata	Raipur	Shillong
Mumbai	Surat	Jhansi
Chennai	Chandigarh	Dimapur
Indore	Guwahati	Shimla

1.2 NAME OF WARD: .....
(Scripter: Drop down of city-wise list of wards attached in excel)

1.3 Name of the CEB: .....*(text)*

1.4 Area of residence in the city:.....*(text)*

1.4A. Type of location of settlement *(Interviewer: By Observation)*

1. Slum
2. Non-slum

1.5 Pincode: .....*(Number)*

Section 2: Details of Household

2.1 Number of all members residing and working/running business in the household:

	M	F	Children	
Total				
Working/Business				(SKIP 3.2 if F = 0)

2.2 Number of young children in the household and their ages:

If a pregnant woman is present in a HH *(add response for pregnant women even)*

Age (0–5) and gender of the young child considered for this survey

A. Age group:

1. 0–1 (Infants)
2. 1–3 (Toddlers)
3. 3–5 (Young children)

B. Gender:

1. Male
2. Female
    - *(Go to Q.No. 3.1 if age of the young child <=5 years, if age of all children >5 years then suspend only caregiver sections. Also, check for availability of pregnant women in both the cases) (skip this if number of children in 2.1 is zero)*
    - *(Note to scripter/interviewers: young children are those who are less than or equal to 5 years old)*

C. Number of pregnant women (number):

- *(If no. of pregnant women is also 0 along with condition given above terminate the interview. If only pregnant women are there without children <=5 years proceed to pregnant women and common sections)*
- *Note to interviewer: While asking questions to pregnant women, we will ask her to keep only her current pregnancy in mind. Not to think of her previous pregnancies (if any) or any childcare she has done in the past for family.*

Section 3: Socio-Economic Background

3.1 Occupation of the CWE:

1. Cultivation including animal husbandry
2. Agricultural wage labour
3. Non-agricultural wage labour
4. Salaried employee

5. Self-employed–Professional
6. Self-employed–Other/Business
7. Retired
8. Any other, specify

3.2 Is the pregnant woman/mother of the said young child/young children working?

1. Yes
2. No *(Skip 3.3)*

3.3 What is the occupation of pregnant woman/mother of the said young child/young children?

1. Cultivation including animal husbandry
2. Agricultural wage labour
3. Non-agricultural wage labour
4. Salaried employee
5. Self-employed–Professional
6. Self-employed–Other/Business
7. Any other, specify

3.4 Highest educational qualification of the CWE:.....

1. Illiterate
2. Literate but no formal education/school up to 4 years
3. School 5–9 years
4. SSC/HSC
5. Some college (including diploma) but not graduate
6. Graduate/Postgraduate–General
7. Graduate/Postgraduate–Professional

3.5 Please tell me which of these items are owned personally by you/your family i.e., excluding the ones provided by employer or items that are owned but not used by anyone in the family:

1. Electricity connection
2. Ceiling fan
3. LPG stove
4. Two-wheeler (motorcycle/scooter)
5. Colour TV
6. Refrigerator
7. Washing machine
8. Personal computer/laptop
9. Car/jeep/van
10. Air conditioner
11. Agricultural land under cultivation
12. Personal land
13. Own a house in the city

3.6 SEC: Literacy level of chief wage earner

№ OF ASSETS (FROM 3.5)	CHIEF WAGE EARNER—EDUCATION (FROM 3.4)							
	Illiterate	Literate but no formal schooling/ school up to 4 years	School–5 to 9 years	SSC/HSC	Some college (including a diploma) but not graduate)	Some college (including a diploma) but not graduate)	Graduate/ post-graduate—General	Graduate/ post-graduate—Professional
	CODE	**1**	**2**	**3**	**4**	**5**	**6**	**7**
None	**01**	E3	E2	E2	E2	E2	E1	D2
1	**02**	E2	E1	E1	E1	D2	D2	D2
2	**03**	E1	E1	D2	D2	D1	D1	D1
3	**04**	D2	D2	D1	D1	C2	C2	C2
4	**05**	D1	C2	C2	C1	C1	B2	B2
5	**06**	C2	C1	C1	B2	B1	B1	B1
6	**07**	C1	B2	B2	B1	A3	A3	A3
7	**08**	C1	B1	B1	A3	A3	A2	A2
8	**09**	B1	A3	A3	A3	A2	A2	A2
9 or more	**10**	B1	A3	A3	A2	A2	A1	A1

3.7 Is the current respondent caregiver or pregnant woman?

Based on the response selected, there are two separate sections:

1. Caregivers
2. Pregnant women

Some questions are common to both respondents and will open for both.

CAREGIVER SECTION ONLY

Section 4: Respondent Profile

4.1 Respondent name: ..... *(text)*

Respondent age: ..... *(number)*

Respondent gender: .....

4.2 Caregiver profile:

(Interviewer note: If there are multiple young children, please ask the respondent to respond only for one young child) (Options selected in Q 2.2 (A) should match options selected in Q4.2)

1. Caregiver of children 0–1 (infants)
2. Caregiver of children 1–3 (toddler)
3. Caregiver of children 3–5 (young children)

4.3 Current respondent:

1. Mother
2. Father
3. Grandfather
4. Grandmother
5. Uncle
6. Aunt
7. House help
8. Nanny
9. Others, specify

4.4 How many number of hours do you spend with your young child in a week using public spaces?

Number of hours *(number)*: .....

COMMON SECTION

Section 5: No. of functional public spaces accessible and pattern of usage (freq, no. of different public space used at different times)

5.1 In the last 1–2 months, what all public spaces you have accessed (with your young child)?

1. Parks and open spaces
2. Neighbourhood streets
3. Playgrounds
4. Crèche/day-care centres/kindergartens/government *anganwadi*
5. Hospitals/PHCs/health centres
6. Malls
7. Public informal spaces like garages, terrace, parking, etc.
8. Others, specify

5.1.a Why are your young children playing in informal spaces like garages, terrace, parking, etc. instead of playing in parks and playgrounds? *(Only ask this if option 7 is selected in Q5.1.)*

1. Parks and playgrounds are far away/not available nearby
2. It is not safe for children going outside of our premises
3. We don't want our children to move away from our sight
4. Others, specify

5.2 In the last 1–2 months, what are the top 2 public spaces you have accessed (with your young child)?
(TOP 2 PUBLIC SPACES ACCESSED AND ONLY THESE TWO OPTIONS WILL OPEN FOR RESPONDENT IN FOLLOWING SECTIONS.)

1. Parks and open spaces
2. Neighbourhood streets
3. Playgrounds
4. Crèche/day-care centres/kindergartens/government *anganwadi*
5. Hospitals/PHCs/health centres
6. Malls

5.3 Do you have sufficient open public spaces (parks, playgrounds, crèches, neighbourhood open spaces, hospitals, malls) in your locality to take young children to?

1. Strongly agree
2. Agree
3. Neutral/don't know
4. Disagree
5. Strongly disagree

5.4 How much time do you spend (with your young child) outdoor in a week (not including crèche hours)?

1. Up to 30 minutes
2. >30 and <60 minutes
3. 1 and <2 hours
4. 2 and <3 hours
5. 3 and <5 hours
6. Equal or more than 5 hours

Section 6: Pregnant Women Only

6.1 Are you currently pregnant?

1. Yes *(Go to further questions of the section)*
2. No *(Terminate)*

6.2 How often do you utilise the public facilities during your pregnancy?

1. Every evening/morning
2. Some days in a week
3. Once in a month
4. Never *(Skip 6.3)*
5. Others, specify

6.3 What all places do you visit/utilise in your current pregnancy? [Multi-response]

1. Parks
2. Playground
3. Nearby garden area
4. Neighbourhood streets
5. Hospitals/PHCs/health centres

6. Malls
7. Others, specify

Section 7:

Note: The sections below are separate section for parks, playgrounds and neighbourhood streets, creches and hospitals. These will open only if they are accessed by respondents. The language of the questions will change based on whether caregiver or pregnant woman is responding. [Crèche section will not open for pregnant women. Rest 5 will open based on her past access.]

7.1 Parks (to open for both caregiver and pregnant woman):

7.1.1 How many no. of parks are accessible in your area within 10–15 minutes walkable distance?

..... (number)

7.1.2 Do you think these parks are safe for (young child) usage?

1. Yes
2. No

7.1.3 How safe do you feel in the park you visit?

1. Safe
2. Neutral
3. Unsafe

7.1.4 Why do you not feel safe visiting the park? *(Only if option 2 in 7.1.2 and option 3 in 7.1.3 are selected, otherwise skip this question)* [Multi-response]

1. No boundary walls/fencing
2. No CCTV
3. Uncontrolled vehicular movement
4. No security personnel
5. Others, specify

7.1.5 How often you visit these parks (with your young child) for outdoor activities?

1. Every morning
2. Every evening
3. Some days in a week
4. More than once a week
5. Once in a month
6. Others, specify

7.1.6 How do you commute to reach the park? [Multi-response]

1. Walk
2. Rickshaw/e-rickshaw
3. Taxi–auto/cab/rideshare
4. Public transport–bus/shuttle

5. Bicycle
6. Personal motorcycle
7. Personal car
8. Others, specify

7.1.7 Does the road outside the park you usually visit has speed control signage?

1. Yes
2. No

7.1.8 The park you usually visit, does it have functional lighting?

1. Yes
2. No

7.1.8.a The park you usually visit, does it have functional CCTV?

1. Yes
2. No
3. Don't know

7.1.9 Does the route taken to reach park is safe and young-child- and caregiver-friendly?

1. Yes
2. No

7.1.10 Is the grass in the ground well maintained and grown?

1. Yes
2. No

7.1.11 Are the sitting and resting areas in park maintained?

1. Yes
2. No

7.1.12 Are there functional and well-maintained toilets and drinking water facility in parks?

1. Yes
2. No

7.1.13 Are there swings and playing equipment and infrastructure accessible for young children between the age of 3 to 5 years old?

1. Yes
2. No *(Skip 7.1.14)*

7.1.14 Are the playing equipment functional and well-maintained?

1. Yes
2. No

7.2 Playground (to open for both caregiver and pregnant woman):

7.2.1 How many playgrounds are there in your locality within 10–15 minutes of walkable distance?

..... (number)

7.2.2 Are the playgrounds safe for young child and caregiver usage (keeping your young child in mind)?

1. Yes *(Skip 7.2.3)*
2. No (*Proceed to 7.2.3)*

7.2.3 Why do you not feel safe visiting a playground? *(Only if option 2 in 7.2.2, otherwise skip this question)* [Multi-response]

1. No boundary walls/fencing
2. No CCTV
3. No designated playing area for young children under age 5
4. No security personnel
5. Others, specify

7.2.4 How often do you visit the playground (with your young child) for outdoor games or playful activity?

1. Every morning
2. Every evening
3. Some days in a week
4. Once in a month
5. Others, specify

7.2.5 How do you commute to reach the playground (with your young child)? [Multi-response]

1. Walk
2. Rickshaw/e-rickshaw
3. Taxi–auto/cab/rideshare
4. Public transport–bus/shuttle
5. Bicycle
6. Personal motorcycle
7. Personal car
8. Others, specify

7.2.6 Does the road outside the playgrounds have speed control signage or visual cues for (young child) safety?

1. Yes
2. No

7.2.7 Does the playground where you/your young child usually visit has functional lighting?

1. Yes
2. No

7.2.7.a Does the playground where you/your young child usually visit has functional CCTV camera?

1. Yes
2. No
3. Don't know

7.2.8 Is the route taken to reach the playground safe and friendly for young child and caregiver?

1. Yes
2. No

7.2.9 Are there maintained sitting and resting areas in playground?

1. Yes
2. No

7.2.10 Are there functional and maintained toilets and drinking water facility in playground?

1. Yes
2. No

7.2.11 Are there swings and playing equipment and infrastructure accessible for young children between the age of 3 to 5 years old?

1. Yes
2. No *(Skip 7.2.12)*

7.2.12 Are the playing equipment functional and well-maintained?

1. Yes
2. No

7.3 Neighbourhood streets (to open for both caregiver and pregnant woman):

7.3.1 Do you (or your young child) use the neighbourhood street for any outdoor activity?

1. Yes
2. No

7.3.2 How often do you use the neighbourhood street for your young child's outdoor playful activity?

1. Every morning
2. Every evening
3. Some days in a week

4. Once in a month
5. Others, Specify

7.3.3 Do you think your neighbourhood streets are safe for young children (keeping your young child in mind)?

1. Yes
2. No

7.3.4 Do the roadsides of neighbourhood have speed control signage?

1. Yes
2. No

7.3.5 Is it easy to move around in your neighbourhood streets with a young child?

1. Not at all
2. Neutral
3. Absolutely

7.3.6 Do the neighbourhood streets have footpaths?

1. Yes
2. No

7.3.6.a. Do the neighbourhood streets have functional lighting in your housing area?

1. Yes
2. No

7.3.6.b. Do the neighbourhood streets have functional CCTV camera in your housing area?

1. Yes
2. No
3. Don't know

7.3.7 Does your neighbourhood have the greenery around?

1. Yes
2. No

7.3.8 Are there any benches or sitting areas available in neighbourhood?

1. Yes
2. No

7.4 Crèche/Day Care/Anganwadi (Caregiver only):

7.4.1 How often do you leave your young child in a crèche?

1. Everyday
2. Some days in a week
3. Only in weekdays

4. Once in a month
5. Others, Specify

7.4.2 How safe you feel your young child is when you leave your young child to crèche?

1. Safe
2. Neutral
3. Unsafe

7.4.3 How do you commute to reach the crèche with your young child? (Multi response):

1. Walk
2. Rickshaw /E-rickshaw
3. Taxi – Auto/Cab/Rideshare
4. Public Transport – Bus/Shuttle
5. Bicycle
6. Personal motorcycle
7. Personal Car
8. Others, Specify

7.4.4 Is the route taken to reach the crèche, safe and young child and caregiver friendly?

1. Yes
2. No

7.4.5 Is this place comfortable for you as a caregiver?

1. Yes
2. No
3. Not Sure

7.4.6 Are there swings and playing equipment and infrastructure accessible for young children between the age of 3 to 5 years old?

1. Yes
2. No (skip 7.4.7)

7.4.7 Are the playing equipment functional and well-maintained?

1. Yes
2. No

7.4.8 Are you aware of various policies of crèche/day care centre that you leave your young child in? (Multi response):

1. Fire safety (Yes/No)
2. Abuse (Yes/No)
3. Child drop-off/pick-up (Yes/No)
4. Emergency response (Yes/No)

7.5 Hospital (to open for both caregiver and pregnant woman):

7.5.1 Do you have any hospital facility located in your residential area according to your young child's medical requirement?

1. Yes
2. No

7.5.2 What type of health facility do you use or usually prefer to use? [Multi-response]

1. Private hospital
2. Government hospital
3. Health centres/PHCs
4. Private local clinics
5. Others, specify

7.5.3 How do you commute to reach the health facility with your young child? [MULTI-RESPONSE]

1. Walk
2. Rickshaw/e-rickshaw
3. Taxi–auto/cab/rideshare
4. Public transport–bus/shuttle
5. Bicycle
6. Personal motorcycle
7. Personal car
8. Others, specify

7.5.4 Is the route taken to reach the hospital, safe and young-child- and caregiver-friendly?

1. Yes
2. No

7.6 Malls (to open for both caregiver and pregnant woman):

7.6.1 What is the frequency of visits to malls with your young child in a week?

1. Once
2. Twice
3. Thrice
4. More than three times

7.6.2 What is the amount of time you spend at mall with your young child in a week?

1. Less than 1 hour
2. 1 and <2 hours
3. 2 and <3 hours
4. 3 and <4 hours
5. 5. Equal or more than 4 hours

7.6.3 At what time of the day do you prefer to visit a mall with your young child?

1. Morning
2. Afternoon
3. Evening
4. Night

7.6.4 Do you think malls are young-child- and caregiver-friendly?

1. Yes
2. No

7.6.5 Do you think malls are safe?

1. Yes
2. No

7.6.6 Are there any green areas in the premises of the malls to play that you visited with your young child?

1. Yes, in almost all malls
2. In a few malls
3. No

CAREGIVER SECTION ONLY

Section 8: Change in behaviour due to digital exposure

8.1 Does your young child use digital gadgets such as smartphone, tablets, TV, etc.?

1. Yes
2. No *(Skip to section 9)*

8.2 Does your young child use digital gadgets such as smartphone, tablets, TV, etc., in your supervision?

1. Yes, all the time
2. Yes, for some amount of time
3. No

8.3 For what purpose does your young child uses digital gadgets? [Multi-response]

1. Playing games
2. watching YouTube videos for entertainment
3. Online classes
4. watching movies/listening songs
5. Others, specify

8.4 How many hours in a day does your young child spends on digital gadgets?

1. Less than 30 minutes
2. 30–60 minutes
3. >1 and 2 hours
4. >2and3 hours
5. >3 and5 hours
6. More than 5 hours

8.5 What change do you see in your young child since he/she started spending his/her time on screen? *(Read out)*

Effect of digital media use on children on following areas:

Response	Improves/Helps	Neutral	Damages
Socio-emotional development	1	2	3
Vocabulary and language development	1	2	3
Learning and cognitive development	1	2	3
Physical activity	1	2	3
Sleep	1	2	3
Behaviour	1	2	3
Ability to focus	1	2	3
Parent child interaction/engagement	1	2	3

Section 9: City Infrastructure (both caregiver and pregnant women)

9.1 Has there been any improvement in your city infrastructure around your home in last 1–2 years with respect to young child and caregiver friendly facilities?

1. Yes
2. No (skip to 9.3)

9.2 What improvements have you noticed? [Multi-response]

1. More signages are there
2. More parking facilities
3. Parks and playgrounds have more equipment
4. More footpaths rebuilt
5. More ramps were built
6. Improvement of safety features
7. Basic necessities such as drinking water, walkways, toilets, trash cans, etc.

8. More plantations
9. Others, specify

9.3 How would you like your overall commute experience to improve? [Multi-response]

1. There should be safer space for pedestrians to walk
2. There are no rickshaws allowed in my area
3. There should be more bus stops to access these public facilities
4. Car/bike parking facilities outside public spaces
5. Availability of public transportation
6. Others, specify

Inhibition or challenges faced using public spaces, expectation of citizens and caregivers for improvement in current public spaces and suggestions (to open for both caregiver and pregnant woman):

9.4 In the questions above (Q5.1), you mentioned you do not visit some of the public facilities. What are reasons for not visiting or using some of the urban public facilities? [Multi-response]

1. They are far
2. They are not well-kept/maintained
3. Commuting is difficult
4. Not safe for young child
5. I do not like to go out because of weather
6. It is difficult to go out with young child/while pregnant
7. I have enough work at home to go out
8. Fear of animal attack or bite
9. Hygiene issues (such as faeces, overflow of drainage, garbage, etc.)
10. Busy roads
11. Fear of vehicles/roads accident
12. Threat of burglary
13. Threat of kidnapping and other possible crimes with young child or person accompanying the young child
14. Open area already encroached by parking lot or other unclaimed usages
15. Resident Welfare Association/any other group in the society has imposed restrictions
16. Noise level
17. Uncontrolled garbage
18. Smell
19. Open water bodies
20. Others, specify

9.5 What better facilities you expect in your locality? [Multi-response]

1. More number of accessible public amenities around the locality
2. Better commuting facilities
3. Safe and proper footpaths for walking
4. Removal of street vendors from walking area
5. Car speed limit should be strictly implemented

6. More police for safe movement to reduce cases of chain snatching, theft, assault, etc.
7. Strict implementations of traffic rules
8. Construction of covered playing areas for different weathers
9. More trees around the parks or gardens with regular planting and maintenance
10. Construction of more ramps
11. Others, specify

9.6 What all challenges do you face due to which you do not visit any urban public facility? [Multi-response]

1. Lack of cleanliness
2. Lack of functional physical infrastructure
3. Lack of greenery
4. No ramps were constructed
5. Walls and area enclosed are not well-developed
6. Sitting arrangement is not made properly such as benches, pavements, etc.
7. Non-availability of swings
8. Do not have any available public facility
9. All public spaces, available are not accessible
10. Do not feel safe
11. No transport facility to reach the public facility
12. Public facility available, are not well maintained/usable
13. Parks and playground available are occupied by young children playing sports such football/basketball/cricket
14. Do not use public facility due to personal health issue/reasons
15. Others, specify

9.7 What all public facilities would you expect to be improved in the public facilities in your area? [Multi-response] *(Read out)*

1. Availability of public amenities such as:
    b. Benches (Yes/No)
    c. Toilets facility (Yes/No)
    d. Drinking water (Yes/No)
    e. Functional walkways (Yes/No)
    f. Boundary walls (Yes/No)
    g. Ramps (Yes/No)
    h. Regular cleanliness of infrastructure (Yes/No)
    i. Availability of dustbins (Yes/No)
    j. Increasing streets and neighbourhood green (Yes/No)
    k. Pedestrian routes/footpaths should be maintained e.g., free of obstacles and potholes repaired. (Yes/No)

9.8 What all public facilities would you expect that must be available in your locality/area?
[Multi-response]

1. Presence of a greater number of designated parks around the locality
2. More number of garden and greenery shall be present in nearby locality
3. Separation of parking lots and open walkway in neighbourhood streets
4. Others, specify

9.9 Are you concerned about air quality while visiting any public places with young children?

1. Yes
2. No

9.10 Is there anything else you would like to tell with respect to the usage of public places? ***(Text) (Not mandatory)*:**

Survey Questionnaire: Qualitative

Section 1: City profile overview

1. **Name of respondent:**

2. **Category of Respondent:**
   - A. City Nodal officer:
   - B. Mayor
   - C. Ward head (AI) Area Inspector
   - D. Nagar Panchayat Head
   - E. Nagar Palika Head
   - F. Ward Official
   - G. Politicians
   - H. City Blockhead
   - I. City Leaders/Senior City Executives

3. **Zone/division/ward/area name:** .....

4. **District name:** .....

5. **Official/stakeholders' organisation/department:** .....

6. **Contact details (phone no.):** .....

7. **What is your current designation?** .....

8. **Could you please tell us what is the average number of public spaces in your ward? Please add which all public spaces ARE YOU REFERRING TO.**

9. **What is the process and frequency of maintaining the public facilities? Are these facilities maintained by government department or a private contractor?**

10. **Do you think the distribution of public facilities in your city is adequate and fair?**

11. **Are all the available public places accessible to young children to play or are there any restrictions in public places?**

12. **Are there any more public facilities in planning stage in your city/area? What all public amenities/facilities are in the planning stage to improve the urban infrastructure especially for the pregnant women, young children, and their caregivers?**

13. **What has been the annual average budget allocation for parks/open spaces in last 3 years?**

14. **Please provide map with parks/open spaces marked of your city/area.**

Section 2: Public spaces available and maintenance

15. **What percentage of area is covered under parks, playgrounds, and open spaces as a percentage of total city area under your department's supervision?**

16. **What is the frequency of maintenance of parks (daily, weekly, monthly)?**

ALLOW SPONTANEOUS RESPONSE, THEN PROBE ON BELOW:

- Percentage of parks with drinking water, sanitation facilities and other amenities, of parks with security guards
- Percentage of parks with functional play equipment, swings etc.
- Whether play areas at different levels (zonal, city, neighbourhood) correspond to city's master plan provisions of age-appropriate play areas.
- Any special consideration for pregnant women, children and caregivers?

17. **In your regular meetings and decision making, do you have special plans for the safety and inclusion of infant, toddlers and young children in using the public facilities? If yes, what kind of plans do you have or what have you done in the past?**

Allow spontaneous response, then probe on below:

- **Public spaces:** Parks/general gardens, playscapes, public playground, sport-field, neighbourhood streets, parking areas in residential areas, etc.

18. **Please list parks depending upon typology in your city.**

19. **Which parks do you recommend as a model park– open space/worth visiting park in the city?**

Section 3: Facilities Available in Open Spaces

CITY:

20. **What percentage of roads in your city has sidewalks/footpaths?**

21. **What percentage of these sidewalks/footpaths have safety features (like railing, ramps)?**

22. **Are these sidewalks/footpaths free from encroachment? If no, what are your plans to make them free from encroachment?**

23. **Does the city have an explicit child safety policy or programme? If yes, please provide a copy of the policy.**

24. **Whether the city has a city-level traffic safety policy or traffic management plan keeping in mind the physical level activity of children through recreational open spaces and parks? If yes, please provide a copy of the policy.**

25. **What changes do you think, programmes like AMRUT and Smart City initiative have made for efficient use of a city's resources, addressing the needs of all citizens especially children regarding public spaces?**

26. **What changes do you think should be made to these programmes to address the needs of pregnant women and young children and their caregivers, regarding the usage of public spaces?**

Ward:

27. **Do all public facilities in your area (wards/block) such as parks, playgrounds, etc., have essential basic facilities such as toilet, walkways, drinking water, trash cans, etc.?**

28. **What are the recreational facilities these public areas have for children? Can you list out type of public areas (like park or playground etc.) having these recreational facilities?**

29. **What percentage of public facilities cater to disabled-friendly needs, in your ward/block?**

30. **Do you think, the public transport is easily accessible by the residents of your ward to reach these facilities?**

Section 4: Issues and challenges

31. **According to you, what are the top 5 challenges citizens face in using these public facilities? What can be done to address these issues?**

32. **What are the barriers in implementing child friendly policies especially regarding public spaces in your area? (E.g., funds, support, approvals, bureaucracy, etc.):**

33. **Do you have any redressal mechanism related to any of the public spaces such as parks?**

34. **Do you get complaints related to parks/open spaces? If yes, what is the nature of those complaints?**

35. **What is the number of the complaints you receive on yearly basis?**

36. **What is the mechanism adopted for resolving complaints?**

Section 6: Overall satisfaction and suggestion

37. **Please share your suggestions, if any, for the overall improvement of open spaces designated public facilities in terms of accessibility, safety, facilities, and cleanliness in the area under your supervision?**

38. **Regarding the public facilities in your area, is there a scope to improve these? What in your opinion should be done?**

39. **What other changes do you think should be made to improve the overall public infrastructure in the country more child-friendly?**

Annexure 3 **Indepth Interview Format**

General guidelines for qualitative interviews

The topics and questions below should be used to guide the discussion. Please do follow up on answers provided by the respondents by asking additional questions or probing with more appropriate questions. In particular, there are 3 main approaches to eliciting more information from the respondents:

- **Seek more detail or explanation of a response. For example:**
  - Tell me more about .....
  - Can you give an example of .....?
  - What next? .....

- **Explore the reasons behind a response. For example:**
  - What makes you say that? .....
  - What was it about ..... that made you decide to .....?

- **Seek clarity and check for inconsistencies. For example:**
  - Can you explain what you mean by ..... ?
  - Earlier you said ..... but it also seems like ..... . Can you explain?

DISCUSSION GUIDE FOR CHILD SURVEY

INTRODUCTION SESSION

First of all, I would like to extend my gratitude to you for agreeing to speak to us and share your views.

- *Explain the purpose of the in-depth interview:*
  I am ..... , working with Ipsos Research Pvt. Ltd., a global research organisation. We regularly carry out research on various topics. Currently, we are doing a survey to understand the perception, opinion and need gap, and level of satisfaction and utilisation with respect to urban public facilities and services available for infant, toddler and young children caregivers. This survey mainly aims at finding need-gap attributes of creating child-friendly urban spaces and their development-oriented spaces.
- *Inform the respondents of the probable duration of the discussion—approximately 45 minutes.*
- *Assure that the information shared will be kept completely confidential and no names or particulars would be divulged that will lead to the identification of individual responses that they give during this discussion.*
- *Explain that there are no right/wrong answers and obtaining opinion, perception and their individual experience is critical.*

Now, before we begin our discussion, let us try to know each other a little more. I have already introduced myself and would now like to get to know more about you. Please introduce yourself.

NOTE TO MODERATOR

- Moderator to keep the objectives of the research in mind while moderating and should ensure that we have answers to the research objectives at the end of the discussion.
- Moderator to ensure that all the questions of the discussion guide are covered by the end of the discussion.
- Moderator to ensure all the respondents actively participate throughout the entire discussion.

INSTRUCTION

Say to the respondent: "Thank you for your time. Your answers have been very helpful and informative. We are very grateful for the information you have provided. Do you have anything else you would like to add that we have not covered in the interview, or any questions or suggestions for us?" *Use the box below to record this.*

Say "Thank you", and close the discussion.

Annexure 4 **Knowledge Dissemination**

Since the study is one of the first, covering 18 cities in India, it is important to disseminate the findings. As planned dissemination has been done through webinars as well as in person workshops. All the suggestions received during the dissemination workshops have been incorporated in the final report.

Dissemination Plan adopted

S. No	Name of the event	Mode	Partners
1	Webinar- Introduction to studies (Jan 2023)	Online	ICLEI SA, VLF, IIT Delhi, IIT Kharagpur, IIT Gandhinagar, Jawahar Lal Nehru University, Ipsos Research Pvt. Ltd
2	Webinar- Findings from the studies (Feb 2023)	Online	ICLEI SA, VLF, IIT Delhi, IIT Kharagpur, IIT Gandhinagar, Jawahar Lal Nehru University, Ipsos Research Pvt. Ltd
3	Workshop at Guwahati- Findings from the studies (Nov 2023)	In person	ICLEI SA, Guwahati Municipal Corporation, VLF, IIT Delhi, IIT Kharagpur, IIT Gandhinagar, Jawahar Lal Nehru University, Ipsos Research Pvt. Ltd
4	Workshop at Kochi- Findings from the studies (Dec 2023)	In person	ICLEI SA, Kochi Municipal Corporation, VLF, IIT Delhi, IIT Kharagpur, IIT Gandhinagar, Jawahar Lal Nehru University, Ipsos Research Pvt. Ltd
5	Workshop at Delhi- Findings from the studies (Jan 2024)	In person	ICLEI SA, NIUA, VLF, IIT Delhi, IIT Kharagpur, IIT Gandhinagar, Jawahar Lal Nehru University, Ipsos Research Pvt. Ltd
6	Workshop at Panjim- Findings from the studies (Feb 2024)	In person	ICLEI SA, Imagine Smart City Panaji, VLF, IIT Delhi, IIT Kharagpur, IIT Gandhinagar, Jawahar Lal Nehru University, Ipsos Research Pvt. Ltd
7	Asia Pacific Climate Week (Nov 2023)	In person	GCAP & ADB
8	COP 28 at Dubai (Dec 2023)	In person	ICLEI Offices in the Asia Pacific Region

Endnotes

1 Varma, R. (2021). Reimagining safer school streets with children using the crosswalk program. IATSS research, 45(1), 39-48
2 https://wri-india.org/blog/what-makes-child-friendly-city-redesigning-safer-and-healthier-urban-spaces-young-people
3 https://issuu.com/bernardvanleerfoundation/docs/child-friendly_urban_design
4 Infants, toddlers, young children and their caregivers
5 Collins dictionary
6 Cambridge Dictionary
7 Early childhood development | UNICEF
8 BvLF_Urban95_Starter-Kit_2019.pdf (bernardvanleer.org), page 11.
9 Those houses which do not require any repairs and in good condition may be considered as 'Good'. (srsc-rr-090518-2.pdf (nirdpr.org.in) page 133).
10 BvLF_Urban95_Starter-Kit_2019.pdf (bernardvanleer.org), page 22
11 15112_Keeping Children Safe on the Road for WEB (who.int)
12 Rules and regulations for School Transport in NCR Delhi Region | BusOkay (July, 2017).
13 BvLF_Urban95_Starter-Kit_2019.pdf (bernardvanleer.org), page 5
14 BvLF_Urban95_Starter-Kit_2019.pdf (bernardvanleer.org)
15 BvLF_Urban95_Starter-Kit_2019.pdf (bernardvanleer.org)
16 9 out of 10 people worldwide breathe polluted air, but more countries are taking action (who.int) (May, 2018)

Glimpses from Dissemination workshops

Title

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