



## **SUB GROUP REPORT**



# **Child Protection in the Eleventh Five Year Plan (2007-2012)**

**Ministry of Women and Child Development  
Government of India  
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New Delhi**

## CONTENTS

	<u>Page</u>
<b>Chapter One: Introduction</b> .....	99
1.1 Context/Changed Programming Scenario for Child protection	
1.2 Protective Environment	
<b>Chapter Two: Situation Assessment</b> .....	110
2.1 Overview	
2.2 Girl Child	
2.3 Female Foeticide	
2.4 Child marriage	
2.5 Child labour	
2.6 Child trafficking, Commercial Sexual exploitation of Children and Child Pornography	
2.7 Children affected by HIV/AIDS	
2.8 Children in conflict with the law	
2.9 Children in Urban Situations	
2.10 Children in Disaster Situations (both natural and man-made)	
2.11 Children with Disabilities	
2.12 Children affected by Substance Abuse	
2.13 Institutional Care	
2.14 Non- institutional care (adoption, foster care, sponsorship)	
2.15 Crèches and Day Care	
2.16 Counselling	
<b>Chapter Three: Child Protection in the Five Year Plans</b> .....	165
3.1 Child Protection through the Five Year Plans	
3.2 Mid-Term Review of the Tenth Five Year Plan	
3.3 Budget Analysis for Child Protection	
<b>Chapter Four: Analysis of Policies and Laws</b> .....	193
4.1 Review of existing Provisions	
<b>Chapter Five: Strengthening the institutional framework for implementation</b> ...206	
5.1 Developing the required infrastructure	
5.2 Resources	
5.3 Assessment, capacity development, standards, monitoring	
<b>Chapter Six: Approach to the Eleventh Plan on Child Protection</b> .....	223
6.1 Strengthening the planning framework and knowledge base	
6.2 Strengthening legal framework	
6.3 Strengthen programming and monitoring, linkages with agencies and with other Sectors	
6.4 Preventive framework to be strengthened	
6.5 Strengthening the capacity development for services/ functioning of the protective environment	

- 6.6 Special emphasis on Girl Child and disability
- 6.7 Child Protection Outcomes for Eleventh Plan

**Chapter Seven: Recommendations for the Eleventh Plan and Financial Allocations.....241**

**Annexure**

- I: Expenditure on Child Protection- BE, RE and AE for Child Protection in Union Budget...257
- II: Term of Reference and Composition of the Sub-Group on Child Protection.....260
- III: Centrally Sponsored Integrated Child Protection Scheme (ICPS).....262
- IV: Rajiv Gandhi National Creche Scheme for Children of Working Mothers.....292

# Chapter One

## Introduction

### 1.1 Context

The newly created Ministry of Women and Child Development has taken charge of child protection programmes transferred from the Ministry of Social Justice and Empowerment. In addition to its nodal function on all policy issues related to children and the implementation and monitoring of CRC, the Ministry now has the primary responsibility for planning, implementation and coordination of child protection services. However, child protection is not the exclusive responsibility of the MWCD; other sectors have a vital role to play. The Ministry is therefore looking at child protection holistically and examining how to rationalize programmes and approaches for creating a strong protective environment for children, diversify and provide essential services for children, mobilize inter-sectoral response for strengthening child protection and set standards for care and services.

The Constitution of India recognizes the vulnerable position of children and their right to protection. Therefore, following the doctrine of protective discrimination, it guarantees in Article 15 special attention to children through necessary and special laws and policies that safeguard their rights. The right to equality, protection of life and personal liberty and the right against exploitation enshrined in Articles 14, 15, 16, 17, 21, 23 and 24 further reiterate India's commitment to the protection, safety, security and well-being of all its people, including children.

The Chapter on Directive Principles of State Policy in the Constitution of India enjoins that the State shall, in particular, direct its policy towards securing:

- (.) that the health and strength of workers, men and women, and the tender age of children are not abused and the citizens are not forced by economic necessity to enter avocations unsuited to their age or strength
- (..)those children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity and childhood and youth are protected against exploitation and against moral and material abandonment
- (...) that the State shall endeavour to provide early childhood care and education to all children until they complete the age of six years

India's National Policy for Children 1974 provides a framework for policy and planning for children. In 1992 India acceded to the United Nations Convention on the Rights of the Child (UNCRC), committing to take measures to ensure the survival, protection, participation and development of its children. At the World Summit for Children in 1990 India adopted the World Declaration for Survival, Protection and Development of children. Additionally, India ratified the Optional Protocols on the Use of Children in Armed Conflict and the Sale of Children, Child Prostitution, and Child Pornography in 2005. It also reaffirmed its commitment to children by adopting the Millennium Development Goals and a World Fit for Children. Moving towards its commitments, the Government of India introduced the National Charter for Children 2003, which stipulates the duties for the State and community, followed by a National Plan of Action

for Children in 2005, which ensures collective commitment and action towards the survival, development, protection and participation of children by all sectors and levels of government and civil society. India has also signed the SAARC Convention on Combating Trafficking and Commercial Sexual Exploitation of Women and Children, 2002, the SAARC Convention on Regional Arrangements for the Promotion of Child Welfare in South Asia, 2002 and is signatory to the SAARC Decade on the Rights of the Child 2001-2010, decided in Rawalpindi Resolution on Children in South Asia in 1996.

The National Common Minimum Programme specifically states that, “The UPA government will protect the rights of children, strive for elimination of child labour, ensure facilities for schooling and extend special care to the girl child.”

Despite such clear commitment to child protection enshrined in the Constitution of India and the UN Convention on the Rights of the Child ratified by India in 1992, and the two Optional Protocols ratified in 2005, and the various national and international commitments made, children continue to remain vulnerable with the number of those needing care and protection is ever increasing.

Five decades of planned development has indeed failed to address the critical issue of ‘Child Protection’. And in these many years a lot has changed in the lives of people, particularly children that calls for *a re-examination of the understanding of ‘Child Protection’ itself*.

## **Defining Child Protection**

‘Child Protection’ needs to be understood in terms of who are the children who need to be protected, from what/whom and how?

Every child has a right to protection. This not only includes children who are in difficult circumstances and those who have suffered violence, abuse and exploitation but also those who are not in any of these adverse situations and yet need to be protected in order to ensure that they remain within the social security and protective net.

‘Child Protection’ refers to protection from violence, exploitation, abuse and neglect. Violations of the child’s right to protection, in addition to being human rights violations, are also massive, under-recognized and under-reported barriers to child survival and development. Children subjected to violence, exploitation, abuse and neglect are at risk of: shortened lives, poor physical and mental health, educational problems (including dropping out of school), poor parenting skills later in life, homelessness, vagrancy and displacement.

Conversely, successful protection increases a child’s chances to grow up physically and mentally healthy, confident and self-respecting, and less likely to abuse or exploit others, including his or her own children.

The need to protect some children is certainly greater than others due to their specific socio-economic and political circumstances and geographical location. These are the children who are

more vulnerable in terms of the harm/danger/risk to their right to survival/development/participation. They are children in difficult circumstances and include:

- ✍ Homeless children (pavement dwellers, displaced/evicted, etc.)
- ✍ Refugee and migrants children
- ✍ Orphaned or abandoned and destitute children
- ✍ Children whose parents cannot, or are not able to take care of them
- ✍ Street and working children
- ✍ Child beggars
- ✍ Victims of child marriage
- ✍ Trafficked children
- ✍ Child prostitutes
- ✍ Children of prostitutes
- ✍ Children of prisoners
- ✍ Children affected by conflict / civil strife
- ✍ Children affected by disasters both natural and manmade
- ✍ Children affected by substance abuse, HIV/AIDS and other terminal diseases
- ✍ Disabled children
- ✍ Children belonging to ethnic, religious minorities and other socially marginalized groups
- ✍ The girl child
- ✍ Children in conflict with law (those who commit crimes)
- ✍ Children who are victims of crime

*'Child Protection' is about protecting children from or against any perceived or real danger/risk to their life, their personhood and childhood. It is about reducing their vulnerability to any kind of harm and in harmful situations. It is also about protecting children against social, psychological and emotional insecurity and distress. It must ensure that no child falls out of the social security and safety net and those who do, receive necessary care and protection to be brought back into the safety net.*

*Child protection is integrally linked to every other right of the child. The failure to ensure children's right to protection adversely affects all other rights of the child and the development of the full potential of the child.*

*Child protection is about protecting every right of every child.*

*It must also relate to children's capacity for self-reliance and self-defence and to the roles and responsibilities of family, community, society and State.*

### **The Approach to Child Protection**

The Government's approach to child protection so far has addressed largely those children who have already missed the protective net and fallen into difficult circumstances. Unfortunately the current coverage falls short of reaching the most vulnerable because the interventions through the existing schemes do not cover all the categories of children in difficult circumstances. Even where the interventions exist, for instance, institutional care for children in difficult circumstances, there is much room for improving the infrastructure and expanding the outreach. The quality of services needs up-gradation and regional imbalances need to be addressed.

For building on a comprehensive understanding of children's right to protection, it becomes important to adopt both *a preventive and a protective approach* to child protection.

The preventive approach – In all these years, application of the preventive approach has been limited to programmes like awareness generation, media advocacy, training and capacity building of various stakeholders, legal literacy, sex education in schools etc. The need of the hour calls for a wider outlook that must go beyond the conventional prevention strategies and

also take into account the link between child protection and other micro and macro development issues. Such a holistic understanding of prevention alone can help keep children within the protective net. Such a proactive approach includes mapping of areas to identify potentially vulnerable families and families with risky behaviour, where children are more vulnerable or likely to come into vulnerable situations. Strengthening the families and family environment must follow. Lateral linkages with different sectors viz. Education, Health, Rural Development Labour, Urban Affairs, Legal Affairs, Home Affairs etc. and different Departments and Ministries of Central and State Governments, including Local Self-Government, PRIs etc. need to be strengthened. A rights-based approach calls for addressing the root causes of any social problem. It is also important that partnership with civil society is strengthened for all stages of planning, implementation and monitoring child protection initiatives. Therefore, a proactive preventive approach as discussed above becomes inevitable.

The protective approach – The protective approach is to deal with situations post-harm and must include immediate as well as long-term protection strategies for all children who need it, including programmes for their physical and psychological recovery, rehabilitation and reintegration, legal aid and access to justice through child-friendly laws and procedures, and clear standards for protection of every individual/family/institution dealing with children.

It is critical to invest in child protection as protection failures are not only human rights violations, but are also major, under-recognized, under-reported and under-acted upon barriers to child survival and development. In addition, the links between protection and other development targets accepted by the country need to be explicitly stated and understood in order to address appropriately the concerns for achieving these and to invest in accordance with the need and magnitude of the problem.

### **Child Protection and the MDGs**

The focus on MDGs is central to all national development planning and a continuing challenge for all those working for promoting child protection. The links between protection issues and the Goals are not explicit; however, there are many links between improved child protection and better development outcomes. An attempt has been made to outline this in the matrix “Millennium Development Goals and Child Protection” below. If these are not recognised and integrated in the framework and resourcing of the **Eleventh Plan**, there may be serious implications for achieving some of the MDGs.

### **The Big Picture: Child Protection strengthens Human Development**

The Millennium Declaration addresses child protection explicitly. If we examine the MDGs closely, it is evident that not a single goal can be achieved unless the protection of children becomes an integral part of programming strategies and plans across sectors. Preventing and addressing violence, abuse, and exploitation is part of achieving the MDGs. Failing to protect children from such issues as violence in schools, child labour, harmful traditional practices, the absence of parental care or commercial sexual exploitation squanders the nation’s most precious resource. Reaching the most vulnerable and isolated and marginalised populations helps ensure the health and well-being of all which is indispensable to achieving the MDGs. A comprehensive programming approach to child protection brings us closer to the human development approaches especially in terms of good governance, human rights, gender, security, social protection and the rule of law.

**MILLENNIUM DEVELOPMENT GOALS AND CHILD PROTECTION**

<b>Goal 1</b>	<b>Eradicate extreme poverty and hunger</b>
	<p><b>Poverty and Child Protection:</b> Children who live in extreme poverty are often those who experience violence, exploitation, abuse and discrimination. In the immediate term, poverty lessens the chances they will enjoy a protective environment, they easily become marginalised and are frequently denied essential services like health and education. In the long run, in a self- perpetuating cycle, their marginalization decreases the likelihood that they will escape poverty for themselves and their families as they enter adulthood.</p> <p><b>Child Labour:</b> Child labour squanders a nation’s human capital. It is both a cause and consequence of poverty. It damages a child’s health, threatens education and leads to further exploitation and abuse.</p> <p><b>Trafficking:</b> Poverty is the root cause of trafficking of children for various purposes.</p> <p><b>Conflict/Civil disturbances:</b> Conflict/civil disturbances deplete physical, economic and human resources and leads to displacement of populations.</p> <p><b>Birth Registration:</b> Without documents to prove birth registration, children and families cannot often access health, education and other social services. The Government cannot plan poverty alleviation and social service programs without accurate estimates of yearly births.</p> <p><b>Abandonment and Separation from Family:</b> Poverty and exclusion contribute to child abandonment, sending children to work on the street or in other environments away from home, and to the use of formal and informal fostering arrangements as well as institutional care. While some of these strategies sometimes may address the child or the families short term economic needs, they can also lead to poor child development, leaving children ill-prepared to deal with adulthood, and a greater likelihood of continuing the cycle of poverty.</p> <p><b>Children in conflict with the law:</b> The CRC and other HR instruments make clear that children accused of crimes are entitled to treatment which takes into account the child's age and the desirability of promoting the child's reintegration and the child's assuming a constructive role in society. When this is not done, children’s chance of reintegration is reduced, and their likelihood of poverty and marginalisation in adulthood rises.</p>
<b>Goal 2</b>	<b>Achieve universal primary education</b>
	<p><b>Education and Child Protection:</b> Universal primary education cannot be achieved without efforts to eliminate the barriers that keep children out of school: child labour, violence in schools, discrimination, and over-use of institutional care. Reaching the hard-to-reach- including children affected by HIV/AIDS, orphans, children with disabilities, children from minorities and of migrant families, and those who are in institutional care- is critical to achieving education for all. Ensuring that children attend schools with qualified staff can also help prevent and address child protection abuses.</p>
	<p><b>Child Labour:</b> Child Work and Child Labour can impede the education of children. Particularly girls, who comprise a larger portion of the out-of-school population.</p> <p><b>Violence:</b> The school environment needs to be safe, protective and free of violence if children are to be encouraged to attend and remain in school. Sexual violence and harassment facing girls at school is a major impediment to achieving gender equality in education. Eliminating corporal punishment and other forms of violence including bullying, peer violence and sexual abuse are thus integral to ensuring a safe and protective learning environment for children.</p>



	<p><b>Conflict/civil disturbance:</b> Conflict/civil disturbance can displace families, separate children from their parents and disrupt a child's education.</p> <p><b>Child Marriage:</b> Girls face economic and cultural pressures to drop out of school in order to get married. <b>Exclusion:</b> Many vulnerable groups subject to discrimination need to be taken into account in reaching this target, including children affected by HIV/AIDS, orphans, children with disabilities, children affected by conflict and those trafficked, minorities and children of migrant families.</p> <p><b>Children without Parental Care:</b> Ensuring that children who are not able to live with their families are placed in the most appropriate family environment increases the likelihood that they will attend and benefit from school</p>
<b>Goal 3</b>	<b>Promote gender equality and empower women</b>
	<p><b>Gender Equality and Child Protection:</b> Child marriage, sexual violence, child labour and trafficking, lack of education and skills, are child rights violations and prevent girls from enjoying gender equality and developing their potential to be self-sufficient and productive citizens. These must be prevented and addressed as part of initiatives to empower girls and women.</p>
	<p><b>Child Marriage:</b> Girls face economic and cultural pressures to drop out of school, and may not have opportunities to participate in community events and other matters that affect their lives.</p> <p><b>Sexual Violence:</b> Widespread sexual violence and harassment of girls at schools are major impediments to achieving gender equality in education. When they occur in other settings, such as community and workplace, they undermine efforts to empower girls and women.</p> <p><b>Child Labour:</b> Girls are disproportionately engaged in domestic work which often compromises their school participation.</p> <p><b>Trafficking:</b> Trafficking in girls and women is a severe impediment to their human rights and empowerment.</p>
<b>Goal 4</b>	<b>Reduce child mortality</b>
	<p><b>Child Mortality and Protection:</b> Extreme exploitation, violence or abuse can lead to child deaths, both under the age of five and throughout various phases of childhood.</p>
	<p><b>Child Marriage:</b> Babies who are born to very young mothers are more vulnerable to diseases during critical early years of life. Young mothers are themselves still children, and their own health is endangered during pregnancy and childbirth.</p> <p><b>Violence:</b> Violence against children can lead in extreme cases to death.</p> <p><b>Conflict/civil disturbance:</b> Violence against children during conflict/ civil disturbances leads to child deaths as seen in Gujarat riots, Chhatisgarh/A.P. naxalite action, North East encounters etc.</p> <p><b>Abandonment and separation from caregivers:</b> Children separated from their mother at an early age, especially those who remain in institutional settings for an extended period of time, are at much greater risk of early death</p> <p><b>Disability:</b> Inattention to disability increases children's risk of poor functioning as they grow, and also increases mortality risk.</p> <p><b>Substance Abuse:</b> Children without protection are more vulnerable to substance abuse and its effects, including death.</p>
<b>Goal 5</b>	<b>Improve Maternal Health</b>

Abuses against adolescent girls endanger their physical and psychological health, and should they become mothers, their reproductive health as well.	
	<p><b>Child Marriage:</b> Protecting girls from child marriage is an important factor in improving maternal health as pregnancy at a young age jeopardizes the health of young mothers.</p> <p><b>Conflict/ civil disturbance:</b> jeopardizes young mother's access to critical health-care services.</p> <p><b>Sexual Violence:</b> Widespread sexual violence in conflict/civil disturbances has a direct impact on maternal mortality, in particular when combined with high levels of HIV/AIDS prevalence.</p>
<b>Goal 6</b>	<b>Combat HIV/AIDS, malaria and other diseases</b>
<b>HIV/AIDS and Protection:</b> The fight against HIV/AIDS must include efforts to prevent child protection abuses which make children particularly vulnerable to the disease. For children orphaned or otherwise made vulnerable by HIV/AIDS, protection is a priority.	
	<p><b>Worst forms of Child Labour:</b> Many of the worst forms of child labour fuel the spread of HIV/AIDS as children are sexually exploited and trafficked for use in other ways (carriers, for substance abuse, messengers in conflict etc). Children from families and communities affected by HIV/AIDS are particularly vulnerable to these forms of exploitation</p> <p><b>Sexual Abuse and Exploitation:</b> Protecting children from sexual abuse and exploitation can play an important part in both ensuring the protection of children affected by HIV/AIDS and preventing infection amongst all young people.</p> <p><b>Children without Parental Care:</b> Children in HIV/AIDS affected families are particularly at risk of losing the care and protection of their families. Ensuring that they remain within the most appropriate family environment is important for their protection and well-being.</p> <p><b>Children in conflict with the law:</b> Reducing recourse to detention is a stated objective of HR instruments dealing with juvenile justice. This will also have the positive affect of reducing their vulnerability to infection, given the high rates of transmission.</p>
<b>Goal 7</b>	<b>Ensure environmental sustainability</b>
	Environmental disasters increase household vulnerability, which in turn increase the pressure for child labour, as well as sexual exploitation, child marriage and trafficking of children. Overcrowding of neighbourhoods and homes can put severe strains on environmental resources, which can lead to violence or sexual abuse in the home.
<b>Goal 8</b>	<b>Develop a global partnership for development</b>
<b>Partnerships for Child Protection:</b> Child Protection demands inter-sectoral cooperation at the national and state and lower levels. Creating a protective environment for children means partnering with local government, civil society, the UN and NGO partners to put protective systems in place by strengthening government commitment, promoting adequate legislation to better protect children ,strengthen systems and capacities, providing services, addressing attitudes and customs, monitoring and reporting, developing children's life skills and encouraging open discussion. Role of private/corporate sector needs to be considered.	

## 1.2 Protective Environment for Children

### Elements of a good Protective Environment

Protection involves maximizing safety from deliberate and situational harm by appropriate and timely safeguards, which are part of the day-to-day environment of children at home, in the community and through the basic service structures. The concept of protection works around the premise that all children have the right to grow up and develop in an environment, which is protective-in, which violence, exploitation and abuse are prevented as well as mitigated and redressed. Some of the principal safeguards are based on the need for institutionalized national systems and attitudes and practices of society at large, which are protective. Elements include laws , child welfare services, social protection measures to support families at risk, and supportive, complementary community actions; generating more open discussion around protection issues , and building support for protection practices in the home, the community and public services, as well as abandoning customs which harm or fail to protect. Protection rights are an intrinsic part of human rights of the child and must acknowledge the child as a person, and that children are important actors in their own protection and their capabilities have to be strengthened.

Every person bears multiple identities,<sup>1</sup> of which some, or one, tend to define who he or she is. An owned identity may not be the same as one which is assigned. Protection both as concept and as practice must take into account the issue of a child's identity, because identity can either protect a child or expose him/her to risk, in a given setting. Every child has a distinct identity as an individual human being. He or she also bears the identity of a specific race, culture, faith system – as well as that of class, caste and other socially identified grouping. The sex, or gender, of children is also part of their identity. Disability is also an identifying factor.

The child's status and condition – and 'protected-ness'-- can be significantly influenced by questions of identity. Such labeling can determine whether a child is included or excluded in terms of rights entitlements. Children at risk because of who they are, or who they are seen to be, must come within the ambit of protection policy and programme. Girl children face or suffer neglect, devaluation, abuse, exploitation and brutality simply because of their female identity, and may face multiple risks due to their other identities. Belonging to subjugated or disadvantaged groups in society sharpens these classifications and their effects. Children in general and girl children in particular, deserve protection against all these evidences and threats of discrimination.

In more specific terms the key elements of a protective environment in the family, community, service structure and society , which need to be built and strengthened and against which we can assess the situation of child protection are as follows:

#### 1. Attitudes, traditions, customs, behaviour and practices:

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<sup>1</sup> Amartya Sen, in several of his writings and statements

- a) There are favourable attitudes, traditions, customs, behaviors and practices within families and communities which make all forms of abuse, violence against children and their exploitation unacceptable, all children are valued and rights of children respected.
- b) Families and communities are motivated and empowered to protect their children from harm, violence and exploitation. Community leaders are committed to prevent exploitation of children and promote positive social norms.
- c) Failures in protection at family, community or state level attract public concern and affront.

## **2. Open discussion of and engagement with child protection issues;**

- a) In families and communities:** There is a dialogue and interaction on child protection issues. There is no culture of silence. Issues like sexual abuse, corporal punishment, violence against children & others are openly discussed and get the attention of communities, government, and the public. Children have the space and opportunity to speak out against violence, abuse and other protection issues without fear.
- b) In Media and civil society:** There is a lively and open public discourse on protection issues, ethical reporting and investigation in the public sphere. Civil society takes up protection as a priority. There is public scrutiny of actions to protect children and monitor accountability.

## **3. Protective Legislation and its enforcement:**

- a) There are adequate protective laws, in line with Constitutional provisions, and international standards for child rights. There is consistent implementation of these laws, speedy prosecution of offenders and no impunity for crime/offences against children.
- b) There are adequate regulatory mechanisms and recourse mechanisms set up which are easily accessible and have the financial and human resources to function effectively.
- c) Children have access to complaint mechanisms and to legal representation-legal and investigative proceedings are child-friendly and confidential and safeguard the best interest of the child.
- d) Girl children and others at risk of exclusion enjoy special support/receive special attention to ensure their access to services and protection mechanisms.
- e) Standards are established and monitored for all parts of the justice administration process. The child is protected in the justice process.
- f) There is a regular monitoring and reporting on prosecutions and use of system data for strengthening effectiveness of justice administration systems in place.

## **4. Capacity Development:**

- a) There are efforts to build the capacity of the Ministries and other partners responsible for the implementation to provide for a protective environment.
- b) The protection lens is applied to all basic services for children.  
Capacity of all those in direct contact with children including anganwadi workers, teachers, health workers, medical officers, social workers and lawyers, justice sector officials and the police, PRI representatives, bureaucrats, judges etc. are strengthened to equip them with skills and knowledge, to identify and respond to child protection issues. This should also include those undertaking training to work in child care services i.e. student trainees.
- d) Law enforcement agencies and judiciary have the skills and capacity to handle protection issues in a sensitive and child-friendly manner.

- e) Capacity development efforts are regular and use information from implementation experience to enrich content and focus.
- f) Special services for children who have suffered because of protection failures are equipped with child – sensitive, trained staff to care for them, including provide psycho-social care and support and maintain high standards established for care.

### **5. Children’s life skills, knowledge and participation.**

- a) Children are informed and knowledgeable to participate in their own protection.
- b) Children, adolescents, have safe protected and constructive channels for self expression and participation.
- c) Children assess situation and negotiate for improvements.
- d) Plan implement actions for redressal of their grievances.

### **6. Responsive, comprehensive services for recovery and reintegration are available following child protection abuses/violations.**

- a) There are appropriate and adequate services for victims of abuse, violence, exploitation.
- b) Children who have been victims of any form of neglect, abuse are entitled to and receive quality care.
- c) Speedy family tracing and return to family.
- d) Social support system supports children and families.
  - e) Family support services for need- based, quality, alternative care for all children deprived of parental care.
- f) Complete psycho-social, educational, vocational support to all children in institutions.
- g) Institutionalization of children used as a measure of last resort.
- h) Mechanisms for review of child placements in institutions.
- h) Strict monitoring of implementation of standards and protection norms in institutional care.

### **7. Government commitment to child protection**

- a) Government interest in, recognition of and commitment to child protection is reflected in policies and programme frameworks.
- b) There is coordination in social and economic policy development to prevent contradictions in child impact objectives.
- c) There is a willingness to allocate adequate budget and resources for child protection and monitor outcomes for children.
- d) Government is committed to growth with social justice and equality and implements strong measures to reduce poverty, vulnerability, disparities and discrimination. There are strong measures to address social exclusion.
- e) Government policies focus support to families to provide economic security and nurturing environments for children’s development. Family is the first front for care and protection of the child. State support to families and communities is such that they are equipped to promote and protect children in their care, with a special effort to support families in worst off areas.
- f) Government seriously examines the lack of development and resultant exclusion of deserving groups among children and their communities and the protection risks that ensue.

Government also recognises and caters to the linkages between discrimination, vulnerability relating to group identities and the threats and dangers that result.

i) Government tracks and assesses the impact of urbanization and its impact on child protection, especially the impact of urban evictions, homelessness, inadequate living conditions, and lack of basic services and livelihood opportunities.

j) There are effective coordination mechanisms for inter-sectoral and inter-Ministerial coordination at central, state, district and panchayat levels.

k) All departments analyze resources spent on children, allocate appropriate investments, monitor outcomes for children and make information available to the public.

All departments analyze policies for their child impact.

## **8. Monitoring and reporting**

a) The extent of abuse, exploitation and violence against children is measured and reported. Effective monitoring system is in place to record the incidence and nature of protection abuses and failures. This information is channeled to inform policy and programming for appropriate response.

b) Intersectoral collaboration for data collection on children, child protection.

c) Independent oversight of police, judiciary, children's institutions;

d) Independent structure for monitoring violations of child rights is available - Commission for Protection of Child Rights, 2005. Complaints mechanism is accessible to children.

e) Mechanisms exist through government and civil society in emergencies and regular situations that collect data, advocate against, report and communicate on abuse, violence and exploitation.

f) Tracking systems exist for children in need of special care/ difficult circumstances, for instance, missing children, child labour, children in institutional care and children available for adoptions.

## Chapter Two

# Situation Assessment

### 2.1 Overview

India is home to more than one billion people, of whom one-third are children under 18 years of age. The world's tenth largest economy unfortunately ranks 127 on the Human Development Index (HDI). If all child rights indicators were to become a critical measure for HDI, India would fare even worse, especially because of its poor performance on child protection.

Girl children continue to be killed off in their mother's womb through sex-selective abortions. The number of girls in the 0-6 age group is fast reducing, causing a red alert. World's highest number of child labourers is in India. To add to this, India has the world's largest number of sexually abused children, with a child below 16 years raped every 155<sup>th</sup> minute, a child below 10 every 13<sup>th</sup> hour, and one in every 10 children sexually abused at any point of time. Children are trafficked within and across borders for a number of reasons. Most subtle forms of violence against children such as child marriage, economic exploitation, practices like the 'Devadasi' tradition of dedicating young girls to gods and goddesses, genital mutilation in parts of the country etc., are justified on grounds of culture, tradition and religion. Physical and psychological punishment is rampant in the name of disciplining children and is culturally accepted. Forced evictions, displacement due to development projects, conflict, communal riots, and natural disasters, all of these take their own toll on children. Children also stand worst affected by HIV/AIDS. Even those who have remained within the protective net stand at the risk of falling out of it.

#### CRIMES AGAINST CHILDREN

Crime Head <i>≈</i> / Year <i>≈</i>	1999	2000	2001	2002	2003	2004
<b>Foeticide</b>	61	91	55	84	57	86
<b>Infanticide</b>	87	104	133	115	103	102
<b>Murder of Children</b>	Not Available	Not Available	1042	1073	1212	1304
<b>Kidnapping &amp; Abduction</b>	6882	6562	5589	1986	2571	3196
<b>Exposure &amp; Abandonment</b>	593	660	678	644	722	715
<b>Procuration of minor girls</b>	172	147	138	124	171	205
<b>Buying of girls for prostitution</b>	5	53	6	9	24	21
<b>Selling of girls for prostitution</b>	13	15	8	5	36	19
<b>Child Marriage Restraint Act</b>	58	92	85	113	63	93
<b>Immoral Trafficking Prevention Act</b>	75	82	125	49	48	47
<b>Child Rape</b>	3153	3132	2113	2532	2949	3542
<b>NDPS Act</b>	9	16	52	56	62	54
<b>Importation of girls</b>	1	64	114	76	46	89
<b>Grand Total</b>	<b>11,109</b>	<b>11,018</b>	<b>10,138</b>	<b>6,866</b>	<b>8,064</b>	<b>9,473</b>

Source: Crime in India, 1999-2004. National Crime Records Bureau

Note: Since children caught for the committing the crime of prostitution and drug peddling or substance abuse are more a victim and need to be treated as such, number of cases of 'juvenile delinquency' booked under Immoral Trafficking Prevention Act and NDPS Act have been included in the table.

India's commitment to the child as contained in its Constitution and several other national and international legal instruments that are binding on the nation falls short of realization despite various programmes and policies being in place. The implementation of these programmes and policies pose a challenge in the face of growing numbers of children in difficult circumstances and absence of adequate financial commitment to child protection.

Over the years, the understanding of children in difficult circumstances has come to include the following categories of children:

- ?? Homeless children (pavement dwellers, displaced/evicted etc.)
- ?? Refugee and migrant children
- ?? Children deprived of parental care i.e. orphaned ,abandoned and destitute children
- ?? Children whose parents cannot or, are not able to take care of them
- ?? Street and working children
- ?? Child beggars
- ?? Victims of child marriage
- ?? Trafficked children
- ?? Child victims of commercial sexual exploitation
- ?? Children of commercial sex workers
- ?? Children of prisoners
- ?? Children affected by conflict/civil strife
- ?? Children affected by disasters, both natural and man made
- ?? Children affected by substance abuse
- ?? Children affected by HIV/AIDS and other terminal diseases
- ?? Children in Institutional Care
- ?? Disabled children
- ?? The girl child
- ?? Children belonging to ethnic and religious minorities and other marginalized groups
- ?? Children who are victims of crime
- ?? Children in conflict with law

While exact and precise data on all these categories of children is not known, a situational analysis based on whatever information is available is imperative for planning for children in difficult circumstances.

### **Summary of existing gaps in child protection services**

In almost 60 years of independence and government functioning, little attempt has been made to respond to the needs of children in need of care and protection. The minimal government structure that exists is rigid and a lot of time and energy goes in maintaining the structure itself rather than concentrating on programmatic outcomes.

The Ministry of Women and Child Development deals with child protection schemes including a Programme for Juvenile Justice, an Integrated Programme for Street Children, Childline Service, Shishu Greha Scheme, Scheme for Working Children in Need of Care and Protection, Rajiv



Gandhi National Creche Scheme for Children of Working Mothers and Pilot Project to Combat Trafficking of Women and Children for Commercial Sexual Exploitation. An examination of these schemes has revealed major shortcomings and gaps in the infrastructure, set-up and outreach services for children.

#### General Gaps:

- ? ? Inadequate implementation of laws and legislations. Mechanisms and structures prescribed by legislations not in place to enable effective implementation;
- ? ? No mapping has been done of the children in need of care and protection or of the services available for them at the district/city/state level;
- ? ? A large percentage of children in need of care and protection are outside the safety net and have no support and access to services;
- ? ? Existing Schemes are inadequate in outreach and funding, resulting in marginal coverage of destitute children and children in difficult circumstances;
- ? ? Allotment of negligible resources to child protection and uneven geographical spread in utilization of allotted resources;
- ? ? Overbearing focus on institutional services with non-institutional services being negligent;
- ? ? Lack of coordination and convergence of programmes/services;
- ? ? Inter-state and Intra-state transfer of children specially for restoration to their families have not been provided for in the existing schemes
- ? ? Lack of professionally trained manpower for providing child protection services in the country, especially counselling services
- ? ? Lack of lateral linkages with essential services for children for example education, health, police, judiciary, services for the disabled, etc.

#### *Specific Gaps:*

*Lack of institutional infrastructure to deal with child protection;*

- ? ? Inadequate number of Child Welfare Committees (CWC) and Juvenile Justice Boards (JJB);
- ? ? The CWCs and JJBs are not provided with requisite facilities for their efficient functioning, resulting in delayed enquiries and disposal of cases;
- ? ? Lack of standards of care (accommodation, sanitation, leisure, food, etc.) in children/observation homes due to low funding norms and also due to lack of supervision and commitment;
- ? ? Inadequate training of personnel working under the juvenile justice system and on other child protection programmes which is also inequitable among States;
- ? ? Weak supervision, monitoring and evaluation of the juvenile justice system;
- ? ? Many of the street children projects do not provide all the basic facilities required, especially availability of 24 hour shelter, food and mainstream education;
- ? ? Not all street children projects are dealing with substance abuse, HIV/AIDS and other sexual abuse related vulnerabilities of children;
- ? ? None of the schemes addresses the needs of child beggars;
- ? ? Minimal use of non-institutional care options like adoption, foster care and sponsorship, for children without family/parental care;
- ? ? Number of Shishu Grehas for orphans are inadequate;

- ? ? Lack of rehabilitation services for older children not adopted through the regular adoption process;
- ? ? After-care and rehabilitation programme is not available in all the States, and even in those States where it is available it is being run as any other institutional care facilities under the JJ Act 2000;
- ? ? Issues like child marriage, female foeticide, street children, working children, and discrimination against the girl child are inadequately addressed;
- ? ? No interventions for children affected by HIV/AIDS, substance abuse, identity –based discrimination, militancy, disaster (both man-made and natural), abused and exploited children, and children of vulnerable groups like commercial sex workers, prisoners, and migrant population.
- ? ? Inadequate attention to preventive measures with major focus of government programmes being on addressing the problem after it occurs.

This situation analysis *presents available data* on certain child protection issues and categories of children in difficult circumstances, *factors responsible* for the vulnerable situations in which children find themselves and *key areas of concern*. The analysis also reveals the large gaps in data, both in quantitative data but more importantly , also on qualitative data and the range and nature of protection issues like abuse, violence, conflict , displacement, to name a few.

## **2.2 Girl Child**

All children have the right to be protected against all forms of harm and hurt, loss and deprivation. Protection measures must address social, psychological, physical, mental, emotional and material risk, danger and damage. Protection must also safeguard and defend children against discrimination of all kinds, including neglect. Girls are the unequal “lesser half” of India’s children.

Girl children are especially at risk of violation of their protection rights simply because they are girls. In societies and communities where women are not respected, the girl child is not valued. In many parts of India, she is in danger of being unwelcome even before birth – and is denied fair care and treatment right from birth and through the childhood years. Much of what should be considered maltreatment is socially regarded as the ‘normal/accepted’ way to treat a girl child in the home or community. The girl child stands un-protected from the traumatic potential of much that is considered customary. From the standpoint of human rights, this places her in need of both preventive and corrective protection.

### **Socio-cultural Frame:**

In a country like India, a caring and protective environment does not develop of itself. The social fabric is replete with stratifications, old and new. The gender divide is only one of these, but is one of the worst. Protection entails promotion, prevention, correction and rehabilitation. As much as safety, protection must defend the dignity of the child. Both risks and responses have to be seen in the layered context of being female in India, and being a child of a certain identity – of class, caste, community, culture, ethnicity -- in India.

The girl child may be less accessible than boy children, and is likely to have less access to those seen as external to her home or family setting. Both protection and development services have to strive to reach girl children.

**The Age Factor:** As with all measures for child rights, protection must be customised to age-specific entitlements and needs.

The 1974 National Policy for Children pledges caring and protective attention to the child both before and after birth. Today this policy provision needs to be fulfilled.

Age	Risk / Protection violation	Discrimination / other vulnerabilities
“Pre-”	Non-enforcement of PCPNDT Act	
Conception 1 yr	Foeticide Infanticide Neglect / Denial of care Abandonment Rape Sale/organ sale	Being unwanted, risk of prenatal detection Discrimination in breast feeding and infant food Neglect of health ( immunization ) Birth sequence / order of birth Access constraints due to identity
2-5	Abuse, violence Rape / incest Neglect / Denial of care Early marriage Abandonment Sale/organ sale	Access constraints due to identity Caste/class/community bars Vulnerability of status: migrant, beggar, refugee, child of sex worker, child of prisoner, HIV/AIDS affected, leprosy affected, Disabled Discrimination in access to food Poorer health attention and poorer access to health care; high risk of nutritional anaemia (74% in 0-3 age group, both sexes) Discrimination in overall treatment, parental care; expression of value and worth Early definition and imposition of ‘suitable’ roles; limits on permitted learning and play activities If enrolled in school, less time for learning Assignment of domestic duties, minor domestic chores
6-10	Abuse, violence Rape / incest Neglect / Denial of care Early marriage Child labour Sale /trafficking Abandonment	Access constraints due to identity Caste/class/community bars Vulnerability of status: migrant, beggar, refugee, child of sex worker, child of prisoner, of HIV/AIDS affected, leprosy affected,Disabled “Exported/imported” inter-state alien Increasing domestic duties/workload Looking after siblings Restrictions on mobility, play
11-14	Abuse, violence, Rape / incest Neglect / Denial of care Early marriage, pregnancy, early motherhood, maternal mortality Child labour, Abandonment Polyandry, Sale/ trafficking	Access constraints due to identity Caste/class/community bars Vulnerability of status: migrant, beggar, refugee, child of sex worker/ of prisoner, of HIV/AIDS affected, leprosy affected,Disabled “Exported/imported” inter-state alien

15-18/19	Abuse , violence, Rape / incest Neglect / Denial of care Early marriage, pregnancy, early motherhood, maternal mortality Polyandry, Child labour Abandonment	Access constraints due to identity Caste/class/community bars Vulnerability of status: migrant, refugee, child of sex worker, ch of prisoner, of HIV/AIDS affected, leprosy affected, Disabled’ “Exported/imported” inter-state alien
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**Factors and Sources of Risk:**

1. A society and community influenced by ‘son preference;’
2. Social /community support for early disposal;
3. Unplanned negative impact of family planning messages for small family / 2-child norms;
4. Persistence of child marriage
5. Emerging sale / ‘export’, and traffickers’ use of cover of pseudo marriages
6. Social silence about domestic violence, household abuse, “sexploitation;”
7. Vulnerability relating to the caste/community/cultural identity of the girl child;
8. Lack of enabling education and socialization of girls.

A serious and pervasive barrier to protecting girl children is their negative socialization to subservience, and their training not to question their status, condition or treatment. There is need for a new programming investment, to offer girls openings to alternative socialization. School education can offer the girl child information and ideas, protecting them against such indoctrination and the blockages of custom and attitude. The social education of boy children towards a better understanding of parity and fairness is equally important. Children can learn to defend themselves, and also to protect one another, but genuine social self-defense cannot happen in an adverse or indifferent climate.

There is need to consider what happens to girl children rescued or recovered from exploitation or abuse. The mechanisms for recovery as well as rehabilitation need to be developed. Social protection theory speaks of a caring community or a protective environment. Existing schemes tend to emphasize restoration to the family setting. In the case of a very young girl child, rescued from early marriage, abduction, sale or the sex trade, or a young victim of domestic trauma, or rape, or a child recovered from a hostility/conflict zone: the family of origin may not be the best option available for re-location. Mechanisms are essential for ongoing contact, shelter, counselling (including family counselling), and possibility of foster or alternate placement, re-entry into local life and activities, re-entry into schooling or development programmes – and for any prosecution of offenders that should officially be undertaken.

Child protection services on the ground, with integrated coordination being planned at district level will have to exercise special vigilance on the situation of girl children in every community. They will need to devise special needed approaches to serve girl children at all stages of childhood. A potential preventive lies in the provision of meaningful development opportunity to girls and importantly in the adoption of a programming approach and initiatives that would generate and sustain ongoing contact with young girls in the community. Lateral linkages between protection and development programming are key inputs to needed change. It is in the community and development settings that an alerting mechanism must emerge and operate.

Girl children themselves must be progressively enabled to stand up for themselves. It is to be hoped that incentive schemes like CCT will help the community to re-value daughters. However, any new programming for protection will have to be exemplary in its alertness, competence and promptness in addressing the many risks and pitfalls girl children face in every day existence.

Given the extent of discriminatory treatment of girl children at all ages and stages of childhood, a comprehensive programme initiative to inform and enable girls to know their world and learn how to make their way in it would be a valuable step towards achieving the goal of women's empowerment. Such a programme must link with protective services.

### **2.3 Sex Selection and Female Foeticide**

The phenomenon of missing daughters over the past two decades is the biggest challenge to India's growth and development today. Failure to protect the girl child is no longer just a health issue but an important child protection issue, deserving immediate and utmost attention.

The 2001 Census data and other studies illustrate the terrible impact of sex selection in India over the last decade-and-a-half. The child sex ratio (0-6 years) declined from 945 girls to 1,000 boys in 1991 to 927 in the 2001 census. Around 80% of the total 577 districts in the country registered a decline in CSR between 1991 – 2001. 204 or about 35% of the districts registered child sex ratios below the national average of 927 females per 1000 males. In the 1991 census, there was only one district with a sex ratio below 850, but in the 2001 Census, there were 49 such districts.

CSR decline was steeper in urban areas (32 points in 2001) than in the rural (14 points). Economically progressive states like Delhi, Gujarat, Haryana, Himachal Pradesh, Punjab and Maharashtra have recorded the sharpest decline in child sex ratios as sex selection technology in these States is widely available. The 10 districts with the worst sex ratios in the country – all below 800 – are all in Haryana and Punjab.

A study of births in three public and five private hospitals in Delhi between 1993 and 2002 found that sex ratios get worse according to birth order. Thus if the sex ratio for the first born is 925 girls for every 1,000 boys among first-born children, it is 731:1,000 among second children and 407:1,000 among third children, as the desperation for a son increases with increasing birth order.

Female foeticide and reducing number of girls has severe consequences. Some of them may be summarized as follows:

Loss of women is likely to have negative consequences on the economy, since women are a vital part of India's labour force.

Devaluation of girls will also give impetus to the practice girls being married at younger age. Increased numbers of child brides further contributes to the poor status of women, as they are

less likely to finish school or develop job skills before marriage. Young brides and their children are more likely to suffer from increased morbidity and mortality associated with early childbirth.

Moreover, there will be an increase in acts of violence against girls and women, e.g., rape, abduction, trafficking.

Ironically, in some villages the elimination of the girl child has created such a shortage of girls that families purchase brides from other villages for paltry sums. Women are also being forced into polyandry, or being “shared” by brothers, and have suffered violence for refusing to do so. An unbalanced sex ratio not only spells economic and social disaster but also means an uncertain future and a poor quality of life for surviving girls and their families.

The whole issue of selective elimination of females has to be understood in the wider perspective of gender issues and in the context of increasing violence against women and girls and child protection. Undeniably, sex selection/female foeticide is an extreme form of discrimination and violence against girls. The adverse child sex ratio reflects the real status of the girl child in the country, challenging the constitutional and policy commitments of equality and non-discrimination. It is a gross violation of the human rights of the girl child.

The lack of medical ethics by practitioners for the selective determination and elimination of the girl child is a crime against society and must be prosecuted.

### **Factors responsible**

- ?? Traditional patriarchal ideologies and cultural practices place daughters at a secondary position
- ?? Deep-rooted son preference has penetrated all sections of the society, rich or poor, upper caste or lower caste, literate or illiterate
- ?? There is a strong desire to have one or two children at the most, out of which one must be a son
- ?? Low value of daughters or daughter discrimination has resulted in averting the birth of female children
- ?? While preference for male child has always been a part of the society, non-invasive and instant sex determination through modern medical technology has made the elimination of girls in the pre-conception and early stages of conception easier
- ?? The combination of the system of patriarchy, feudalism and easily accessible medical technology tends to perpetuate discrimination on the basis of sex
- ?? Commercialisation of the institution of marriage, marriage customs and cultural practices add to the large-scale devaluation of girls, making girl child an unwanted burden
- ?? Practice of infanticide has been present in a few communities in some districts and regions in India but this practice did not reach the alarming proportions in elimination of girls as the present day availability of sex determination followed by sex selective abortion is reaching. This is because in foeticide, there is no inhibition from actually killing a child that an act of infanticide would involve.
- ?? The increase in rate of female foeticide is a result of the greed and unethical practices of the medical community.

?? The enforcement of the laws against female foeticide is poor, with a very low rate of prosecution of offenders, including the medical practitioners, and extremely poor conviction rate.

### **Areas of concern**

?? Unless seen and addressed in the context of child protection, it may not be possible to deter people from killing the unborn girl child and prosecute the offenders.

?? It is 12 years since the enactment of the Prenatal Diagnostic Techniques (Regulation and Prevention of Misuse) Act 1994. It is also over two years since the more comprehensive, amended Preconception and Prenatal Diagnostic Techniques (PNDT) Act, 2003 came into existence. Yet enforcing the law has proved to be a major challenge given the resistance from the unethical medical practitioners.

?? Effective implementation of PCPNDT needs to be assured through, ensuring registration, curbing the spread of mobile ultrasound, regulating sale of new machines; ensuring compliance of the Act like keeping records and submitting them to the authorities in time, preferably online like the birth records are being done now; monitoring the functioning of these ultrasound clinics, complete audit of all pregnancy ultrasounds across the country (audit all F forms submitted).

?? The Appropriate Authorities are ineffective and are not held accountable by the government and civil society and the powerful doctors' lobby renders their actions null and void. Clinics that have been sealed for breaking the law have been re-opened for practice within a few days. Lawbreakers have got away after paying fines of just Rs 1,000. So far only one doctor and paramedical have been prosecuted for foetal sex determination.

?? Another problem is that the appropriate authorities don't know their functions and responsibilities. Appropriate Authorities do not have the necessary expertise and experience in legal matters. Deputing of medical professionals, on regulatory bodies under the PNDT Act, has not been an effective way to check the practice of sex determination, as doctors tend to be reluctant to book their fellow doctors.

?? Even law agencies like the police or the courts tend not to view the breaking of law by doctors and medical professionals as serious offences against women and children and against the law of the land.

?? Central supervisory board of PCPNDT needs to be reconstituted with effective partnership of the civil society and decrease the influence of the organised medical profession and medical politicians like presidents of medical association, nominees of medical associations.

?? Lack of adequate medical facilities is leading to increasing reach of private health service providers, whose practices are difficult to monitor.

?? "There are two important issues of policy associated with this decline in the child sex ratio. One is the obsession with population control, which assumes that all the failures in development can be mono-causally linked to population explosion. The other more recent issue is the intrusion of the two-child norm into the Panchayati Raj Acts of many states, despite its absence from the Population Policy of 2000, leading to disqualification of many elected representatives. Most of the excluded belong to the SCs and STs. Some experts have suggested a link between the imposition of the two-child norm and sex selective abortions. *Imposition of the two-child norm, then, cannot be the route to population stabilization, for it*

*may lead to a disturbingly unbalanced population.* The reworded sentence in NCMP stating that population stabilization would be achieved by strengthening primary health care focuses on reducing infant, child and maternal mortality. This philosophy needs to underpin all schemes and all programmes. The Centre, should, therefore urge the chief ministers of the state governments that are implementing coercive population control programmes to immediately withdraw the programme<sup>2</sup>.

- ?? Survival of the girl child not part of the reproductive health agenda and finds no mention in the RCH PIP.
- ?? There is need to stress the accountability of development policies and programmes in the family welfare sector (with their attendant commitment of human, material and financial resources) towards the healthy and safe survival of the girl child, which documents acknowledge in a policy framework.
- ?? “National Indicators of Health Equity” under which various markers of health equity are listed, which includes neo natal mortality, IMR, child mortality, MMR, women’s health, etc. But a gender-balanced sex ratio at birth is not a national indicator of health equity. This marker is missing.
- ?? Effective and strong implementation of the law should go side by side with reviews of policy and development strategies. We should advocate *a public acceptance* of the reality – that the continuing decimation of the numbers of the girl child is not just due to “deep rooted socio cultural features” but is exacerbated by short sighted and unsound public policies in population and their accompanying development packages.

## 2.4 Child Marriage

Child marriage is a persisting harmful traditional practice, rampant in many parts of the country and the incidence of it is highest in the States of Rajasthan, Bihar, Uttar Pradesh, Chattisgarh and Madhya Pradesh. According to the 1991 Census, the percentage of married females in the total number of females in the age group 10 to 14 was 13.2 in Rajasthan, the highest in the country. In second place was Madhya Pradesh at 8.5 percent, followed by Uttar Pradesh at 7.1. For the country, the percentage of married women under the age of 18 stood at 53.3 per cent. The situation did not change substantially in the following decade. The 2001 Census reports that there are nearly 300,000 girls under 15 who have given birth to at least one child. According to the Rapid Household Survey conducted across the country, 58.9 per cent of women in Bihar were married before the age of 18, with 55.5 per cent in Rajasthan, 54.9 per cent in West Bengal, 53.8 per cent in UP and 53.2 per cent in Madhya Pradesh and 39.3 per cent in Karnataka. Jammu and Kashmir has the lowest percentage of under-age marriage, which is 3.4, followed by Himachal Pradesh (3.5) and Goa (4.1). Despite high female literacy in Kerala, close to one-tenth of women are married before attaining the legal age of 18.<sup>3</sup> National Family Health Survey (II) data suggests that the median age for the marriage of girls in India is 16.4 years. The survey also found that 65% of the girls are married by the time they are eighteen.

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<sup>2</sup> Planning Commission. Mid-Term Appraisal of the Tenth Five Year Plan (2002-2007). “Women, Children and Development”, Chapter 4, paragraph 4.49

<sup>3</sup> Human Rights Law Network, Child Marriages and the Law in India, Aparna Bhat, Aatreyee Sen, Uma Pradhan (Ed.), 2005



The fixing of the legal age of marriage at 18 years for girls and 21 years for boys has not prevented the continuation of early marriages. Nor has the Child Marriages Restraint Act, legally in force since 1929, been effective in restraining the practice.

The Government's new National Plan of Action for Children 2005 flags complete abolition of child marriages as one of 12 key national priorities.<sup>4</sup>

## **Major adverse affects of Child Marriage**

**Education:** Education is recognised by the Constitution of India as a fundamental right for all children in the age group of 6-14 years. Early child marriage denies this basic right to the girl child. Factors like poverty and puberty combine to make the girl a school dropout and pushed into early marriage. The dropout rate among girls is highest at the elementary level often because of early marriage. The lack of proper and complete education renders girls incapable of acquiring any skill that can empower them. Needless to say, lack of education also affects reproductive behaviour, use of contraceptives, health of the new born child and proper care and hygienic practices. Every year of education added strengthens a mother's ability to nurture and care for her children.

**Health<sup>5</sup>:** Child marriage affects girl children's reproductive and sexual health. They suffer from high rates of obstetric complications, anaemia, malnutrition, obstructed labour because of small pelvis, postpartum haemorrhage, toxemia, vesico-vaginal fistula, intra-uterine growth retardation, pregnancy induced hypertension, premature delivery, higher maternal mortality rates, high incidence of reproductive tract and sexually transmitted infections (RTIs and STIs) and foetal wastage (miscarriages or still-birth), the neonatal and infant mortality rates are also high along with incidences of premature delivery and low birth weight of the new born. Adolescent mothers are twice as likely to die of complications arising out of pregnancy compared to women 20 years or older. The IMR is 40 per cent higher for adolescent mothers than for adult mothers (107.3 and 78.5 per thousand live births respectively). Adolescent girls also face riskier and unprotected sexual exposure within their marriage, leading to a higher risk of contracting HIV/AIDS and other RTIs and STIs.

**Well-Being:** Child marriage is a gross violation of the UN Convention on the Rights of the Child and the Constitutional provisions of right to life, liberty, and security, right to health, right to freedom from slavery, right to education, right to non-discrimination on the grounds of sex, and right to equality. In addition to the health effects, the emotional effects of child marriage are immeasurable. Early marriage and forced sexual activity throw the girl's identity into a state of crisis. There is an early burden of responsibilities, a higher risk of violence and abuse within the family, threat of being rejected by the family because of the propensity of child grooms going in for more than one marriage. Child marriage is a complete violation of a child's human rights, self-worth and dignity. It denies children participation in decision-making, recreation, and space of their own. The emotional impact of child marriage on a girl is far worse than in the case of a

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<sup>4</sup> Ministry of Women and Child Development, Government of India. National Plan of Action for Children 2005: (adopted 20 Aug. 2005): Pt 13, pg 3.

<sup>5</sup> Ibid, 18

boy child. However, from the perspective, getting married at an early age violates the human rights of both boys and girls.

**Changing face of Child Marriage:** In India, child marriage is a centuries old tradition, where children as young as two to three years were often married or given away in marriage. However, in traditional societies in spite of early commitment of children into wedlock, marriages were not consummated till children were much older and were perceived to be able to understand the responsibilities intrinsic to marriage. Over time, giving children in marriage has turned into a major social evil entailing issues of child rights, dowry, sexual abuse, among others detailed above. Some of the emerging trends in child marriage have far-reaching adverse consequences in the life of a child. For example, child marriages have come to be used as a means to traffic young girls and women into the sex trade and labour both within the country and outside. Children are married, trafficked and sent to work in places like Delhi, Haryana, Uttar Pradesh, and Kolkata. Imbalance in the sex ratio in some states is emerging as a reason for trafficking of young girls for the purposes of marriage. In states with very low sex ratio, there is a tremendous shortage of marriageable girls, resulting in the need to buy young brides from other states. In some cases, these girls may be forced to serve as a wife to two or three brothers in the same family.

In some situations, economic circumstances have forced parents to give away their young daughters in marriage to much older or physically or mentally challenged men. Incidents of girls being given away to rich/old Arab 'sheikhs' in the city of Hyderabad in Andhra Pradesh have received much attention nationally and internationally.

The media representation of marriages attracts the adolescent mind to courtships and marriages of choice. Such relationships have only further increased the vulnerability of girls to sexual abuse, exploitation, desertion, mental and physical torture. Of late, some runaway marriages have led to negative consequences for the young boys as well, as they have been booked for kidnapping, abduction and rape, thereby getting marked as young child offenders.

### **Factors Responsible**

?? Illiteracy and lack of education

?? Patriarchy

?? Gender discrimination and unequal status of women

?? Traditions and customs, eg. the season of Akha Teej is considered auspicious for marriages

?? Economic reasons eg. Higher dowry needs to be given to daughters when they are married at later age

?? Lacunae and shortcomings in the existing Child Marriage Restraint Act: for example the law does not declare the child marriage null and void

?? Lack of protective environment for a young girl. Marriage is defended as a security strategy in a situation where there are very few options open for the development of women and children

?? Lack of administrative will and action

?? Gender imbalance in some states has led to trafficking of girls in the name of marriage

### **Areas of Concern**

Child marriage is a grave injustice towards children, and like any other social injustice, it cannot be seen in isolation. Measures to curb it have to stem from situating it in the total structure of society, interrelating to existing patriarchal, social and cultural structures, class, religion, and customary practices. It thus calls for comprehensive government measures, including measures to provide genuine development opportunities to girl children. Child marriage is a violation of children's human rights and must be treated as such. It is a serious protection issue. The early marriage of boy children is equally a denial of childhood rights, and a part of this violation.

Lack of sufficient data and inadequate implementation of the provisions concerning registration of marriages affect all planning and interventions.

Most incentive measures undertaken by the Government relate to enhancing opportunities for girls to go to school and get educated. The prevailing social milieu in the country, however, creates a mind-set in which the major concern of parents is the early marriage of their daughters and this is also the girls' major concern based on her socialization. This mind-set needs to be addressed if girls are to benefit from development opportunities.

Targeting the 11-18 age group of girls, the Kishori Shakti Yojana does not have an element which addresses the issue of child marriage and the empowerment of girls. While prevention is important, there is need for programming to focus on the married girl child, who cannot be left outside the protective net.

There is need for dialogue and joint planning by the Ministry of Women and Child Development and the Ministry of Youth Affairs and Sports officials to exploit the under-utilised potential of the country-wide network of 300,000 youth clubs and development centres under the Nehru Yuva Kendra Sangathan as a force for monitoring and for prevention of child marriages.

Parents concerns regarding violence against girls, rape and other forms of abuse are not completely invalid. Unless the girls are provided an overall protective environment, harmful practices like child marriage cannot be uprooted.

Accountability for the well-being of girl children must be reflected in the conduct of all those who have the responsibility to plan and implement the programmes and monitor implementation of the law.

Inadequate protection for those who have stood up to fight the practice of child marriage only strengthens the perpetrators of such blatant violation of human rights of children. Bhanwari Devi, a WDC worker in Rajasthan faced the wrath for fighting child marriage when the influential village leaders raped her to teach her a lesson. The chopping of the arms of an Anganwadi worker in Madhya Pradesh who tried to stop a child marriage will also never be forgotten. The absence of any protection for such people only points to the inadequacy of the administrative and judicial involvement and commitment.

There are no perceived positive options for girl children 'rescued' from child marriages; also sometimes for boys.

The Eleventh Plan could move more boldly to enhance its substance and its application. It should live up to its title.

- ?? Short term solutions must provide concrete alternatives for girls and their parents who wish to come out of the net of child marriage.
- ?? Long term solutions must address the elimination of poverty, better educational and employment opportunities, as well as change in gender perceptions.

## 2.5 Child Labour

India is a home to the highest number of child labourers in the world.

- ✍ The Census reports clearly point to the increase in the number of child labourers in the country from 11.28 million in 1991 to 12.59 million in 2001<sup>6</sup>.
- ✍ Reports from M.V. Foundation in Andhra Pradesh reveal that nearly 400,000 children, mostly girls between seven and 14 years of age, toil for 14-16 hours a day in cottonseed production across the country. 90 percent of them are employed in Andhra Pradesh alone<sup>7</sup>.
- ✍ According to Yamina de Laet of the International Chemical, Energy and Mine Workers' federation (ICEM), children aged 6-14 years represent 40 percent of the labour force in the precious stone cutting sector<sup>8</sup>.
- ✍ Fact-finding undertaken by HAQ: Centre for Child Rights, M.V. Foundation, Samatha, CACL, CACT, Oxfam Swaraj-Karnataka and, Mines, Minerals and People and Movement against Uranium Project-Hyderabad, has brought to light employment of children in the mining industry in Bellary District in Karnataka despite a strict ban on it.
- ✍ Rescue operations in Mumbai and Delhi in 2005-2006 also highlight employment of children in the zari and embroidery units.
- ✍ Although the number of children employed in the agricultural sector, in domestic work, roadside restaurants and sweet-meat shops, automobile mechanic units, rice mills, Indian Made Foreign Liquor (IMFL) outlets and most such sectors considered as 'non-hazardous', is not known, there is ample evidence to suggest that more and more children are entering the labour force and are also exploited by their employers.

### Factors responsible

Combination of poverty and the lack of a social security network are the two main factors responsible for the problem of child labour in India. The increasing gap between the rich and the poor, privatization of basic services and the neo-liberal economic policies are throwing vast numbers of population out of the social security net and the impact on children is the worst. Entry of Multi-Nationals Companies in India without mechanisms to hold them accountable has also played its toll on children. For example, according to the India Committee of the Netherlands, both Hindustan Lever Ltd., the Indian subsidiary of British-Dutch multinational company Unilever, as well as the American multinational Monsanto are making use of hazardous forms of child labour in cotton seed production in India on a large scale<sup>9</sup>.

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<sup>6</sup> Office of the Registrar General, India. Census of India 1991 and Census of India 2001, New Delhi

<sup>7</sup> HAQ: Centre for Child Rights. Status of Children in India Inc., 2005. pg. 169

<sup>8</sup> Trade Union World, Briefing. International Confederation of Free Trade Unions, ICFTU, October 2004, No. 6, in Status of Children in India Inc., HAQ: Centre for Child Rights, 2005. pg. 176.

<sup>9</sup> Dr. Davuluri Venkateswarlu, Child Labour and Trans-National Seed Companies in Hybrid Cotton Seed Production in Andhra Pradesh, <http://www.indianet.nl/cotseed.html>

Lack of adequate number of schools, poor infrastructure, lack of basic facilities such as drinking water and toilets in schools, the expense of schooling, poor quality of schooling, teacher absenteeism, and corporal punishment in schools are factors that push children out of school and into work.

Weak law enforcement fails to check the increase in the demand for children as cheap and convenient labour.

### **Areas of concern**

- ✍ Access to data on child labour from the concerned Labour Ministry is difficult. What is available is the information on 5-14 year olds in the tables on 'Workers by Educational Level, Age and Sex' in the Census of India. Here too, the collection of information is by the same categories and criterion that is applicable to adults. Therefore, like adults, child workers in the 5-14 age group are also categorised as Main Workers, Marginal Workers. There is no information on children less than 5 years who may be employed or those above 14 years.
- ✍ Numerous laws and rules at the Central as well as State levels are in place to assess the extent of child labour in the country, and to tackle it. Court directives too lend a hand. But CAG reports show that those responsible for carrying out this reform are indifferent to the vast tragedy. As seen from the CAGs reports, states either routinely under-report the true numbers of working children, or simply do not bother to conduct the surveys needed to properly identify the children. The CAG's reports show that this maladministration is now routine, and millions of children around the country continue to languish in labour during their 'childhood'. Our children can't read and write because the adults responsible for liberating them can't - or won't - count them correctly<sup>10</sup>.
- ✍ The Child Labour legislation is inadequate to address the real problem. In fact this law makes a fallacious distinction between 'hazardous' and 'non-hazardous' sectors, negating the fact that any employment of children violates a child's basic rights to survival, development, protection and participation. Prohibition of employment in the so-called 'hazardous' sectors and regulation in the 'non-hazardous', allows for employment of children and weakens law enforcement. Moreover, this is in contradiction with the Constitutional guarantee of right to education for all children in the 6-14 years age-group.
- ✍ The Child Labour (Prohibition and Regulation) Act, The Factories Act, The Mines Act, The Plantations Act, The Merchant Shipping Act, The Motor Transport Workers Act and the Beedi and Cigar Workers (conditions of Employment) Act, prohibit employment of children under 14 years only. None of them have been amended to address all children up to 18 years of age, as defined in the UNCRC and now also covered by the Juvenile Justice legislation in India.
- ✍ Clearly, child labour is not perceived as a crime against children and humanity. The National Crime Records Bureau, while providing data on crimes against children under special and local laws, leaves out any information pertaining to cases registered under the Child Labour (Prohibition and Regulation) Act and the Bonded Labour Act.
- ✍ The rate of conviction under the child labour laws is poor, clearly pointing to weak enforcement of laws. Of the 2504 prosecutions under the Child Labour (Prohibition and

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<sup>10</sup> Himanshu Upadhyaya, Children can't read, adults can't count. India Together. (<http://www.indiatogether.org/child/labour.htm>)

Regulation) Act between January to 31 May 2003, there were only 318 convictions, the rest 2050 ending up in acquittal<sup>11</sup>.

- ✍ Trafficking of children for labour, be it for domestic work or shrimp cultivation, zari industry, diamond cutting, precious stone industry or any other form of work, is in the news almost every day. Yet there is no law to address this problem.
- ✍ Child labourers fall within the ambit of not just the child labour law and certain other labour laws but also the juvenile justice law, as they are children in need of care and protection. However, in the case of rescue and rehabilitation of such children, involvement of both the labour department and the social welfare department along with the Child Welfare Committees causes confusion, only to the detriment of the child.
- ✍ The child labour policy and programmes of the Ministry of Labour have failed to achieve the desired results. In fact there is a huge gap between the need and allocation for programmes for elimination of child labour.

The Budget Estimates 2005-06 for NCLP & Grants in Aid to Voluntary organisations is Rs. 10,330 lakh, for the INDO-US Project it is Rs. 2500 lakh and for Strengthening of Child Labour Cell, Rs. 5 lakh. Thus Government of India's expenditure for mainstreaming one child labour in regular school education is Rs. 3569. This means that for mainstreaming all 1,25,91,667 child labourers (2001 Census) in education, which is a commitment of the government under Article 21A of the Constitution, India will need Rs. 4,49,300 lakh per year @ Rs. 3569 per child per year. However, in the Budget Estimates of 2005-06, the total allocation for the three child labour programmes amounts to only Rs. 12,835 lakh and covers just 3,59,650 children, leaving a huge gap of Rs. 4,36,465 lakh between the need and allocation for elimination of child labour.

- ✍ The general lack of a protective environment exposes children to all forms of exploitative labour and sexual abuse.

### Child Domestic Workers

There is a growing phenomenon of rampant and systematic exploitation of children in domestic work in urban areas. In many cases, such children have been

<sup>11</sup> HAQ: Centre for Child Rights, Parliament of India, V pg. 48

### State-wise Distribution of Working Children in the Age Group 5-14 years according to 2001 Census

SL. No.	Name of the State	2001 Census
1	Andhra Pradesh	1363339
2	Assam	351416
3	Bihar	1117500
4	Gujarat	485530
5	Haryana	253491
6	Himachal Pradesh	107774
7	Jammu & Kashmir	175630
8	Karnataka	822615
9	Kerala	26156
10	Madhya Pradesh	1065259
11	Maharashtra	764075
12	Chhattisgarh	364572
13	Manipur	
14	Meghalaya	53940
15	Jharkhand	407200
16	Uttaranchal	70183
17	Nagaland	
18	Orissa	377594
19	Punjab	177268
20	Rajasthan	1262570
21	Sikkim	16457
22	Tamil Nadu	418801
23	Tripura	21756
24	Uttar Pradesh	1927997
25	West Bengal	857087
26	Andaman & Nicobar Island	1960
27	Arunachal Pradesh	18482
28	Chandigarh	3779
29	Dadra & Nagar Haveli	4274
30	Delhi	41899
31	Daman and Diu	729
32	Goa	4138
33	Lakshadweep	27
34	Mizoram	26265
35	Pondicherry	1904

forced to work for long durations, without food, and/or have worked for very low wages. Many of the live-in domestic workers are in a situation of near slavery. With the violation of their human rights, not only are there sub-human living and working conditions but even blatant injustice of non-payment of wages as well as criminal acts of physical, sexual and psychological violence amounting to torture have been reported.<sup>12</sup>

The employment of children in domestic work is an age-old practice and it continues, sanctioned by the middle class families who pay less, feed less, get longer hours of work and beat them to silence. “If we don’t employ them, they will starve” is the argument. Therefore, little children carrying the school bags of children of their own size continues to be an acceptable sight, which no one need bother their conscience over. There is growing evidence that domestic work in one of the most “hazardous” sectors of employment, it has recently been notified by the Ministry of labour, prohibiting employment of children below 14 years as domestic servants or in dhabas, tea stalls and restaurants. As a result of this notification, there is a likelihood of a large number of children being laid off, especially in metropolitan cities and big towns. Therefore there is need to address the rehabilitation of these children including shelter, education, food, health and other needs and return to families based on review of their situations .

## **2.6 Child Trafficking, Commercial Sexual Exploitation of Children and Child Pornography**

### **Child Trafficking**

Every day men, women and children are trafficked across India and throughout South Asia, with India being the source country as well a transit and destination point. However, cross-border trafficking is only the tip of the iceberg. There is considerable degree of trafficking between States within the country and some trafficking from India to Gulf States, to South East Asia and some European destinations. The Ministry of Home Affairs, GOI, estimates that 90 percent of trafficking for sexual exploitation is within the country. The profits from trafficking lead to the practice taking root in a particular community, which is then repeatedly exploited as a ready source of victims. People are being trafficked not only for prostitution, but also for labour, entertainment and sports, pornography and sex tourism, begging, organ trade, for sexual exploitation through marriage and for adoption. Many of those trafficked are children, sometimes as young as 8 years old, or even younger.

Very little reliable quantitative data on the overall prevalence of trafficking is available because there is no common understanding of the issue. Almost everyone understands trafficking as synonymous to prostitution and this applies to child trafficking also. Commercial sexual exploitation of children accounts for Rs. 11,000 crores of the Rs. 40,000 crores commercial sex industry<sup>13</sup>. There is little or no systematic documentation on the other purposes of trafficking such as for entertainment, domestic work, organ trading, adoption etc.

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<sup>12</sup> Asha Bajpai, Child Rights in India- Law, Policy and Practice, Oxford University Press, 2003

<sup>13</sup> Gupta 2003

The problem of trafficking is acute in Andhra Pradesh, Bihar, Karnataka, Maharashtra, Tamil Nadu, Rajasthan, Uttar Pradesh and West Bengal<sup>14</sup>. While both boys and girls are victims of trafficking, girls are more vulnerable, especially to trafficking for sexual purposes. 60% of the estimated 2.3 million women and child commercial sex workers in India come from Scheduled Castes/Scheduled Tribes/Other Backward Classes<sup>15</sup>, and according to an ILO estimate, 15% of them are children<sup>16</sup>. The number of tribal girls, a large number of them under 18 years, migrating from states like Chattisgarh and Jharkhand to Metropolitan Cities every year, runs into thousands. They are lured into leaving homes and they have no option but to take up petty jobs, ending up at times as sex workers. According to a survey conducted by People's Awakening for Traditional Revival and Advancement (PATRA), there are at least 2500 to 3000 tribal girls from Jharkhand alone who move to cities every year.

Over the last few years, there has been an increase in trafficking of girls for and through marriage. In States where there is gender imbalance due to low sex ratio, finding brides for eligible men is becoming difficult. As a result buying brides from other States has become common. In Haryana and Punjab for instance, girls are bought from Assam and other parts of Eastern India for marriage. While trafficking of girls for marriage is a relatively new phenomenon, using marriage as a means to traffic girls into prostitution and farm labour has been an old practice in India. Organisations working in the Balasore district of Orissa have reported an increasing trend of girls belonging to poor families being lured by middlemen to Eastern Uttar Pradesh with promises of good dowry-less marriage. Inevitably, the aspiring grooms are already married or old. These girls are forced to work as agricultural labourers during the day and cater sexually not only to their husband but to others too at night<sup>17</sup>. Similarly, few years ago there were reports of Bengali girls being brought into Kashmir to be sold to aspiring grooms, who are often poor, old or physically disabled. The Ameenahs from Hyderabad continue to be sold to Arab Sheikhs in the name of marriage. The Kosi -Mahanada Region in Bihar also witnessed large-scale bride sale in 2002-03.

Infant sale rackets have also always been in the news. A lot of infant sale that continues in hospitals and nursing homes remains unreported. The States of Delhi, Maharashtra, Andhra Pradesh and Tamil Nadu have been in news in this regard. Trafficking of children for adoption is not related only to inter-country adoptions. A large number of cases of sale of infants from local hospitals and nursing homes are of sale to prospective Indian parents.

Trafficking for labour is the most under reported crime. If data were to be systematically collected in this regard, children trafficked for labour would far outnumber those trafficked for commercial sexual exploitation. Trafficking for labour or economic exploitation takes various forms. Girls from Orissa, Madhya Pradesh, Chhattisgarh, Jharkhand, Bihar and West Bengal are regularly being trafficked into cities through middlemen who are part of placement agencies that put these girls to work as domestic servants. Besides, it is a well established fact that boys are trafficked for all kinds of labour, be it labour in the zari units, in gem polishing and diamond

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<sup>14</sup> Mukherjee, 1997

<sup>15</sup> CSWB

<sup>16</sup> US Dept. of State, Country Reports of Human Rights Practices-2000

<sup>17</sup> HAQ: Centre for Child Rights. Status of Children in India Inc. 2005. pg. 186



cutting units in Surat or, domestic work, work in sweetmeat shops and in small restaurants and dhabas.

While boys are also trafficked to the Middle-East for camel jockeying and cases of adolescent boys from Punjab being trafficked and smuggled into European destinations are also known, trafficking of children for organ transplant and illegal activities such as begging, drug peddling, drug smuggling etc. makes no distinction between boys and girls.

The circus industry too has been in news for trafficking of girls and boys from Nepal and not only training them for performance but also abusing them physically, sexually and mentally. Many of these girls serve as slave labour to the ring-masters and the circus owners.

Although there is a dearth of comprehensive and precise data on the subject, information gathered from the records of NCRB in one year, give an indication of the age group and purposes for which children are being trafficked. In the Year 2004, 2265 cases of kidnapping and abduction of children that qualify as forms of trafficking were reported to the police. Of these 1593 cases were of kidnapping for marriage, 414 of kidnapping for illicit intercourse, 92 for unlawful activity, 101 for prostitution, 16 for slavery, 1 for selling body parts, 15 for adoption, 13 for sale and 20 for begging. In 3 percent of these cases the victims were children below 10 years, in 24.59 percent the victims were children aged 11-15 years and in 72.41 percent the victims were children aged 16-18 years. The US State Department's TIP report of 2006 states that 'Independent sources report that the municipal government of Mumbai — India's largest city and largest concentration of victims of commercial sexual exploitation — arrested 13 suspected sex traffickers in 2005, but did not prosecute or convict any traffickers. Similarly, the city governments of Calcutta and Chennai registered 25 and 109 arrests of sex traffickers respectively, but provided no indication that these cases were ever prosecuted. The state of Maharashtra reported 82 prosecutions of trafficking offenses and the conviction of eight traffickers in 2004.

### *Trafficking and Sexual Abuse related Crimes against Children*

<b>Crime Head ↓ / Year →</b>	<b>1999</b>	<b>2000</b>	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>
<b>Kidnapping &amp; Abduction</b>	6882	6562	5589	1986	2571	2265
<b>Exposure &amp; Abandonment</b>	593	660	678	644	722	715
<b>Procuration of minor girls</b>	172	147	138	124	171	205
<b>Buying of girls for prostitution</b>	5	53	6	9	24	21
<b>Selling of girls for prostitution</b>	13	15	8	5	36	19
<b>Child Marriage Restraint Act</b>	58	92	85	113	63	93
<b>ITPA</b>	75	82	125	49	48	47
<b>Child Rape</b>	3153	3132	2113	2532	2949	3542
<b>NDPS Act</b>	9	16	52	56	62	54
<b>Importation of girls</b>	01	64	114	76	46	89
<b>Grand Total</b>	10961	10823	8908	5594	6692	7981
Source: Crime in India 199-2004, National Crime Records Bureau, New Delhi, India						

A number of studies highlight the exploitation that trafficked children undergo in their workplaces. Children are forced to work for long hours in unhygienic conditions coupled with poor nutritious food, for small wages and are subjected to physical and mental exploitation. These trafficked children suffer from psychological disorders such as anxiety, insomnia, depression, and post-traumatic stress disorders. They also suffer from poor health conditions such as scabies, tuberculosis, and other communicable diseases. Two studies from India found HIV rates were higher among prostituted girls than among prostituted women (12.5% vs. 5.4% and 27.7% vs. 8.4%)<sup>18</sup>.

The rate of conviction of traffickers in India is low. Although increasing number of cases are being filed against traffickers, legal action is slow giving a chance to the traffickers to escape trial and conviction. While the small number of convictions and the inadequate numbers of rescue homes along with the high level of dissatisfaction amongst rescued children regarding the quality of services being provided in these homes, seemingly present a dismal picture, there is evidence of efforts being made at stricter law enforcement and faster justice delivery and to improve the quality of services for care and protection being provided to victims of trafficking. Amendments in existing legislations to ensure stringent, punitive action against traffickers and improvement in quality of services for care and protection of children; an emphasis on concern, commitment and sensitivity of all stakeholders including the NGOs, police, the judiciary, social

<sup>18</sup> TIP Report 2006, US State Department

workers, doctors, teachers and panchayat members towards rescued children; frequent judicial interventions; setting up of special courts to facilitate faster trials; counseling of victims and making them self confident and empowering them with knowledge about their Rights have all contributed towards improving the protective environment to which children are entitled and the speed with which justice is being delivered. The Government of India is funding NGOs to build shelters or short-stay homes for victims of trafficking under its Swadhar Scheme, to provide comprehensive care to these victims including education, vocational training and orientation on life skills. However, these homes are far few in number in comparison to the magnitude of the problem and many shelters do not have the capacity to provide protection to trafficking victims for more than a few months and for creating the enabling environment to prevent re-trafficking of victims once they leave the shelters. Also, there is no provision to provide adequate protection to victim witnesses to prevent retribution from their traffickers.

### ***Child sex tourism and child pornography***

This problem has not been tackled seriously or discussed openly in India. Communities are most often silent and unwilling to speak about this phenomenon.

Tourism contributes around 11.6% of India's GDP. More than 2.4 million tourists visit India every year and growth of the tourism industry in India has contributed to an increase in the sexual exploitation of children by tourists. Children in South Asian countries are more vulnerable because of the weak enforcement of laws. Child sex tourism involves hotels, travel agencies and tour operators and some companies openly advertise availability of child prostitutes<sup>19</sup>.

Child sex tourism is prevalent in Goa, North Karnataka (Gokarna and Karwar), Kerala (Kovalam), Tamil Nadu (Mamallapuram), Orissa (Puri), West Bengal (Digha) and in Rajasthan. Mumbai is believed to be the 'biggest centre for paedophilic commerce in India'<sup>20</sup>. The tourist season shows a sudden influx of young boys and girls onto the beaches in these tourist destinations. On an average 50 girls and boys arrive in Goa during tourist season.

A study on child sex tourism completed by an organization called Equations in 2002, indicates that children are promised better jobs and then 'forced' into sex and that moneylenders force parents to sell their children to repay debts. The study also reports that hotels, and lodges have contacts with adult sex workers, pimps, rickshaw pullers, petty traders who make contact with street children and bring them to tourist hotels and lodges.

The Agra-Delhi-Jaipur belt is spawning a flourishing trade in child prostitution among Rajasthan's nomadic tribes and entertainers with girls as young as 10 years serving in sex shops along the highway<sup>21</sup>.

Sex tourists are often paedophiles who seek out children to fulfill their sexual urges. ACTWAC has revealed that an orphanage is a typical cover for such paedophiles. Cases which have come

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<sup>19</sup> Nirmala Niketan College of Social Work, 2003

<sup>20</sup> ibid.

<sup>21</sup> '10 year old tribals forced into sex trade in Rajasthan' (as reported in Jonaki, Vol.1, No.2 September, 1997)

to light in Tamil Nadu indicate that children are at times drugged and then subjected to sexual abuse.

Child pornography is closely linked to child sex tourism. Many paedophiles claim to be documentary film producers and pick up children from the streets after tempting them with food and gifts.

Child pornography is also a part of cyber pornography and is recognized as a cyber crime. The Worldwide, the internet is being highly used by its abusers to reach and abuse children sexually. In India with increasing access to internet, there is increased risk of children falling victim to the aggression of pedophiles.

### **Factors Responsible**

Poverty is often cited as a major factor responsible for trafficking of children in India. Other factors like low valuation of girls, vulnerability of children as compared to adults, loss of traditional sources of livelihood, growing unemployment, inadequate legislation and weak law enforcement, have all contributed to the increase in child trafficking. Increasing breakdown of social structures are resulting in a loss of family and community support networks, making families, particularly women and children, increasingly vulnerable to traffickers' demands and threats.

With increasing globalization, economic disparities between countries, and porous borders facilitating easy movement of people, there is large-scale illegal migration of women and children into India from the neighbouring countries. Often such situations of illegal migration are exploited by the traffickers to traffic women and children into exploitative situations, including prostitution and labour. Unsafe migration is the best situation to be exploited by the traffickers for their benefit.

Trafficking is an organised crime. The nexus between traffickers, law enforcement officials and politicians allows very little scope for protecting children from being trafficked.

There is growing demand for children as they are cheap labour, they can be easily manipulated and they do not pose much threat to the traffickers as compared to adults.

Victims who are able to return to their communities often find themselves stigmatized or ostracized, and therefore are re-trafficked.

### **Areas of Concern**

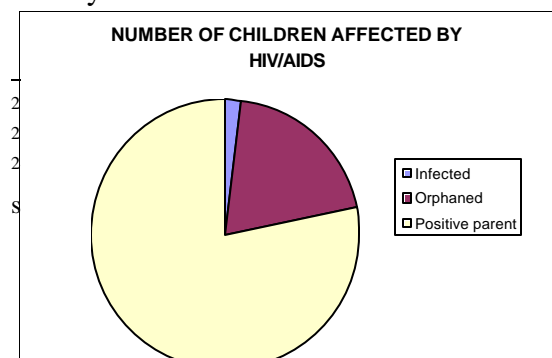
?? The limited understanding of child trafficking keeps many forms and purposes of child trafficking away from the possibility of policy intervention and action on the ground.

?? There is a dearth of comprehensive statistics on child trafficking, both within the country and across the borders. Absence of a tracking system makes it difficult to assess the real situation and plan for it. Records of migration are not maintained, birth registration is poor, and registration of marriages is a big problem. In such a situation, very often policy and decision makers do not easily understand the magnitude of the problem.

- ?? There has been very little emphasis on investment in prevention of trafficking. Such investment would be cost effective because it would reduce vulnerability of children and their families and increase the opportunity for future development of children, families and the community. In India, such investment in prevention should be at the heart of all action plans to combat trafficking.
- ?? The laws and legislations do not seem to be adequate or comprehensive in dealing with the various forms of trafficking.
- ?? Even when there are legal provisions addressing different forms of child trafficking, data is not always compiled as per these provisions.
- ?? Greater media exposure and the representation of women as sex objects have been identified as one of the causes of increasing trafficking of women and children. Media representation of women reinforces the notion that women are sex objects for the gratification of men<sup>22</sup>.
- ?? With the tourism industry aiming to become the second largest foreign exchange earner in the country, more children are likely to be ‘at risk’ and vulnerable to sexual exploitation.
- ?? There are no services available for the boys who are victims of trafficking. No protection is available for them under any law, policy or programme. The outreach of short-stay homes such as those under Swadhar is limited to girls and women.
- ?? India has signed the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children. The delay in its ratification impedes serious action through law and policy.
- ?? Current schemes and programmes for trafficked survivors are very inadequate.
- ?? Witness protection and witness assistance remain serious challenges in the absence of child-friendly laws and legal system.
- ?? Delayed trials, inadequate legal machinery, lack of trauma counselling centres and legal aid services further deny justice to victims of trafficking.
- ?? Police and judiciary, both need to be sensitized to deal with victims of trafficking.

## 2.7 Children affected by HIV/AIDS

Figures on the actual number of HIV/AIDS infected people in India vary from one source to another. According to UNAIDS, in India, 0.16 million children in 0-14 age group are infected with HIV<sup>23</sup>. However, NACO estimated only 0.55 lakh HIV infected children (0-14 years) in the country in 2003<sup>24</sup>.



004, Geneva

6 pregnant women who are HIV positive have availed PPTCT  
 is. Considering the GFR (General Fertility Rate) among women

Other available 'guesstimates' suggest the following categories and numbers of children (0-14 year olds) affected by HIV/AIDS in India<sup>25</sup>:

Infected with HIV: 55,000-220,000  
Orphaned by AIDS: 1,500,000-2,500,000  
Living with HIV  
positive parent: 6,000,000-10,000,000

The official number of full-blown AIDS cases amongst children and youth recorded by NACO is as follows:

<b>Surveillance for AIDS Cases in India (Period of report - 1986 to 31<sup>st</sup> July, 2005)<sup>26</sup></b>	
Total no. of AIDS cases in India:	<b>111608 (Male: 79041 / Female: 32567)</b>
Total no. of AIDS cases in Children (0-14 Years):	4854 (Boys: 2860 / Girls: 1994 )
Total no. of AIDS cases in 15-29 Years :	36187 (Males:21782 / Females:14405)

Reports of discrimination faced by HIV/AIDS infected and affected children in basic services such as education and health care and even when they are placed in state protection in institutional care needs are plenty, pointing to gross violation of their fundamental right to non-discrimination.

### **Factors responsible**

The most common cause of infection among children is the Mother-to-child transmission (MTCT) and, with 1.36 million women infected, the infection among children can go higher, unless effective programmes are put in place. Other than MTCT, sexual contact, including sexual abuse; blood transfusion; and, unsterilised syringes, including injectible drug use are also sources of infection among children<sup>27</sup>.

Lack of understanding and awareness of the problem; overemphasis in public education programmes only on transmission of HIV through sex; society's attitude and moralistic outlook on such a critical health issue; lack of measures to hold hospitals and medical practitioners accountable for resorting to unsafe practices and equipments while providing treatment to their patients; lack of adequate nutrition for those undergoing ART; lack of a law to deal with the issue and protect persons living with HIV/AIDS; lack of proper counselling for testing and fear of violation of confidentiality and privacy – are all factors that lead to increased number of persons living with HIV/AIDS going untreated, thereby adding to the growing statistics.

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as 103.2 per thousand, there will be 1.84 lakh pregnant women in HIV infected pool. If the transmission rate of HIV infection from infected mothers to children is taken as 30 per cent in worst case scenario, there will be 55,145 HIV infected children in the country.

<sup>25</sup> Research is continuing to produce more accurate estimates. These data are to provide a general sense of proportion for planning purposes. The number of infected children is based on ante-natal data and UNAIDS estimates. The number of orphaned children is based on preliminary computer modelling. The number of children living with positive parent is based on five million adults living with HIV in India.

<sup>26</sup> [http://www.nacoonline.org/facts\\_reportjuly.htm](http://www.nacoonline.org/facts_reportjuly.htm)

<sup>27</sup> UNAIDS, Report on the Global AIDS Epidemic, 2004, Geneva

## Areas of concern

- ✍ Millions of children are becoming orphans deprived of parental care and protection due to untimely death of their parents. There are no authenticated statistics on these orphaned children. Although it is believed that with ART, HIV-positive people will live longer, children of such parents will sooner or later become orphans. The AIDS control programme of the government is not touching this crucial category of children and the discrimination faced by them.
- ✍ According to NACO paucity of funds is a hindrance in providing Anti-Retroviral Therapy to all infected persons. However, it only utilised 46 percent of funds allocated in the period 1999-2004<sup>28</sup>.
- ✍ Tested for HIV due to repeated illnesses, many HIV positive children are found to have HIV negative mothers. Given the nature of our surveillance systems, the extent of this reality is as yet unknown. In fact, there are many cases of HIV positive children whose mothers have never been tested and where it is assumed that the latter is HIV positive. It is highly probable in situations of HIV positive children with HIV negative mothers that the child has got infected due to unsafe health care practices either soon after birth, through immunizations, blood transfusions or during childhood illnesses. There are several instances where the history of the children reveals that the probability of iatrogenic transmission is extremely high. What is very disturbing is that these cases are not investigated or followed up for a variety of reasons – ranging from sheer lassitude at best, to deliberate attempts at concealment for fear of implicating the concerned hospital<sup>29</sup>.
- ✍ Child health issues addressed through policy and action often include those falling within the ambit of family planning, reproductive and child health and nutrition programmes. Within reproductive and child health issues, immunization has by far received greatest focus. HIV/AIDS has of late started receiving some attention, but again within RCH the focus is on transmission from mother to child. In other words a whole range of other categories of children infected and affected by HIV/AIDS remain un-addressed.
- ✍ Children's needs in the context of HIV/AIDS:
  - ?? Children infected with HIV need specialised medical treatment and care, which can greatly prolong and improve the quality of their lives. This care is best provided in the same way as any other health issue – by parents with the support of local health centres and practitioners – rather than in specialist (and thus stigmatizing) facilities.
  - ?? Children orphaned by AIDS often need help to deal with emotional trauma and social exclusion, and their extended families may need encouragement and support to accept and care for these children. Institutionalization of children is a last resort but, where unavoidable, institutions must not discriminate against children affected by HIV/AIDS and must prioritise their reintegration of all children into appropriate family care.
  - ?? Children living with an HIV-positive parent will benefit most from medical intervention to keep their parents alive and productive. This is the most cost-effective method to prevent them from becoming orphans, and to avoid the trauma and impoverishment, which often follow parental death. These children will also benefit from measures targeting social service providers and the community at large designed to overcome stigma and discrimination.

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<sup>28</sup> CAG performance Appraisal Report No.3, 2004, [www.infochangeindia.org](http://www.infochangeindia.org)

<sup>29</sup> Mariette Correa, Independent Researcher, in HAQ: Centre for Child Rights, Status of Children in India Inc., 2005. pg. 66

- ✍ In case of infected children nutrient supplements along with the pediatric ART is essential. Yet it has remained a neglected area.
- ✍ Poor surveillance and lack of reliable data only adds to the problem. Besides, not much research has been done on non-commercial sexual exploitation viz. sexual abuse, rape, molestation which also increases vulnerability to HIV/AIDS and this is one area that needs to be looked into.
- ✍ Information, education and communication materials in public circulation are all too general and lack information for people living with HIV/AIDS on their rights and laws, policies, programmes and services available to them.
- ✍ There is very little effort being made towards creation of an enabling and protective environment and putting an end to discrimination and social stigma faced by children affected and infected with HIV/AIDS and also those at risk.
- ✍ The move towards privatising health services and introducing health insurance causes concern in the context of HIV/AIDS. Given that even the disabled do not get covered under any insurance scheme, whether persons infected and affected by HIV/AIDS will ever get covered remains a question.
- ✍ Since the Juvenile Justice Law allows institutions to give away children in adoption, provisions must be in place to ensure that children with HIV/AIDS are not given away in adoption or their HIV/AIDS status is made known to the adoptive families before signing the adoption agreement. The issue is tricky as we also need to ensure that at the end of the day testing for HIV/AIDS does not become compulsory for every child that is to be given away into adoption, though in the case of infants there is very little choice such a child can have. At the same time there is need for some serious thinking on how to ensure that adoptive parents do not disown the child after adoption if they discover that the child is HIV positive. The state must be prepared to take care of the cost of treatment and care for such children without depriving the child of the family environment, unless it is proved that it is not in the best interest of the child.
- ✍ To address HIV/AIDS only as a public health issue is in itself limiting, particularly when seen in the context of children and their right to protection.

## 2.8 Children in Conflict with Law

Children in conflict with law or the child offenders are most commonly referred to as juveniles or juvenile delinquents. Covered under the Juvenile Justice (Care and Protection of Children) Act, 2000, the number of such children has increased over the years, from 17,203 in 1994 to 30,943 in 2004. The crimes committed by juveniles have also seen an increase in the same period from 8,561 to 19,229. While part of this increase in juvenile crimes may be attributed to the inclusion of boys aged 16-18 years in the definition of child in the revised juvenile justice law of 2000, the fact remains that the rate of juvenile crimes is fairly high and more and more children in the 16-18 years category are coming in conflict with law.

### Juveniles Apprehended under IPC and SLL Crimes by Sex (1994-2004)

S. No.	Year	Boys	Girls	Total	Percentage of Girls
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1	1994	13,852	3,351	17,203	19.5
2	1995	14,542	4,251	18,793	22.6
3	1996	14,068	5,030	19,098	26.3
4	1997	14,282	3,514	17,796	19.7
5	1998	13,974	4,969	18,923	26.2
6	1999	13,088	5,372	18,460	29.1
7	2000	13,854	4,128	17,982	23.0
8	2001	31,295	2,333	33,628	6.9
9	2002	33,551	2,228	35,779	6.2
10	2003	30,985	2,335	33,320	7.0
11	2004	28,878	2,065	30,943	6.7

Source: Crime in India 2004.

Note: As per revised definition of juveniles in the Juvenile Justice (Care and Protection of Children) Act, 2000, boys in the age group of 16-18 years have been included

### **Incidence and rate of Juvenile Delinquency under IPC (1994-2004)**

S. No.	Year	Incidence of		Percentage of Juvenile Crimes to Total Crimes
		Juvenile Crimes	Total Cognizable Crimes	
1	1994	8,561	16,35,251	0.5
2	1995	9,766	16,95,696	0.6
3	1996	10,024	17,09,576	0.6
4	1997	7,909	17,19,820	0.5
5	1998	9,352	17,78,815	0.5
6	1999	8,888	17,64,629	0.5
7	2000	9,267	17,71,084	0.5
8	2001	16,509	17,69,308	0.9
9	2002	18,560	17,80,330	1.0
10	2003	17,819	17,16,120	1.0
11	2004	19,229	18,32,015	1.0

Source: Crime in India 2004.

Note: As per revised definition of juveniles in the Juvenile Justice (Care and Protection of Children) Act, 2000, boys in the age group of 16-18 years have been included

Once the crime is committed and the child is apprehended, the case comes before the Juvenile Justice Board (JJB). Till the inquiry is pending the child is kept in an observation home, unless otherwise released as per the law. On conviction, the child is sent to the special home or place of safety.

### **Status of Disposal of Cases of Children in Conflict With Law (1998-2004)**

Year	Arrested and sent to Courts	Sent to home after advice or admonition	Released on Probation and place under care of		Sent to Special Homes	Dealt with Fine	Acquitted or otherwise disposed off	Pending disposal
			Parents / Guardians	Fit Institution				
1998	18,964	2,620	3,889	829	1,751	908	2,107	6,860
1999	18,460	1,656	5,298	768	1,281	832	3,358	5,267
2000	17,982	2,619	3,091	2,012	1,864	609	1,132	6,656
2001	33,628	4,127	4,833	1,003	4,037	897	4,436	14,296
2002	35,779	3,236	11,338	1,240	3,381	908	1,693	13,983
2003	33,320	3,413	9,074	1,526	3,936	1,592	1,730	12,049
2004	30,943	3,848	5,662	1,138	4,942	1,256	1,957	12,140

Source: Crime in India, 1998-2004, National Crime records Bureau.

As can be gathered from the above table, with increase in the age of boys covered by the juvenile justice law from 16-18 years, the burden of pending cases and the pressure on the Juvenile Justice Boards has clearly increased. Number of convictions is high as compared to acquittals, which can be seen from the number of children sent to special homes and those acquitted. Those who are pending disposal are either kept in observation homes or may have been released on bail. Till date no information has been collected on number of children released on bail. The Juvenile Justice Boards as well as the concerned administrative authority are usually shy of sharing such information with public.

### Factors Responsible for children coming in conflict with law

There are several social and economic factors that push children to committing crimes. In the year 2004, out of the total juveniles involved in various crimes, 9,273 were illiterate and 10,771 had education up to primary level. These two categories have accounted for 64.8 percent of the total juveniles arrested during the year 2004. Children living with parents/guardians (23,701) have accounted for 76.6 percent of the total juveniles arrested. The share of homeless children who were involved in various crimes was just 7.5 percent.

A large chunk of juveniles (72.3%) belonged to the poor family whose annual income was up to Rs. 25,000/-. The share of juveniles hailing from middle income group (Rs.50,000 - Rs.2,00,000) was 8.7 percent. The share of juveniles from upper middle income (Rs. Two lakh to Three lakh) and upper income (above Rs. Three Lakh) was considerably low at 0.3 percent and 0.02 percent respectively<sup>30</sup>.

In 1999, the National crime Records Bureau had observed, 'As expected, low income and education, poor economic set up is generally the main attributes for delinquent behavior of the juveniles'.

At the same time, we cannot ignore the impact of media on children. Violence in today's cinema, acceptable aberrations shown in TV serials, advertisements, fashion shows, reality TV showing Crime related episodes, all of these have a negative impact on the minds of children.

<sup>30</sup> Crime in India 2004. National Crime Records Bureau. Chapter 10.

On the other hand, some children in conflict with law are actually victims of crimes, particularly when they are used, trafficked and forced into begging, drug peddling, prostitution etc. Unfortunately, the law does not even recognize child beggars as children in need of care and protection.

The contribution of growing consumerism and other pressures of a neo-liberal economy, domestic violence and a total lack of a protective environment in pushing children to commit crimes is fairly significant and calls for attention from the policy makers.

Inadequacy of law and the behaviour of police add to the woes of children. It has been found that children, often innocent ones, are rounded up by the police for theft and robbery so that the police can claim that can show some action on the cases reported by them.

### **Areas of concern**

#### **1. Identified Justice Delivery System for Children in Conflict with Law includes the following:**

- ?? Juvenile Justice Board – Magistrates and Social Workers.
- ?? Probation Officers
- ?? Police & Special Juvenile Police Unit
- ?? Observation Home Staff /Special Home Staff /After Care Homes.
- ?? NGOs
- ?? State Advisory Committee/ Board
- ?? District /State Rehabilitation Committee
- ?? Railway police
- ?? State Monitoring Committee
- ?? Ministry of Women & Child Development Department.
- ?? Department of Education
- ?? Department of Higher Technical Training
- ?? Ministry of Home Affairs
- ?? Department of Finance
- ?? State Human Rights Commission.

The co-ordination and interaction between different wings of the juvenile justice delivery system is poor. Lateral linkages with other sectors and Ministries/Departments such as health, nutrition, education and vocational training, sports and youth affairs, law enforcement, including railway police etc. need to be strengthened to stop any violation or denial of basic human rights of children in conflict with law and ensure proper rehabilitation and reformation. Coordination is also missing between the States and juvenile justice mechanisms set up the different states. This is important particularly if a case of a child in conflict with law needs to be shifted or transferred to his native state. This also requires adequate investment of human and financial resources to transport the child and hence coordination between the local police in the two states as well as the railway police and the concerned JJBs.

#### **2. With the share of juvenile crimes doubling over the past decade i.e. from 0.5% to 1.0% in relation to total crimes it is evident that the infrastructural and administrative**

**support has to increase proportionately to address the issues related to children in conflict with law.**

### **3. Impediments in the Administration of Justice**

Institutionalisation has to be the last resort. However, in the present situation, children are deprived of their right to be properly defended, denied bail even when they have committed petty offences or are first time offenders, and hoarded in institutions, in conditions detrimental to their growth, development and protection.

Amongst most children in conflict with law, those that remain out of the possibility of protection under the juvenile justice system are child beggars. These children continue to be governed by the Bombay Prevention of Begging Act. As a result, their cases are dealt with in the Beggars Courts and they are also held in the beggar's homes, which is for both adult and child beggars.

There are several other concerns concerning administration of juvenile justice that need elaboration. These include:

#### *Denial of Bail*

Bail is a right of every child offender and the spirit of the juvenile justice legislation clearly suggests that children in conflict with law should be released on bail except on three conditions: (a) the child will be exposed to moral, physical and psychological danger or, (b) the release will defeat the ends of justice or, (c) release is likely to bring him in association of any known criminal. It has been found that children are often denied bail on these grounds, without clearly establishing the name of persons from whom the child is likely to be in danger or the name of criminals with whom the child is likely to be associated. Moreover, to seek bail children need to be legally represented before the Board. For those who can afford, finding a good lawyer is not a problem. But most others have to rely on the poor and sub-standard legal aid services. As a result, not only does the number of cases pending disposal goes up and the institutions receiving such children remain overcrowded, but the child's right to be heard and have a say in his own disposition stands jeopardized.

#### *Inadequate Social Investigation Reports*

Another hurdle in helping these children access their right to bail or be released under other provisions in the law is the Special Investigation Report prepared by the Probationary Officers for every child, which forms an important and significant basis for the JJB's decision to grant or deny bail. A social investigation report is meant to be based on home visits made by the probationary officers and inquiry from the child's community and neighbourhood, child's friends, relatives etc. Given the increase in the number of cases of crimes committed by children and shortage of probationary officers, such in-depth inquiry has never been possible. As a result, there is no real assessment of the child's situation and circumstances and his/her family environment. Even a good case of bail gets rejected in the absence of a fair social investigation report.

#### *Poor or Non-existent Probation Services*

A fairly significant number of children in conflict with law are released on probation. However, a good probationary service programme, where the child is supervised, monitored and provided support on being released on probation, does not exist in India. Neither are there any successful experiments available to provide a model for developing effective probationary service programmes. This is an area that needs urgent and utmost attention to ensure a reformative approach to juvenile justice rather than a punitive approach.

#### *Inhuman Conditions in Institutions*

Violence and abuse faced by children in conflict with law, from the time they are apprehended till they are released, tells a lot on the existing system and its inadequacies. Children in conflict with law face abuse and other human rights violations during arrest, interrogation and detention, including arbitrary arrest, physical abuse during interrogation, and routine harassment and physical abuse by police and by private security guards. They are held in overcrowded and unsafe conditions, denied basic sanitary facilities, and sometimes commingled with adults. They are also denied family visits, religious services, and other important contacts with their communities and even adequate food at times. There is complete deprivation of the right to liberty in total disregard of international juvenile justice and protection standards. Even when education is guaranteed as a fundamental right for 6-14 year olds, for those held in institutions, this right stands violated. The facilities where they are detained fail to provide adequate medical care, mental health intervention, or rehabilitative services. Drug and substance abuse, sexual abuse, physical punishment and inhuman treatment are rampant and often reported in the media. In many states, these children are still kept with adults inside the prisons.

There is no age-specific segregation and treatment of children inside the observation homes and special homes. Smaller children being physically and sexually abused by the older ones is often reported and found to be true. Perhaps the spaces and facilities for children in conflict with law need to be separated to cater to different age groups and their needs.

Currently, rehabilitation options for children held in institutions are very limited. Traditional and conventional vocations are taught under the vocational training programmes without really assessing what kinds of skills have a viable market. As a result children end up learning tailoring or bookbinding and the likes, virtually left with no skills that can help them earn a decent livelihood on being released. In fact, there is acute shortage of staff and personnel to take up the vocational training courses and often children are found idling away their time in the institutions, taking to drugs and becoming unproductive for the rest of their life.

#### *Unfriendly Atmosphere in the JJB*

The trend observed over a period of time shows that children are deprived of the variety of rehabilitative dispositions that are available in juvenile proceedings either due to the low awareness/interest of the presiding magistrates or due to stated resource crunch. The whole atmosphere in the JJBs is unfriendly to the child. While JJBs were created under the juvenile justice system to be a child-friendly mechanism, they continue to function like any other adult court. Though training is mandated for the JJB members, it does not happen in most cases. There is limited use of non-institutional options for rehabilitation and social integration. Due to heavy pressure on the JJBs with regard to the number of cases handled in

a day, children have to wait long hours till they are called in. In fact they have to be there the whole day, often without food, water and proper toilet facilities as they are all brought together from the institution in the morning and taken back together at the end of the day.

4. The age of commission of crime occurs within the impressionable early and late adolescent period. This indicates that till child protection is not given the same emphasis as other issues concerning children and unless it is integrated with every other sectoral intervention for preventing children from falling into vulnerable situations and protecting them when required, all rights for all children can never be met.

## 2.9 Urban Children in Distress/Difficult Circumstances

Nearly 29% of the India's population lives in urban areas. An average of 50% of the urban population live in conditions of extreme deprivation - compounded by lack of access to basic services and legal housing and poor urban governance.<sup>31</sup> The urban population is also rapidly expanding due to large-scale migration to cities for a possible better life. The cities and towns are also expanding but the sheer volume of people compromises the ability of the city to meet their basic needs. A large proportion of this migrating population ends up residing in slums in inhuman conditions. As a result, urban poverty and hunger are increasing.<sup>32</sup> All this has led to a huge number of homeless children, pavement dwellers, street and working children and child beggars, who are left alone to fend for themselves.

### Homeless children<sup>33</sup>

Homelessness is not a condition unknown to children in India. Children live on the streets, in pipes and under bridges. Children along with their families are forcibly evicted from their homes in the name of development and urban beautification. Natural disasters and conflicts render many homeless or force them to live in unsafe housing conditions. As a result, whether by acts of commission or omission by the state, their right to adequate housing is constantly violated. The UN Convention of the Rights of the Child (UN CRC) has recognised adequate and safe housing as the right of every child.

In practice, adequate housing, or the lack of it, is rarely considered a children's issue. They are often not seen as a special category with special needs but merely as components that make up the family unit. Hence, the logic that follows is that if the right to adequate housing is protected, promoted and fulfilled for adults, children will invariably enjoy the same benefits. Similarly, it is assumed that the impacts of housing rights violations, including forced evictions, displacement and the loss of housing due to natural disasters, are the same and have the same effects on adults and children alike.

Experience, however, suggests otherwise. Violation and the non-fulfillment of a right have varying impacts on different sections of society. As children form one of the most vulnerable

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<sup>31</sup> Consortium for Street Children 2004, <http://www.streetchildren.org.uk/>

<sup>32</sup> Nutritional Problems in Urban Slum Children, <http://www.indianpediatrics.net/july2004/682.pdf>

<sup>33</sup> HAQ: Centre for Child Rights, Status of Children in India Inc., 2005

groups, their needs as well as the impacts of violations differ greatly from those of adults. And as children do not form a homogenous group and include a variety of sub-groups based on gender, race, caste, class, descent etc., the impacts of violation of their right to adequate housing differ accordingly.

Increasing homelessness is a growing phenomenon in the wake of globalisation. Global market forces continue to destabilize rural livelihoods. Pressures of globalisation have led to policies and programmes supported by compliant laws and legal decisions that have systematically robbed the people of their right to adequate housing. For instance, the pressure for infrastructure development considered key for attracting foreign investment, has led to the mushrooming of dams, mines and highway projects. Laws like the Indian Forest Act or the Land Acquisition Act have been used to drive people off their otherwise secure and adequate homes and lands. Whether people lose their livelihoods in the villages or are driven off their homes and lands due to mega projects, or infrastructure development projects, they are forced to migrate to other areas, towns and cities, where they live on the streets and footpaths, or in the most appalling housing conditions, in overcrowded slum clusters. Lack of basic facilities and disease becomes a way of life.

The Census traditionally collects information of houseless households, who do not live in a building or census house, but live in the open or on road sides, pavements, pipes, flyovers etc. The data on houseless households provides an overview of the type of such households existing in the country who are either forced by poverty or other reasons compelled to live in the open. This is the only reliable data that is available on homelessness in the country. There are 447,552 houseless households consisting of 1,943,476 persons in India. Of these

<b>Houseless households in India</b>		
<b>Houseless Households</b>	<b>Number of Households</b>	<b>Population</b>
Rural	259,742	1,164,877
Urban	187,810	778,559
<b>Total</b>	<b>447,552</b>	<b>1,943,476</b>
<i>Source: Census of India, 2001</i>		

58.1% were enumerated in the rural areas, while 41.5% in the urban areas. The Census of India 2001 for the first time provided data on the average household size, which was reported for all areas at 4.3. The rural and urban average household size was reported as 4.5 and 4.1 respectively.

### **Migrant Children<sup>34</sup>**

A major factor that contributes to rapid urbanization is the increased migration from rural areas to India's urban areas. Many of these migrants are landless agricultural laborers whose traditional occupations no longer exist or do not provide sufficient income, and who have come to the cities in search of employment. In Bangalore, many are migrant construction workers who were promised work by agents and subcontractors for construction companies, but who were abandoned by the construction companies and their agents once the work was completed. In general, rural-to-urban migration can be explained by India's policy of development, which has favored urban, industrial development over rural development. While this policy did create greater industrialization and less reliance on agriculture as the engine of economic development, it did not alleviate rural poverty. According to the UNDP, 49 percent of India's rural population lives at or below the poverty line. Some of these unemployed or underemployed people are forced to go to cities in search of economic opportunities. Cities provide a slightly better

<sup>34</sup> Human Rights Watch: Police Abuse and Killings of Street Children In India, November 1996

opportunity for these people. However, since the UNDP estimates that 38 percent of India's urban population is at or below the poverty line, this accounts for more than eighty-nine million people. A 1992 UNICEF study of street children in Bombay observed that the large-scale migration of families from rural to urban areas... has resulted in severe overcrowding, degrading work conditions, homelessness, deprivation of basic services and appalling living conditions in the city. Yet, to return to the village means starvation: to remain in the city means possible survival at least physically.

To a great extent the issue of street children is closely associated with the process of fast urbanization that has been taking place in the major cities of India since the sixties. Children come to the city with high expectations and full of hopes that they would easily get jobs there and are able to live comfortably with their families. But except for the fortunate ones the dream is shattered in the case of many. Finding it very hard to make both ends meet they are driven to a life of precarious survival. No place to live, no job to support their family with, they are forced to take to streets as their homes and live on the meager earnings that they somehow manage by doing various odd jobs. The railway stations and their surroundings, under flyovers [highway overpasses] and over-bridges, and in unoccupied spaces they live in large clusters constructing tiny little shanties with bamboo poles and plastic sheets or torn cloths. Often such children are displaced due to development projects and find their way on to the streets or fall pray to bonded labour.

Co-mingled with the migrant population and contributing to the phenomenon of street children is the local population of urban poor who were born in the cities, the temporary migrant families, children who travel to cities daily for work and abandoned or orphaned children. All are subjected to the same economic and social problems that the poor throughout India face, including coping with significant increases in the cost of living. As an increasing number of children face severe economic hardship, more and more children become child laborers in whatever occupations are available, including a practice that the Indian government described as, "decadent social practices like scavenging..." in the form of rag-picking, and increasingly, criminal activity.

### **Street Children<sup>35</sup>**

Street children or children living and working on the streets are a common phenomenon in urban India. Often treated as an eyesore and nuisance, their presence in everyday urban life is difficult to ignore. In spite of the relative high visibility of street children, there is very little information available on their exact numbers. UNICEF estimated 11 million street children in India in 1994, which is considered to be conservative. It also estimated 100,000 – 125,000 street children each in Mumbai, Kolkata and Delhi, with 45,000 in Bangalore.

An another official figure available from a 1997 report of the DWCD, Ministry of HRD, Government of India stated that 11 million children lived on the street at that time, of which 420,000 lived in the six metropolitan cities of the country. Even these figures are 8-12 years old and almost no effort has been made to update these figures.<sup>36</sup>

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<sup>35</sup> Ibid, 33

<sup>36</sup> "50 Years of Child Development: The Challenges Ahead" by DWCD, Min. of HRD, Govt. of India, 1997



While many of these children living on the streets come to urban centers in search of a livelihood, in an attempt to escape poverty and caste discrimination, other are lured with grand promises by child traffickers. There are also a significant number of children who find themselves on streets in an attempt to escape from violent and abusive home conditions. Many street children also belong to families who were forcibly evicted from their homes and lands without adequate rehabilitation as a result of large development projects. Among others there are also those children who come to cities with their families as seasonal migrants to escape the situation of dwindling livelihoods and increasing case of starvation the rural areas.

However, most of these children and their families are disappointed. In the absence of adequate housing in the cities, these children are often exposed to exploitation, variety of deprivation and harassment from the police. Such children are vulnerable to hunger and malnutrition, lack of health care, lack of education, physical and sexual abuse, substance abuse and STI/HIV/AIDS. These children too have right to adequate housing/shelter, proper nutrition, education, health care and above all protection from all forms of abuse and violence.

### **Child Beggars**

No accurate data is available on the number of beggars specially child beggars, but the immensity of the problem can be appreciated by some old statistics from different parts of the country:

?? Only 15,000 of the estimated 100,000 beggars in Mumbai are genuine and there are gangs controlling the rest of them, according to the survey conducted by NGO Social Development Centre.<sup>37</sup>

There are no new estimates of how many people in India, specifically this city (Delhi) of 15 million people, live off begging. The last figure was released in 1983, when a professor in Delhi University's Law Faculty estimated there were 1.01 million beggars in the country.

**Source:** Delhi NGOs, Cops Lock Horns over Beggars by Sudeshna Banerjee, [Indo-Asian News Service](http://www.globalpolicy.org/ngos/state/2002/1119beggars.htm), November 2002, [www.globalpolicy.org/ngos/state/2002/1119beggars.htm](http://www.globalpolicy.org/ngos/state/2002/1119beggars.htm)

?? More than 25,000 beggars were rounded-up in Bombay the last time a drive was launched against them in the mid-1970s, but most of them returned to the street in a few months, complaining of appalling conditions in beggar homes. The situation hasn't changed much since then and past experience makes many doubt whether this fresh initiative will make much headway.<sup>38</sup>

?? According to the statement made by the Minister of State for Social Justice, Government of Maharashtra in State Assembly, the number of beggars in Mumbai, which was 20,000 in 1963, rose to three lakh in 2004<sup>39</sup>

?? India has 55 million working children. Delhi accounts for the largest number of child workers in India. Many children are being exploited by organised mafia-style groups; the more serious being, begging, prostitution and drug trafficking<sup>40</sup>

<sup>37</sup> Begging in Mumbai an organised racket: survey, Yahoo! India News, July 2004  
<http://in.news.yahoo.com/040703/43/2er57.html>

<sup>38</sup> World: South Asia Drive Against Bombay Beggars, BBC News, August, 1998 downloaded from  
[http://news.bbc.co.uk/1/hi/world/south\\_asia/160774.stm](http://news.bbc.co.uk/1/hi/world/south_asia/160774.stm)

<sup>39</sup> Mumbai beggars worth Rs 180 crore, Press Trust of India, July 2006, <http://www.ibnlive.com/news/madhvan-and-shahids-hairraising-tale/16142-13.html>

- ?? There are more than 12,000 handicapped beggars in Delhi alone. And its doctors like Ajay Agarwal that help the beggar mafia to mutilate, terrorise and live off the beggars of the city. A fact confirmed by beggars themselves<sup>41</sup>
- ?? Some 50,000 people live on Delhi's pavements or squalid open lots. These squatters are predominantly from rural areas, many of them forced to move off their ancestral lands to make way for a network of dams that are being constructed across North India despite fierce opposition.<sup>42</sup>

Although there is no data on child beggars making it difficult to estimate the number of such children in the country, the above estimates and figures point to the fact that children belonging to such families are often forced to take up begging in absence of any other choice.

Begging is one of the responses of acute poverty. People are not born beggars and do not become so by taking alms, but are victims of lack of employment opportunities in rural and urban areas. Some of them are often incapable of working because of old age and physical handicap.<sup>43</sup>

People become beggars for various reasons. Some of them are just lazy, while others have been robbed on a visit to the city and still others have left home after being duped by family and friends. According to a survey conducted on beggars in Mumbai by an NGO, Social Development Centre, most beggars are happy with what they are doing and do not want to take up a job even if offered one. They would work for a few days and go back to begging.<sup>44</sup>

## 2.10 Children in Disaster Situations (both natural and manmade)

India is one of the world's most vulnerable countries in terms of disasters both manmade and natural. Due to the geographic and demographic structure of the country, the people of India are vulnerable to floods, droughts, cyclones, earthquakes, communal riots, conflicts, epidemics, fires throughout its states and union territories. The physical loss and devastation caused by these disasters is often accompanied by emotional suffering. Survivors are left without near and dear ones, source of livelihood, their life's savings and assets and most severely, hope for the future.<sup>45</sup>

India is geographically prone to natural disasters with floods, droughts, cyclones, earthquakes

<p><b>India: Vulnerability to Disasters</b></p> <ul style="list-style-type: none"> <li>?? 54% of land mass prone to earthquakes</li> <li>?? 40 million hectares (8%) of landmass prone to floods</li> <li>?? 8000 Km long coastline with two cyclone seasons</li> <li>?? Drought –low and medium rainfall region which constitute 68% of the total area vulnerable to drought</li> <li>?? Hilly regions vulnerable to avalanches landslides/Hailstorms/ cloudbursts</li> <li>?? Man-made disasters including those linked to terrorism</li> </ul>	<p>and landslides becoming a recurrent trend. About 60% of the landmass is prone to earthquakes of various intensities; over 40</p> <hr/> <p>v11_1_save.html y 2006 stinations/delhi/3500010001.html Banerjee, <a href="#">Indo-Asian News Service</a>, November 2002,</p> <p>D &amp; UNICEF, Psychological Support for Children and</p>
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Adolescent in Disaster Situations- Module for Facilitators and Manual for Service Providers, [http://www.whoindia.org/LinkFiles/Mental\\_Health\\_&\\_substance\\_Abuse\\_tsunami\\_Child\\_and\\_Adolescents\\_Psychosocial\\_support.pdf](http://www.whoindia.org/LinkFiles/Mental_Health_&_substance_Abuse_tsunami_Child_and_Adolescents_Psychosocial_support.pdf)

million hectares of land is prone to flood; about 8% of the total area is prone to cyclones and 68% of the area is susceptible to drought. In the decade 1990-2000, an average of about 4344 people lost their lives and about 30 million people were affected by disaster every year.<sup>46</sup> In such situations loss of private, community and public assets are enormous.

The December 26, 2004 tsunami, which struck the west coast of northern Sumatra and spread through the coastal areas in India, Indonesia, Sri Lanka, Thailand and Maldives, Myanmar, Seychelles and Somalia, killed more than 280,000 people in South and Southeast Asia, including more than 10,000 in India. The ravaging sea destroyed large sections of India's coastal areas. Some 200,000 homes were destroyed or damaged on India's mainland. According to an estimate made by the officials carrying out aid work at the venue, one in every three died during tsunami was a child. Thousands of children lost their lives in the disaster. In Karaikal region, Pondicherry, 251 out of 490 total casualties were children, of which 148 were girls. In Tamil Nadu, children account for 40 per cent of the casualties. According to a UNICEF official, an estimated 2.5 million children have lost their two safe havens - their homes and schools in Gujarat Earth Quake 2001. The Gujarat earthquake in 2001 destroyed three hospitals, 21 primary health centres, and four community health centres.<sup>47</sup>

### **Areas of Concern**

- ✍ Disaster management does not specifically find mention in the 7<sup>th</sup> Schedule of the India Constitution, which lists subjects under the Central and State Government. At present no state governments, save those of Orissa, Gujarat and Bihar has instituted a State level Disaster Management Authority. That leaves a gap in accountability when there are shortcomings in the administrative response to disaster.
- ✍ There is no legislation by the central government or any state government to deal with the management of disasters.
- ✍ There is no comprehensive National Disaster Management Policy/Law to address the impact of disasters on children. Recognizing the need for a disaster management policy, Government of India, has framed the Disaster Management Bill, 2005, which was introduced in the Rajya Sabha on the 11 May 2005. The bill is presently with the Parliamentary Standing Committee on Home Affairs
- ✍ There is no scheme/programme by any Ministry/Department of the Central/State Government specific to children affected by disasters

## **2.11 Children with Disabilities**

Although the Ministry of Social Justice & Empowerment has been the Nodal Ministry dealing with subject of disability, and a major part of it is addressed through the Health Ministry, it is critical to see it as a protection issue also. In fact child disability has never really been a focus area of any Ministry and therefore calls for urgent attention. Even today, data related to disability among children varies from one source to another.

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<sup>46</sup> National Disaster Management Division, August 2004, Disaster Management in India- A Status Report, Ministry of Home Affairs, Government of India

<sup>47</sup> HAQ: Centre for Child Rights, Status of Children in India Inc., 2005

Detailed figures on child disability according to the 2001 Census Report are as follows:

2.19 crore (2.13 per cent) of the total population of the country are persons living with disability and 1.67 per cent of the total population in the age group 0-19 years (46,38,26,702) are disabled (see table below).

### Disabled Population in the age-group 0-19 by Type of disability, Age and Sex – Census 2001

Total Population	Disabled	Type of Disability				
		In seeing	In speech	In hearing	In movement	Mental
	21906769	10634881	1640868	1261722	6105477	2263821
Disabled Population in 0-19 years	7732196	3605553	775561	90452	2263941	796689
Disabled children as per cent of the total population in 0-19 years	1.67%	0.78%	0.17%	0.01%	0.48%	0.17%
Disabled children as per cent of the total disabled population	35.29%	33.9%	47.26%	23.02%	37.08%	35.19%

Source: Census of India 2001: Table C20 India

Amongst all persons living with disability, 35.9% are children and young adults in the 0-19 age group. Three out of five children in the age group of 0-9 years have been reported to be visually impaired. Movement disability has the highest proportion (33.2 per cent) in the age group of 10-19. This is largely true of 'mental' disability also<sup>48</sup>.

Other estimates suggest<sup>49</sup> -

?? One in every 10 children is born with, or acquires, a physical, mental or sensory disability. So India could have 12 million (1.2 crore) disabled children.

?? 75 per cent of the disabilities are preventable.

?? Only one per cent of children with disability have access to education.

It is said that hardly fifty per cent of disabled children reach adulthood, and no more than twenty per cent survive to cross the fourth decade of life<sup>50</sup>. Although there is very little information regarding the nutritional status of children with disabilities, it is recognised that disabled children living in poverty are among the most deprived in the world. Feeding difficulties contributing to poor nutrition have been reported among disabled children living in more affluent environments<sup>51</sup>. Under-nutrition is a common problem in children with severe cerebral palsy (spastic quadriplegia), which often has significant impairment of their eating and swallowing mechanisms. Because of their difficulty in eating and drinking, many such children can achieve an adequate nutritional status only with tube feeding.

<sup>48</sup> Office of the Registrar General of India. Census of India 2001.

<sup>49</sup> <http://www.infochangeindia.org/ChildrenIbp.jsp>

<sup>50</sup> Dr (Brig) M L Kataria, 'War against disability-Fighting for the right of the child', 29 May 2002, [www.tribuneindia.com](http://www.tribuneindia.com)

<sup>51</sup> <http://www.disabilityindia.org/dinJour/article3.html#nutrition>, April, 2003 quoted in Status of Children in India Inc. 2005, HAQ:Centre for Child Rights.

## Factors Responsible

The India Human Development Report, 1999 suggests that most physical disabilities are genetic, biological and even birth defects<sup>52</sup>. According to a report by Child Relief and You, 'The Indian Child', the most significant factors causing disability are<sup>53</sup>:

- ?? Communicable disease;
- ?? Infection in early childhood;
- ?? Early motherhood;
- ?? Nutritional deficiencies;
- ?? Insufficient or inaccessible health care services;
- ?? Inadequate sanitation;
- ?? Consanguineous marriages

The preventable causes include<sup>54</sup>:

- ?? Nutritional anaemia, infection, use of toxic drugs, ill-health, and lack of required care of the mother during the prenatal phase, all increase the risk of disability in the new born child;
- ?? At the natal phase, complications such as lack of oxygen to the foetal brain, haemorrhage and precipitate birth carry similar risks;
- ?? Post childbirth, infections like meningitis or encephalitis and head injuries due to accidents may result in a number of disabilities; and
- ?? Polio has been one of the leading causes for disability in children in India.

Sometimes environmental factors too render children vulnerable to diseases that result in long term disability<sup>55</sup>.

Besides there are several protection issues that are linked to increased risk to disability, particularly mental disabilities. Trafficking, sexual abuse and sexual exploitation of young girls not only has a psychological impact on the child but may also cause physical impairment and retardation in growth and development of the child. Trafficking of children for begging often poses threat to the child's physical well-being and increases the risk of being rendered physically disabled through violence and force. Children living on streets face are prone to accidents resulting in physical disability. Drug and substance abuse also pose a risk. Corporal punishment in schools/institutions/homes has caused hearing impairment amongst children and other physical and mental disabilities too. Most such factors responsible for disability among children are not documented and therefore beside some reported incidents of abuse and violence leading to disability, there is very little collated information linking disability with child protection.

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<sup>52</sup> Department of Women and Child Development. Convention on the Rights of the Child, India First Periodic Report 2001.

<sup>53</sup> Department of Women and Child Development. Convention on the Rights of the Child, India First Periodic Report 2001.

<sup>54</sup> Department of Women and Child Development. Convention on the Rights of the Child, India First Periodic Report 2001.

<sup>55</sup> Brundtland, Dr. Gro Harlem, Director-General of the World Health Organization, World Health Day Theme: 2003, Shape the future of Life; Healthy Environments for Children, Nursing Journal of India, April 2003, quoted in Status of Children in India Inc. 2005, HAQ:Centre for Child Rights.

## Areas of concern

It is unfortunate that society continues to treat disability with apathy or at best pity, on the one hand, and revulsion on the other. In spite of recognition of the need to make special efforts for the physically and mentally challenged, the efforts have been inadequate. Disability continues to fall in the realm of "social welfare." While efforts are on to bring it into the realm of "rights," there is still a long way to go.

Discrimination against disabled persons is serious challenge to the very fabric of the Country and the Rights guaranteed under the Constitution of India. Yet we are far from ensuring inclusive education and guaranteeing protection to disabled persons. Poor enforcement of the Persons with Disabilities Act and the Mental Health act, the disabled persons in India continue to be discriminated against in terms of access to basic services and opportunities.

Teachers in schools are not trained to deal even with learning disabilities. The special educators or trained resource teachers support to the regular class teachers is provided under the 'Integrated education for Disabled Children' scheme of the Ministry of Human Resource Development. This is because the general assumption is that general teachers cannot meet the educational needs of children with disabilities. However, what is needed is single disability teachers, multi-disability teachers and regular teachers with special education skills. A majority of training programmes for special educators or special teachers focus on single disability and these programmes are not economically viable as appointing special educators for a group of 4-5 children is very expensive. Teacher training programmes that enable the teacher to manage all disabilities is necessary. At the same time reorienting the general teacher training courses is also important<sup>56</sup>.

Lack of data regarding different types of disabilities and number of people living with such disabilities has been an obstacle in planning and making adequate interventions. In 2004, the CAG report noted, "the Ministry did not possess any reliable data on the numbers and categories of disabled in the country, which was essential to estimate the resource requirements and facilitate the preparation of a well-considered action plan"<sup>57</sup>. It also said that adequate measures had not been taken for prevention of disabilities through early detection, awareness campaigns and training of staff of Primary Health Centres<sup>58</sup>.

There is dearth of special services for the disabled children. The paediatric wards in the Government hospitals are not capable of dealing with children with disabilities, particularly in terms of infrastructure and resources. "Only about 5% of the persons with disabilities have been reached out by any kind of services. What is even more disturbing is that even the scant services available are highly skewed in favour of a few large urban metropolises. ...The prevalence of disability is, more in the rural areas. Further most of the persons with disabilities belong to the economically lower brackets. They are doubly disadvantaged since they come from poorer sections of the society while their cost of living is higher due to the additional cost of aids and

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<sup>56</sup> Dr. Madhumita Puri. Children in Globalising India. HAQ: centre for Child Rights. 2002.

<sup>57</sup> Himanshu Upadhyaya, 'Crippling delivery to the disabled', September 2004, [www.indiatogether.org](http://www.indiatogether.org), quoted in Status of Children in India Inc. 2005, HAQ:Centre for Child Rights.

<sup>58</sup> Ibid, 47

appliances, need for modifications in their dwelling units and manpower support that they may need<sup>59</sup>.

There are hardly any studies in the country in the field of child and adolescent psychiatry. Those that have been done concentrate mainly on the epidemiology and the use of assessment schedules. Very little research has been done in the areas of phenomenology, etiopathogenesis, treatment and adverse effects<sup>60</sup>.

The situation of those suffering from mental disorders is even worse as there is still very little recognition of the problem. Dyslexia, a learning disorder, found among children, is not widely understood and accepted as a problem, which obstructs the learning abilities of a child.

Mental health disorders account for nearly a sixth of all health-related disorders.<sup>61</sup> Despite this, most countries devote 1 per cent or less of their health budgets to mental health services. India spends just 0.83 per cent of its total health budget on mental health (WHO 2001a)<sup>62</sup>.

Even amongst the disabled children, there are some more vulnerable than others on account of their circumstances and living conditions. For instance, for the working child population, occupational hazards pose a serious threat<sup>63</sup>.

The link between disability and protection must be recognized and adequate support services should be provided for those who are disabled and also otherwise in need of care and protection. Services for the disabled child need to be integrated into every programme and scheme of every Ministry/Department. Disabled friendly infrastructure finds no mention in the policies of Ministries such as the Railway Ministry, Ministry of Commerce and Industry, Ministry of Tourism etc.

## **2.12 Children affected by Substance Abuse<sup>64</sup>**

A survey reveals that of the children who came for treatment to various NGOs, 63.6 per cent were introduced to drugs at a young age below 15 years. Overall 0.4 per cent and 4.6 per cent of total treatment seekers in various states were children. According to recent data, among those involved in drug and substance abuse in India, 13.1 per cent are below 20 years.

Heroin, Opium, Alcohol, Cannabis and Propoxyphene are the five most common drugs being abused by children in India. Recent available data points out that among the alcohol, cannabis and opium users about 21 per cent, 3 per cent and 0.1 per cent respectively were below 18 years.

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<sup>59</sup> Dr. Madhumita Puri. Children in Globalising India. HAQ: Centre for Child Rights. 2002.

<sup>60</sup> Shah L.P, and B.Renu Sheth, , 'Development of Child and Adolescent Mental Health in India: The Last 40 Years', April 1998, IACAPAP Bulletin. (<http://info.med.yale.edu/chldstdy/IACAPAP/498/498index.htm>), quoted in Status of Children in India Inc. 2005, HAQ:Centre for Child Rights.

<sup>61</sup> Pathare Soumitra, ,Less than 1% of our health budget is spent on mental health', June 2005, [www.infochangeindia.org](http://www.infochangeindia.org) in Status of Children in India Inc. 2005, HAQ:Centre for Child Rights.

<sup>62</sup> Ibid, 51

<sup>63</sup> HAQ:Centre for Child Rights. Status of Children in India Inc. 2005. pg. 70

<sup>64</sup> Ibid, 33

A new trend has emerged in drug and substance abuse with children now taking a cocktail of drugs through injection, and often sharing the same needle, which increases their vulnerability to HIV infection.

### Areas of Concern

There are no sensitization programmes for school children or children out of school. The government has initiated curative programmes for stopping drug and substance abuse. There is no substance abuse policy in India. A national master plan for substance abuse was evolved in 1994 which focuses on the establishment of treatment and rehabilitation centres, training in substance abuse for primary care doctors and other personnel, collaborating with non-governmental organisations and carrying out education and awareness building programmes. These programmes are guided by the Ministry of Health and Family Welfare and the Ministry of Social Justice and Empowerment. However, the almost 589 per cent increase between 1999 and 2003 in the number of cases registered against children under the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985 raises an alarm. The National Crime Records Bureau recorded 9 cases of juvenile delinquency under NDPS Act in 1999, which has gone up to 62 cases in 2003. Some volatile substances, which are present in many easily available products like cough syrups, pain relief ointments, glue, paint, gasoline and cleaning fluids, are directly toxic and are often abused by children. Many chemist shops that sell drugs without prescription also contribute to the growing instances of drug and substance abuse. Besides being a crime, the issue has serious health dimensions that call for timely mental health inputs. Inadequate number of mental health professionals across the country and inadequacy of mental health services makes the problem even more complex. The number of specialised inpatient and outpatient facilities for children are very few and are mostly attached to Psychiatric and Paediatric departments of various medical colleges and other special institutions (see section on Mental Health). These also differ in their structure, functioning, and in the available therapeutic facilities and are mainly situated in urban areas. There are practically no facilities available in the rural areas.<sup>74</sup> According to WHO, the District Mental Health Programme, which is being operated in twenty-two districts in the country, attempts to take mental health care to the rural and underprivileged sections of the society.

Besides drugs and other toxic substances, the consumption of tobacco by children too is a cause for concern. India accounts for one-sixth of tobacco illnesses worldwide.<sup>76</sup> In India 20 million children are getting addicted to smoking every year, and nearly 55,000 children are becoming smokers every day in comparison to 3,000 in the US.<sup>77</sup> In its report 'Tobacco and the Rights of the Child', WHO notes that most people start using tobacco during adolescence and, sustained by an addiction to nicotine, continue into adulthood. Tobacco use among young people continues to rise as the tobacco industry aggressively promotes its products to a new generation of potential smokers.

<b>Commonly Abused Drugs by Children (below 15 years) in India</b>					
	<b>Heroin</b>	<b>Opium</b>	<b>Alcohol</b>	<b>Cannabis</b>	<b>Propoxyphene</b>
	Rajasthan (1.3)	U.P. (1.7)	Chandigarh (1.3)	Chandigarh (4.4)	Haryana (4.2)
	Delhi (1.1)	Punjab (0.1)	Gujarat (1.2)	Haryana (1.3)	Mizoram (3.4)
	West Bengal (0.6)	-	Manipur (0.7)	Bihar (0.9)	-
	M.P. (0.5)	-	West Bengal (0.6)	M.P. (0.8)	-



	U.P. (0.5)	-	Goa (0.5)	Maharashtra (0.6)	-
<b>Total</b>	<b>0.5</b>	<b>0.1</b>	<b>0.3</b>	<b>0.5</b>	<b>0.8</b>

The Government of India in May 2004 banned smoking in public places as well as tobacco advertising and sponsorship of sporting events by tobacco firms. In tough new regulations, the Union Health Ministry has also imposed a ban on smoking in films and serials. The Health Ministry had in fact also said that distributors and directors of films and TV shows would have to show health warnings on screens in old movies and TV shows, whether Indian or foreign, that showed actors smoking. However, the Ministries of Health and Family Welfare and Information and Broadcasting (I&B) had delayed it by two months from August 1 this year to Gandhi Jayanti (October 2), which has been further extended since. WHO's repeated warnings on impact of tobacco on children's rights should not be ignored any longer, or else, as its report indicates, "if current trends continue, 250 million children alive today will be killed by tobacco."

## 2.13 Institutional Care

Historically India has the tradition of the joint family system. Therefore, orphans, widows, destitute and the aged were given shelter, care, love and protection within the family itself. However, due the changes in the economic scenario and rapid industrialization, migration became a necessity. The socio-cultural pattern also began to then change. This led to more individual family units and the breakdown of the traditional joint family system. Due to urbanization and rural poverty, as well dilution of social controls the children have been affected the most. . Majority of the poor families seek institutional care for their children as a solution to their poverty than as a solution to the problems faced by their children

It is alarming to see the increasing numbers of such children and the numbers entering the institutional system. These children are not necessarily orphans but destitute and they do have a family somewhere, however, once these children enter the institutional system there are very limited opportunities for them to get out and go back to their families.

According to the India Country Report on Violence against Children (June 2005), India has a child population of 427 million (2001 census). The number of destitute children stands at 44 million while there are 12.44 million orphans in the country, many of them in institutional care. The institutions for children in conflict with the law host about 40,000 children.

The institutions in India fall into four categories: (1) the statutory institutions formed as part of the juvenile justice system under Juvenile Justice (Care and Protection of Children) Act, 2000 to house children in conflict with law pending enquiry; (2) the institutions to look after the children in need of care and protection (children's homes and shelter homes) as directed by the Child Welfare Committees set up under the Juvenile Justice Act of 2000; (3) the institutions run by civil society organisations and religious groups to look after children in need of care and protection; (4) government- run institutions for vulnerable children belonging to the scheduled castes and tribes. In addition to these institutions are the large number of hostel schools run by the state and the educational institutions. There is no adequate information on the number of children in any of the states except for those in statutory institutions.

**Crime in India** reports of NCRB point to the fact that on an average 32,000 children are apprehended and produced in the courts in a year. Most of these children spend one week to one year in the observation homes. On an average 4500 children are sent to the special homes in a year. Apart from the NCRB sources there is no other source which throws light on the number of children entering the institutions in this country.

Karnataka in an effort to implementing the Orphanages and Charitable Homes (Control and Supervision) Act; attempted to register children's homes, with more than 1500 institutions applying for license within two years – housing 60,000 - 75,000 children.

### **Factors Responsible**

Across India, children continue to be separated, temporarily or permanently, from their families as a result of conflict and displacement, the HIV/AIDS pandemic, endemic poverty, and abuse. Often this separation is needless and could be prevented. Many such separated children frequently end up in institutions for residential care that rarely provide the environment that children, especially young children, need for healthy development.

Many children are also removed from their families against the family's wishes in the belief that this is the best or only option because of the family's poverty, the mother's unwed status, a child's disability, a parent's positive HIV status, or the lack of educational opportunities for the child. Poverty is often the driving force behind the vulnerability of single orphans (those who have lost one parent).

Private donors, faith-based organisations, NGOs, and governments channel significant resources into more orphanages or residential care institutions for children, rather than supporting programmes to assist single parents, relatives, and foster carers. This promotes a situation where those same parents and families, together with communities and government officials, turn to those institutional facilities as a first response. As a consequence, resources for family-based and community-based alternatives for vulnerable children decreases even further as key donors construct new institutions and direct funding into existing ones.

### **Areas of Concern**

- ?? Lack of a uniform registration mechanism for institutions caring for children.
- ?? Lack of gate keeping policy to check the entry of children into institutions.
- ?? Lack of a data gathering mechanism to know the number of children in institutions at a given point in time.
- ?? Resistance from traditional structures: Reducing numbers of children in institutions or closing them down in the extreme cases can meet resistance from the staff as well as local officials. Also institutions are funded by NGOs and the state and often this becomes an obstacle.
- ?? Lack of resources: Where the resources are limited or not available, appropriate implementation of community based programs becomes impossible. This is despite the fact that community based alternatives are more cost effective than institutional care. Appropriate reallocation is therefore important or the raising of additional funds.

?? Schemes from the government are formulated in such a way that there need to be a minimum number of children within the institution to get the support from the government. This forces many of the institutions to make sure they keep so many children to receive the assistance from the government.

?? There are no minimum standards prescribed for running institutions.

?? Over crowding and lack of basic amenities in many of the institutions.

Even in institutions set up for care and protection of children, “prison” like atmosphere exists and children are not free even to meet family members regularly.

## **2.13 Non Institutional Alternatives – Adoption, Foster care and Sponsorship**

Adoption in the present context is the legal placement of a child with any person other than his/her biological parent. In India at present it is done under three legislations:

- a) Hindu Adoption and Maintenance Act 1956 applicable to Hindus, Sikhs, Jains and Buddhists where in the child gets all the rights of a biological child.
- b) The Guardian and Wards Act 1890 which is applicable to all other communities but where in the child does not have the rights of a biological child.
- c) The Juvenile Justice Act 2000 provides for Adoption as a rehabilitative measure for in an abandoned child, but due to its silence on the issue of inheritance and other rights the JJ Act is not widely used.

Adoption has been an accepted practice in Indian Society. However an increase of Inter-country Adoptions in the 70's led to the 1984 landmark Judgment of the Supreme Court that has laid down guidelines for Adoption. The role of Government in regulating the programme and the present structure are in out come of the SC Judgement.

### Important Highlights of the present system

1. The Central Adoption Resource Agency an autonomous body under the Ministry is the Nodal Agency for monitoring Adoptions.
2. All Adoption placements have to be done by Child Welfare Organizations who are licensed by State Govts for Indian Adoptions and in the case of Inter-country Adoptions the Organizations are recommended by State Govts to CARA for recognition.
3. The Priorities for Adoptions
  - (a) Firstly Indian families in India
  - (b) Secondly Indian families residing outside India
  - (c) Thirdly one parent of Indian Origin
  - (d) Lastly Foreigners.
4. To prevent malpractices safe guards have been laid down to ensure that a child is free for adoption.
  - (a) An abandoned child has to be produced before the Child Welfare Committee under the JJ Act who after due enquiry declare the child as having no legal claimants and can be placed in adoption.

(b) Where a biological parent surrenders a child she/he executes a Surrendered documents duly notarized. The biological parent has 60 days to reconsider the decision.

5. Indian parents can apply to any of the licensed agencies for adopting a child. If the parents are found suitable as per the guidelines they can adopt a child.
6. Foreigners have to apply through an Adoption Agency in their country that is enlisted with CARA and there is a process laid down by the SC and CARA to be followed.
7. Shishu Greh's – homes for abandoned babies have been funded by GOI, which also give children in Indian Adoption.

Given this framework the available statistics is as follows:

- ?? No. of Child Welfare organizations recognised by CARA for Inter- country/In-country Adoption – 60 in 14 States.
- ?? No. of Child Welfare Organization licensed by State Govts for only In-country Adoption – data not available.
- ?? No. of Shishu Greh – 33 in 12 States.
- ?? No. of Voluntary Coordinating Agencies to promote Indian Adoptions – 16 in 14 States.

CARA In-country and Inter-country Statistics				
Year	In-country Adoption		Inter-country Adoptions	Total
	Agencies	Shishu Greh		
1999	1627		1293	2920
2000	1890		1364	3254
2001	1960		1298	3258
2002	2014		1066	3080
2003	1949		1024	2973
2004	1707	584	1021	3312
2005	1541	743	867	3151

This data does not include the figures of Indian adoptions done by Child Welfare Organization recognised by State Governments to do only Indian adoptions.

The present trend of increasing Indian adoptions is a reflection of the awareness programmes and changing social attitudes. There are lists of waiting prospective Indian parents in most centers.

### Areas of concern

- ?? Although there are a large no of children in institutions who may need a family there is no system of identifying and placing.
- ?? The organized and monitored adoption programme is there only in 14 States. Adoptable children in other states either languish in children's homes/may be trafficked to neighboring states/or given in informal/illegal adoption.
- ?? In spite of the safeguards malpractices even in the licensed /recognised institutions are reported from time to time. Lack of monitoring and immediate action by state Govts due to paucity of designated staff is one of the main concerns.
- ?? Delays at various levels – CWC due to lack of PO, Court etc.,
- ?? Charges by Agencies – preference for Inter-country.

?? Surrendered of children particularly of girl children needs to be deterred by offering support services to the parents.

?? Last but not least the need for an enabling legislation on adoption applicable to all communities.

### Foster Care

Foster care, which is short-term or long-term care in alternate families for children in difficult circumstances, is almost non-existent in India and needs to be developed as an alternative to institutional care.

### Areas of Concern

Internationally it is accepted that this has to be done with professional guidance and constant supervision to ensure quality care and protection for the child.

### Sponsorship

Sponsorship which offers financial and other support services to families in distress in order to ensure that the child is kept and care for within the family is now provided by certain NGOs to prevent abandonment or institutionalization. There is no record or data on the number of children receiving such assistance, the NGOs who provide sponsorship or the geographic areas covered.

## **2.14 Creche & Day Care**

The survival, development and protection of children depend purely on active support and assistance of adult caretakers. In all developed and developing economies the profile of adult caretakers has changed over the years, particularly in the case of women, who are socially and culturally seen as child nurturers. This has posed several challenges to the care and protection of the young ones. With increased opportunities for employment for women and the need to supplement household income, more and more women are entering the job market. The breaking up of joint family system and the increased phenomenon of nuclear families has generated a demand for support to working women in terms of quality substitute care for their young children while they are at work. At the same time, it is equally important to realize and recognize that crèche and daycare services are no longer only a requirement of poor working mothers, but also of women from all kinds of economic backgrounds, who require support and relief from childcare as they struggle to cope with the burden of activities, within and outside the home.

There is no doubt that India's approach to issues related to women and children has changed significantly since the 70s, gradually shifting from needs-based, welfaristic interventions to rights-based developmental strategies and programmes. The National Policy for Children, 1974 made the first beginning towards this shift. This policy document clearly recognized the need to provide for full physical, mental and social development of a child before and after birth as a distinct goal. In pursuance of the commitment made to the children in the National Children's Policy, 1974, the scheme called 'Assistance to Voluntary Organisations for Creches for Children of Working/ Ailing mothers' was introduced. The scheme was designed to provide a safe environment to children while their mothers are working, through health care, sanitation, nutrition, play materials, cradles, beds and the provision of a supervisor in every crèche, who can provide stimulation to the children.

In the 80's, ECCE for the 0-6 year olds came into focus as part of the National Education Policy of 1986. India's commitment to the young child further strengthened when it adopted the World Fit for Children Declaration and Plan of Action and ratified the UNCRC in 1992.

Accordingly, in 1993-94, in order to meet the growing need for more crèches, the 'National Creche Fund' was set up, under which assistance was made available to voluntary organizations/mahila mandals (women's groups) through the interest earned from the corpus fund to convert existing Anganwadis (pre-school centres) into Anganwadi-cum-creche Centres<sup>65</sup>.

In the year 2002, when India declared education as a fundamental right of all children in the 6-14 years age group, it also distinctly recognized the importance of early childhood care and education for the 0-6 year olds as a directive principle for the State to follow. Article 45 of the Constitution of India under the Directive Principles of State Policy now clearly lay down that, "State shall endeavour to provide early childhood care and education to all children until they complete the age of six years".

As a step towards this Constitutional commitment, in 2005-06 both the crèche and day care schemes were integrated into a new programme titled, 'Rajiv Gandhi National Creche Scheme for Children of Working Mothers'. The aim was to increase the number of crèches as well as the budget for every crèche. The scheme is implemented through the Central Social Welfare Board (CSWB) and two national level voluntary organizations – Indian Council for Child Welfare (ICCW) and Bharatiya Adimjati Sevak Sangh (BAJSS).

### **Rajiv Gandhi National Creche Scheme for Children of Working Mothers –Organization-wise details of crèches and grant released during 2006-07**

*(Rs. in lakhs)*

S. No.	Name of Organisation	No. of Creches	Grant Released during 2006-07		
			Ist Quarter	IInd Quarter	IIIrd Quarter
1.	Central Social Welfare Board	14,565	1726.52	1410.86	3137.38
2.	Indian Council for Child Welfare	2,364	251.77	250.49	502.26
3.	Bharatiya Adimjati Sevak Sangh	1,749	185.32	185.32	370.64
<b>Total</b>		<b>18,678</b>	<b>1846.67</b>	<b>2163.61</b>	<b>4010.28</b>

The number of creches under the 'Rajiv Gandhi National Creche Scheme for Children of Working Mothers' is 18,678. This is totally inadequate when compared to the huge numbers of working mothers and their children. The requirement of crèches to cater to the childcare needs of the 22 crore women in the informal sector alone is 800,000<sup>66</sup>.

<sup>65</sup> Ministry of Women and Child Development. Annual Report, 2005-06. Government of India.

<sup>66</sup> CLAP. Exploring Rights of the Child in Early Childhood. A Report of the Interface for Perspective Building on Legal Aspects of Early Childhood Care and Development.

In addition to the crèche and day care services provided by the Ministry of Women and Child Development, some labour laws also make it mandatory for employers to provide crèches for children of women employed by them.

The Factories Act of 1948 expects industrial units employing 30 or more female workers to run a creche for their children. Similarly, the Plantations Act of 1951 stipulates that every plantation employing 50 or more women workers should provide a creche. The Mines Act of 1952 specifies that a creche has to be provided wherever women are employed, regardless of their number, making it necessary, even if only one woman is employed. The Beedi and Cigar Workers (conditions of employment) Act, 1966 provides that every industrial premises wherein more than 50 female employees are ordinarily employed, there shall be provided and maintained a suitable room or rooms for the use of children under the age of 6 years of such female employees. The Contract Labour Act of 1970 and the Inter State Migrant Workers Act of 1980 also have legislative provision for crèches on the same model<sup>67</sup>.

### **Factors that generate the need to link Early Childhood Care with Child Protection**

While every stage in the life of a child is critical, early childhood constitutes the most vulnerable period. Infants are more vulnerable to developmental retardation, if not permanent damage, from neglect and deprivation<sup>68</sup>. The significance of investing in early childhood care is fairly well established across the world. However, the approach to it has largely been in terms of addressing the health and development needs of the young child or in terms of addressing the needs of women who enter the job market. In the present day situation, the need to also look at it from the child protection lens has become crucial. Therefore, when looked at from the protection perspective, children who participate in quality childhood programmes “are more likely to obtain a higher level of education and get a better-paying job, and are less likely to be involved in crimes”<sup>69</sup>. Also, absence or lack of childcare services and pre-school implies that the young child is kept in the care of older siblings. In most cases this older sibling is young enough, needing care and protection for herself/himself. Often, it is the girl child in the family who is kept away from school to take on this responsibility. Furthermore, children are vulnerable not just to accidents while their parents are away at work, but also to violence and abuse by both strangers and known persons. With the joint family system breaking down everywhere in the country, and families and relatives themselves posing a threat to the protection of children, the problems of working parents and their children abound. Child sexual abuse involving male family members or relatives or neighbours is on the rise. Home is no longer the safest haven. Besides, there are other kinds of fears that set in on the minds of children left behind all by themselves or without anyone they can really trust. On the other hand, where parents take their young ones along with them to their work places, as for example in the case of construction workers, they have to leave their children on the work site itself in very unsafe conditions.

For the countries who have ratified the UN Convention on the Rights of the Child (UNCRC) it is important to remember that all rights are indivisible and while the UNCRC may have treated Early Childhood Care and Education (ECCE) as part of a child’s right to development, the

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<sup>67</sup> op. cit. p1 (<http://www.indianngos.com/issue/child/government/rights/conventionontherights.htm>)

<sup>68</sup> <http://www.indianngos.com/issue/child/government/rights/conventionontherights.htm> Convention on the Rights of the Child Country Report.

<sup>69</sup> HAQ: Centre for Child Rights. Status of Children in India Inc., Enakshi Ganguly Thukral (ed.), New Delhi, 2005.

relationship of ECCE with every other right of the child, including protection rights cannot be ignored.

### **Areas of concern**

- ?? With more and more women coming into the workforce, the need for crèche and day care services for their children has only increased. However, the growth of crèche/daycare facilities has been very slow, resulting in failure to meet the needs of working mothers and their children in terms of extent, content and quality of services.
- ?? In the existing crèche and day care schemes of the Ministry of Women and Child Development, there is no role of State Governments/UT Administrations. As a result there are no possibilities of involvement of local Community Based Organisations and Self Help Groups, other large national NGO, trade unions or workers boards such as Building Workers Association by the State Governments/UT Administrations in the implementation of the schemes.
- ?? Confusions regarding the role of ICDS Anganwadis and Creches prevail, affecting the daycare services adversely. Restrictions such as a Creche cannot be located in an area where an ICDS Anganwadi exists and visa versa hamper the growth and outreach of daycare services.
- ?? Lack of proper and regular training of caregivers and limited hours of day care under the existing crèche and daycare schemes are equally serious concerns that need to be addressed.
- ?? The implementation of provision of crèche and childcare services under the labour laws has been rather poor. Employers either refrain from employing women if it is mandatory for them to provide for daycare of their children or, they fail to show employment of women in their official records in order to avoid the provision of services for the children of their women employees.
- ?? Specific attention is called for in the case of children of women working in the informal/unorganized sector. This is because these women are not covered by any of the existing labour legislations.
- ?? Every working mother finds it difficult to work in the absence of safe and quality day care facilities where they can comfortably leave their children. Children also need a good and safe environment while their parents are away for work. Besides, daycare is fast becoming a need of non-working mothers also. The limited scope of the existing crèche and daycare programmes cannot meet this need of the hour. Planning for and investing in this need of all mothers and all children has therefore become imperative.
- ?? There is an under utilisation of the existing provisions for creches because fathers who need it for their children cannot use it. The childcare needs of a father are yet to be recognized in India<sup>70</sup>.
- ?? Early childhood care is yet to be seen as a child protection issue. Unless this happens, the planning and investment in child protection will remain inadequate and more and more children will continue to fall out of the safety and protective net, which can otherwise be provided by quality day care services.

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<sup>70</sup> CLAP. Exploring Rights of the Child in Early Childhood. A Report of the Interface for Perspective Building on Legal Aspects of Early Childhood Care and Development.



- ?? While crèches address the needs of the early childhood care and protection of the 0-6 year olds, day care is a much broader concept in both its understanding and outreach. Besides early childhood care for the 0-6 year olds, day care as such has become a need of children of all age groups from all kinds of families. The joint family system is breaking and the nuclear family structure, with both parents working, is coming into existence in urban as well as rural settings. In such circumstances, the need for care and protection for all children of working parents through day care facilities is an upcoming challenge.
- ?? The most essential factor in establishing successful day care programme(es) for all children is that quality and safety standards are ensured under the programme(es). If children are not safe at home, they are also not safe in care institutions, be it day-care facilities. To ensure that children do not become victims of neglect, violence, abuse and exploitation is therefore critical. This not only requires setting up minimum standards of care and protection for all crèche and day care facilities and other institutions providing permanent or temporary shelter to children but also strict monitoring of the services, transparency and accountability.

## 2.15 Counselling

### The Child's Best Interests

Children experience trauma, physical and mental pain, fear, deprivation and despair as a result of how they are treated. Such experience can result in life-long damage to a child's personality and spirit.

As State Party to the CRC, and as a nation committed to the promises set out in the Constitution and the National Policy for Children, India has accepted the responsibility of helping children whose protection rights are violated or at risk. Such children require not just love and kindness, but skilled professional attention.

Programme initiatives to offer children protection, healing care and rehabilitation are constrained by a serious lack of counselling institutions and services, and a tied lack of people who are professionally trained and socially enlightened to provide children in need the kind and standard of counselling they require, to enable them to recover from adverse experience or treatment, and to help build or re-build a caring and protective environment for them.

### National Plan of Action for Children, 2005:

The NPA recognises child protection needs and makes landmark promises to address them. It pledges "to create and uphold a safe, supportive and protective environment for all children, within and outside the home"... " Develop and provide professional counselling services for children affected by psycho-social trauma" ... and "Support creation of accredited training courses/institutions for counselling services which meet international standards"<sup>71</sup>.

### Situation and Needs:

The counselling of children requires both learned competencies and a positive mindset towards children struggling to deal with their world. Mindsets have their roots more in a socio-cultural

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<sup>71</sup> Govt of India: National Plan of Action for Children-2005: Section III (Child Protection), Chapter 11: Pts 11.1.2, 11.3.9, 11.3.10.

milieu and related norms of acceptable behaviour than in the formal content of courses of study. If the State accepts its CRC obligation to be an exemplar in setting and upholding standards for the treatment of children, it must develop such competency and such attitudes, and place them at the service of children who need protection and care.

‘Children have the right to be protected from all forms of abuse, neglect, exploitation, and violence...whether at home, in school or other institutions, in the workplace, or in the community’. {Para 43}

‘Establish mechanisms to provide special protection and assistance to children ...’Make appropriate treatment and rehabilitation accessible for children...’Ensure that children...are given all possible assistance...to help them resume a normal life...’Provide appropriate training and education in children’s rights to all...personnel...’provide or strengthen training for them (*officials*) to respect the dignity, human rights and fundamental freedoms (*of all children affected or threatened by denial of these*).’

[World fit for Children 2002: UN]. {Para 44: (10) to (46)}.

This places on the State the three-fold responsibility of (i) ensuring education and training at professional standard, (ii) development/establishment of a competent and accountable counselling infrastructure as an integral component of all relevant delivery systems affecting the child, and (iii) recruitment and placement of trained personnel. While NGOs and private sector institutions have their role to play in developing and providing such supports to children, it falls on the State to be the prime actor in serving the nation’s children.

The 2003 National Charter for Children inserts a proviso to children’s entitlement to have their rights secured, stating that children’s enjoyment of rights hinges on the degree and manner in which they themselves honour their duties to family, community and society. While children do need to learn how to be productive and contributing citizens and good social beings, the Charter’s conditionality for governmental and social responsibility cannot be accepted. The guiding principle for dealing with children is the principle of the child’s best interests. The 1974 National Policy for Children still stands as the State’s official commitment to the child, and it is unequivocal in placing the child’s interest as paramount in any decision or situation affecting children. This policy and its underlying perspective must guide the new Five-Year Plan.

Children are entitled to protection against any form of harm, or risk of harm. They are entitled to a protective and caring environment, and this must include the availability and provision of professional guidance and counselling. Today, it is not available because there are not enough institutions and courses preparing trained personnel capable of providing such services to benefit children. It is also likely that the character and content of training currently on offer does not adequately address the present and emerging scenario of child protection needs and risks.

These needs and risks now include:

?? Children affected by HIV/AIDS;

?? Children affected by drugs and substance abuse;

- ?? Children at risk of or affected by the violations covered by the two Optional protocols to the UN CRC<sup>72</sup> (including trafficked victims, victims of sexual abuse and exploitation and children at risk of or affected by situations of conflict, whether internal or other);
- ?? Children at risk of or affected by India's non-ratification of ILO Conventions # 138 and #182;
- ?? Children at risk or needing protection because of their caste or community, or their gender identity;
- ?? Children affected by natural disasters;
- ?? Children who are victims of neglect and violence; and,
- ?? Children in conflict with law.

The list is not exhaustive, but at least an attempt to prioritise the focus in terms of categories of children for whom counseling is an essential requirement.

Many conditions and settings create or aggravate counselling needs. Children in need include those who may not be in a 'visible' trauma or post-trauma situation stemming from an external disaster, but who are in socially, psychologically or emotionally 'at risk' situations, including in family or household settings, as also in settings where they come in contact with services of the State and other institutions.

WHO sets out a contextual frame and essential standards for the 'undefined and hidden burden' of mental health vulnerabilities and problems. Mental health aspects of the situation of children in distress or danger deserve specific attention. The mental health NGO Snehi<sup>73</sup> states that courses of study presently available in India fail to transfer to trainees the minimum standards and substance that services should ensure.

#### The importance of trust :

- ?? There is need to take special note of the challenge implicit in reaching out to children of alienated groups, including those that may be in political or other confrontation with the State, and in providing help and restorative guidance to children falling within the purview of the Optional Protocol on the involvement of children in armed conflict. These are situations in which mutual lack of trust between the authorities and the alienated group can hamper effective contact and communication with affected children.
- ?? In situations of domestic violence against children, access to counselling attention must be a feature of the rescue, recovery and rehabilitation of an affected child, both for reassurance and for guidance. Family guidance is also a key counselling task.
- ?? Children's need for guidance and assistance entailing counselling also arises in the more everyday settings of government service institutions and outlets ( e.g. health services, schools/education or training sites, police stations, law courts,), where the fact of being children can deny them the caring attention they deserve.
- ?? Children's confidence to seek and access counselling and other services also hinges on trust.

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<sup>72</sup> (i) Optional Protocol on sale of children, child prostitution and child pornography; (ii) Optional Protocol on the involvement of children in armed conflict, Govt of India accepted both in 2005.

<sup>73</sup> Snehi: NGO, focusing on psycho-social support services and mental health care for children and young people/ Dr Deepak Gupta, Mr Abdul Mabood: 2006.

### **Present Status of Training Resource Base:**

The MWCD has identified the following critical shortfalls and needs:

?? Inadequate perception of counselling needs in different problem/crisis situations;

?? Lack and inadequacy of counselling services and supports, including referral;

?? Lack of trained personnel;

?? Lack of suitable institutions offering appropriate courses of instruction;

?? Lack of training/retraining facilities and investments to upgrade skills;

?? Inadequate fiscal investment;

?? Poor attention to essential standards / need to upgrade standards.

NGOs have identified the following additional shortfalls and concerns:

?? Lack of attention to and linkage with orientation to children's human rights;

?? Lack of /inadequate analysis of the range of situations and settings where children are entitled to caring attention, and need counselling support;

?? Deficits in the knowledge of child development and age-specific needs analysis to customise counselling interventions to the development level of the children to be served;

?? Lack of attention to mental health as a component of child rights and development, and deserving of counselling;

?? Lack of attention to special needs of children with disabilities;

?? Apparent lack of attention to counselling implications of the fallout on children from socio-cultural tensions/hostility;

?? Lack of capacity development in those entrusted with foster-care or other placement of children needing or undergoing / receiving counselling attention.

Currently, 15 universities and institutions in the country<sup>74</sup> are listed as offering diploma courses in counselling.

NCERT offers a 6-month post-graduate diploma course in guidance and counselling, open to teachers and educators. It includes orientation on multi-cultural interaction, globalisation, industrialisation. The RIETs in Bhopal and Mysore also offer diploma courses. Jamia Millia offers a post-graduate diploma in counselling psychology, as well as BA and MA courses in applied psychology. Tata Institute of Social Sciences offers a one-semester certificate in rehabilitation counselling for work with persons with disability.

NIMHANS provides a course of study for M. Phil in clinical psychology. MSW courses are available in 46 universities/institutions; the paper on clinical psychology includes some content on counselling. This is not enough to meet present and foreseen requirements.

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<sup>74</sup> SNDT, Mumbai; Annamalai, Cuddalore; Devi Ahilya Vishwavidyalaya, Indore; HP University, Shimla; Madras University, Chaneai; Mumbai University, Mumbai; Punjab University, Chandigarh; Mahatma Gandhi Chitrakoot Gramodaya Vishwavidyalaya, Chitrakoot; Maharaja Sayajirao University, Baroda; Rani Durgavati Vishwavidyalaya, Jabalpur, Jamia Millia Islamia, Delhi

Counselling skills and action are urgently required in a range of service delivery and service contact settings and infrastructures. The 2003 NIPCCD exercise to develop the content and structure for a post-graduate course on child guidance and counselling provides a useful blueprint for Government action in the Eleventh Plan. (It is unfortunate that the recommendations were not pursued during the Tenth Plan period).

There is need to invest in increasing training and educational capacity of institutions. While NIPCCD can be enriched with a suitably trained professional faculty to conduct such courses of study and training, it is important to explore possibilities for the enrichment of courses and content to be considered by universities and other training institutions.

There is need for a matching exercise to develop a workable orientation and training package for lower-ranking personnel who would be in contact with children and could help to provide support services.

## Child Protection in the Five Year Plans

### 3.1 Child Protection through First to Ninth Five Year Plans (1951-2002)

Child development has been a priority subject in the country's developmental planning right from the **First Five Year Plan (1951-56)**. The First Five Year Plan recognized the importance of promoting social services for maintaining and consolidating the gains of economic development, attaining adequate living standards and social justice. Accordingly, a comprehensive Social Welfare Programme that was developed during the First Five Year Plan included welfare of Women and Children, Family Welfare, Welfare of the Physically and Mentally Disabled.

In the initial years, the responsibility of child care services had primarily rested with voluntary organizations under the charge of a national apex body, viz., the Central Social Welfare Board which was set up in 1953 to promote voluntary action in the field of women and child development and disabled welfare. In September 1955, the Ministry of Education constituted a National Advisory Council for the education of the physically disabled. The functions of this Council were to advise Central Government on problems concerning the education, training and employment and the provision of social and cultural amenities for the physically and mentally disabled to formulate new schemes and to provide liaison with voluntary organizations working in the field.

Subsequent reviews and assessments concluded that holistic development of the child requires integration with other developmental sectors and their services. Accordingly, during the Second to the Fourth Plan (1956-78), Child Welfare Services were linked to different sectors of the Plan such as Health, Family Welfare, Nutrition, Education, Rural and Urban Development. These Plans, besides according high priority to education for children, also introduced measures to improve maternal and child health services, supplementary feeding for children and expectant and nursing mothers.

In the **Second and Third Plans (1956-61 and 1961-66)** social welfare activities were extended to different sectors. States were involved in the sphere of statutory enactment and organization of basic services for education and rehabilitation of the disabled and the extension of welfare services for women and children in rural areas. The Central Bureau of Correctional Services (CBCS) was set up in 1961 for collection and compilation of national statistics and preparation of guide books and model schemes. Social Defence programmes under the Suppression of Immoral Traffic in Women and Girls Act, Probation of Offenders' Act and Children Acts were organized. The Central Institute of Research and Training in Public Cooperation was set up in 1966 for research and training on problems relating to popular participation.

In the **Fourth Plan (1966-71)**, all attempts were made to consolidate the initiatives taken in the previous plans. The activities of Central Social Welfare Board were further strengthened. In addition to the three National Institutes for the Blind, the Deaf and the Mentally Retarded, a National Institute of Orthopaedically Handicapped was set up. For the placement of Disabled persons in employment, special employment exchanges were set up.

The **Fifth Plan (1974-78)** proved to be the landmark in the field of child development through the adoption of a National Policy for Children (1974), and launching of the Integrated Child Development Services (ICDS) with a shift from welfare to development in the approach towards development of children. The programme of ICDS, launched in 33 experimental blocks in 1975, aimed to reach a package of 6 basic services, viz., health check-up, immunization, referral services, supplementary feeding, non-formal pre-school education and health and nutrition education for children below 6 years and expectant and nursing mothers living in the most backward areas through a single window delivery agency called 'Anganwadi Centre'. The Central and State Governments provided scholarships to the physically disabled. The State Governments extended institutional and non-institutional services for the socially and physically disabled. The Central Bureau of Correctional Services (CBCS) was raised to the status of an Apex agency and given the title of “**National Institute of Social Defence (NISD)**” to be a model organization at the national level with specialized services of training, research and developing alternative models for innovative experiments, field testing etc.

The **Sixth Five Year Plan (1980-85)**, i.e., the early Eighties witnessed an effective consolidation and expansion of programmes started in the earlier Plans. The National Policy of Health adopted in 1983 set certain specific targets like bringing down the high rates of Infant and Child Mortality and take up universalisation of immunization etc. by the year 2002 A.D. The National Policy on Education of 1986 emphasised universal enrolment and retention of children in the schools especially the girl children. Non-formal education programmes were also promoted intensively. Vocationalisation of education was given priority. Pre-school education centres were supported in the educationally backward states by extending grants to voluntary organizations. The social welfare programmes received further momentum in the State Sector. The Children's Acts (the present JJ Act of 2000) were enacted in all the States except Nagaland. The Central Social Welfare Board continued to function as a focal and apex agency in the voluntary sector. The **Voluntary Action Bureau was set up in 1982** to meet the challenge of crimes and atrocities against women and children and to create awakening among the masses towards their social responsibility. An Information and Mass Education Cell was established with the aim of creating awareness of various social welfare schemes to mobilize public opinion against social evils like atrocities against women, child marriage etc. and to promote positive social attitudes.

The **Seventh Five Year Plan (1985-90)** continued the major strategy of promoting early childhood survival and development through programmes in different sectors, important among these being ICDS, universal immunization, maternal and child care services, nutrition, preschool education, protected drinking water, environmental sanitation and hygiene, and family planning. Under the maternal and child health services of the Ministry of Health and Family Welfare, the universal immunization programme to protect children from six major diseases which affect early childhood mortality and morbidity, viz. diphtheria, whooping cough, tetanus, polio, measles and childhood tuberculosis was strengthened for the development of children as a whole. ICDS continued to be the single nation-wide programme for early childhood survival and development during Seventh Plan. The Juvenile Justice Act (JJA) was enacted in 1986, to deal effectively with the problem of neglected or juvenile delinquents and provide for a standardized framework for dealing with such children. The Government of India enacted the Child Labour Prohibition and Regulation Act, 1986 and in 1987, the National policy on Child Labour was

formulated. Projects were sanctioned to voluntary organizations for the welfare of working children to provide non-formal education, supplementary nutrition, health care and skill training. For children in need of care and protection, grants were given to voluntary organizations through the State Governments.

During the **Seventh Plan** and **Annual Plans 1990-92**, a significant expansion of programmes and services for the welfare of the Disabled took place. For education of the Disabled almost all the States implemented programmes to provide stipends and other incentives to the Disabled at the elementary school stage. The Scheme to award scholarships to physically Disabled students to pursue general, technical and professional courses from Class IX onwards on the basis of means-cum-merit test, was continued. To provide technical support to 11 District Rehabilitation Centres for the disabled, 4 Regional Rehabilitation Training Centres (RRTC) were set up for developing the training material and the manuals and for providing material to create community awareness through the use of different media. In addition to four National Institutes for Disabled, two other organizations, viz., the Institute for the Physically Handicapped (Delhi) and the National Institute of Rehabilitation Training and Research (Cuttack) also offered a wide range of services for the rehabilitation of the Disabled and organized manpower training. The Science and Technology Project in the Mission Mode of Application of Technology for the Welfare and Rehabilitation of the Disabled was launched in 1988. Voluntary organizations were also assisted to provide services to the physically handicapped in the areas of education, training and rehabilitation.

Human Resources Development being the major focus of the **Eighth Five Year Plan (1992-97)**, policies and programmes relating to 'child survival, protection and development' were accorded high priority with emphasis on family and community based preventive services to combat high infant and under-5 child mortality and morbidity. Following the ratification of the 'Convention on the Rights of the Child', in 1992 the Government of India formulated two National Plans of Action (NPA) - one for children and the other exclusively for the Girl-Child. While the NPA for Children sets out quantifiable goals to be achieved by 2000 AD in the priority areas of health, nutrition, education, water, sanitation and environment, the NPA for the Girl Child (1991-2000) aimed at removal of gender bias and enhances the status of girl child in the society, so as to provide them the equal opportunities for their survival, protection and development. Both the Plans of Action adopted an inter-sectoral approach in achieving sectoral goals laid down in the Action Plans in close uniformity with the major goals of 'Health For All', 'Education For All' etc.

In view of the main thrust of the Eighth Plan policies and programmes relating to survival, protection and development of all sections of the population especially those of the Disabled and Disadvantaged were implemented. The major thrust was towards enabling the disabled to become active, self-dependent and productive members of the nation by extending opportunities for education, vocational training and economic rehabilitation etc. Efforts were made to integrate the services for the Disabled covering the entire range of activities from prevention to rehabilitation. Programmes under different sectors of the Plan, more particularly, health, nutrition, education, science and technology, employment and welfare were integrated in such a manner that effective inter-sectoral support was developed. The enactment of a comprehensive legislation, namely, The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, was a land mark achievement in the history of the welfare of the



Disabled .The Rehabilitation Council Of India (RCI) was set up as a statutory body under the RCI Act of 1992., with the objective of upgrading and standardizing the syllabus and ensuring uniform standards of training of professionals for the welfare of the Disabled. A Scheme of “Assistance to Voluntary Organisations for the Establishment of Special Schools “was initiated in 1992-93.

In the field of Social Defence, greater thrust was laid on non-institutional care and rehabilitation of beggars. Efforts were made to tackle the evil of prostitution and its diverse manifestations through strict enforcement of law besides building strong public support, with police and community vigilance. For prevention and control of drug abuse and alcoholism, apart from strict enforcement of the legislation, the role of the media was enlarged through both electronic and print media. Services of counseling, de-addiction and after-care centers were also expanded. The special feature in the field of Social Defence was launching in 1993 of a new programme of Welfare and Rehabilitation Services for the Street Children - an emerging problem. The revised guidelines and procedures laid down by the Supreme Court for regulating inter-country adoption was implemented by CARA.

Voluntary Organizations, which have been playing a key role in the organization of services for the Disabled and Social Defence were encouraged with necessary financial support and technical guidance. Simultaneously, efforts were also made to make the services community-based. Wherever required, the training programmes were modified and diversified to make them relevant to the market demands and job opportunities. Special efforts were made to encourage the disabled to initiate various self-employment ventures through extending necessary financial support.

The **Ninth Five Year Plan (1997-2002)** re-affirmed its priority for the development of early childhood as an investment in the country's human resource development through inter-ministerial strategies.

The strategy aimed at placing the Young Child at the top of the Country's Developmental Agenda with a Special Focus on the Girl Child; instituting a National Charter for Children ensuring that no Child remains illiterate, hungry or lacks medical care; ensuring 'Survival, Protection and Development' through the effective implementation of the two National Plans of Action - one for the Children and the other for the Girl Child; acknowledging that the first six years are critical for the development of children, therefore, greater stress will be laid on reaching the younger children below 2 years; continuing to lay a special thrust on the 3 major areas of child development viz. health, nutrition and education; universalizing ICDS as the main-stay of the Ninth Plan for promoting the over-all development of the young children, especially the Girl Child and the mothers all over the country; arresting the declining sex ratio and curb its related problems of female foeticide and female infanticide; bringing down the IMR to less than 60 and the CMR to below 10 by 2002 AD through providing easy access to health care services including RCH services and 100% coverage of immunization in respect of all vaccine preventable diseases; universalizing the Nutrition Supplementary Feeding Programmes to fill the existing gaps in respect of both pre-school and school children and expectant and nursing mothers with a special focus on the Girl Child and the Adolescent Girl; promoting the nutritional status of the mother and the child by improving the dietary intake through a change in the

feeding practices and intra-family food distribution; strengthening the early joyful period of play and learning in the young child's life and to ensure a harmonious transition from the family environment to the primary school; recognizing girl's education as a major intervention for breaking the vicious inter-generational cycle of gender and socio-economic disadvantages; expanding the support services of crèche / day-care services and to develop linkages between the primary schools and of the child care services to promote educational opportunities for the Girl Child; expanding the scheme of Adolescent Girls in preparation for their productive and reproductive roles as confident individuals not only in family building but also in nation building; and widening the scope and the spectrum of child development services with necessary interventions related to empowerment of women and children, families and communities through effective convergence and coordination of various sectoral efforts and services.

In order to achieve these commitments/strategies, efforts were being made during the Ninth Plan through various policy/programmatic interventions, in all child-related sectors through effective coordination and convergence of services and personnel. Details of various sectoral efforts and achievements are listed below:

#### Women and Child Development

Efforts were made to strengthen the on-going approach of converging the basic services of health, nutrition and pre-school education towards promoting the holistic development of the young child through **Integrated Child Development Scheme (ICDS)**, which continued to be the major intervention during the Ninth Plan for the overall development of children. It catered to the pre-school children below 6 years and expectant and nursing mothers with a package of services viz. immunization, health check-ups, referral services, supplementary nutrition, pre-school education and health and nutrition education. Though universalisation of ICDS was contemplated by the end of 1995-96 through expanding its services in all the 5652 Blocks all over the country, yet only 4200 could become operational at the beginning of Ninth Plan, before the ban on further operationalisation of ICDS projects was imposed by the Ministry of Finance w.e.f. 16.5.97. However, the ban was finally lifted and now the Government has decided to universalize ICDS all over the country by the end of the Ninth Plan.

On completion of 25 years of its implementation in October 2000, the impact of ICDS was evaluated by a number of individual experts and various research organisations. Of these, the National Evaluation of ICDS conducted by the National Institute of Public Co-operation and Child Development (NIPCCD), New Delhi in 1992 and the Mid-term Evaluation of World Bank assisted ICDS need a special mention. The findings of the Study by NIPCCD indicated a very positive impact of ICDS on the health and nutrition status of pre-school children. **Balika Samriddhi Yojana** was launched to extend a special package to girl children belonging to families living below the poverty line to ensure that all girl children enter into schools. Special incentives, viz. Rs. 500 to the mother and annual scholarships ranging from Rs. 300 to Rs. 1000 for girl children in classes I to X. For this, the Government released an ad-hoc grant of Rs.60 crore to cover 12 lakh girl children in the financial year 1997-98. **Kishori Shakti Yojana** was introduced as an enriched version of the scheme for Adolescent Girls being implemented as part of ICDS to improve the nutritional and health status of girls in the age group of 11-18 years and to equip them with vocational skills so that they can be gainfully engaged. Additional Central Assistance of Rs.375 crore under the Pradhan Mantri Gramodaya Yojana was extended to fill the

existing financial gaps for implementing the Special Nutrition Programme of ICDS, universalisation of ICDS by the end of the Ninth Plan to cover all the 5,652 blocks/wards over the country benefiting 54.3 million children and 10.9 million expectant and nursing mothers was also initiated during this period. Honorarium of Anganwadi Workers from Rs. 500 to Rs. 1,000 and to Anganwadi Helpers from Rs. 260 to Rs. 500 per month was revised in recognition of the services being extended by them.

UDISHA was launched to strengthen the on-going ICDS Training Programme into a dynamic, responsive and comprehensive training-cum-human resource development programme. For the implementation of UDISHA, World Bank extended financial assistance to the extent of Rs.600.55 crore. The National Institute of Public Cooperation and Child Development (NIPCCD), New Delhi with its nation-wide network of 3 Regional Centres, 18 Middle Level Training Centres (MLTCs) and 300 Anganwadi Workers Training Centres (AWTCs) was given the responsibility to implement UDISHA.

The scheme of **Creches and Day Care Centres for children of working/ailing mothers**, being a non-expanding scheme, maintained the same level of 12470 creches benefiting 3.12 lakh children. However, to meet the growing demand for more creches, a National Creche Fund (NCF) was set up in 1994 with a corpus of Rs.19.90 crore received under Social Safety Net. A Bill for setting up of a National Commission for Children to safeguard the Rights of Children was also formulated during this period. The National Charter for Children was also drafted during this period, which delineated government commitments and resources for the child.

#### Health and Family Welfare

The Reproductive and Child Health (RCH) Programme, being operated by the Ministry of Health and Family Welfare since October 1997 aimed at integration and expansion of family welfare services, up-gradation of their quality and making them easily accessible to the people. The Scheme, *inter-alia*, focused on maternal health and child survival issues with giving full attention to all the components. Efforts were made to improve the health status of women and children so that, decline in population growth is achieved. A close convergence between the RCH and ICDS Programme was developed, as health check-up and nutrition education were the services being provided at the Anganwadi centres. Services of Anganwadi workers were utilized to impart health and nutritional education to the woman beneficiary. It was decided in consultation with the Department of Family Welfare that village health worker and Auxiliary Nurse Midwives (ANMs) have to work in close coordination with the Anganwadi Workers. Anganwadi Worker, as she comes from the grass-root level and normally from the same village, was found better placed to drive home the points about reproductive and child health and nutrition etc. to the rural people, especially women. Besides the RCH Programme, various other related activities namely, immunisation, birth registration activity, pulse polio campaign were also undertaken by the ICDS functionaries, especially Anganwadi Worker at the grass-root level.

#### Nutrition

In line with the commitments of the National Nutrition Policy (NNP) of 1993, priority was accorded to promote the nutrition status of the mother and the child by improving the dietary intake and through a change in the feeding practices and intra-family food distribution and preventing the deficiency diseases. Accordingly, efforts were made to improve/ensure the quality

of effectiveness of the nutrition feeding programmes, viz., Special Nutrition Programme for Children below 6 years and expectant and nursing mothers through ICDS and Mid-Day Meals Programme for school going children implemented by the State Governments. Further, the nutrition component of Prime Minister's Gramodaya Yojana (PMGY) was specifically outlined with the objective of eradicating mal-nutrition amongst children under 3 years by increased nutritional coverage of supplementary feeding of these children through ICDS schemes. This Additional Central Assistance (ACA) for nutrition component under PMGY was an additionality over and above the provision for the number funded under the State Plan for ICDS scheme.

CARE-India also extended food aid for supplementary nutrition to children below six years of age and to pregnant and nursing mothers in the ICDS programme. In accordance with the List of Provisions (LOP) approved for 1999-2000, CARE-India committed to supply food aid to 66.05 lakh beneficiaries distributed in the States of Andhra Pradesh, Bihar, Madhya Pradesh, Orissa, Rajasthan, Uttar Pradesh and West Bengal. In addition to that, World Food Programme (WFP), a United Nations agency, under its Project 2206 extended food aid for supplementary nutrition to children below six years of age and to expectant and nursing mothers under the ICDS Scheme. There was a Country Programme (CPI) for India for a five-year period from 1st April 1997 to 31st March 2001. In addition to this, 3500 MTs. of food was also available from Canadian International Development Agency (CIDA) assistance for the State of Rajasthan to cover an additional 2.30 lakh beneficiaries.

#### Education

Sarva Shiksha Abhiyan (SSA) was launched for universalisation of elementary education in a mission mode. The Scheme adopted a holistic and convergent approach for incorporating all existing programmes of elementary education in the central and centrally sponsored categories under its framework. Early childhood care and education constituted an integral part of Sarva Shiksha Abhiyan. This component of SSA was primarily implemented through the Anganwadi Centres of the ICDS. Keeping in view In view of the expected universalisation of ICDS Scheme during mid-Tenth Five Year Plan, enriching and strengthen the early learning aspect of the ICDS Scheme was recognized since it is the foundation for the child's cumulative lifelong learning.

The Department of Women and Child Development requested the Department of Elementary Education and Literacy to provide one part-time teacher in Anganwadi Centre for imparting pre-school education and providing for necessary teaching and learning materials and game kits for Anganwadi centres. This was critical for releasing the over-burdened AWW to focus on family and community based interventions for improved health, nutrition and development outcomes in younger children under 3 years, adolescent girls, pregnant and nursing mothers. It was envisaged that the part-time preschool teacher would also improve the quality of early learning activities for 3-6 year olds at the AWC, strengthening the early development and learning continuum across the young child's life. Coordinated action between the Sarva Shiksha Abhiyan and ICDS Scheme will go a long way in achieving the goal of universal retention by 2010 under the Sarva Shiksha Abhiyan Scheme.

#### Welfare and Social Justice

The Ministry of Social Justice and Empowerment implemented many welfare programmes for children in difficult circumstances. **A Child Line Foundation** was set up to extend child line

services in major cities to protect children facing abuse, exploitation and neglect etc. Under the Schemes of **Assistance to Homes for Infants and Young Children for promoting in-country adoption** institutional care to children who have lost parental support at a very early age (0-6 years) is provided till the time they are placed in adoption. Under this scheme, grant-in-aid was given to voluntary agencies for setting up homes (Shishu Griha) for Infants for promoting in-country adoption. **A Programme for Juvenile Justice** aimed at strengthening the implementation of Juvenile Justice Act 1986 and to bring about a qualitative improvement in the services provided for both neglected as well as delinquent children. Under this Scheme, Children Homes, observation homes, juvenile homes, special homes and after-care institutions are established. Besides, juvenile courts and juvenile welfare boards are also operating in different parts of the country for implementation of the Juvenile Justice Act.

Similarly, under the Scheme of **Pre-Matric Scholarships** for Children of those engaged in unclean occupations, financial assistance is provided to enable the children of families involved in unclean occupation to pursue pre-matric education courses in recognized institutions. Central assistance is provided to the State Governments on a 50:50 basis and 100 UT administrations over and above their committed liabilities. The scheme has been extended to cover OBCs also. The scheme of **Rehabilitation of Children of Sex Workers** implemented by voluntary organisations, aims to rehabilitate the children of the sex workers who are one of the most disadvantaged segment among the neglected children through imparting vocational training, non-formal education, health care and nutrition. Under this scheme, grants are also given for setting up of Day-Care Centre for children of fishermen, maintenance of orphan children etc. The **Integrated Programme for Street Children** aims to prevent destitution of children and facilitate their withdrawal from life on the streets. The programme provides for shelter, nutrition, health care, education, recreation facilities to street children and seeks to protect them against abuse and exploitation. The target group of this programme is children without homes and families such as street children, children of sex workers and children of pavement dwellers. Under this scheme, grants are given to voluntary organisations, state governments, UT administrations, local bodies and educational institutions.

In pursuance of the directions of the Hon'ble Supreme Court of India, a Central Adoption Resource Agency (CARA) was set up as one of the sections of the Ministry in 1990 and was registered as an autonomous body in 1999 with the objective of providing a detailed framework for regulating and expediting adoptions in India. Various efforts have been initiated to ensure promotion of adoptions as well as to streamline adoption services. CARA has been closely networking and coordinating with State Governments in monitoring and evaluating adoption agencies, Voluntary Coordinating Agencies (VCAs) and NGOs that are receiving grants under the Shishu Griha Scheme. CARA has also initiated various steps in promotion of in-country adoptions. These include strengthening the VCAs by enhancing their grant-in-aid. In order to enhance the capacity building of various agencies involved in adoption, a series of 17 training programmes were organised all over the country under the National Initiative for Child Adoption in collaboration with the National Institute of Social Defence.

#### Youth Affairs

The view on Adolescent girls and boys has been varied and ridden with gender bias in the planning process hitherto. Universalisation of supplementary feeding with a special emphasis on

adolescent girls was mentioned in the Ninth Plan “..... In preparation for their productive and reproductive roles as confident individuals not only in family building but also in nation building” (Planning Commission, Government of India 1998). The girl was viewed primarily as a future mother, whose health and nutritional care attain significance in the fulfillment of this role, reflecting a gender stereotyped attitude and perspective. The perception for boys was however as a potential workforce, as ‘human capital’ in relation to their productive role alone. The Ninth Plan was limited in its perspective of opportunities and spaces for adolescents, and it was hoped that through a specific focus on this age group, the biases and limitations will be corrected and new thrust provided for the development of adolescents as individuals.

It was recognized that the policy perspectives on Adolescents in the period up to the Ninth Plan have been piecemeal, with various sectors referring to this age group as part of the overall approach, and no specific focus was given in most cases. The National Policy on Education (1986, modified in 1992) lays emphasis on the eradication of illiteracy especially for the 15 to 35 age group and universalisation of primary education and the Adolescent age group are considered as part of children to be provided primary education and adults who are participants of adult literacy activity. To some extent, the employment related educational needs are addressed through vocational education at the higher secondary level. The policy also talks about meeting the non-formal and need-based vocational needs of youth (15-35 years). “Education for Women’s Equality” has special relevance for education programmes for adolescents. Mahila Samakhya Programme which aims inter alia, at ensuring equal access to educational facilities for adolescent girls and young women responded to a growing demand from adolescent girls for opportunities to complete formal education and also acquire leadership and vocational skills. Mahila Shikshan Kendras, Kishori Melas and other educational activities were organized to create opportunities for education and self-development of adolescent girls.

The National Population Policy was enacted in 2000, which recognized the earlier invisibility of adolescents and they are the subjects of one of its 12 strategic themes. They were specifically referred to in the sections on information, nutrition, contraceptive use, STDs and other population-related issues. It was felt that there is a special mention about developing a health package for adolescents and enforcing the legal age at marriage. The Draft Health Policy 1999 was also formulated during this period, which expressed concern for the health of special groups such as adolescent girls, with regard to their nutritional needs. Adolescent girls were clubbed with pregnant women and children instead of treating them as a distinct group and only the pregnancy and maternity related health needs of adolescents are referred to.

A National AIDS Policy was drafted in 2000, which recognized adolescents as a significant portion of the sexually active population, and called for them to be a special focus group under the Policy. The issue of AIDS however is dealt with in an alarmist way, instead of taking an educative approach to the adolescents needs for information and choices. National Nutrition Policy (1983) focused on adolescent girls and that too only in relation to the importance of their role as mothers and housewives. The National Policy for the Empowerment of Women, which came in existence in 2001, recognized the girl child as a separate category and adolescent girls seem to be covered there under. The policy takes cognizance of their nutrition, education, adopts a holistic approach to health, violence, sexual abuse and the rights of the girl child.

The Draft National Youth Policy 2001 provided a comprehensive overview of youth issues and concerns and comes closest to a policy on adolescents. The draft policy “Working with youth and not merely for youth” highlighted several areas of concern for adolescents and youth in the country and emphasized an inter-sectoral approach. The policy laid stress on providing youth with ‘more access to the process of decision making and implementation of these decisions’. The Draft Youth Policy actually made a distinction between the age of adolescence (13-19) and the age of attainment of maturity (20-30 years). By marking the age of adolescence, the policy facilitated advocacy efforts for focus on adolescents in government programmes.

#### Programmes for Adolescent Girls

Apart from the two schemes for Adolescent Girls implemented by the Department of Women & Child Development, Kishori Shakti Yojana and the Balika Samridhhi Yojana other departments were also implementing programmes for adolescent girls, which had a bearing on their well being and developmental opportunities. Nehru Yuva Kendras undertook activities for Health Awareness to educate and enable people to adopt health and family welfare programmes. The Ministry of Social Justice and Empowerment implemented a scheme for providing educational facilities including scholarships and hostels for tribal girls. The Department of Family Welfare provided for maternal care including safe motherhood and nutrition facilities, prevention of unwanted pregnancies, and safe abortion facilities to all women. The Directorate General of Employment and Training, Ministry of Labour facilitated registration in employment exchanges for job placements and career counselling and vocational guidance for adolescents.

### **3.2 Mid-Term Review of the Tenth Five-Year Plan (2002-2007)**

#### Women, Children and Development<sup>75</sup>

The Tenth Plan has set certain monitorable targets for women and children including all children in school by 2003; all children to complete five years of schooling by 2007; reduction in gender gaps in literacy and wage rates by at least 50 percent by 2007; reduction of Infant Mortality Rate (IMR) to 45 per 1000 live births by 2007 and 28 by 2012; reduction of Maternal Mortality Rate (MMR) to 2 per 1000 live births by 2007 and to 1 per 1000 live births by 2012. The other objectives of the Tenth Plan include arresting the decline in the child sex ratio; increasing the representation of women in premier services and in Parliament; and universalisation of the Integrated Child Development Services (ICDS) scheme.

Though some of these targets are set for beyond the Tenth Plan, the Mid-Term Appraisal has been conducted in the light of these targets. The goals appear almost impossible to achieve. It took two decades to reduce the gender gap in literacy from 26.62 in 1981 to 21.69 in 2001. But the Tenth Plan envisages a reduction by 50 per cent in five years. The burning issues relating to women and children are the adverse child sex ratio, persistently high infant, child and maternal mortality ratios, wide gender gaps in literacy and in wage rates, escalating violence against women and the rising incidence of female foeticide and infanticide. Other important concerns are the feminisation of poverty and the exploitation of women in low paid, hazardous and insecure jobs in the unorganised sector and in the export processing or special economic zones.

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<sup>75</sup> Women, Children and Development (Part-II, Chapter-4), Mid-Term Appraisal of the Tenth Five Year Plan (2002-2007), The Planning Commission, India

According to the NSS 55<sup>th</sup> Round (1999-2000), women casual workers in urban areas are more vulnerable to poverty compared to not just their male counterparts but also to workers both female and male in other employment categories.

The mid-term appraisal of women and child development has found glaring gaps and inconsistencies on the ground in the light of the promises made in the Tenth Plan and the NCMP. A high-powered inter-ministerial review (under the chairpersonship of the Prime Minister) of gender justice will bring the Tenth Plan back on track regarding its commitment to gender justice. Alternatively, a Prime Minister's Mission on Women, Children and Development can be considered.

### ***Integrated Child Development Services and Crèches***

The Integrated Child Development Services (ICDS), launched in 1975, aims at the holistic development of children up to six years of age with a special focus on children up to two years, besides expectant and nursing mothers. This is done through a package of six services- health check ups, immunisation, referral services, supplementary feeding, non-formal pre-school education and advice on health and nutrition. Up to 2003-04, ICDS had been operationalised in 5,262 blocks against the target of 5,652 blocks to be operationalised by the end of the Tenth Plan to benefit 41.5 million persons comprising 34.4 million children and about 7.1 million pregnant and lactating mothers through 6.49 lakh anganwadi centres.

The Tenth Plan outlay for ICDS is Rs.10391.75 crore. The significance of ICDS can be gauged from the fact that 75 per cent of the DWCD's Tenth Plan outlay is earmarked for this scheme. However, the quality of implementation of the scheme varies from state to state. A comparative evaluation study conducted in 1992 by the National Institute of Public Cooperation and Child Development (NIPCCD) found the health and nutritional status of pre-school children and nursing and expectant mothers in ICDS areas much better than in non-ICDS areas.

The NCMP envisages universalisation of ICDS and anganwadi centres in each settlement. A Supreme Court order, in Writ Petition (Civil) No. 196/2001, also directs the government to increase the number of anganwadi centres to 14 lakh and to revise the cost norm of Rs.1 per child per day for supplementary nutrition, which was fixed way back in 1991. At present, there are 6.49 lakh operational anganwadi centres. Extension of centres to each settlement will require about 14 lakh centres, which amounts to more than double of the existing number.

Given the importance of ICDS in the survival and development of children and its centrality within the programmes of the DWCD, it merits a serious discussion, including a critique and suggestions.

Women are both productive workers contributing to the economy as well as mothers and homemakers. There are around 106 million women (NSS 55<sup>th</sup> Round, July-June 1999-2000) in the workforce, out of which around 40-45 per cent are in the reproductive age group. Day-care support services are an essential requirement for these women. Though an estimated 30 million children under six need daycare, there are only 12,470 crèches catering to 3,12,000 children and this has remained more or less stagnant over the last three plans. The existing crèche facilities



need to be expanded exponentially. This can partly be attained if the obligatory legal stipulation for provision of crèches at the place or site of work is strictly enforced. The government also has to play a major role in this. The ICDS programme does not have the critical component of day-care in the package of services provided, though lip service has been paid from time to time. This has prevented ICDS from achieving its objectives. For example, IMR cannot be brought down effectively without focusing on infant nutrition, but this has always remained the weakest part of the ICDS programme and is linked to the lack of day-care. Children under two years need to be fed frequently, appropriately and with loving care, which is not possible if the mother is at work. Day care could meet this need. An illustration of the lack of awareness about this is that even though anganwadi workers maintain as many as 17 records, none of these contain the occupation or the work status of the mother! One consequence of the lack of day-care is its impact on the education of the girl child, since she is made to stay home to take care of younger siblings. Another issue that needs to be addressed is that disabled children must be encouraged to attend the crèches and crèche workers have to be trained for care of such children.

Universalisation of ICDS, one of the goals of the NCMP, needs to be completed in five years time. Universalisation cannot and should not be interpreted merely in terms of doubling the number of centres to 14 lakh. The nature of change and quality improvement is as important. Children in the 0-14 years age group constitute 33.8 per cent of the population. A larger share of public expenditure, including investment expenditure, is required to be allocated for them. Lack of food security and poor nutritional status affects the physical growth, intelligence, behaviour and learning abilities of children and adolescents, especially during the development of the brain in the 0 to 3 years period. Malnutrition – understood as specific deficiencies of essential nutrients (vitamins and minerals) and prevalent in the form of goiter (inadequate intake of iodine), anaemia (iron deficiency) and vitamin A deficiency - is widespread. According to the National Family Health Survey, 1998-99, the incidence of malnutrition among children is as high as 47 per cent. Unfortunately, most states are unable to meet the supplementary nutrition component of the ICDS because of financial constraints. Food is either not available at the ICDS centres, or not in adequate quantities. A suggestion that the Centre could share the cost of supplementary nutrition in the ICDS programme could be considered. Supplementary nutrition can be supervised by women's SHGs on behalf of the panchayats.

One criticism of the ICDS programme relates to centres in remote areas inhabited by tribal people where the distances are formidable and the food is inadequate. For instance, in Jharkhand, there may be one ICDS centre for a village comprising four to five tolas (settlements). The tolas may be located at a distance of two-three km from each other, making it difficult for children to reach the centre. The facilities and the provision of food are never adequate to serve all the children in the village. This variable needs to be separately addressed. Pre-school education for children in the three to six years age group is a weak component of ICDS. The anganwadi workers need to be trained to be able to fulfil this requirement. The 93<sup>rd</sup> amendment of the Constitution, in effect, accorded elementary education the status of a fundamental right, but left out pre-school education. The exclusion of the latter would deprive many children in the three to six age group of pre-school education, which may lead to greater school dropout rates and other problems. District-level strategies must be designed for pre-school education. In addition, the State Councils for Educational Research and Training (SCERTs) must train the anganwadi workers to meet the needs of pre-school education.

In order to meet the Tenth Plan goals relating to reduction of IMR and MMR, there must be a good maternal and childcare clinic at every block headquarters. The medical kits and services of the anganwadi centres are inadequate to meet the clinical needs of maternal and childcare. The inherent risks of motherhood need to be recognised, the kits need to be upgraded. There may not be a strict detailed division of labour between the anganwadi workers and the auxiliary nurse midwives (ANMs) on the ground and the two need to work together in tandem so as to ensure better results in the immunisation of children and in pre-natal, neo-natal and post-natal care for mothers and infants.

For the ICDS to achieve its objectives, an effective synergy is required between the DWCD and the Ministry of Health and Family Welfare, the Department of Education, the Department of Drinking Water Supply and other ministries/departments to meet the requirements of health, sanitation, drinking water, pre-school education, etc. Finally, accountability should remain with the state departments of WCD, but with increasing attempts to involve the panchayati raj institutions (PRIs) as partners.

The success of any scheme ultimately depends on the effectiveness of the delivery mechanism at the field level. Various government agencies, autonomous bodies, public enterprises, PRIs and NGOs are involved in the implementation of the different schemes/ programmes for women and children. Schemes such as Swyamsidha, Swa-Shakti, and Hostels for Working Women are implemented with the involvement of all these agencies at different levels. Schemes like Swadhar and the RMK are entrusted mainly to NGOs and operate through SHGs. The involvement/participation of women in the implementation process is established through SHGs, which have proved to be an effective medium at the grass-root level for the welfare and development of women and children. SHGs managed by and involving women are also being encouraged to participate in the implementation of specific schemes.

The NGOs/voluntary agencies continue to play an active role in the implementation of schemes that supplements/ complements the efforts of the government. The NGOs mobilise women into SHGs and enhance their capacity, especially under Swyamsidha, Swa-shakti and RMK. Training programmes are organised for women under Swawlamban and STEP. NGOs are also operating the Working Women Hostels, and implementing Swadhar. The PRIs can ensure transparency and strengthen social audit of the schemes by playing the role of a watchdog. The ICDS programme, which is implemented mostly through the district/block/field-level functionaries like Child Development Project Officers, Supervisors, Anganwadi Workers and Helpers needs the direct involvement of PRIs and SHGs to mobilise children and women to avail of the services. Involvement of the PRIs and SHGs in the delivery of services like immunisation, supplementary nutrition and pre-school education at the anganwadi centers will go a long way in maximising the benefits of the ICDS programme. The PRIs can also be directly involved in mobilisation of SHGs and in promoting micro-credit activities among women.

The outlay for the Tenth Plan for the DWCD has been allocated keeping in view the priorities and commitments of the Plan. The Tenth Plan outlay for DWCD is Rs. 13,780 crore, which is 36.72 per cent higher than the Ninth Plan outlay. The data suggests that the child development programmes alone have been provided 89.65 per cent of the total Tenth Plan outlay as compared

to 88.70 per cent in the Ninth Plan outlay. This is mainly because of the fact that ICDS alone gets the bulk of the total outlay of the DWCD. If the outlay provided for 2005-06 is included, the DWCD will have a projected expenditure of 67.47 per cent of the total outlay by the end of the fourth year of the Tenth Plan. The progress of expenditure in child development in the Tenth Plan has been equally satisfactory at 71.07 per cent. However, in the case of women's development, the utilisation of funds may not touch even the 50 per cent mark by the end of the fourth year of the Tenth Plan. This is disappointing in view of the commitment to the empowerment of the women. Hence, there is an urgent need for reactivating the implementation of the schemes for the socio-economic empowerment of women.

At the level of the states, the programmes of the DWCD succeed where the implementing machinery is effective and the states are able to supplement the efforts of the Union government. Critical reviews of DWCD at the State level reveal some persistent lacunae. Some States and Union Territories are yet to set up an exclusive department/directorate for women and children, or for that matter, a State Commission for Women. So far 24 States/ union territories have set up a State Commission for Women. The performance of States/Union Territories with regard to the Women's Component Plan (WCP) is, on the whole, unsatisfactory. Also, a flagship scheme like ICDS has suffered a setback because of the inability by the states to provide the funds to meet the supplementary nutrition component of the scheme.

#### ***Other areas of concern***

?? **Child Trafficking:** Child trafficking is not merely confined to trafficking for commercial sexual exploitation, but can be for organ transplants, begging, entertainment (camel jockeying and circus), child labour and domestic work, drug peddling, and participation in armed conflicts, to name a few. For the vast multitude of homeless and street children, a more comprehensive policy on adoption and foster care of children must be formulated, which should be in consonance with the Convention on the Rights of the Child (CRC).

?? **HIV-AIDS:** There is no data indicating the extent to which children are affected by HIV/AIDS, although mother-to-child transmission is a serious problem. Also, there are instances where parents are HIV negative but children have been found to be HIV positive because of artificial insemination or use of used syringes/needles. The Naaz Foundation India Trust, an organisation that runs a care-home for HIV positive orphaned children and abandoned women, has come across instances of children getting infected due to vaccination. Semen for artificial insemination needs to be screened for HIV. Mother-to-child transmission rates can be brought down with drug treatment, but often the drugs are not available in many hospitals. To reduce the incidence of transmission due to breast-feeding, HIV-positive women should be provided with alternatives like soya milk for their children. Emphasis needs to be laid on well-accepted HIV/AIDS preventive measures such as the use of condoms, given multiple partner sexual behaviour. Social exclusion follows once HIV is detected. The problem of discrimination against HIV positive children while accessing public services like hospitals, schools, playgrounds, and other facilities needs to be addressed, perhaps with some special legislation.

?? **Restraining Child Marriage:** The Child Marriage Restraint Act of 1929 (as amended in 1949 and 1978) needs to be reviewed and amended, but this must be preceded by an

investigation of contemporary trends. The problem is not so much a continuation of traditional cultural practices, but the emergence of new complex causes. These are growing insecurity of girls and increasing violence against them, adolescent pregnancy resulting from sexual ignorance and neglect, increasing drop-outs from post-primary schooling due to various reasons, and deep neglect of the physical and cultural development of girls, with no provisions for games/sports, healthy entertainment and reading facilities. The problem of ignorance among girls about how to cope with their nascent sexuality needs to be addressed by the Ministry of Human Resource Development and of Youth Affairs. These Ministries should also implement the recommendations of the 2001 Report of the Working Group on Adolescents for the Tenth Plan.

?? **Protecting Girl-child Domestic Labourers:** In pursuance of its mandate to suggest systemic changes, the National Commission for Women (NCW) should, among other things, suggest institutional mechanisms to prevent violence against women and girl children in several fields, for example, in girl child domestic wage labour. Classifying domestic wage labour by girl children as a hazardous occupation may help avoid their exposure to the risks of mental and physical harassment, and sexual exploitation. Such a proposal may be put before the Technical Advisory Committee under the Child Labour Act that considers proposals to categorise any occupation as hazardous.

### **Social Justice and Empowerment<sup>76</sup>**

In order to ensure social justice and empowerment, the Tenth Five-Year Plan is committed to empowering the socially disadvantaged groups. The stated objectives were creating an enabling environment that is conducive for these groups to exercise their rights freely, enjoy their privileges and be able to lead a life with confidence and dignity; ensuring removal of disparities, eliminating exploitation and suppression and providing protection to the disadvantaged groups; ensuring that developmental benefits reach the unreached through equitable distribution; ensuring the involvement of the socially disadvantaged groups in the process of planning not merely as beneficiaries but also as participants in the formulation of need-based programmes/projects, as well as their implementation, supervision and monitoring; accelerating the on-going process of improving the socio-economic status of the disadvantaged groups through effective implementation of various policies and programmes and thus bring them at par with rest of the society.

Concerted efforts are being made both at the governmental and non-governmental levels, through effective implementation of various welfare and developmental policies and programmes, towards achieving social empowerment, especially through educational development; economic empowerment, through employment and income generation activities and alleviating poverty; social justice, through effective implementation of the existing legislations and other measures for preventing and protecting the disadvantaged groups from atrocities, exploitation, discrimination and social disabilities.

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<sup>76</sup> Social Justice and Empowerment (Part-II, Chapter-3), Mid -Term Appraisal of the Tenth Five Year Plan (2002-2007), The Planning Commission, India

In order to ensure optimum utilization of funds, efforts were made through a zero-based budgeting exercise to rationalize programmes and reduce the 31 on-going schemes of Ninth Plan to 13 schemes (four Central sector and nine Centrally sponsored schemes) in the Tenth Plan.

The social welfare groups, include persons with disabilities (loco-motor, visual, hearing, speech and mental disabilities); social deviants who come in conflict with law (juvenile delinquents/vagrants, drug addicts, alcoholics, sex workers, beggars etc); and the other disadvantaged groups, which includes older persons, children in distress such as street children, orphaned/abandoned children etc. While the Census has figures on the population of disabled and the aged, there is no data on to the size of other groups. According to the 2001 Census, the disabled are estimated at 21.90 million or about 2.2 per cent of the total population and about 75 per cent of the disabled are in rural areas. The aged (60+) number 70.6 million, accounting for 6.9 per cent of the total population.

### ***Persons with Disability:***

The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (PWD Act), which came into force in 1996, aims to empower persons with disabilities with a right to demand an enabling environment in which they can enjoy protection of rights, equal opportunities and full participation in developmental activities. The Act has a special focus on rehabilitation of the rural disabled.

However, state governments have not made much headway in the effective implementation of the Act, with some states not even having constituted the mandatory State Coordination Committees (SCC). Where they have been constituted, no meetings have been held. To ensure adequate financial support, the Tenth Plan advocated the introduction of a Component Plan for the Disabled in the budget of all the concerned ministries/ departments to ensure regular flow of funds for schemes/programmes for empowerment of the disabled. The Ministry of Social Justice and Empowerment had expressed its difficulty in implementing this suggestion. There is, however, ample scope in the PWD Act to ensure that both Central and state governments pay adequate attention to persons with disabilities.

Not much progress has been made in two other thrust areas of the Tenth Plan: to develop and implement disabled-friendly policies in the public and private sectors and to develop a social security scheme for the old and the disabled on the lines of the old-age pension. There are six National Institutes for people with disabilities offer a variety of long term and short term training programmes. At present, these National Institutes are paying more attention to building up technical manpower through degree and diploma courses. However, their role in the area of research and development and up-gradation of services in the states has been very limited and this needs to be strengthened in order to develop cost effective aids and appliances. The activities of these National Institutes also need to be evaluated from time to time so as to diversify/ modify training programmes and to make them more relevant to the available job opportunities and from the point of view of their usefulness, coverage and cost effectiveness.

The Integrated Scheme to Promote Voluntary Action for Persons with Disability scheme is the result of the amalgamation of four similar Ninth Plan schemes with the common objective of promoting voluntary efforts for the welfare and development of persons with disabilities. This re-

cast umbrella scheme not only incorporates all the components of the earlier schemes but also proposes to cover new areas like legal aids and legal counselling; support facilities for sports, recreation, excursions, creative and performing arts; promotion of research in various developmental areas, establishment of well equipped resource centres, etc. The scope of the revised scheme has been increased so that any voluntary organisation working for ameliorating the plight of the disabled is funded.

The presence of voluntary organizations in some states like Punjab, Haryana, Uttar Pradesh, Bihar and Jharkhand is very poor. There is an urgent need to promote credible voluntary organisations in these areas. The Ministry of Social Justice and Empowerment facilitates delivery of various rehabilitation services to persons with disability by extending financial, technical and administrative support to public institutions and voluntary organisations so that they can enlarge the scope of vocational and professional opportunities, income generation opportunities and promote formal as well as non-formal employment through placement services. The funds are provided to the voluntary organisations for running rehabilitation centers for leprosy-cured persons, manpower development in the field of mental retardation and cerebral palsy, visual impairment and hearing impairment and special schools for the major areas of disability and for any other specific activities.

Although the Disability Division of the Ministry has a well-developed system of monitoring its schemes, programmes and institutions/organisations, there is need to further strengthen the system with more vigilance involving state governments and independent private institutions to keep check on misuse of the funds. A total 1,323 NGOs have been assisted under the Promotion of Voluntary Action for Persons with Disabilities scheme to benefit 4,67,000 persons and Rs.211.30 crore released (42 per cent) as grant to NGOs in the first three years of Tenth Plan.

The Assistance to Disabled Persons for Purchasing/Fitting of Aids and Appliances scheme, popularly known as ADIP, has a direct impact on the lives of indigent disabled persons through the supply of durables, standard sophisticated aids and appliances. Voluntary organisations, Red Cross Societies, the National Institutes and the Artificial Limbs Manufacturing Corporation (ALIMCO), Kanpur, are provided grant-in-aid for the purchase, fabrication and distribution of aids and appliances. Under the scheme, implementing agencies get 100 per cent nonrecurring financial assistance for those aids that do not cost more than Rs.6,000. The fund utilisation and coverage of beneficiaries under the scheme indicate satisfactory progress. Against the outlay of Rs.354 crore in the Tenth Plan, the actual expenditure in the first three years will be Rs.165.46 crore, (46.67 per cent of outlay) and 5,12,000 beneficiaries were covered.

ALIMCO was set up in 1976 for developing, manufacturing and supplying artificial limbs and rehabilitation aids to the disabled. In spite of a strong element of subsidy built into its products, ALIMCO was, at one time, running into losses. However, over the last three years, it has significantly improved its operations, achieving substantial increase in turnover and cutting its cash losses. The value of production has gone up to Rs.41.41 crore in 2003-04 from Rs.34.33 crore in 2001-2002 and the value of sales from Rs.38.9 crore in 2003-04 from Rs.31.94 crore in 2001-02. Against the Tenth Plan outlay of Rs.20.50 crore, Rs.2.13 crore has been spent in the first year and there is no budgetary support provided for Plan outlay thereafter as the Corporation is able to generate internal resources to sustain its operations.

Some of ALIMCO's products are costlier compared to items manufactured by other agencies. However, the quality, efficiency and durability of ALIMCO products are better than the others and product range is much larger and varied than any other single manufacturing unit in the country. The products of ALIMCO include orthoses, prostheses for upper and lower extremities, spinal braces, traction kits, wheel chairs, crutches, three wheelers and special tools and equipment required for fitment of prosthetic and orthotic assemblies by limb fitting centres. There is an urgent need to evaluate the functioning of the Corporation to assess how it caters to the needs of poorer segments of the disabled and optimise the cost of production of various aids and appliances.

The Rehabilitation Council of India (RCI) was set up in 1986 to regulate and monitor the training policies and programmes for persons with disabilities, prescribe minimum standards of education and training for various categories of professionals dealing with persons with disabilities, regulating these standards in all training institutions country-wide to bring uniformity, recognising institutions/universities running courses in the field of rehabilitation, recognising foreign degree/diploma/certificates awarded by universities/ institutions on a reciprocal basis, promoting research in rehabilitation and special education, maintenance of a Central Rehabilitation Register and related matters.

In addition to its normal activities, RCI has been engaging itself in the training of special educators and medical professional / personnel. Not only is this outside RCI's mandate but it also overlaps with the activities of other National Institutes and agencies. Regulating the training of rehabilitation professionals by itself is a huge task and the Council should confine itself to the mandate given to it under the existing provisions.

The National Handicapped Finance Development Corporation (NHFDC) was set up in 1997 to promote economic empowerment of persons with disabilities through financing of self-employment ventures and assisting beneficiaries in the upgradation of technical and entrepreneurship skills. During the first two years of the Tenth Plan, 1,0028 individuals and 98 NGOs, including micro-finance groups, were benefited. The NHFDC operates through the State Channelling Agencies (SCAs) nominated by the respective states governments, which number 46 at present. The Corporation has been doing satisfactory work as the number of individual beneficiaries has gone up from 2,913 in 2001-02 to 5,564 in 2003-04. However, there is need to reduce the administrative costs, which are about 3 per cent of the annual disbursement and to improve the loan recovery position. As of 25 November 2004, the Corporation had outstanding loans to the tune of Rs.5.77 crore.

### ***Social Deviants***

**The Prevention and Control of Juvenile Maladjustment scheme** provides full coverage of services in all districts as contemplated under the Juvenile Justice Act, 1986 (JJ Act) as amended in 2000. Many states are not able to avail funds under this Centrally sponsored scheme because of their inability to contribute a matching share of 50 per cent. Although, the utilisation of the funds has been satisfactory (89.5 per cent in 2002-03 and 102 per cent in 2003-04), more than 72 per cent funds were utilised by only five states. Andhra Pradesh, Madhya Pradesh, Maharashtra, Tamil Nadu and Uttar Pradesh. Maharashtra alone received more than 35.5 per cent of of the

total funds released under the scheme in 2002-03 and 45.31 per cent in 2003-04, which shows a huge inter-state disparity in utilisation of funds. The major gaps in the implementation of the Act have been inadequate and poor quality juvenile justice infrastructure, low priority given by the state governments and lack of trained manpower. The scheme was revised in 1998 and renamed Integrated Programme for Juvenile Justice. A Juvenile Justice Fund has been set up to bring about qualitative improvements in the infrastructure.

The **Prohibition and Prevention of Drug Abuse scheme** was launched in 1985-86 as a Central Plan scheme to educate the community and create awareness about drug abuse; provide motivational counselling, treatment and rehabilitation of drug addicts, ensure their social re-integration and to promote community participation and public cooperation for drug demand reduction. A total of 373 NGOs were assisted and 369 de-addiction centres set up in 2002-03 and 295 NGOs assisted and 315 de-addiction centers established up to March 2004 in 2003-04. However, 57.6 per cent (170) of the 295 NGOs assisted in 2003-04 were located in just seven states and 124 of these are in four states. Maharashtra (45), Uttar Pradesh (40), Kerala (21) and Manipur (18). Similarly, out of the 315 de-addiction centres set up in 2003-04, 136 are in four states alone. Thus, the scheme has not been able to assist the needy groups and reach remote areas. Out of 46 counselling centres, there are only eight in the North-East, an area that deserves special attention. The scheme should be redesigned and activated.

#### ***Other Disadvantaged Groups***

The **Integrated Programme for Street Children** scheme assists a wide range of initiatives, which cover providing shelter, nutrition, health-care, sanitation and hygiene, safe drinking water, education, recreational facilities and protection against abuse and is to prevent destitution of children who are without homes and family ties and facilitate their withdrawal from the streets. The main services under the scheme include establishment of 24-hour drop-in-shelters, non-formal education, vocational training, placement, capacity building and general awareness. Since its inception in 1998 as many as 2,50,740 street children have been benefited through 214 voluntary organisations in 24 States/Union Territories.

One of the important initiatives taken for the welfare of the children was the establishment of a **Childline service**, which is a 24-hour toll-free telephone service (1098) that can be accessed by children in distress or by adults on behalf of these children to seek emergency assistance and for referring the child to an appropriate organisation for long-term follow-up care. The objective of the Childline is to attend to children in difficulties and facilitating their rehabilitation through providing a platform for networking among government and non-government agencies in the area of child welfare and sensitising those working in the police, judiciary, hospitals, etc. on child protection issues. Childline is presently functional in 55 cities and has responded to more than 48.79 lakh calls between its inception in 1998 and December 2003. An outlay of Rs.85.90 crore has been allocated for the Tenth Plan period but only Rs.39.10 crore (45.5 per cent) has been spent in the first-three years, indicating a shortfall of 14.5 per cent.

Despite the continuous efforts of the government, street children continue to be in a precarious situation. Coordinated efforts are required for implementation of the Integrated Programme for Street Children and for extending its reach in order to attend to problems and needs of these children. The programme has so far benefited 1,040 children against the target of 1,200 for first



two years of Tenth Plan. In addition, 840 children have been benefited under the **Sishu Grih scheme**, which is a part of this scheme.

In order to fulfil the Tenth Plan commitments, the government has been implementing 16 schemes (15 as Central sector and one as a Centrally sponsored scheme) for the care of the disabled as well as in the social defence and other disadvantaged groups segment. There are 10 Central sector schemes for the welfare of disabled during the Tenth Plan with an outlay of Rs.1465.40 crore and the main schemes include Schemes for Funding National Institutes, AIDP, Scheme to Promote Voluntary Action for Person with Disabilities, NHFDC and Implementation of the PWD Act, 1995. Out of the outlay of Rs.1465.40 crore for the disability sector, Rs.1319.80 crore (about 90 per cent) has been earmarked for these five schemes and, therefore, the progress of the expenditure would largely depend on the progress made in these. Similarly, an outlay of Rs.538.60 crore has been earmarked during the Tenth Plan for social defence and other disadvantaged groups, of which Rs.453.40 (84.20 per cent) is for four schemes. Assistance to Voluntary Organisations for Providing Social Defence Services, Assistance to Voluntary Organisations for Programmes Related to the Aged, Grant-in-aid for Welfare of Children in Difficult Circumstances and Schemes for Prevention and Control of Juvenile Social Maladjustment.

The pace of progress made during the first three years of the Tenth Plan in both the disability and social defence sectors has been slow. In the disability sector, the anticipated expenditure for the first three years of the Tenth Plan has been estimated at Rs.456.61 crore (31.20 per cent) against a total Central sector outlay of Rs.1465.40 crore, leaving a balance of Rs.1008.8 crore (68.8 per cent) for the remaining two years of the Plan. The shortfall of 28.8 per cent (considering 60 per cent as ideal expenditure for three years) is mainly due to poor performance of two schemes. Implementation of the PWD Act (Rs.15.92 crore expenditure against Rs.154 crore outlay) and College of Rehabilitation Science (Rs.1.00 crore expenditure against Rs.53.73 crore outlay). However, action is being taken to get these two programmes launched during 2004-05.

Similarly, in the social defence and other disadvantaged groups sector, only Rs.228.56 crore (42.4 per cent) of an outlay of Rs.538.60 crore has been spent, leaving a balance of Rs.310.04 crore (57.6 per cent) for next two years and there is a short fall of about 17.6 per cent. There has been slow progress on expenditure in six schemes relating to social defence and other disadvantaged groups. The overall performance in terms of financial achievements in the social welfare sector during the first three years of the Plan has been somewhat low. As against an outlay of Rs.2004 crore, only Rs.685.21 crore (34.2 per cent) has been spent, resulting in a shortfall of 21 per cent for the sector.

### **3.3 Budget Analysis for Child Protection**

Children under the age of 18 constitute 42 percent of India's population. They represent not just India's future, but are integral to securing India's present. Yet development indicators continue to

show slow progress towards securing their welfare and delivering their basic rights. The very survival of the child continues to be at risk, particularly for girls, with their survival prospects getting grimmer. Successive Census figures reveal a sharp decline in the child sex ratio. Despite a booming economy, investments in social development are insufficient and are also not yielding changes rapidly enough.

The National Common Minimum Program (NCMP) reiterates the United Progressive Alliance led Indian government's commitment to rapid economic growth and targeted investments aimed at the poorest of the poor. The NCMP outlines ambitious targets related to public spending on key services, including the following: education will be raised to 6% of GDP, with at least half to be spent on primary and secondary education, while public spending on health will be raised to at least 2-3% of GDP over the next five years, focusing mainly on primary health care.

An analysis of the broad trends in budgetary allocations in India shows that as a result of the growing economy, social sector expenditures have been increasing both as a proportion of aggregate government expenditure and real expenditure (i.e. at constant prices) since the 1990s. Increased policy efforts and the expansion of programmes in nutrition (ICDS) and education (Mid-day Meal Scheme, Sarva Shiksha Abhiyan) have resulted in steady increases in expenditure on children. However, while the Union Government's expenditure on Social Services (measured as a proportion of Gross Domestic Product (GDP)) has been going up steadily, there is not much change for 2006-07 over 2005-06. Further analysis shows that the increase in allocations between 1996-97 and 2006-07 represents just under 0.4 % of GDP, with an increase from 0.71 % of GDP in 1996-97 to 1.1 % of GDP in the Budget Estimates for 2006-07. Also, almost the entire increase over the decade from 1996-97 to 2006-07 Budget Estimates (BE) has been in Revenue Expenditure (which has gone up from Rs.9014.15 crore in 1996-97 to Rs.41,698.73 crore in 2006-07), while Capital Expenditure has been almost stagnant over this period (Rs.658.09 crore in 1996-97 and Rs.1164.83 crore in 2006-07).

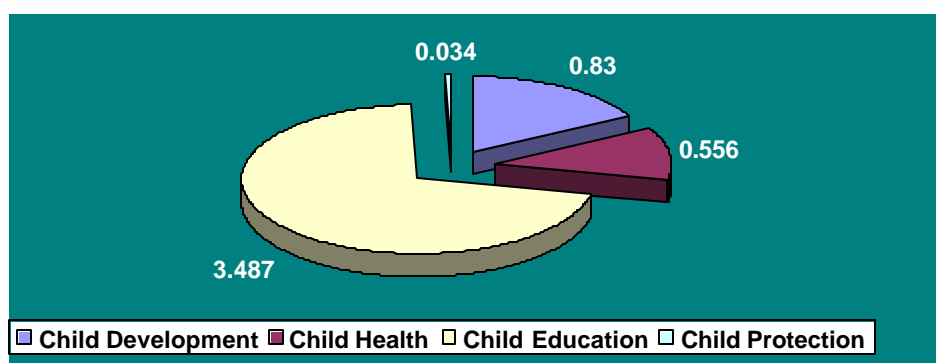
Analysis of the allocations made in the budget and the actual expenditure incurred subsequently on different sectors/programmes/schemes point to the priorities of the government. 'Child Budgeting' represents an important policy analysis tool that can help us take stock of our development investments for children and identify glaring gaps in resource investment and utilisation. Sufficient resourcing of our progressive policy framework is the first step to making real our Constitutional and other national policy commitments. Budgetary analysis helps us to also map the areas, which are relatively neglected.

Better outcomes in any sector, for instance, education, health or rural development, depend not just on allocations but also on proper utilization of those allocations. In India, there are many non-financial constraints that impede progress in several sectors, especially the social sector. However, financial constraints could pose serious challenges to development in any sector, and hence the focus on identifying such constraints and making efforts for their removal are essential.

In 2001, for the first time an attempt was made by HAQ: Center for Child Rights at using 'Child Budgeting' as a tool to monitor public funding on children through a decadal analysis of the union budget undertaken from a child rights perspective. Two further attempts were made by

ICCW – Tamil Nadu in 2003 and 2004. The Ministry of Women and Child Development took a step in this direction in 2002-03. The child budgeting exercise was discontinued by DWCD in 2003-04, but subsequently resumed in 2004-05 and is currently being undertaken in partnership with UNICEF. Child budget analysis reveals the persisting low level of fund allocation for any measures affecting children, with resources for child protection at the lowest of all. The total share of child protection in the Union Budget for 2005-06 was just 0.034% (see diagram and table below) and the budget estimates for child protection between 2004-05 and the current financial year 2006-07 have remained more or less the same.

### **Percentage Share of Sectoral Allocation on Children in Union Budget**



Year	% Share of Child Health in Child Budget	% Share of Child Development in Child Budget	% Share of Child Education in Child Budget	% Share of Child Protection in Child Budget	% Share of Total Child Budget in Union Budget
2004-05	0.423	0.422	1.567	0.033	2.445
2005-06	0.527	0.658	2.638	0.034	3.857
2006-07	0.556	0.830	3.487	0.034	4.907

Source: GOI Expenditure Budget 2004-05, 2005-06, 2006-07 (Vols 1&2) and HAQ: Centre for Child Rights, Delhi

India fares poorly compared to other countries in allocation of resources for health, development, protection and education for children. As a proportion of Gross Domestic Product, these investments are particularly low and increases are not commensurate with the overall increase in national productivity and income. Under-investment in health, development, protection and education will only serve to widen income gaps and perpetuate inequality, both of which will impede national efforts to meet important development targets.

Poor investment on child protection is in itself a reflection of the low priority this sector has received in government's own planning and implementation. The neglect of vulnerable children - street children, orphans, migrant children, trafficked and sexually abused children - in our policy and financial statements is obvious when we review budgetary allocations over the years. Ever since child budget analysis has been undertaken in India, the share of child protection in the Union Budget has remained even lower (0.03 percent) than what the States show. Allocation made for child protection is negligible when compared to the number of children falling out of the safety and protective net. While there is no denying that education is, and has to be one of the

most important sectors, if children’s right to protection is not met, every other right is at stake.

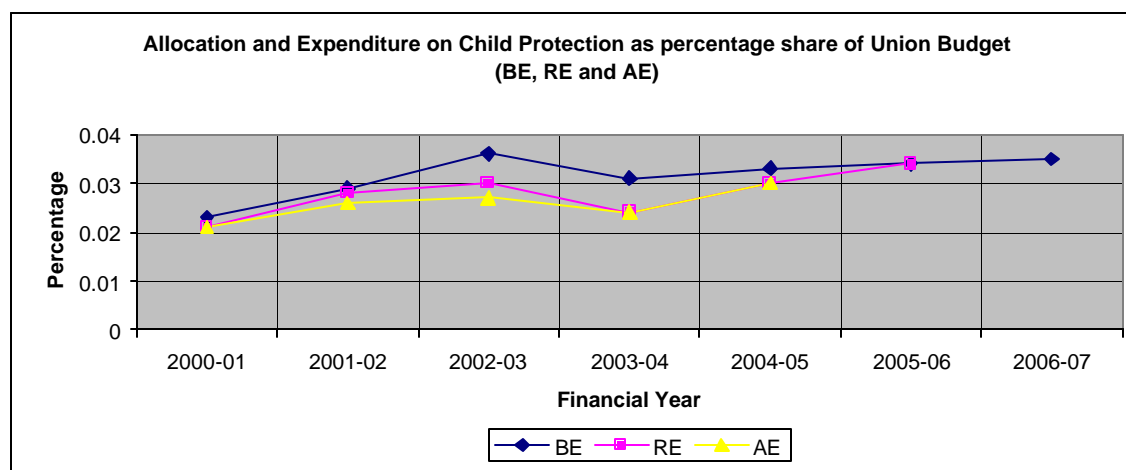
On an average, between 2000 and 2005, of every 100 rupees spent by the Union Government only 3 paise was spent on child protection, while the share of child health was 40 paise followed by child development (45 paise) and elementary education (1 Rupee 50 paise).

Average percentage share of children in Union Budget in the Tenth Plan Period (BE, RE and AE)			
	BE (2000-2007)	RE (2000-2006)	AE (2000-2005)
Child Health	0.064	0.475	0.401
Child Development	0.525	0.45	0.456
Child Education	1.933	1.647	1.514
Child Protection	0.032	0.028	0.028
Union Budget	100	100	100

Source: Demands for Grants (2000-2007) for relevant Ministries/Departments and Expenditure Budget Vol. 1 (2000-2007)

## Sectoral Analysis

### Child Protection



The least attended sector in terms of political commitments as well as investments is child protection. With a child protection budget constituting only 0.34 percent of the total Union Budget, nothing can be achieved in terms of building a protective environment for children of the country. Moreover, small grants for child protection under various schemes fails to address child protection holistically and only adds to the problem of implementation and monitoring.

The budget for child protection largely addresses two very specific categories of children in difficult circumstances – child labour and children that fall within the purview of the juvenile system either as street children or as children in conflict with law or children requiring

alternative care such as adoption. Budget for child labour elimination programmes indeed comprises the major share within child protection.

The Ministry of Labour's Citizen's Charter clearly lays down elimination of child labour from hazardous sectors by the end of 10th plan as one of its goals. Government of India's expenditure for mainstreaming one child labour in regular school education is Rs. 3569. According to the Census of India - 2001, the total number of working children in India is 1,25,91,667. This implies that for mainstreaming all 1,25,91,667 child labourers in education, which is the commitment of government under Article 21A of Indian Constitution, India will need Rs. 4493.966 crore per year at the rate of Rs. 3569 per child per year. In the Revised Estimates of 2005-06 there was a huge gap of Rs. 4378.516 crore between the need and allocation for elimination of child labour.

In the Tenth Plan period, 250 Districts in 20 states were covered under NCLP. The need for NCLP in these 250 districts continues even in the Eleventh Plan period. At the same, additional districts will have to be reached in the next plan period. Besides the Parliament's decision to ban employment of children in domestic work and dhabas and restaurants with effect from October 10, 2006 calls for far more inputs in terms of programmes and services for children thus released from labour. The Ministry of Labour along with the Planning Commission will have to accordingly plan a higher outlay in the Eleventh Plan.

For all other child protection issues there are no national measurable goals and targets against which progress can be gauged but for what has been laid down in the National Plan of Action for Children 2005 (NPAC). The Eleventh Plan must therefore follow the NPAC goals on child protection. One of the biggest hurdles in setting goals and targets for child protection is lack of precise data and information.

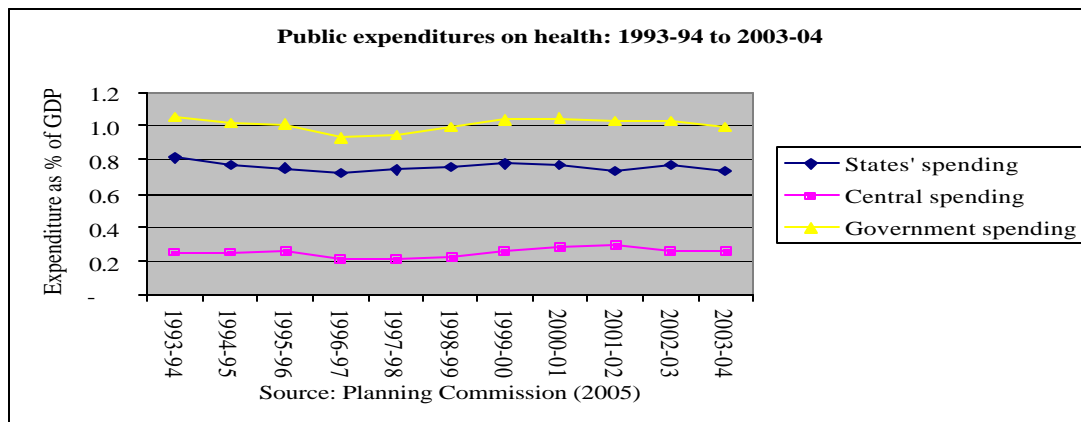
In order to meet the challenges of child protection both in terms of maintaining a data base and planning for the numbers reflected through it, the Ministry of Women and Child Development, Government of India proposes a centrally sponsored scheme "Integrated Child Protection Scheme (ICPS)", which not only brings all existing child protection schemes of the Ministry under one window but also proposes an increased allocation for child protection programmes in the Union Budget. The Ministry is making serious efforts to have the proposed scheme included in the Eleventh Plan document for ensuring necessary fund allocation.

Getting required allocation and then ensuring optimal utilization of funds has always been a challenge for any Ministry. Given the globalisation, liberalisation and privatization of the economy and essential social sector services, a large numbers of population are falling out of the social security net, with more and more children in particular falling into difficult circumstances. In such a situation, ideally increased budget should lead to increased spending also. However, monitoring is critical to this and budget analysis is just another tool to ensure greater accountability of public finances.

## **State Budget Analysis**

States are primarily responsible for the provision of social sector services, yet are dependent to a certain extent on flows from the Central government. The graph below indicates the importance

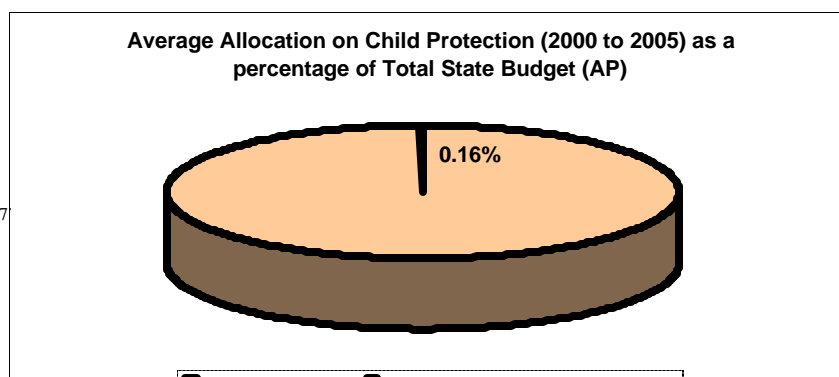
of the state's contribution to the health sector as an example. Many states are, however, not contributing sufficient finances to social sector spending. Where states are unable to match Central grants, the implementation of important social schemes may be adversely affected<sup>77</sup>.



Real per capita expenditure on health by the central government went up from Rs.89 in 1993-94 to Rs. 122 in 2003-04. Despite this increase, however, levels of public spending remain insufficient. This is because health is primarily financed by state governments– and state spending is low and inadequate. For instance, per capita public expenditure by states in 2003-04 varied from Rs. 77 in Bihar, Rs. 91 in Uttar Pradesh and Rs. 98 in Rajasthan to Rs. 275 in Kerala, Rs. 294 in Punjab and Rs. 485 in Delhi. It is also found that state governments tend to cut back their spending as allocations by the Centre increase.

The weakening capacity of states to raise matching grants could be explained to a large extent by the accumulation of debt and mounting debt service burden, as well as the rising share of committed but non-developmental expenditures in a context of low and declining non-state revenues and increasing contingent liabilities, such as guarantees on loans. There are significant variations in state allocations for child-focused expenditures. States with larger child populations are spending disproportionately less on child-related sectors, with some exceptions and variations.

Analysis of child budgets in some States clearly points to the need for higher investment by the States on child protection.

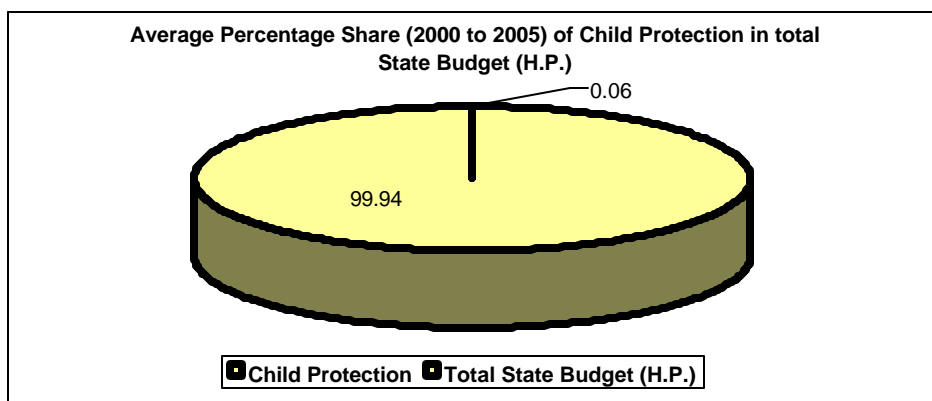


**Child Protection in Andhra Pradesh**

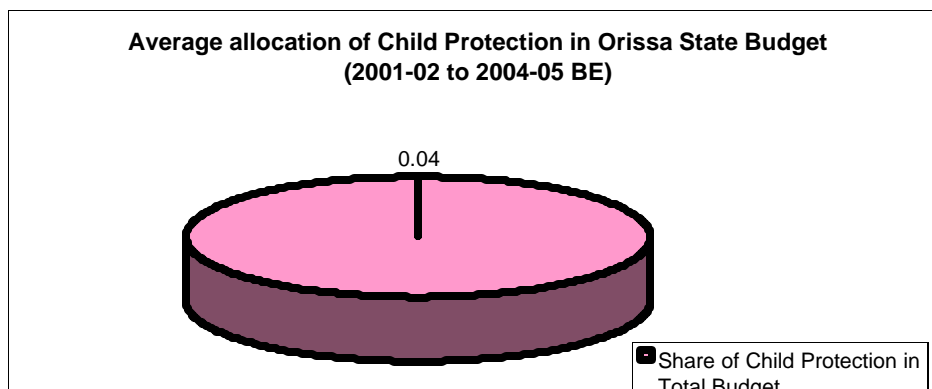
on Budget

*Average allocation for child protection in Andhra Pradesh between 2000-2005 comes to 0.16 percent of the total State budget.*

**Child Protection in Himachal Pradesh**



*On an average, the allocation for child protection in Himachal Pradesh is 0.06 percent of the total State Budget Allocation.*



**Child Protection in Orissa**

*On an average, the share of child protection in the total State Budget Allocation (Budget Estimates) in Orissa is 0.04 per cent respectively.*

The child protection allocation in the States includes allocations under Centrally Sponsored Schemes as well as the State's own contribution to the sector. It is clear from child budget analysis that the States by themselves are not investing adequately on child protection and proper implementation of most centrally sponsored schemes is lacking for want of the State's share.

Some of the problems relating to child budgeting that have been identified over the years include:

- ✍ Gaps in budget estimates and expenditure;
- ✍ Problems in flow of funds from the Centre to the State;
- ✍ Inability of States to meet the matching grant requirement from the State in the case of Centrally Sponsored Schemes;
- ✍ Inadequacy of mechanisms to check misappropriation and misuse of funds;
- ✍ Dependence on external aid;
- ✍ Flaws in the very planning of various Ministries and Departments itself; and most importantly; and,
- ✍ Lack of meaningful communication and coordination between the Planning Commission, the Finance Ministry and the Ministries/Departments concerned with child protection issues at the stage of formulation of the five-year plan, mid-term review and final evaluation of the plan period

The gaps and problems listed above have been bothering both Government and NGOs alike. Child Budgeting must be taken as a serious exercise and needs to be encouraged and undertaken at all levels of governance to identify and address the shortcomings of financing the social sector, particularly programmes relating to children. The exercise must begin at the very level of panchayats, the very basic unit of democratic functioning. For this to happen, the Eleventh Plan will have to focus on decentralised planning for all sectors. This will logically result in decentralized monitoring through analysis of allocation and spending by the panchayats against the plans they had made.



The NPAC 2005 has articulated clearly the rights perspective and agenda for the development of children, and provides a robust framework within which to promote the development and protection of children. It is therefore logical and imperative that the NPAC 2005 becomes the basis for planning for children in the Eleventh Plan in all sectors and the principles articulated in it guide the planning and investments for children.

With the State Government's having a major share of the responsibility for implementation of social sector schemes, declining flows of funds from the Centre to the States is a serious challenge and may adversely affect the provisioning of social services in States. To address this significant set of financial constraints, effective policy action is required, either in the form of increased transfers from the Centre, and/or greater pressure on States to prioritize their expenditures in line with policy commitments to the social sectors and to children.

Child protection must receive necessary financial commitment from the Planning Commission as well as the Finance Ministry. Support to the Ministry of Women and Child Development's proposed ICPS will be a step in this direction. All budget for child protection schemes and programmes should be in the plan category and not in the non-plan category.

Improved targeting of districts having high incidence of female foeticide, high rate of violence or crimes against children, high incidence of child sexual abuse, source areas for child trafficking etc., are also important measures that can improve outcomes.

## **Chapter Four**

# **Analysis of Policies and Laws**

A review of the existing provisions related to the child protection is discussed below for further comments, suggestions and recommendations.

Constitutional Provisions, Policies, Legislations and Programmes relating to Child Protection	Comments
<p><b>Constitutional Provisions on Child Protection</b></p> <p><i>Article 15 (3)</i> Nothing in this article shall prevent the State from making any special provision for women and children.</p> <p><i>Article 21.</i> Protection of life and personal liberty.—No person shall be deprived of his life or personal liberty except according to procedure established by law.</p> <p><i>Article 21A:</i> Free and compulsory education for all children of the age of 6 to 14 years</p> <p><i>Article 23.</i> Prohibition of traffic in human beings and forced labour.—(1) Traffic in human beings and beggar and other similar forms of forced labour are prohibited and any contravention of this provision shall be an offence punishable in accordance with law.</p> <p><i>Article 24.</i> Prohibition of employment of children in factories, etc. —No child below the age of fourteen years shall be employed to work in any factory or mine or engaged in any other hazardous employment.</p>	<p>The <b>Constitution of India</b> follows the principle of protective discrimination and thereby commits itself to safeguard their rights through policies, laws and action. This is an enabling Article and should be used more consistently for child protection.</p> <p>Most protection issues can be taken up under this including child protection.</p> <p>While Article 21(a) secures the fundamental right to education in the 6-14 age group, it must be the endeavor of the State to guarantee the provision of free and quality education to children aged below 6 and up to 18 years.</p> <p>There is a clear commitment in the Constitution prohibiting trafficking in human beings. However there is a need for a comprehensive law on anti-trafficking, which will take into account the provisions of the Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography.</p> <p>Article 24 in the light of present context there is a need to review this article, which permits the children above the age of 14 to work in hazardous or non-hazardous employment. There is a contradiction between this article and article-21A, which gives a right to education to all children from 6-14 years, thus the child's right to education is compromised if the child is put to work. There is also a need to review what constitutes hazardous in courts as there is a view that any child who is not in school and engaged in any kind of work is in a potentially hazardous situation.</p>

<p><i>Article 39 (e)</i> that the health and strength of workers, men and women, and the tender age of children are not abused and that citizens are not forced by economic necessity to enter avocations unsuited to their age or strength;</p> <p><i>Article 39 (f)</i> that children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity and that childhood and youth are protected against exploitation and against moral and material abandonment.</p> <p><i>Article 45</i> State shall endeavor to provide early childhood care and education to all children until they complete the age of six years.</p>	<p>Under Article 39 (e) and (f) the Constitution recognizes the child's right to protection from all forms of abuse and exploitations, and their right to freedom and dignity. However, to ensure the implementation of this article there is a need to create strong protective framework, which will respond to the needs of the children.</p> <p>For the first time the need for early childhood care and education for children below 6 years has found a specific mention in the Constitution of India. Although currently it is a Directive Principles for the State to follow, it must be perused by the State as a recognized obligation.</p>
<p><b>International Conventions/ Commitments</b></p> <ul style="list-style-type: none"> <li>?? Convention for the Suppression of Traffic in Persons and the Exploitation of Prostitutes and others, 1949</li> <li>?? Minimum Age Convention, 1973</li> <li>?? Convention on the Elimination of All Forms of Discriminations Against Women (CEDAW), 1979</li> <li>?? The United Nations Convention on the Rights of the Child, 1989</li> <li>?? World Conference on Education for All, 1990</li> <li>?? The Global Conference on Water and Sanitation, 1990</li> <li>?? World Fit for Children Declaration, 1990</li> <li>?? World Summit for Children, 1990</li> <li>?? Optional Protocols on involvement of children in armed conflict</li> <li>?? Optional Protocol on the sale of children, child prostitution and child pornography, 2005</li> <li>?? UN Rules for the Protection of the Juveniles Deprived of their Liberty, 1990</li> <li>?? UN Standard Minimum Rules for the Administration of Juvenile Justice (Beijing Rules), 1985</li> <li>?? United Nations Guidelines for the Prevention of Juvenile Delinquency (Riyadh Guidelines) 1990</li> </ul>	<p>India has signed and ratified all the International Conventions and declarations, baring the ILO Conventions. Efforts are on to integrate provisions of all these convention into the relevant laws, rules, polices and schemes. While efforts have still to be made to incorporate all standards in these Conventions and commitments into laws and programmes, an even greater effort is required to strengthen implementation of existing provisions.</p>

- ?? Hague Convention on Protection of Children & Cooperation in respect of Inter-country Adoption, 1993
- ?? Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others 1951
- ?? SAARC Decade on the Rights of the Child 2001-2010
- ?? SAARC Convention on Prevention and Combating Trafficking in Women and Children for Prostitution 2002
- ?? SAARC Convention on Regional Arrangements for the Protection and Welfare of Children, 2002
- ?? Millennium Development Goals (MDGs)

### **National Policies**

#### ***✍* National Charter for Children, 2003**

Underlying the National Charter for Children, adopted in 2004, is the intent to secure for every child its inherent right to be a child and enjoy a healthy and happy childhood, to address the root causes that negate the healthy growth and development of children, and to awaken the conscience of the community in the wider societal context to protect children from all forms of abuse, while strengthening the family, society and the Nation. This Charter has the following sections on child protection:

- ?? Survival, life and liberty;
- ?? Protection from economic exploitation and all forms of abuse;
- ?? Protection of the girl child;
- ?? Care, protection, welfare of children of marginalised and disadvantaged communities; and
- ?? Ensuring child-friendly procedures.

#### ***✍* Commission for the Protection of Child Rights Act, 2005**

At the centre, the Commissions for Protection of Child Rights Act were enacted in 2006. It provides for the constitution of a National Commission and State Commissions for protection of child rights and children's courts

The **National Charter for Children** affirms India's commitment to the child, however, it does not declare India's acceptance of children's entitlements as their rights. The National Policy for Children, 1974 still stands as the official policy commitment to children of India.

With India's accession to the UNCRC and its two Optional Protocols a rights based framework has been accepted as the guiding frame for policy measures and programming for children. This is clearly reflected in the National Plan of Action for Children, 2005.

Efforts should be made to set up the Commission for the Protection of Child Rights speedily and encourage State Governments to appoint State Commissions. National and State Commission should deal with all matters referred to them in a timely manner and should be accessible to children.

for providing speedy trial of offences against children or of violation of child rights and for matters connected therewith or incidental thereto.

- ?? Spread awareness of child rights
- ?? Review all the laws and other documents for children
- ?? Set up a mechanism to hear complaints about violation of child rights
- ?? Undertake and promote research in the field of child rights
- ?? Examine the situation of children
- ?? The central act includes study of treaties and other international instruments and undertakes periodical review of existing policies, programmes and other activities on child rights and makes recommendations for their effective implementation in the best interest of children that the Goa Children's Act does not.

***✍* National Plan of Action for Children, 2005**

India is a signatory to the May 2002 decisions and commitments made by the UN General Assembly Session on Children, set out in the "World Fit for Children" outcome document. The National Plan of Action for Children 2005 has been formulated and adopted as India's response to those commitments.

**Critical Strategies & Priorities in the NPA on child protection include:**

- ?? Development of a system of identification, investigation, reporting, follow-up & referral of children at risk within and outside homes/institutional care
- ?? Maintaining disaggregated data-base for all categories of children in difficult circumstances, including child labour, child marriage, disabled children etc. through Census and programme specific MIS
- ?? Special attention to certain categories of children requiring greater focus such as, child beggars, child labour, street children, children in need of care and protection and children in conflict with law as covered by the juvenile justice act, trafficked children, child victims of sexual abuse and exploitation, children affected by natural and man made disasters,

India's implementation of the **National Plan of Action for Children 2005** is also being geared to address the specific commitments set out in the Millennium Development Goals, which India has accepted. However, this can only be achieved if adequate attention is given to strengthening child protection as protection failures will negatively influence almost all MDGs.

The Government of India has requested all the State Governments to formulate their State Plans of Action for Children. Implementation action at State level must be initiated in the 11<sup>th</sup> Plan Period with clear targets.

Action to implement National Plan of Action for Children 2005 must be incorporated in to the 11<sup>th</sup> Five Year Plan with the required allocation of financial resources, development of required infrastructure and commitment of human resources with clear targets and monitoring of outcomes.

<p>children of sex workers and prisoners, children affected by armed conflict and civil disorders.</p> <ul style="list-style-type: none"> <li>?? Convergence with related Ministries / Department at Central &amp; State levels</li> <li>?? Enlisting support from the private sector</li> <li>?? Preventing destitution &amp; exploitation of children through care, protection &amp; developmental programmes</li> <li>?? Achieving 100% registration of births, deaths and marriages by 2010</li> <li>?? Promoting community based care and rehabilitation for all children in difficult circumstances</li> <li>?? Large-scale investment in capacity building of all caregivers and service providers</li> <li>?? Requisite counseling, awareness generation and support services for adolescents to prevent them from becoming vulnerable and protect them from harm</li> <li>?? Public awareness, sensitization and mobilization of parents, caregivers, community and other actors in civil society</li> <li>?? Supporting services of crèche/day care both in rural and urban areas</li> <li>?? Sensitize allied systems to the problems of children</li> <li>?? Childline &amp; other necessary support service, infrastructure, referral for children in emergency situations</li> <li>?? Professional counselling services for children in psychological trauma and establishment of accredited training courses/institutions for creating a cadre of trained counsellors</li> <li>?? Promotion of quality institutional and alternative care</li> <li>?? Upgradation of standards of existing services</li> <li>?? Contingency planning and emergency preparedness</li> <li>?? Infrastructural support to NGOs for destitute, orphan children through in- country adoption</li> <li>?? Combating trafficking of narcotic drugs, psychotropic substance to prevent the use by children and creating Mechanisms for rehabilitation of child substance abusers</li> <li>?? Raen Basera, drop-in-shelters, temporary shelter and the night shelters for safety of children</li> <li>?? Implementation of juvenile justice law</li> <li>?? Creation of child-friendly judicial and administrative procedures for dealing with</li> </ul>	
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<p>administrative procedures for dealing with children</p> <p>?? Free legal aid and advice for children in conflict with law</p> <p>?? Eradication of harmful, traditional and customary practices that put children at risk, particularly of trafficking and sexual exploitation</p> <p>?? Assistance to child victims of abuse and exploitation for their full physical and psychological recovery, development and social reintegration</p> <p>?? Prevention of cross-border trafficking and creation of nodal authorities and other infrastructure to deal with all kinds of child trafficking</p> <p>?? Adoption of a national law to deal with child trafficking, including ratification of the international instruments such as the UN Protocol on Trafficking in Persons</p> <p>?? Institution of a rights based uniform definition of child labour and bonded labour</p> <p>?? Elimination of all forms of child labour by linking it with ensuring right to education for all children</p> <p>?? Ensuring access to mainstream education for all child labourers by 2012 and access to nutrition, clothing and protection from all forms of abuse and neglect</p> <p>?? Elimination of child marriages</p> <p>?? Ensuring survival, development and protection of the girls child and restoring her dignity by eliminating harmful, discriminatory and unethical traditional practices, and providing legal, medical, social and psychological support services and opportunities for development of their full potential</p> <p>?? Ensuring enforcement of all laws relating to children, particularly the Child Marriage Restraint Act, PNDT Act, ITPA, Juvenile Justice (care and Protection of Children) Act, Child Labour (Prohibition and Regulation) Act, amongst others</p> <p>?? Eliminate disability due to poliomyelitis by 2007</p> <p>?? Creation of effective links and quick referrals between ICDS, Primary Health Centres, mother and child programmes and hospitals (paediatric units) for early detection of high risk babies and children with disabilities</p>	
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<p>?? Access to neighbourhood schools and inclusive education, accessible and disable friendly infrastructure, early childhood care for the disabled child, inclusion of children with mental illness in all existing schemes for children with disability, vocational training, capacity building of care givers, access to services, support and protection, implementation of the disability law</p> <p>?? Ensuring a supportive and enabling environment for care and protection of children affected by HIV/AIDS</p> <p>?? Quality health care and services, including free Anti-Retroviral therapy for children infected with HIV virus</p> <p>?? Prevention of mother-to-child transmission of HIV/AIDS</p> <p>?? Development of special packages for children abandoned on account of HIV/AIDS</p> <p><b>☞ The National Children's Fund</b>  The National Children's Fund was created during the International Year of the Child in 1979 under the Charitable Endowment Fund Act, 1890. The Fund provides financial assistance to voluntary agencies for implementing programmes for the welfare of children including rehabilitation of destitute children.</p> <p><b>☞ UPA's National Common Minimum Programme 2004</b>  The National Common Minimum Programme specifically states that the UPA Government will protect the rights of children, strive for elimination of child labour, ensure facilities for schooling and extend special care to the girl child.</p> <p><b>Key Features</b></p> <p>?? Commitment to the well being of the common man</p> <p>?? Preservation, protection and promotion of social harmony</p> <p>?? Enhancement of welfare and well being of farmers, farm labour and workers, particularly in the unorganized sector</p> <p>?? A pledge to provide a corruption-free, transparent and accountable government at all times.</p>	<p>The Fund should be enhanced and energized. It should have flexibility in supporting new and innovative ventures to benefit children and the ability to respond promptly to emergencies.</p> <p>While the NCMP does not detail all the commitments of the UPA Government made for children, it provides a basic affirmation of the UPA Government's resolve to "protect the right of children". The test of NCMP is in how it gets translated into practical programming and investment in children; the National Plan of Action for Children 2005 spells out goal, objective and strategies to achieve this.</p>
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?? Administration that is responsive and responsible at all times

## National Legislations

### **Juvenile Justice (Care and Protection of Children) Act, 2000**

This is an Act to consolidate and amend the law relating to juveniles in conflict with law and children in need of care and protection, by providing for proper care, protection and treatment by catering to their development needs, and by adopting a child-friendly approach in the adjudication and disposition of matters in the best interest of children and for their ultimate rehabilitation. The Act defines a juvenile/child as a person who has not completed the age of 18 years. It has two separate chapters – one for juveniles in conflict with law and the other for children in need of care and protection. It also contains an exclusive chapter concerning rehabilitation and social reintegration of children. The Act defines Juvenile in conflict with law as a child who is alleged to have committed an offence and Children in need of care and protection broadly as children who are neglected, abused, abandoned, victim of any armed conflict or natural calamity amongst others. In order to implement its provisions and procedures, the Act provides for:

- ?? Juvenile Justice Boards
- ?? Child Welfare Committees
- ?? Institutional care through children's homes, observation homes, shelter homes, special homes and aftercare organizations
- ?? Non-institutional care through Adoption, Foster Care, Sponsorship and After Care
- ?? Special Juvenile Police Units
- ?? Juvenile Justice Fund
- ?? State/District Advisory Boards
- ?? Selection Committee
- ?? Inspection Committee

All offences committed against a child are cognizable and punishable under the provisions of this Act.

The Juvenile Justice System in India is based on the principle to promote and safeguard the rights of children. It is governed by the **Juvenile Justice (Care and Protection of Children) Act, 2000**, which is a progressive and proactive legislation providing for the care, protection, treatment and rehabilitation of children in need of care and protection and juveniles in conflict with law. While it is an accepted fact that the Juvenile Justice Act 2000 is a progressive and comprehensive legislation for children of India, uniform implementation of its provisions throughout the country has been a cause of concern. In order to achieve the objectives of the Act it is imperative to address following issues:

- ?? Acute shortage of qualitative and quantitative data relating to children in need of care & protection, children in conflict with law and institutional Care system
- ?? Standards of care not established and implemented
- ?? Inadequate infrastructure under JJ system in terms of number of Juvenile Justice Boards, Child Welfare Committees, Special Juvenile Police Units, etc.
- ?? Lack of non-institutional and family based care system for children
- ?? Inadequate budgetary allocation for child protection
- ?? Inadequate training and capacity building of functionaries under juvenile justice system
- ?? Lack of resources and manpower at State and District levels for implementation and monitoring of the provisions
- ?? Child protection is not in the priority list of State Governments planning process
- ?? Strengthening linkages with other sectors to implement the provisions of the Act

**☞ The Child Labour (Prohibition and Regulation) Act, 1986**

The Act was enacted in 1986 by the Parliament to prohibit the engagement of children in certain employments and to regulate the conditions of work of children in certain other employments. However, it was brought into force by the Central Government in 1993. The Act provides for power to State Governments to make Rules with reference to health and safety wherever the employment of children is permitted. The salient features of the Act include:

- ?? Prohibition of employment of children in certain occupations and process
- ?? Child Labour Technical Advisory Committee
- ?? Regulation of conditions of work of children including fixing hours and period of work, weekly holidays, notice to inspector, provision for resolving disputes as to age, maintenance of registers and for health and safety, etc.
- ?? Penalties for employing any child or permitting any child to work, procedures relating to offences, appointment of inspectors and powers to remove difficulties

**☞ The Factories Act, 1948**

**☞ The Mines Act, 1952**

**☞ The Plantation Labour Act, 1951**

**☞ The Merchant Shipping Act, 1958**

**☞ The Motor Transport Workers Act, 1961**

**☞ The Beedi and Cigar Workers (Conditions of Employment) Act, 1966**

**☞ The Bonded Labour System (Abolition) Act, 1976**

**☞ The Immoral Traffic (Prevention) Act, 1956**

In 1986, the Government of India amended the erstwhile Suppression of Immoral Traffic in

In view of the India having signed and ratified the UN Convention on the Rights of the Child (UNCRC), the **Child Labour (Prohibition and Regulation) Act 1986** is inadequate to address the real problem. The law makes a fallacious distinction between 'hazardous' and 'non-hazardous' sectors, negating the fact that any employment of children violates a child's basic rights to survival, development, protection and participation. Prohibition of employment in the so-called 'hazardous' sectors and regulation in the 'non-hazardous' allows for employment of children and weakens law enforcement. Moreover, this is in contradiction with the Constitutional guarantee of right to education for all children in the 6-14 years age group. Furthermore, the definition of children given by this legislation is in contradiction with the UNCRC and the Juvenile Justice (Care and Protection of Children) Act 2000. Therefore, an amendment to this Act is urgently needed.

The Department of Women and Child Development under the Ministry of HRD has become a full-fledged Ministry and the child protection policies and programmes implemented by the Ministry of Social Justice & Empowerment have been transferred to the new Ministry. The issues of child labour should also be transferred to the Ministry of Women and Child Development to create a single window approach for all child protection programmes in the country.

All these Acts prohibit employment of children under 14 years only, which is not in accordance with the UNCRC and the Juvenile Justice legislation in India. Therefore an amendment to these Acts is required for ensuring that children are protected from child labour and their rights are not violated.

The Ministry of Women and Child Development is in the process of amending the **Immoral Traffic (Prevention) Act** with a view to make

erstwhile Suppression of Immoral Traffic in Women and Girls Act 1956, renamed as the Immoral Traffic (Prevention) Act to widen the scope of the law to cover both the sexes exploited sexually for commercial purposes and provided enhanced penalties for offences involving children and minors.

The Immoral Traffic (Prevention) Act, 1956 prescribes stringent action against those inducing children (below 16 years) and minors (16 to 18 years) in the offence of procuring, inducing or taking a person for the sake of prostitution (Section 5). The Act further provides that where any person is found with a child in a brothel, it shall be presumed, unless the contrary is proved, that he has committed an offence of detaining a person in premises where prostitution is carried on. Similarly, when a child or minor found in a brothel, on medical examination, detected to have been sexually abused, it shall be presumed, unless the contrary is proved, that the child or minor has been detained for purposes of prostitution or, as the case may be, has been sexually exploited for commercial purposes. The punishment consists of imprisonment of either description for a term which shall not be less than 7 years, but which may be for life or for a term, which may extend to 10 years and shall also be liable to fine, with a provision for less than 7 years under special circumstances.

Besides contemplating specialized machinery for its enforcement, the Act envisages a comprehensive scheme for rescue, protection and corrective treatment of prostitutes. Section 21 deals with establishment of Protective Homes by the State government.

#### **Child Marriage Restraint Act 1929**

The Child Marriage Restraint Act 1929, as amended in 1979 is an Act to restrain the solemnization of child marriages. The Act prescribes a minimum age of 21 years for males and 18 years for females for marriage. This law is applicable to all Indians. The Act provides for punishment for solemnizing a child marriage. It also provides for punishment to parent or guardian, if they marry off their children/wards before the permissible age. Under the Act, any marriage

the law victim friendly and, at the same time, making punishment for traffickers more stringent and putting greater criminal culpability on them.

Considering the shortcomings in the **Child Marriage Restraint Act** and its implementation, the Government of India has proposed an improved legislation – **The Prevention of Child Marriage Bill 2004**. The National Commission for Women and the National Human Rights Commission played an important role in the preparation of the draft Bill, which was introduced in the Rajya Sabha on December 20, 2004. The Bill aims at:

?? Providing for declaration of all child marriages voidable at the option of the contracting party

<p>permissible age. Under the Act, any man who marries a minor girl is liable to the punishment as prescribed. No woman can be punished under this Law.</p> <p><b>Hindu Adoption and Maintenance Act (HAMA) 1956</b></p> <p>HAMA is an Act to amend and modify the law relating to adoptions and maintenance among Hindus. It is the only codified law available for adoption and its applicability is restricted to Hindus alone that includes Bhuddists, Jains and Sikhs. The Act provides for norms and standards</p>	<p>to the marriage, who was a child</p> <ul style="list-style-type: none"> <li>?? Making a provision for declaring the child marriage as void in certain circumstances</li> <li>?? Requiring the husband or, if he is a minor at the material time, his guardian, to pay maintenance to the minor girl until her remarriage</li> <li>?? Providing for legitimisation of children born of a child marriage even if the marriage has been annulled, including providing for the custody and maintenance of the children born of child marriages</li> <li>?? Empowering the district court to add to, modify or revoke any order relating to the maintenance of the female petitioner and her residence and custody or maintenance of her children, etc.</li> <li>?? Empowering the courts to issue injunctions prohibiting solemnisation of marriages in contravention of the provisions of the proposed legislation</li> <li>?? Making the offences under the proposed legislations to be cognizable for the purposes of investigations and for other purposes</li> <li>?? Providing for appointment of child marriage prevention officers by the State Government</li> <li>?? Empowering the State Governments to make rules for effective administration of the legislation</li> </ul> <p>The Parliament constituted a Standing Committee to receive written and oral evidence from several experts in the civil society to get their comments and suggestions on the proposed legislation. At present the Bill is still under discussion.</p> <p>In February 2006, the Supreme Court of India ruled that all marriages, existing and future would have to be registered. The Centre, State Governments and the Union Territories were accordingly directed by the apex Court to frame a uniform set of rules and procedures for registration of marriages.</p> <p>It is an accepted fact that HAMA brought in some radical changes in the existing Hindu Law. However, HAMA continues to have serious flaws and antiquated provisions, like:</p> <ul style="list-style-type: none"> <li>?? A single woman (unmarried, widowed or divorced) can adopt a child but a married woman is not allowed to do so. She can only be the consenting partner and not the petitioner. The husband has to be petitioner,</li> </ul>
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for adoption and maintenance. The conditions laid down by the Act provides that only person below 15 years are capable of being taken in adoption, unless there is a custom or usage applicable to the parties which permits persons who have completed the age of fifteen years being taken in adoption. The Act enables a person to adopt a child of either sex, child of any caste, child of unknown parentage and child with physical disabilities.

#### **Guardians and Wards Act (GAWA) 1890**

It is an Act to consolidate and amend the law relating to Guardian and Ward, which confers only a guardianship status on the parent, which ceases once the child completes 21 years of age. The Act provides for appointment and declaration of guardians, duties, rights and liabilities of guardians among others. The Act also provides for penalty to guardian appointed by a Court if he/she removes the ward from the jurisdiction of the concerned Court.

thereby discriminating against married women.

- ?? The moment a Hindu converts to another religion, he/she not only loses the right to adopt, but will have no legal recourse if the spouse decides to place the child for further adoption.
- ?? The Act prohibits a person with a son, grandson or great-grandson, from adopting a boy, and adopting a girl if he/she has a daughter or son's daughter living with them
- ?? There is no full proof guarantee against any eventual maltreatment/abuse/exploitation of an adopted child in the adoptive family. However, the irrevocability clause of HAMA creates a legal obstacle for the re-adoption of such children
- ?? As per the opinion of the Union Law Ministry (Department of Legal Affairs), non-resident Hindus (NRIs/PIOs) are not eligible to adopt a child under HAMA. Whereas Adoption orders are being issued in favour of NRIs and PIOs (habitual residents in other countries) by the Indian Courts. These adoptions are considered as final adoptions. There is a need for bring congruity between the opinion of the Law Ministry and Court practice.

Since Adoption is also now regulated under the Juvenile Justice (Care and Protection of Children) Act 2000, there is a need to have uniformity in the provisions. Further, in order to integrate provisions of the UNCRC and Hague Convention on Protection of Children & Cooperation in respect of Inter-country Adoption, an amendment to HAMA is required.

In the absence of a uniform adoption Law, Muslims, Christians, Jews, Parsis can adopt children using the Guardians and Wards Act 1890. However, it provides only the guardianship status. Since the child has the status of a ward under the Act, s/he finds no legal protection in terms of enjoying legal rights over her/his parent's property. It is left to the parent/guardian to will his property to the child, or as is the case with Muslims, gift their ward a section of their property during their lifetime as Muslim personal law does not allow a person to will away his property.

<p> <del>///</del> <b>Probation of Offenders Act 1958</b>  <del>///</del> <b>Bombay Prevention of Begging Act 1959</b>  <del>///</del> <b>Orphanages and Other Charitable Homes (Supervision and Control) Act 1960</b>  <del>///</del> <b>Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act 1987</b>  <del>///</del> <b>Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992</b>  <del>///</del> <b>Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act 1994</b>  <del>///</del> <b>Persons with Disabilities (Equal Protection of Rights and Full Participation) Act 2000,</b> </p>	<p>will away his property.</p> <p>In order to integrate provisions of the UNCRC and protect the fundamental right to equality of children as provided under the Article 14 of the Constitution of India, there is a need for amendment in the Adoption Law.</p> <p>In order to achieve the objectives of these legislations, it is imperative to:</p> <ul style="list-style-type: none"> <li><del>///</del> Ensure the implementation of existing legislation and wide dissemination of information about the provisions and mechanisms for complaints/monitoring of implementation.</li> <li><del>///</del> Adoption of new legislation to cover aspects of child protection weakly represented or not represented under existing legislations</li> <li><del>///</del> Consider amendments to existing legislations to incorporate broader protection for children</li> <li><del>///</del> Conduct reviews and examine further need for amendments to legislation to bring them in line with agreed constitutional and international commitments</li> </ul>
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## Approach to the Eleventh Plan on Child Protection

In the Eleventh Plan (2007-2012), Child Protection will be viewed as an essential component of the country's strategy of placing '*Development of the child at the centre of the 11<sup>th</sup> Plan*'. Violations of the child's right to protection, in addition to being human rights violations, are massive, under-recognized and under-reported barriers or obstacles to child survival and development. Failure to protect children has serious consequences for the physical, mental, emotional, social development of the child; consequences for the loss in productivity and the loss in human capital for the nation.

The Government of India has adopted a National Plan of Action for Children (NPAC) in 2005, which has Cabinet approval. Time targets in the NPA extend to 2012, the end-year of the Eleventh Plan. The NPA for Children sets out a range of positive measures and declares its intent to secure them for all children aged up to 18 years. It identifies the Constitution and the CRC as the guiding framework for realizing the rights of children below 18 years. It clearly implies cross-sectoral thinking and planning, and inter-sectoral measures. The NPAC has identified twelve key priority areas for the utmost and sustained attention in terms of outreach, programme interventions and resource allocations. These are:

- ?? Reducing **Infant Mortality Rate**
- ?? Reducing **Maternal Mortality Rate**
- ?? Reducing **Malnutrition** among children
- ?? Achieving 100% civil **registration of births**.
- ?? **Universalization of early childhood care and development and quality education for all children** achieving 100% access and retention in schools, including pre-schools.
- ?? Complete **abolition of female foeticide, female infanticide and child marriage** and ensuring the survival, development and protection of the **girl child**.
- ?? Improving **Water and Sanitation** coverage both in rural and urban areas
- ?? Addressing and upholding the rights of **Children in Difficult Circumstances**.
- ?? Securing for all children all legal and **social protection** from all kinds of abuse, exploitation and neglect
- ?? Complete abolition of **child labour** with the aim of progressively eliminating all forms of economic exploitation of children.
- ?? **Monitoring, Review, and Reform** of policies programmes and laws to ensure protection of children's interests and rights.
- ?? Ensuring **child participation** and choice in matters and decisions affecting their lives

The NPAC 2005 has articulated clearly the rights perspective and agenda for the development of children, and provides a robust framework within which to promote the development and protection of children. It is therefore logical and imperative that the NPAC 2005 becomes the basis for planning for children in the Eleventh Plan in all sectors and the principles articulated in it guide the planning and investments for children. All budget for child protection schemes and programmes should be in the plan category and not in the non-plan category.

The Guiding Principles of the NPA are:

- ?? To regard the child as an asset and a person with human rights
- ?? To address issues of discrimination emanating from biases of gender, class, caste, race, religion and legal status in order to ensure equality
- ?? To accord utmost priority to the most disadvantaged, poorest of the poor and the least served child in all policy and programme interventions
- ?? To recognize the diverse stages and settings of childhood, and address the needs of each, providing all children the entitlements that fulfill their rights and meet their needs in each situation.

Since the finalization of the NPAC, 2005 the issues of children affected by HIV/AIDS and urban children in distress/difficult circumstances have also been accepted as key priorities by MWCD and will find a place in the Eleventh Plan as key priorities that need to be addressed.

The Government of India has accepted the MDGs as part of national commitments to be achieved by 2015. Most MDGs relate to children and there is strong link between child protection and the MDGs. The Mid-Term Appraisal report on the Tenth Plan found that outcomes on most of the goals were off-track in 2005. It is imperative that the link is understood and translated into investment and actions for strengthening child protection in the Eleventh Plan. In addition the Millennium Declaration provides the specific framework for specific attention to addressing the protection rights of children.

The draft Approach Paper for the Eleventh Plan has adopted a very narrow and inadequate perspective on child protection. In fact, the approach is welfare oriented, limited to identifying and mainstreaming street children, differently abled and other disadvantaged children. The major focus is on education and health. This does not fully reflect the vision, perspective and framework laid out in the National Plan of Action for Children, 2005 and the goals and objectives already approved at the highest level of the cabinet. It also does not reflect an understanding of the real situation of child protection in the country and the planning and investment required. This also does not reflect the clearly articulated commitment in the NCMP to *'safeguard the rights of children'*. The main endeavour of the Ministry of Women and Child, therefore, will be ***to carve out a broad and comprehensive framework for child protection*** in the Eleventh Plan and ***set the foundation for creating and strengthening a robust protective environment for children***. Child protection concept incorporates both prevention and corrective aspects. Children have a right to be prevented from becoming subjects of violence, abuse, neglect and exploitation, and at the same time if they do become victims of the same the State has a duty to mitigate the impact of the violation of their rights, through its services and support systems. This will be carried out with ***strong advocacy and a detailed implementation strategy for enhancing the infrastructure for protection services, increasing the access and range of services and to increase the investment for protection of children***.

The draft Approach Paper for the Eleventh Plan, however, has identified some interventions for serving the under-served, bridging divides and including the excluded. Some provisions indicated are:

- ?? Accelerating the pace of poverty reduction and providing appropriate safety nets for the poor;



- ?? Addressing the divide between those who have access to essential services and those who do not; Generating employment; make the NREGP work; give it enough funds; develop and implement an integrated self-employment programme; 100days employment to every rural household, initially in 200 districts. To cover entire country in five years.
- ?? Make the National Urban renewal Mission work;( so far the Mission has not specifically addressed the issue of children in urban distress and difficult circumstances and MWCD has taken up the issue with Urban Ministry).
- ?? Address SC, ST and Minority divides: adopt the National Tribal Policy; eliminate manual scavenging and bonded labour, identify and rehabilitate bonded labourers and their children.
- ?? Address regional disparities: use the Backward Regions Grant Fund.
- ?? Address under-development in districts which leads to severe social problems, perception of alienation and neglect, adversely affecting the security environment .These problems have led to the rise of Naxalism in many of the 100 identified districts and lead to a disruption of normal life of the population, especially children, and threat to the safety and development of children.
- ?? Gender bias deeply ingrained in society, reflected in indicators like sex ratio, literacy levels of boys and girls, MMR .Gender balancing –provisions in many ministries/depts. Special measures for gender empowerment and equity. Campaigns against patriarchal values.
- ?? Focus on Violence against women, economic empowerment and women’s health.

These provisions will also be *harnessed for reducing child vulnerability*, through the relevant Ministries and Departments. MWCD will *build the lateral linkages, systems for targeting and convergence, so that the impact of marginalization, exclusion and the concomitant vulnerabilities for the family and therefore the child, are reduced and the protective environment for children strengthened.*

## **PRINCIPLES TO BE KEPT IN MIND WHILE DEVELOPING THE INTERVENTIONS FOR THE ELEVENTH PLAN.**

The implementation strategies and specific interventions will be finalized keeping in mind *the best interest of the child* and the philosophy of building *child-friendly protection services*. The following key principles will be kept in mind:

1. **Child protection a shared responsibility:** The responsibility for child protection is a shared responsibility of government, family, community, professionals, and civil society. It is important that each role is articulated clearly and understood by all engaged in the effort to protect children. Government has an obligation to ensure a range of services at all levels.
2. **Reducing child vulnerability:** There is a need for a focus on systematic preventive measures not just programmes and schemes to address protection failures at various levels. A strong element of prevention will be integrated into programmes , converging the provisions and services of various sectors on the vulnerable families, like livelihood support( NREGS), SHGs, PDS, health, child day care, education, to strengthen families and reduce the likelihood of child neglect , abuse and vulnerability.
3. **Strengthen family:** Children are best cared for in their own families and have a right to family care and parenting by both parents. Therefore a major thrust will be to strengthen the

family capabilities to care for and protect the child by capacity building, family counselling and support services and linking to development and community support services.

4. **Promote non-institutional care:** There is a need to shift the focus of interventions from an over reliance on institutionalization of children and move towards more family and community –based alternatives for care. Institutionalization should be used as a measure of last resort after all other options have been explored.
5. **Intersectoral linkages and responsibilities:** Child protection needs dedicated sectoral focus as well as strengthening protection awareness and protection response from other sectors outside the traditional protection sector including in emergencies and HIV/AIDS programming.
6. **Create a network of services at community level:** An appropriate network of essential protection services is required at all levels for supporting children and communities.
7. **Establishing standards for care and protection:** All protection services should have prescribed standards, protocols for key actions and should be monitored regularly. Institutionalisation should be for the shortest period of time with strict criteria being established for residential placement and all cases of institutionalization reviewed periodically.
8. **Building capacities:** Protection services require skilled, sensitive staff, equipped with knowledge of child rights and standards of care and protection. Capacities of all those in contact with children require strengthening on a continuing basis, including families and communities.
9. **Providing child protection professional services at all levels:** There is a need for varied special services for the many situations of child neglect, exploitation and abuse, including for shelter, care, psychological recovery, social reintegration, legal services etc. which have to be professional and child-focused.
10. **Strengthening crisis management system at all levels:** First response and coordinated inter-sectoral actions for responding to crisis need to be established and institutionalized.
11. **Reintegration with family and community:** systems are to be put in place for efforts to reintegrate children with their families and community and regular review of efforts instituted.
12. **Addressing protection of children in urban poverty:** Children in urban poverty are at high risk/ increased vulnerability; constantly under threat of eviction; denial or exclusion from basic services; social turmoil; and the stretched capacity of the adults to function as adequate caretakers due to their poverty. This indicates the need for developing a strong social support and service system.
13. **Child impact monitoring:** all policies, initiatives and services will be monitored for their child impact and reports made public, including for children themselves through child-friendly reports.

## **PROPOSED PROGRAMME FRAMEWORK FOR CHILD PROTECTION**

Keeping in mind the analysis of the situation of children, the gaps identified in implementation of existing policies and programmes and the commitments made for the protection of children, MWCD will develop, a holistic and comprehensive approach to child protection and the development of a protective environment for children. The principles identified above will guide the planning, implementation, setting of standards, investments made and monitoring of the outcomes for children. The key aspects of the comprehensive approach will include:

### **1. Strengthening the knowledge base:**

A protective environment for children requires a good knowledge base that on the incidence and nature of child protection abuses and violations and allows for developing informed and strategic responses. Lack of data adversely affects planning of appropriate access and nature of services required for children. Specific measures for developing and strengthening the knowledge base are:

- ?? Develop a system of data collection and indicators consistent with the Convention and disaggregated by gender, age, social status (Scheduled Castes and Tribes), marginalized groups and urban and rural area and make it publicly available. This system would cover all children up to the age of 18 with specific emphasis on those who are particularly vulnerable, are marginalized, have disabilities, HIV/AIDS , etc. This is to be used as the basis for planning policies, programmes and protection for children and inform capacity building.
- ?? Child impact studies will be undertaken when planning programmes relating to economic and social policies.
- ?? Conduct comprehensive studies to assess the causes, nature and extent of specific child protection issues like trafficking and commercial sexual exploitation of children; violence; children in conflict with the law and any other area for which data and information cannot be gathered through regular information systems.
- ?? Investigate and research areas of potential or new threats to child protection to build knowledge, evidence and integrate into policy and programmes, such as livelihood security, migration, internal displacement, internet and other technologies. This is essential for translating assumptions to knowledge/evidence for planning appropriate response and services and building appropriate safeguards.
- ?? Developing an electronic knowledge bank/resource library on child protection.

### **2. Strengthening the legal framework, law implementation and monitoring .**

A concerted effort will be made at mobilizing the machinery for effective implementation of existing laws and simultaneously the review and consideration of better protection of children in light of obligations and commitments will be initiated.

#### **a) Measures for strengthening Protective Legislation and its enforcement**

One of the foremost protection measures is to ensure that perpetrators of crime/offences against children are brought to justice and an important message sent out to the offenders that there is intolerance for this and offenders will be caught and prosecuted. Measures that will be undertaken include:

**i) Ensuring the implementation of existing legislation and wide dissemination of information about the provisions and mechanisms for complaints/monitoring of implementation.**

?? Take all necessary steps to ensure the implementation of:

- The Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 as amended in 2002
- The Dowry Prohibition Act, 1961 and State laws
- The Karnataka and Andhra Pradesh Devadasis (Prohibition of Dedication) Act, 1982 and Rules, 1982
- The Child Marriage Restraint Act, 1929
- The Juvenile Justice Care and Protection Act, amendment 2000
- The Guardianship and Wards Act 1890
- Factories Act 1954
- Hindu Adoption and Maintenance Act 1956
- Probation of Offenders Act 1958
- Bombay Prevention of Begging Act 1959,
- Orphanages and Other Charitable Homes (Supervision and Control) Act 1960
- Bonded Labour System (Abolition) Act 1976
- Immoral Traffic Prevention Act 1986
- Child Labour (Prohibition and Regulation) Act 1986
- Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act 1987,
- Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992
- Persons with Disabilities (Equal Protection of Rights and Full Participation) Act 2000
- Transplantation of Human Organ Act, 1994
- Information Technology Act, 2000
- SC/ST (Prevention of Atrocities) Act, 1989
- All State Legislations pertaining to children

**ii) Adoption of new legislation to cover aspects of child protection weakly represented or not represented under existing legislations. These require consideration**

?? Adopt new legislation to prohibit offences, violence, including sexual abuse of children in the family, in schools, in the work place and in institutions;

- ?? Banning child domestic work. Removing the CRC declaration on child labour.
- ?? Consider introduction of new national legislation to prohibit corporal punishment in the family, in schools and other institutions.
- ?? Formulate and enforce the implementation of a new legislation for implementation of the fundamental right to education.
- ?? Consider development of new legislation for creches and day care services for children.
- ?? Ratification of the UN protocol to Prevent, Suppress Trafficking in persons especially women and Children, 2000.
- ?? Ratification of the ILO Conventions on Minimum Age, 138 and Worst Forms of Child labour, 182.
- ?? HIV/AIDS Bill
- ?? New legislation to regulate and promote adoption

**iii) Consider amendments to existing legislations to incorporate broader protection for children**

- ?? Amendments to the Juvenile Justice Care and Protection of Children Act, 2000
- ?? Increase the age of criminal responsibility for child, which is currently at 7 years. (Amend IPC);
- ?? Amendment of the IPC, CRPC and Evidence Act to provide and strengthen the legal framework for children and ensure witness protection;
- ?? Extend the scope of the Immoral Traffic Prevention Act to all forms of trafficking of children and ensure that all trafficked children are always treated as victims;
  - ?? Review of laws for uniform legal definition of child.
  - ?? Amend Child Labour legislation.
  - ?? Amend inheritance laws for rights of all adopted children.

**iv) Conduct reviews and examine further need for amendments to legislation to bring them in line with agreed constitutional and international commitments.**

- ?? Scrutinize carefully religious and personal laws, both at the national and state levels, with a view to ensuring that the best interests of the child are served and Constitutional provisions and principles of the Convention on the Rights of the child are not being flouted.
- ?? Review the legal framework for domestic and international adoption and take all necessary measures, including the adoption of new guidelines by the central authority, to implement the 1993 Hague Convention on Protection of Children & Cooperation in respect of Inter-country Adoption, 1993.
- ?? Ensure that adoption is possible for children of all religions, in accordance with the strict regulations reflected in article 21 of the Convention on the Rights of the Child.

b) In addition to the implementation, review, amendment and examination of the conformity of laws with established international protection standards, steps will be taken to ensure that ***adequate financial and human resources are provided for the establishment of mechanisms and structures necessary to implement the law and for the capacity development of all functionaries in the justice process.***

This will need to be reviewed and adequate costs and mechanisms to support and monitor implementation built in.

### 3. PREVENTION

Analysis of the implementation focus so far and keeping in mind the need for a holistic approach for creating a protective environment for children, a major thrust in the Eleventh Plan will be to create a strong preventive approach to child protection.

#### i) Strengthening the preventive framework

- Awareness building and advocacy with families, service providers, media, civil society
- Focus on support to vulnerable families; converging services, information, counselling
- Developing and strengthening community capacities for protection and monitoring.
- Integrating child protection concerns and safeguards in all sectors

#### a) In order to promote favourable attitudes, or address harmful ones, awareness creation measures should be undertaken:

It is important to undertake awareness-raising measures to prohibit and eradicate all kinds of customs or traditional practices harmful to the health and well being, survival and development of children, boys as well as girls. These may include:

- ?? Educational and motivational measures to ensure recognition and implementation of the principle that both parents have common responsibilities for the upbringing and development of their child;
- ?? De-schooling families and communities to change their own outlook and provide spaces for children to protect themselves;
- ?? Comprehensive public education campaigns to prevent and combat gender discrimination, particularly within the family. Political, religious and community leaders, panchayats to be mobilized to support efforts to eradicate harmful traditional practices and attitudes, which still discriminate against girls;
- ?? Public education campaigns and any other appropriate measures concerning the negative consequences of ill-treatment and abuse of children;
- ?? Advocacy, policy, awareness building and communication to prevent/address harmful traditional or customary practices like child marriages;
- ?? Specific advocacy, awareness, communication and capacity development approaches to prevent and address child sexual abuse, exploitation and child trafficking;
- ?? Comprehensive public education campaigns involving, religious and political leaders to prevent and combat caste-based discrimination with a view to changing social attitudes;
- ?? Develop massive awareness campaigns, involving parents, communities, law enforcement officers, medical practitioners, etc. about the crime of sex determination and sex selective abortions;
- ?? Undertake awareness-raising campaigns to sensitize the public, and parents in particular, about the rights and special needs of children with disabilities, including those with mental health concerns;

- ?? Undertake education campaigns to educate families, teachers and other professionals working with and/or for children against corporal punishment with a focus on alternative ways of disciplining children;
- ?? Carry out educational efforts to reduce stigma or discrimination against children in conflict with the law, affected by HIV/AIDS or for any other reasons so that they have an appropriate opportunity to fully access services and be re-integrated into society;
- ?? Advocacy, awareness-raising, capacity-building and implementation support for improved birth registration, especially of vulnerable and marginalized groups;
- ?? Support for communication approaches for reducing vulnerability and stigmatization of at-risk children and families;
- ?? Awareness-raising involving parents, community members, programme functionaries, community based organisations for preventing child labour, child domestic work, trafficking of children for various purposes;
- ?? Educating professionals who deal with victims of abuse, particularly medical professionals.

b) Focus on support to vulnerable families; converging services, information:

- ?? Mapping of vulnerable families including tracking of migrants;
- ?? Birth registration for children;
- ?? Converging the provisions and services of various sectors on the vulnerable families, like livelihood support (NREGS), SHGs, PDS, health, child day care, education, to strengthen families and reduce the likelihood of child neglect, abuse and vulnerability;
- ?? Implementation of the fundamental right to education;
- ?? Proactive awareness generation and access to information about services and programmes available for them;
- ?? Outreach services for follow up of children belonging to vulnerable families by the outreach workers of the District Child Protection Units;
- ?? Family guidance and counseling for improving coping mechanisms and reducing vulnerability.

c) Measures promoting open discussion of and engagement with child protection issues; media attention and civil society action:

- ?? Encourage adoption of Child Protection Guidelines/Policy in all Government agencies/ departments, NGOs and organizations working for children;
- ?? Sensitize and promote media to function in defence of the child, as an alerting mechanism on protection failures with sensitivity and ethical standards so as not to compromise the privacy, safety and best interest of the child;
- ?? Promoting guidelines, self- regulatory mechanisms for high standards in reporting on children's issues and in advertising;
- ?? Encourage community leadership, local influencers to generate dialogue for constructive questioning of traditions and customs that are harmful to children;
- ?? Promoting community consciousness and acceptance of standards for positive change towards practices which are more beneficial;
- ?? Promote mobilization of communities, through representatives, religious or political leaders or youth groups, for adopting progressive 'Social conventions', community pledging etc as a

means of changing those aspects of behaviour that are governed by community pressures, deep-rooted traditions etc., e.g. child marriages, sex determination/female foeticide etc.;

- ?? Promoting public access to information on children's issues and outcomes of public expenditure for children;
- ?? Encouraging public hearings on protection issues with the involvement of all stakeholders, govt., civil society, children, parents etc.;
- ?? Encouraging civil society watch/ reporting mechanisms on protection issues as a measure to promote transparency and accountability.

d) Integrating child protection concerns and safeguards in all sectors:

- ?? Disaggregated data on situation of children and access to services collected and available.
- ?? Strict enforcement of laws and implementation reports/monitoring of implementation and linkages with the State and District Child Protection Units and State Adoption Cells
- ?? Standards of services are established and being monitored regularly.
- ?? Safeguards and preventive measures clearly defined to ensure best interest of the child and safeguard privacy of the child and prevent from further victimization.
- ?? Each sector to develop clear child protection guidelines and mitigation plans and protocols for action.
- ?? Each sector to do child budget analysis and ensure adequate and efficient expenditures and carry out outcome monitoring.
- ?? Each sector to publish reports on progress of child indicators including child protection measures being implemented.
- ?? Regular mechanism for coordination and review of inter-sectoral actions for child protection.
- ?? Coordination and intersectoral linkages with the following Ministries/Departments at the national level: Education, Health, Labour, Urban Affairs, Rural Development, Home Affairs, Tourism, Information Technology, Legal Affairs, Social Justice and Empowerment, Youth Affairs and Information and Broadcasting, established through a regular mechanism and sectors have integrated child protection measures in their policies and programme delivery. Similar linkages to be developed at state and district level with all relevant sectors for child protection through the proposed State and District Child Protection Units.

#### **4. INTERVENTION SERVICES FOR RESUE, CARE, REHABILITATION AND RE-INTEGRATION**

##### **i) Strengthen programming and monitoring, linkages with agencies and with other sectors:**

A key focus of the Plan efforts will be to review existing protection services and the several small initiatives so that they can be brought under a comprehensive umbrella with the objective of merging services, eliminating overlapping services and strengthening the nature and quality of the interventions.

**A major intervention will be to establish responsive, comprehensive services for recovery and reintegration and ensure these are available following child protection abuses/violations .**



Child victims of any form of neglect, exploitation or abuse are entitled to care and non-discriminatory access to basic social services. The aim will be to ensure the services are provided in an environment which fosters the health, self-respect and dignity of the child and safeguards his/her privacy and safety

Attention will be paid to ensure that access, outreach, range of services, quality of services and the response mechanisms are strengthened. In addition, capacities for service delivery will be enhanced and all sectors mobilized for appropriate and timely response. These measures will include:

- ?? Provision of facilities for the care, recovery and reintegration of child victims of neglect, physical, sexual or substance abuse, emotional abuse, violence and exploitation;
- ?? Protection from arrest and maltreatment by the police, and effective services for reconciliation with their families and community;
- ?? Measures to strengthen institutional capacities of child protection systems to address in a gender-sensitive way, abuse, violence and exploitation (including in schools and for psychosocial support);
- ?? Measures to change and demonstrate progress in reducing the use of detention for children in conflict with the law as a measure of last resort; and the progressive increase in the use of family and community-based approaches for care of children;
- ?? Development and improvement of alternative care, foster care, sponsorship, adoption and after care services;
- ?? “Child-friendly” and gender appropriate investigation and court procedures established and/or strengthened;
- ?? Legal and policy reform for the incorporation of child justice standards;
- ?? Institutional capacity-building of law enforcement, justice and social welfare sectors in support of improved justice for children;
- ?? Increase public awareness, dialogue and support for child justice, have improved systems for the provision of alternative care, including standards, policies and systems and capacity for implementation and monitoring;
- ?? Implement registration, tracing/tracking systems, interim care and reunion for separated children, establishment of “child-friendly” spaces and provision of psychosocial support, including in emergencies;
- ?? Access to services, at the most peripheral level, for a child in distress;
- ?? Strengthen coordination between police, childline and NGOs and establish measures for immediate response to children;
- ?? Establish effective procedures and mechanisms to receive, monitor and investigate complaints, including intervention where necessary;
- ?? Investigate and prosecute cases of ill-treatment, ensuring that the abused child is not victimized in legal proceedings and that his/her privacy is protected;
- ?? Establish and reinforce the toll-free “Childline” in all districts. Take the necessary measures to support the existing services, in particular the NGOs, to respond adequately to the calls for help from children (or on their behalf) and, if necessary, for the establishment of new services. Review Childline, potential decentralization, standards for services and better role clarity and coordination among agencies;

- ?? Ensure impartial and thorough investigations in cases of rights violations committed against children and the prompt prosecution of those responsible, and that it provides just and adequate reparation to the victims (Commission for the Protection of Child Rights);
- ?? Adopt multidisciplinary and multisectoral approaches and take measures to prevent and combat sexual exploitation and trafficking of children;
- ?? Strengthen and extend the initiatives for Street Children to address the large and increasing number of street children, with the aim of protecting these children, especially girls, and of preventing and reducing this phenomenon, in particular through assistance to families and access to education and health;
- ?? Expand the Rajiv Gandhi National Crèche Scheme for children of working mothers to increase access in rural and urban areas. Review quality of services, financial allocations and establish standards for care. Strengthen monitoring of services;
- ?? Development/establishment of a competent and accountable counseling infrastructure as an integral component of all relevant delivery systems affecting the child;
- ?? Strengthen existing infrastructure and institutional mechanism through additional human and financial resources;
- ?? Successful models of convergence between sectors , civil society and community developed demonstrating the functioning of a strong child protection environment.
- ?? All children affected and infected by HIV/AIDS have access to basic services( health, education, nutrition and treatment for HIV/AIDS and psychosocial support to mitigate social impact, in high prevalence states .
- ?? Provide counseling and psycho-social support services for HIV affected children in family and community settings.
- ?? Provide trauma counseling services as a necessary crisis intervention measure for children affected by emergencies, abuse and violence.
- ?? Mental health professionals to be attached to State and District Child Protection Units, CWCs, JJBs and SJPU.
- ?? Girl children, and others at risk of exclusion, enjoy special supports/receive special attention to ensure them access to services and protective mechanisms.

## **ii) Strengthening the capacity development for services and functioning of the protective environment**

### **Special emphasis on capacity development for counseling**

Health workers, teachers, police, social workers and many others who deal with children need to be equipped with the skills, knowledge, authority and motivation to identify and respond to child protection problems. The capacity of families and communities to protect their children is also essential. There are other broader types of capacity which relate to the protective environment, including the provision of education and safe areas for play. To ensure adequately skilled and equipped staff at all levels for the protection of children, the following measures will need to be considered:

- ?? Strengthen efforts to disseminate the principles and provisions of the Convention, and make these efforts systematic, in order to sensitize society and all functionaries about children's rights;

- ?? Undertake systematic education and training on the rights of children for all professional groups working for and with children, in particular, judges, lawyers, law enforcement officials, civil servants, municipal and local workers, personnel working in institutions and places of care /detention for children, teachers, health personnel, including psychologists, and social workers and all service providers;
- ?? Strengthen training programmes on rights of children and relevant care and protection standards for all professionals involved with the system of juvenile justice; dealing with adoption, sexual abuse and exploitation of children etc.
- ?? Capacity-building of social work/social welfare sector to enhance the availability and quality of gender-appropriate services for vulnerable children and families, including psychosocial support;
- ?? Increase the number of social workers and the quality of their training;
- ?? Provide educational information to parents, teachers, government administrative officials, the judiciary, all service providers, children themselves and society at large on the right of children to have their views taken into account and to participate in all matters affecting them. Promote, within the family, the schools, institutions, as well as in judicial and administrative proceedings, respect for the views of children, especially girls and children from marginalized and vulnerable groups;
- ?? Train parents, teachers, law enforcement officials, care workers, judges, health professionals and children themselves in the identification, reporting and management of cases of ill-treatment, abuse, using a multidisciplinary and multisectoral approach;
- ?? Systematically involve legislators, local self government, PRI members and other community and religious leaders in programmes to eradicate customs and traditions that impede the protection of children. Adopt specific measures for communication for illiterate people and for people in remote areas;
- ?? Community capacity is also key. Community-based anti-trafficking committees can be effective in both prevention of trafficking as well as return and reintegration of children. These committees can provide for ongoing community monitoring and attention to protection risks.
- ?? Develop adequate capacity for psychological counseling of children, especially child victims of abuse, violence and exploitation. There should be a system of accreditation to ensure quality standards.
- ?? Capacity development for managing of standards and reporting on child related outcomes.
- ?? Train social workers, counselors, and other professional related to residential, foster care and juvenile homes to identify and help children with emotional and behavioural problems. All residential, foster care and juvenile homes to have an inbuilt mental health programme to foster positive mental health and cater to children with mental health issues.

Training institutions like NIPCCD, NCERT, NISD, NIMHANS, Public Administration Institutions, Police Academies, Judicial Academies, Universities, Child oriented professional courses like Masters of Social Work, Masters of Child Development etc. will be used for the capacity development efforts.

## **Children's life skills, knowledge and participation.**

### **Measures for imparting life skills to all children, especially the most vulnerable.**

If children are unaware of their right not to be abused, or are not warned of the dangers of, for example, trafficking, or the need to speak out to someone in their confidence, they are more vulnerable to abuse. Children need information and knowledge to be equipped to protect themselves. Children also need to be provided with safe and protective channels for participation and self-expression. To create a protective environment for children it is imperative that attention is given to imparting appropriate life skills to all children, especially the most vulnerable.

- ?? Strengthen efforts through schools and community based educational programmes, to enable children to identify, avoid and, if necessary, deal with potentially violent situations. They need to be informed about their rights and how to bring information about abuse and safely to the notice of someone who can help.
- ?? Children's involvement in their own protection will be strengthened through creation of child-friendly spaces for children, especially in situations of displacement, disasters, civil disturbance/ conflict and by peer-to-peer counseling etc.
- ?? Special efforts to be made for expanding knowledge and empowerment of girls. Educated girls are less likely to agree to marry at a young age. Attempts to close the gender gaps in education will include the establishment of child-friendly schools and cash incentives for parents.
- ?? Strengthen sexual and reproductive health education, mental health and adolescent-sensitive counseling services and make them accessible to all adolescents through schools and community education programmes, and institutional care institutions, mass media etc. Children have to be empowered to refuse unsafe or unwanted sex and to negotiate behaviour to prevent them from being exploited.
- ?? Community based educational efforts to impart life skills, knowledge about their rights and helped to protect themselves from exploitation, abuse and the dangers of trafficking, substance abuse and HIV/AIDS. Especially opportunities to express their views and communicate for help are required.
- ?? Special efforts to be instituted for imparting life skills for out of school children
- ?? The programme design for imparting services and life skills to cater to age, gender and the situation of children.
- ?? Life skills education for children in institutional care.
- ?? Vocational skills imparted to children in institutional care are viable options, suited to the current market needs and opportunities.
- ?? Kishori Shakti Yojna will be revamped to incorporate access to information on services and programmes, life skills, legal literacy and well-being counseling.
- ?? Provide group education to adolescents to respond to anxieties, fears, information gaps, peer pressure, stress, anger, aggression, depression, suicidal ideation, loneliness and related mental and emotional needs and problems for the well-being of adolescents

### **Counseling Capacity development**

- ?? Improved and expanded provision of training in counselling and child rights, and a significant increase in the provision of counselling services to children in need and at risk.

?? Ensuring the recruitment and placement of trained personnel and education and training at professional standard,

## **5. Strengthen monitoring and reporting on child protection**

A protective environment for children requires an effective monitoring system that records the incidence and nature of child protection abuses and allows for developing informed and strategic responses. Specifically, the measures will include:

- ?? Develop a system of data collection and indicators consistent with the Convention and disaggregated by gender, age, social status (Scheduled Castes and Tribes), marginalized groups and urban and rural area and make it publicly available. This system should cover all children up to the age of 18 with specific emphasis on those who are particularly vulnerable, are marginalized, have disabilities etc. This is to be used as the basis for planning policies, programmes and protection for children.
- ?? Develop information systems and regular monitoring and analysis of key indicators on child protection.
- ?? Promote reporting on key child protection indicators to policymakers, general public and regional and international monitoring mechanisms.
- ?? Evaluation and documentation of good practices.
- ?? Strengthen capacities of (including children and adolescents) to conduct analysis and apply data and research on child protection.
- ?? Conduct rapid assessment of protection issues related to children and women in emergencies.
- ?? Strengthen mechanism to coordinate the effective implementation of the National Plan of Action for Children and the goals and programmes of the Eleventh Plan /MDGs at the national level, between the national and the state levels and at state and district and Panchayat levels.
- ?? All existing special measures/temporary programmes/new initiatives should have specified goals and timetables, in order to evaluate their success and justify their continuation, expansion and dissemination.
- ?? Promote the use of system data for preventing protection failures, strengthening capacity of implementing staff and giving feedback to programme administrators.
- ?? In view of the Regional commitments and issues emerging from the SAARC Conventions, mechanisms for regional cooperation for data collection will have to be developed to strengthen collaborative efforts at trafficking prevention and control.
- ?? Nodal agency to be identified, mechanisms for monitoring, periodicity of reports on situation of children and finalization of indicators to be carried out.

The programme framework will pay special emphasis on the **Girl Child** and discrimination.

## **Expected Child Protection Outcomes for Eleventh Plan**

- ?? 100% registration of births, deaths and marriages by 2010
- ?? Rescue and remove children below 14 years of age from the work force by 2010
- ?? Ensure mainstream education for all child labourers by 2012
- ?? Eliminate child marriages by 2010
- ?? Progressive elimination of child begging
- ?? Rescue all child domestic servants in urban areas and child workers in dhabhas, tea stalls and restaurants.
- ?? Complete abolition of female foeticide, female infanticide, and ensure prosecution of offenders.
- ?? Reduce the proportion of infants infected with HIV by 20% by 2007 and by 50% by 2010
- ?? All children affected and infected by HIV/AIDS have access to basic services( health, education, nutrition and treatment for HIV/AIDS and psychosocial support to mitigate social impact, in high prevalence states.
- ?? Expand the Rajiv Gandhi National Creche Scheme for children of working mothers so as to increase the number of crèches for children from 30,000 to 100,000 by 2012
- ?? Initiating a scheme of Conditional Cash Transfers for improving survival of girl child, completion of education and delay in the age of marriage.
- ?? All State Child Protection Units to be fully functional by the end of first year of the Eleventh Plan and District Child Protection Units to be functional by the mid-term of the Eleventh Plan.
- ?? JJBs, CWCs and SJPU to be set up and functional in all districts by the end of first year of the Eleventh Plan period
- ?? Establish at least one home each for boys and girls in every state to function as temporary shelter homes and expand, based on need, to every district by the mid-term of the Eleventh Plan.
- ?? State Adoption Cell, in every State by the end of first year of the Eleventh Plan Period and Foster Care and Placement agencies in every state by the mid-term of the Eleventh Plan.
- ?? Standards for care and protection of children are established for all services by the end of the first year of the Plan and are monitored regularly.
- ?? Need for trained counseling capacity to be identified at district, state and national level. Institutions identified and supported to create a professional cadre of counselors by the end of the Eleventh Plan.
- ?? Implementation of all laws relating to child protection, with mid-term review/evaluation and reports.
- ?? Commissions for Protection of Child Rights are established at the Centre and in all states.
- ?? Childline expansion to 400 districts and major cities by the end of the Eleventh Plan. Mechanisms put in place for reaching children in distress who do not have access to phones/childline. Every Childline centre to be linked to counseling services, health services and District Child Protection Units.
- ?? Child protection is integrated into urban planning and local governance to have well defined response mechanisms and services for children in urban distress and difficult circumstances.
- ?? Creation of 24 hr Night Shelters and Drop- In Centres for all boys and girls in need in all major cities, with services like shelter, food, counseling, health, education, recreation and referral by mid-term of the Eleventh Plan.

- ?? Prevent trafficking of children for all purposes and rescue and rehabilitate trafficked children.
- ?? Expand the Scheme based on the lessons learnt from the evaluation the three pilot projects in source and destination districts, under the Scheme for Rescue of Victims of Trafficking, by end of the first year of the Eleventh Plan
- ?? Contingency disaster preparedness plans and emergency relief for children drawn up by State and District Child Protection Units mid- term of the Eleventh Plan.
- ?? Institutional capacity for training identified and strengthened for capacity development of all service providers and professionals who come in contact with children in the process of administration of justice.
- ?? Training materials and tools developed and training of trainers conducted by the first half of the second year of the Eleventh Plan.
- ?? Training of all service providers at all levels in child protection by the mid-term of the Eleventh Plan.
- ?? Expansion of Regional Centres of NIPCCD and strengthening of the capacity of NIPCCD and the Regional Centres to meet the training and research requirements for child protection by the mid-term of the Eleventh Plan.
- ?? Systematic data base on vulnerable children and families to be established for all services and new and emerging protection concerns investigated and researched systematically.
- ?? District child protection needs-assessment, mapping of services and specific district protection plans by mid-term of the Eleventh Plan.
- ?? Child tracking systems in place by the mid-term of the Eleventh Plan for missing children, child labour, children in institutions and alternate care systems and crimes against children to inform planning of services and prevention at district and state levels.
- ?? MWCD to publish annual reports on the status of implementation of the NPAC and the status of India's Children as a means of regularly monitoring the status of child rights in India.
- ?? MWCD to institutionalize child budgeting in all sectors and states and identify resource gaps and administrative bottlenecks for strengthening child protection investment and planning.
- ?? The culture of silence on child protection issues is to be broken. Child protection is high on the government and public agenda. Issues like sexual abuse, corporal punishment, violence against children & others forms of exploitation of children are openly discussed and get the attention of communities, government, and the public.
- ?? Families and communities have access to information and are motivated and empowered to protect their children, to report violence, abuse and exploitation and seek assistance and support for their children by mid term of Eleventh Plan.
- ?? Media and civil society adopt ethical reporting and investigation on child protection issues, and practice self regulation in this regard.
- ?? Coordination and intersectoral linkages with the following Ministries/Departments at the national level: Education, Health, Labour, Urban Affairs, Rural Development, Home Affairs, Tourism, Information Technology, Legal Affairs, Social Justice and Empowerment, Youth Affairs, Planning Commission, Railways and Information and Broadcasting, established through a regular mechanism and sectors have integrated child protection measures in their policies and programme delivery. Similar linkages to be developed at state and district level with all relevant sectors for child protection.

## Strengthening the Institutional Framework for Implementation

Child Protection has never been a programme of any one Ministry/Department. Until 2005, the Labour Ministry was responsible for child labour elimination programmes, the Social Justice and Empowerment Ministry was responsible for Juvenile Justice and adoption matters and the Department of Women and Child Development had some programmes for victims of trafficking.

The ongoing programmes and schemes on child protection and the nodal Ministries/Departments responsible for them are as follows:

- ✍ Improvement in Working Conditions of Child/Women Labour - (Ministry of Labour)
- ✍ Initiative to Develop Skills, ITIs & Elimination of Child Labour in 10th Plan - (Ministry of Labour)
- ✍ A Programme for Juvenile Justice - (Ministry of Women and Child Development)
- ✍ Integrated Programme for Street Children - (Ministry of Women and Child Development)
- ✍ Child Line - (Ministry of Women and Child Development)
- ✍ Central Adoption resource Agency (CARA) (Ministry of Women and Child Development)
- ✍ Scheme of Assistance to Homes for Children (Shishu Greh) to Promote In-Country Adoption
- ✍ Scheme for welfare of working children and children in need for care and protection (Ministry of Women and Child Development)

The year 2006 has seen some change with the Department of Women and Child Development becoming a full fledged Ministry and the juvenile justice and adoption related matters being transferred to this new Ministry. Child labour issues however, continue to be dealt with by the Labour Ministry. This is indeed a positive change. But a lot more is required to address protection for all children. The need of the hour is to ensure that issues of protection find a place in all sectors, including Railways, Industry, Trade and Commerce, Rural Development, Urban Affairs, Tourism, Banking, Legal Affairs, Home Affairs, Health and Family Welfare, and Information and Broadcasting.

Some of the schemes of the Ministry of Women and Child Development under the women's welfare section address issues concerning protection of the girl child even though there is no girl child specific component and budget under these schemes. They need to be considered as child protection schemes and in the years to come they could perhaps have a clearly defined child protection component and budget. These schemes include:

- ✍ Swadhar
- ✍ Short Stay Home
- ✍ Scheme for rescue of victims of trafficking
- ✍ Relief and rehabilitation of rape victims

The Kishori Shakti Yojana is yet another scheme of the Ministry of Women and Child Development that can be used to meet protection goals. While its main focus is nutrition for adolescent girls, the scheme provides platform for raising protection concerns with this age



group and empowering them with information, knowledge and skills to be able to protect themselves.

The Rajiv Gandhi National Scheme for the Children of Working Mothers, implemented by the Ministry of Women and Child Development, is primarily seen as fulfilling child development goals only. However, protection needs of children aged 0-6 years are also met through crèche and day care facilities and hence it may well be taken as a child protection scheme also.

There are some schemes for the disabled persons under the Ministry of Social Justice and Empowerment. Since they do not have a child focus or specific component for children, issues of disabled children get very little attention.

An analysis of the objectives of these schemes, the implementing machinery, outreach and beneficiaries and budget allocation, brings out some concerns that need to be addressed as part of effective planning. The chart that follows attempts to present such analysis and concerns.

## CHILD PROTECTION PROGRAMMES AND SCHEMES

Objectives and Programme Components	Implementing Mechanism	Outreach/Beneficiary	Allocation and Expenditure (RE and AE) (in Crore)			Comments
			Year	RE	AE	
<p><b>A Programme for Juvenile Justice</b></p> <p>'A Programme for Juvenile Justice' is a scheme for ensuring implementation of the Juvenile Justice (Care and Protection of Children) Act, 2000. The objectives of the scheme are:</p> <p>?? To extend help to State Governments to bear the cost of infrastructure and services development under the Juvenile Justice Act in order to ensure that in no circumstances the child in conflict with law is lodged in a regular prison.</p> <p>?? To ensure minimum quality standards in the juvenile justice services</p> <p>?? To provide adequate services for prevention of social maladjustment and rehabilitation of socially maladjusted juveniles</p> <p>?? Ensure participation of community and other organizations into the care and protection of children in conflict with law</p> <p>??</p>	<p>State Governments and UT Administration are responsible for establishment and maintenance of various levels of institutions for juveniles in conflict with law and children in need of care and protection. The Central Ministry provides 50% assistance to State Governments and UT Administration for this purpose.</p> <p>Juvenile Justice Boards and Child Welfare Committees are set up in the States and UTs for receiving and disposing children in conflict with law and children in need of care and protection respectively.</p> <p>Children's homes are established to provide shelter to children in need of care and protection.</p> <p>Observation homes, special homes and places of safety are established for rehabilitation of children in conflict with law.</p>	<p>Details of the grants released to the States/UTs, number of Homes assisted and number of inmates assisted during 2003-04, 2004-05 and 2005-06 are as follows:</p> <p>2003-04 Inmates assisted: 38749 Homes assisted: 623</p> <p>2004-05 Inmates assisted: 40,739 Homes assisted: 593</p> <p>2005-06 Inmates assisted: Homes assisted:</p>	2003-04	14.40	16.33	<p>Government is yet to meet its commitment of setting up a Juvenile Justice Board and a Child Welfare Committee in every district.</p> <p>Many states do not have a home for children in need of care and protection and some states have no such facilities for girls.</p> <p>In many places observation home and special home and place of safety are situated in the same premises.</p> <p>Inadequate staff in the homes and lack of adequate number of probationary officers as well as child welfare officers hinders the process of protection and justice.</p> <p>In order to implement the existing provisions of this scheme and the juvenile justice legislation, a mechanism that is less bureaucratic and speedier needs to be created.</p> <p>Only 50% of the funds for implementing this scheme come from the Centre and the rest have to be raised by the States, which often does not happen. It is thus important that the Centre provides 100% assistance to States for implementing all such schemes.</p> <p>Instead of one or two schemes, there should be a full-fledged programme for implementation of juvenile justice and creation of a protective environment for children.</p>
			2004-05	18.90	19.71	
			2005-06	20.43	NA	
<p><b>An Integrated Programme for Street Children</b></p>	<p>The implementing agency can be the State</p>	<p>Target group is children without homes and</p>	Year	RE	AE	<p>Street children includes many other categories of children such as child beggars, children</p>

<p>The scheme aims at preventing destitution of children and facilitating their withdrawal from life on the streets. It provides for shelter, nutrition, health care, education, recreation facilities to street children and seeks to protect them against abuse and exploitation. A project under this scheme includes:</p> <ul style="list-style-type: none"> <li>?? City level surveys;</li> <li>?? Documentation of existing facilities and preparation of city level plan of action;</li> <li>?? Contact programmes offering counseling, guidance and referral services;</li> <li>?? Establishment of 24 hours drop-in shelters;</li> <li>?? Non-formal education programmes;</li> <li>?? Programmes for reintegration of children with their families and placement of destitute children in foster care homes/hostels and residential schools;</li> <li>?? Programmes for enrollment in schools;</li> <li>?? Programme for vocational training;</li> <li>?? Programmes for occupational placement;</li> <li>?? Programmes for mobilizing preventive health services;</li> <li>?? Programmes aimed at reducing the incidence of drug and substance abuse, HIV/AIDS etc;</li> <li>?? Post ICDS/Anganwadi programmes for children beyond six years of age;</li> </ul>	<p>Governments, Union Territory Administrations, Local Bodies, Educational Institutions and Voluntary Organisations.</p> <p>Up to 90% of the cost of the project is provided by the GOI and the remaining has to be borne by the Organisation/Institution concerned. Depending upon the type of activity and nature of service, an appropriate amount not exceeding Rs. 1.5 million per annum can be sanctioned as recurring cost for each project. The grant under this programme is released to selected organisations in two equal half yearly instalments.</p>	<p>family ties i.e., street children and children especially vulnerable to abuse and exploitation such as children of sex workers and children of pavement dwellers. Children living in slums and with their parents are excluded from this scheme. Since the inception of the Programme, 2,50,938 street children have been extended help by the Ministry through 214 organisations in 24 States/UTs.</p>	<p>2003-04 2004-05 2005-06</p>	<p>9.90 12.55 10.80</p>	<p>9.899 11.784 NA</p>	<p>addicted to drugs, street children affected by HIV/AIDS, rag-pickers etc., each of them requiring specialized attention. A more comprehensive and targeted approach is thus required to deal with the specific situations of all street children. Moreover, these children must be provided necessary care and protection under the juvenile justice legislation. Instead of conducting raids and treating them as criminals, the victimization of these children needs to be addressed and they need to be provided a protective environment. As a result the juvenile justice mechanism needs to be strengthened and the police and judiciary need to be trained and sensitized.</p> <p>A cadre of counselors needs to be built in the years to come to prevent children from running away from homes or taking to drugs etc. and also to help children post-victimisation. Dearth of counselors and social workers has led to a catastrophe as there is nobody to reach out to children when they need emotional and psychological support. Since prevention is better than cure, role of counselors and social workers in preventing harm/risk as also in protecting those already harmed becomes crucial. Necessary institutions and courses may be initiated to develop such trained personnel and place them in every school, panchayat, childline centre, police station or any other point of contact for children in distress.</p>
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?? Programmes for capacity building and for advocacy and awareness building on child rights.						
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<p style="text-align: center;"><b>Childline Service</b></p> <p>Child line is a 24 hours free phone service, which can be accessed by a child in distress or an adult on his behalf by dialing the number 1098 on telephone. Child line provides emergency assistance to a child and subsequently based upon the child's need, the child is referred to an appropriate organization for long-term follow up and care. The basic objectives of the Childline Service are as follows:-</p> <p>?? To respond to children in emergency situations and refer them to relevant Governmental and Non-Governmental Organisations;</p> <p>?? To create a structure which ensures the protection of the rights of the child as ratified in the UN Convention on the Rights of the Child and The Juvenile Justice (Care and Protection of Children) Act, 2000;</p> <p>?? To provide a platform for networking amongst organizations and to strengthen the support systems which facilitate the rehabilitation for children in especially difficult circumstances;</p> <p>?? To sensitize agencies such as the public, hospitals, municipal corporations and the railways towards the problems faced by these children;</p> <p>?? To provide an opportunity to public to respond to the needs of children in difficult circumstances.</p>	<p>Childline is a project of the Ministry of Women and Child Development. Childline India Foundation (CIF) has been established as an umbrella organization for the implementation of the service through NGOS (Child Line Centres). CIF serves as a link between the Ministry and the NGOs in the field. It identifies, provides support services and monitors efficient service delivery of the child line centers at various locations. Secretary of the Ministry is the Chairperson of the Governing Board of the Foundation.</p>	<p>Child Line service focuses on the needs of children living alone on the streets, child labourers working in unorganized sector, domestic workers and sexually abused children.</p> <p>Child Line is operating in 74 cities/towns in India, offering a bouquet of comprehensive child protection services through it's.</p> <p>Since its inception in June 1996, a referral network of over 3000 civil society organisations, academic institutions, state governments, corporations, youth and children has been established to receive and refer calls for appropriate redressal.</p> <p>CHILDLINE has registered 96.30 lakh calls between June 1996 and March 2006.</p>	<p>Year</p> <p>2003-04 2004-05 2005-06</p>	<p>RE</p> <p>NA</p>	<p>AE</p> <p>NA</p>	<p>The service is being standardized to meet common norms and objects. It will be extended to rural areas also. An experiment in this regard has already been initiated in four states.</p> <p>Expansion of Child Line will require greater partnership with voluntary organizations and also with other platforms such as youth groups or community-based groups etc.</p> <p>At the same time, it implies higher investment of resources and capacity building of the allied systems to cooperate in reaching out to every child in distress.</p> <p>In some States such as Orissa, Child Line is facing resource crunch and the State has requested the centre for support. Childline service needs in the existing States will have to be identified and met.</p>
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<p><b>Central Adoption Resource Agency (CARA)</b>  Central Adoption Resource Agency (CARA) regulates and monitors the working of recognized social/child welfare agencies engaged in inter-country adoptions through State Governments and U.T. Administrations. CARA has formulated the Guidelines for Adoption as per Supreme Court ruling.</p>	<p>CARA grants recognition to Indian Placement Agencies on the recommendations of the State Government for processing inter-country adoption. It also accords enlistment to foreign agencies that are engaged in sponsoring applications of foreign prospective parents. These agencies are licensed by the appropriate Government Department in the country of origin to mediate in-country and inter-country adoptions and their applications are forwarded and recommended by the India's Diplomatic Mission. In order to ensure promotion of in-country adoption and placement of the children in their own socio-cultural milieu Voluntary Coordination Agencies (VCAs) have been set up, as envisaged by the Supreme Court of India, to promote Indian adoptions, to formulate, develop and execute programmes and activities for generating awareness in this regard. VCAs coordinate the work of all its member agencies (Placement Agencies) and adoption homes. Financial assistance is provided from the General Grant-in-aid Programme for Assistance in</p>	<p>74 Indian Placement Agencies spread over the length and breadth of the country have been recognised by CARA to carry out in-country and inter-country adoptions of children.</p> <p>158 Enlisted Foreign Agencies (including 44 Government bodies) in over 26 countries have also been recognised by CARA. These agencies sponsor prospective adoptive parents to recognised Indian Placement Agencies.</p> <p>There are 16 Voluntary Coordinating Agencies recognised by CARA in 14 States.</p> <p>As per records available with CARA, the following number of children have been placed in inter-country adoption (foreign as well as NRI) through recognised Placement Agencies:</p> <p>Year 2000 - 1364  Year 2001 - 1298  Year 2002 - 1066  Year 2003 - 1024</p>	<p>Year</p> <p>2003-04  2004-05  2005-06</p>	<p>RE</p> <p>1.20  1.30  1.30</p>	<p>AE</p> <p>1.03  1.15  NA</p>	<p>CARA has revised the guidelines for inter-country adoption following India's ratification of the Hague Convention for the Protection of Children and Cooperation for Inter-country adoption in 2003.</p> <p>While there is a clear need to promote adoption, it is also important to streamline the procedure and ensure checks and balances to counter trafficking of children in the name of adoption. Some concerns that must be addressed in the XIth Plan include:</p> <ol style="list-style-type: none"> <li>Although there are a large no of children in institutions who may need a family the system of identifying and placing is poor and inadequate.</li> <li>The organized and monitored Adoption programme is there only in 14 States. Adoptable children in other states either languish in children's homes/may be trafficked to neighboring states/or given in informal/illegal Adoption.</li> <li>In spite of the safeguards malpractices even in the licensed /recognised institutions are reported from time to time.</li> <li>Lack of monitoring and immediate action by State Governments due to paucity of designated staff is one of the main concerns.</li> </ol>
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	the Field of Social Defence to the VCAs, which are involved in active promotion of In-country Adoptions and clearance of children for Inter-country Adoptions at the State level.	<p>Year 2004 - 1021 Year 2005 - 867</p> <p>(Data is pertaining to the period January to December 2005 and is awaited from 29 agencies)</p> <p>Number of children placed in In-country adoption is: Year 2000 - 1890 Year 2001 - 1960 Year 2002 - 2014 Year 2003 - 1949 Year 2004 - 1707 Year 2005 - 1204</p> <p>(Data is pertaining to the period January to December 2005 and is awaited from 29 agencies)</p>				
<p><b>Scheme of Assistance to Homes for Children (Shishu Greh) to Promote In-Country Adoption</b></p> <p>The main objective of the Scheme is to provide support for institutional care within the country for care and protection of infants and children up to 6 years of age who are either</p>	Grants-in-aid is given by the Ministry to NGOs and State Government run Children's Homes for setting up Homes for Infants (Shishu Greh) in order to promote their placement in in-country adoption.	No of Shishu Greh – 33 in 12 States.	<p>Year</p> <p>2003-04</p> <p>2004-05</p> <p>2005-06</p>	<p>RE</p> <p>2.70</p> <p>2.65</p> <p>2.00</p>	<p>AE</p> <p>2.289</p> <p>2.225</p> <p>NA</p>	<p>In 2004-05, 39 NGOs were running 44 units of Shishu Greh, and 3 State Governments (Karnataka, Mizoram and Uttar Pradesh) were running 9 units of Shishu Greh. However, now there are 33 shishu grehs in 12 states.</p> <p>The closing down of erring Shishu Greh's</p>

<p>abandoned or orphaned or rendered destitute and ensure their rehabilitation through in-country adoption.</p>	<p>Financial assistance is provided to non-governmental organizations (up to 90%) and to State run institutions (100%).</p> <p>Grant-in-aid is provided upto Rs. 6 lakhs per year to each Shishu Greh, which covers costs for maintaining the children such as Staff, Medicines and other necessities.</p>					<p>responsible for infant sale is a commendable step. However, since the idea is to place children in a family environment rather than in institutions, new shishu greh's need to be established along with a strict mechanism to license these institutions and monitor them regularly.</p> <p>Infrastructure and resources are therefore required not only for having more shishu greh's in place but also for regular their monitoring and evaluation.</p>
<p><b>Rajiv Gandhi National Crèche Scheme for the Children of Working Mothers</b></p> <p>The Ministry of Women and Child Development launched Rajiv Gandhi National Crèche Scheme for the 0-6 year old children of working mothers with effect from 1st January 2006, in order to provide better and improved Crèche/Day Care facilities. The scheme was prepared by merging two old schemes viz. the National Crèche Fund and the Scheme of Assistance to Voluntary Organizations for Crèche for Working and Ailing Women's Children. The main objectives of the new scheme of crèches is to promote a healthy all round development of children of the working/ailing mothers particularly those employed in the unorganized sector and belonging to the BPL category. Guidelines with</p>	<p>Assistance is provided to NGOs for running the crèches under this scheme. At present these are - the Central Social Welfare Board, Indian Council for Child Welfare and Bhartiya Adim Jati Sevak Sangh, and grants are provided to them in the ratio of 80:11:9.</p> <p>A user charge of Rs. 20/- per child per month is collected from BPL families using the crèche and Rs. 60/- per child per month from other families.</p> <p>As regards, training, it is organized through the agencies identified in consultation with the</p>	<p>The scheme covers children aged 0-6 years. Those eligible availing services under this scheme are families with monthly income of Rs. 12,000/-. Prior to this scheme, only families with an income of Rs. 1800/- per month were eligible to receive the benefits.</p> <p>Each crèche is meant to cater to 25 babies for eight hours. The guidelines for running crèches under this scheme clearly lay down that 50% of children in a crèche must be from BPL</p>	<p>Year</p> <p>2003-04</p> <p>2004-05</p> <p>2005-06</p>	<p>RE</p> <p>21.40</p> <p>29.22</p> <p>41.40</p>	<p>AE</p> <p>19.532</p> <p>20.293</p> <p>NA</p>	<p>The number of creches under the 'Rajiv Gandhi National Creche Scheme for Children of Working Mothers' is 18,678. This is totally inadequate when compared to the huge numbers of working mothers and their children. The requirement of crèches to cater to the childcare needs of the 22 crore women in the informal sector alone is 800,000<sup>78</sup>.</p> <p>More implementing agencies need to be involved in the implementation of the scheme. State Governments/UT Administrations, local Community Based Organisations and Self Help Groups, other large national NGOs, trade unions or workers boards such as Building Workers Association must all be involved as organisations.</p> <p>The Parliamentary Standing Committee of the Ministry of HRD, in its 175th report, Committee had asked for an appraisal</p>

<sup>78</sup> CLAP. Exploring Rights of the Child in Early Childhood. A Report of the Interface for Perspective Building on Legal Aspects of Early Childhood Care and Development.



<p>regard to Physical Environment, Food and Essentials etc., have been formulated for the implementing agencies to follow.</p> <p>Training of crèche workers on childcare and early childhood education, health-first aid, CPR, emergency, hygiene and nutrition, is an essential component of the scheme.</p>	<p>concerned State Government.</p>	<p>families.</p> <p>Organisation wise detail of No. of Creches sanctioned as on 11.07.06: CSWB (14, 565 Creches); ICCW (2,383 Creches); BAJSS (1,749 Creches) Total - 18, 697 Creches.</p> <p>The financial norms was revised from Rs. 18,480/- to Rs.42,384/- per crèche per annum and it was decided to set up 14,719 new crèches by the end of 10th Five Year Plan.</p>				<p>about the rationale of selecting only three agencies for operationalising the Crèche Scheme. The Committee had further recommended that more and more reputed and established NGOs may be selected for implementing the Creche Scheme.</p> <p>Up-gradation of infrastructure and materials, including cooking/eating utensils, cot, mattresses, pillows, cradles, fan, toys and learning materials requires more investment in the XIth Plan.</p> <p>Regular training of crèche workers (the scheme proposes refresher courses every two years), cost of training institutions and trained personnel to train, are also areas to be strengthened through adequate investment of financial resources as well by establishing linkages with available training institutions.</p> <p>Lateral linkages with the local PHC or sub-PHC in the area and tie up with the Anganwadi centres for inputs like immunization, polio-drops, basic health monitoring needs to be strengthened in the XIth Plan. Without this the scheme cannot achieve its objectives and there will be very little improvement in the life of a child.</p>
<p><b>Swadhar Scheme</b> This scheme was launched by the Ministry during the year 2001-02 for the benefit of women/girls in difficult circumstances, to provide -- primary need of shelter, food, clothing and care to the marginalized women/girls living in difficult circumstances who are without any social and economic</p>	<p>The implementing agencies can be the Social Welfare/Women &amp; Child Welfare Ministry of State Governments, Women's Development Corporations, Urban Local Bodies and reputed Public/Private Trust or Voluntary Organizations.</p>	<p>At present, a total of 129 Shelter Homes and 124 Helplines are functional.</p> <p><i>Target group/beneficiaries include:</i></p>	<p>Year</p> <p>2003-04</p> <p>2004-05</p> <p>2005-06</p>	<p>RE</p> <p>0.80</p> <p>3.69</p> <p>5.50</p>	<p>AE</p> <p>1.115</p> <p>4.213</p> <p>NA</p>	<p>While women form the main target group of this scheme, it does address the needs of the girl child who is victim of trafficking and sexual abuse. It is therefore important to see this as a scheme for the protection of the girl child also.</p> <p>Although there were some delays in the implementation of the scheme in its initial</p>

<p>support; emotional support and counseling to such women; rehabilitate them socially and economically through education, awareness, skill up gradation and personality development through behavioral training etc; to arrange for specific clinical, legal and other support for women/girls in need of those intervention by linking and networking with other organizations in both Government and non-Government sectors on case to case basis; to provide Help line (24 hour telephone facility) or other facilities to such women in distress; and provide such other services as will be required for support and rehabilitation to such women in distress.</p>		<p>Widows deserted by their families and relatives and left uncared at places where they are victims of exploitation;  Women prisoners released from jail and without family support;  Women survivors of natural disaster, who have been rendered homeless and are without any social and economic support;  Trafficked women/girls rescued or runaway from brothels or other places or women/girl victims of sexual crimes, who are disowned by family or who do not want to go back to respective family for various reasons;  Women victims of terrorist/extremist violence who are without any family support and without any economic means of survival;  Mentally challenged women (except for the psychotic categories) who are without any support of family or relatives;  Women with</p>			<p>phase, in 2005-06, the outreach of the scheme has expanded.</p> <p>While expansion of Swadhar must continue in the XIth Plan period, investment also needs to be made on making more helplines functional and at the same time making such services widely known to all in the country.</p>
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		HIV/AIDS deserted by their family or women who have lost their husband due to HIV/AIDS and are without social/economic support; or Similarly placed women in difficult circumstances				
<p><b>Assistance to Voluntary Organisations for setting of Short-stay Homes</b></p> <p>The scheme seeks to protect and rehabilitate women and girls who are facing social and moral danger due to family problems, mental strains, social ostracism, exploitation or other causes. The scheme provides services like medical care, psychiatric treatment, case work services, occupational therapy, education, vocational and recreational activities and social facilities of adjustment, The Ministry of Women and Child Development has also anchored help line services for women in distress in some Short- Stay Homes.</p>			<p>Year</p> <p>2003-04</p> <p>2004-05</p> <p>2005-06</p>	<p>RE</p> <p>15.35</p> <p>14.40</p> <p>15.00</p>	<p>AE</p> <p>15.689</p> <p>15.26</p> <p>NA</p>	
<p><b>Scheme for rescue of victims of trafficking</b></p> <p>This scheme is to address trafficking in women and children for commercial sexual exploitation through small pilot projects. The aim is to test the efficacy of certain approaches and methods to combat trafficking and sexual abuse of women and children. Three pilot</p>	<p>The scheme is being implemented through identified NGOs. However, the critical mechanism for implementation of the scheme includes:</p> <p>Networking with police, judiciary, local NGOs and</p>	<p>For widest possible reach in the community in source areas, all types of target groups are aimed to be reached, including students in schools and colleges, teachers, youth clubs, women's</p>	<p>The scheme was started in 2005-06. Hence only RE figure for that year is available, which is 0.25 Crore</p>			<p>All projects under the scheme are one-year pilot projects. The outcome of the projects will be visible in some time. The lessons learnt could then be replicated and upscaled for wider outreach in the Eleventh Plan period. Investment will be required accordingly.</p>

<p>projects have been initiated under this scheme, two in source areas (one rural area, where it is a traditional practice, and one urban area) and one in destination area.</p> <p>Features of the projects in the source area include:</p> <p>?? <i>Community empowerment</i> - awareness generation and social alertness, poverty alleviation schemes, micro-credit schemes through women's groups and self-help groups, and involvement of Panchayati institutions</p> <p>?? <i>Girl child empowerment</i> – persuading parents to send their girls to school, non-formal education for those whose age or any other factor bars them from joining mainstream schools directly, motivating teachers to work towards retaining students and lowering the drop-out rate; and, vocational training of three kinds i.e. modernized version of any traditional skill or art in the area for the girl child, skills for setting up a small scale industry, and skills in the sectors with high employment generation potential</p> <p>?? <i>Actual intervention</i> in the cases of high risk groups with the help of police, local NGOs and women's groups to get information about traffickers and the trafficking chain</p> <p>?? <i>Rehabilitation and reintegration</i> of rescued victims, including</p>	<p>women's groups, self-help groups</p> <p>Discussions, peer education, rally, signature campaign, posters, booklets, wall paper, handbills, street theatre, puppetry, radio, local newspapers etc. to be used for interacting with various stakeholders</p> <p>Establishment of required infrastructure and provision of NFE centres, temporary shelters, trauma counseling, health care and vocational training and additional entrepreneurial support for the rehabilitation of victims, through the NGO responsible for the projects</p>	<p>groups, community based organizations, social leaders, elected representatives, successful and famous individuals from the community etc.</p> <p>In the destination areas, the target groups are victims and traffickers.</p>		
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<p>psychological and economic rehabilitation and temporary shelter.</p> <p>Features of the project in destination areas (a red light in a city/town) –</p> <p>?? <i>Networking</i> with police, judiciary, local NGOs and women’s organizations for information and successful rescue, including regular meetings of a coordinating body, sensitization workshops and financial rewards for informers</p> <p>?? <i>Rescue</i></p> <p>?? <i>Temporary shelter</i> in the interim period before repatriation, which provides boarding and lodging and also health care and information related to HIV/AIDS</p> <p>?? <i>Repatriation</i></p> <p>?? <i>Successful prosecution of offenders</i> through sensitisation of judiciary and local police, dissemination of legal awareness, enlisting help of sensitive lawyers, and witness assistance</p>				
<p><b>Relief and rehabilitation of rape victims</b></p> <p>This scheme was formulated by the National Commission for Women in pursuance of the Supreme Court judgement dated 19.10.94 directing the Government to mitigate the sufferings of rape victims and pay them some compensation. The scheme accordingly provides for the</p>		<p>Rape victims</p>	<p>This is very recent scheme of 2006-07. Therefore only budget estimate is available for 2006-07, which is 1.00 Crore</p>	<p>The scheme is yet to take off. Implementation of the scheme through establishment of relevant mechanisms specified under it requires large-scale investment and commitment of resources.</p> <p>The target group of the scheme is only women or girls who are victims of rape. Boys too fall prey to sexual abuse, including rape and need such measures for</p>

<p>constitution of:          ?? Criminal Injuries Relief and Rehabilitation Board in every district to award compensation to rape victims; and,          ?? District Monitoring Committees to provide shelter, protection, legal and medical aid and other rehabilitative measures for the victims.</p>				<p>their protection and rehabilitation.</p>												
<p><b>National Child Labour Project (NCLP) Scheme</b>          The NCLP scheme is a Central sector scheme. The project aims at withdrawing and rehabilitating children working in identified hazardous occupations and processes through special schools and finally mainstreaming them to the formal education system. Education, vocational training, health check-ups, nutrition and monthly stipends for children are essential components of the scheme.</p>	<p>National Child Labour Project (NCLP) Scheme</p> <p>Under the scheme project societies are set up at the district level under the Chairpersonship of the Collector/District Magistrate for overseeing the implementation of the project.</p> <p>The scheme engages following mechanisms:</p> <p>?? Civil society and NGOs at the district level for running the special schools</p> <p>?? Two educational instructors and one vocational instructor for every special school</p> <p>?? one medical doctor for every 20 schools to take care of the primary health needs of the children</p> <p>?? mid-day meal scheme of the Ministry of Human Resource Development for</p>	<p>National Child Labour Project (NCLP) Scheme</p> <p>Each special school provides for enrolment of 50 children.</p> <p>Till November 2005, 250 projects, 6232 special schools have been sanctioned with an overall coverage of 3,15,911 children. From the inception of the scheme, 3.38 lakh children have been mainstreamed.</p>	<p>Total Allocation for all Child Labour Schemes Together</p> <table border="1"> <thead> <tr> <th>Year</th> <th>RE</th> <th>AE</th> </tr> </thead> <tbody> <tr> <td>2003-04</td> <td>67.95</td> <td>67.336</td> </tr> <tr> <td>2004-05</td> <td>98.12</td> <td>93.14</td> </tr> <tr> <td>2005-06</td> <td>115.45</td> <td>127.05</td> </tr> </tbody> </table>	Year	RE	AE	2003-04	67.95	67.336	2004-05	98.12	93.14	2005-06	115.45	127.05	<p>Government of India's expenditure for mainstreaming one child labour in regular school education is Rs. 3569. According to the Census of India - 2001, the total number of working children in India is 1,25,91,667. This implies that for mainstreaming all 1,25,91,667 child labourers in education, which is the commitment of government under the Article 21A of Indian Constitution, India will need Rs. 4493.966 Crore per year at the rate of Rs. 3569 per child per year. In the Revised Estimates of 2005-06 there was a huge gap of Rs. 4378.516 Crore between the need and allocation for elimination of child labour.</p> <p>In the Xth Plan period, 250 Districts in 20 states were covered under NCLP. The need for NCLP in these 250 districts continues even in the XIth Plan period. At the same, additional districts will have to be reached in the next plan period. The Ministry of Labour along with the Planning Commission will have to accordingly plan a higher outlay in the XIth Plan.</p> <p>While it is important to ensure that the Child Labour legislation is amended in the XIth Plan period to bring domestic child workers within its protection, it is also</p>
Year	RE	AE														
2003-04	67.95	67.336														
2004-05	98.12	93.14														
2005-06	115.45	127.05														

<p>Assistance to Voluntary Organisations and NGOs</p> <p>Under the Grants-in-aid Scheme Voluntary Organisations/NGOs are financially assisted to the extent of 75% of the project cost, for taking up action-oriented projects for rehabilitation of working children.</p> <p>International Programme on the Elimination of Child Labour (IPEC)</p> <p>The International Programme on the Elimination of Child Labour is a global programme launched by the International Labour Organisation in December 1991. India was the first country to join it in 1992 when it signed a Memorandum of Understanding (MOU) with ILO. The MOU that expired on 31.12.1996 has</p>	<p>nutrition ?? banking system for creation of a bank account of every child released and rehabilitated through the NCLP, in which the monthly stipend of Rs.100 received by every child is deposited</p> <p>Assistance to Voluntary Organisations and NGOs</p> <p>The projects are implemented by the Voluntary Organisations/NGOs. Monitoring is done through periodic reports from the assisted NGOs and field visits by the officials of Central and State Governments.</p> <p>International Programme on the Elimination of Child Labour (IPEC)</p> <p>At the international level, IPEC has a Programme Steering committee consisting of representatives of the ILO, the donors and participating countries. At the national level in India, there is a National Steering</p>	<p>Assistance to Voluntary Organisations and NGOs</p> <p>88 NGOs were assisted financially during 2005-06.</p> <p>International Programme on the Elimination of Child Labour (IPEC)</p> <p>IPEC - India supported over 165 Action Programmes in the period spanning 1992-2002</p>	<p>necessary that the XIth Plan envisages a higher outlay to be able to successfully rehabilitate the vast numbers of child domestic workers who will be released subsequent to the change in the law and in the years to come.</p> <p>Implementation of NCLP cannot be limited to running of special schools and provision of health care and nutrition while children. An additional mechanism of tracking children and ensuring that they do not get re-trafficked into labour has to be part of the ongoing child labour elimination projects. Under the GOI-UNICEF Master Plan, development of a National Tracking system to monitor children in NCLP is one of the main activities. This system must have a wider mandate to check re-trafficking besides ensuring that children enter mainstream education after completing NCLP schools.</p> <p>In addition, it is necessary to invest adequately in setting up Child Welfare Committees under the Juvenile Justice system all over the country in every district and staff these Committees with adequate number of Child Welfare Officers who should be responsible for follow-up of children repatriated/sent back home. In this way all child labour, those who end up in NCLP schools and those who do not, can be traced and tracked.</p> <p>While convergence of schemes has been at the core of programmes for elimination of child labour, there are many Ministries/Departments that have to play their role. An external evaluation on 'the reality of convergence' is important at this</p>
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<p>thereafter been extended from time to time and has recently been extended till September 2006. The long-term objective of IPEC is to contribute to the effective abolition of child labour. Its immediate objectives are: (1) Enhancement of the capability of ILO constituents and NGOs to design, implement and evaluate programmes for child labour; To identify interventions at community and national levels which could serve as models for replication; and Creation of awareness and social mobilization for securing elimination of child labour.</p> <p>INDUS Project</p> <p>The Government of India and the US Department of Labour have initiated a US\$ 40 million project aimed at eliminating child labour in 10 hazardous sectors across 21 districts in five States namely, Maharashtra, Madhya Pradesh, Tamil Nadu, Uttar Pradesh and NCT of Delhi.</p>	<p>there is a National Steering Committee of which the Secretary, Ministry of Labour and Employment is the Chairman. This is tripartite in composition with representation from NGOs as well.</p> <p>INDUS Project</p> <p>This project, popularly known as INDUS, is being implemented by ILO.</p>	<p>INDUS Project</p> <p>An estimated 80,000 children will be withdrawn and rehabilitated through this project. Support activities will also be directed to 10,000 families of former child workers.</p>		<p>stage in order to plan better strategies in this regard. The role of Ministry of Information and Broadcasting has to be included in the strategy for prevention of child labour.</p>
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### ***Strengthening the institutional framework and mechanism for child protection***

Striving for a protective environment for all children demands a commitment from the XIth Five Year Plan on strengthening the institutional framework and mechanism for child protection. The Ministry of Women and Child Development is now a full-fledged Ministry and also the nodal Ministry for all issues concerning women and children. Since children constitute 42 percent of the country's population and deserve special attention, the Ministry must have a separate and distinct Department to deal with Child Rights. This will be significant step towards ensuring focused attention to children's survival, development, protection and participation.

Another step towards strengthening the institutional framework would be to bring all existing schemes for elimination of child labour under the Ministry of Women and Child Development rather than leaving them with the Labour Ministry. All child labourers are recognized as children in need of care and protection under the juvenile justice legislation, which is implemented through the Ministry of Women and Child Development. To avoid any confusion in terms of administrative jurisdiction, which can be a hurdle in proper implementation of a scheme, can thus be avoided.

Since the Ministry of Women and Child Development is responsible for most child protection schemes, it would be more meaningful to integrate the multiple vertical child protection schemes of the Ministry under one composite programme. This programme could aim at achieving the goal of providing a safe and protective environment for all children through proactive measures in the area of prevention and protection such as strengthening knowledge-base through research and documentation, establishing a tracking system, mapping families at risk, mass awareness generation and capacity building of service providers, building lateral linkages with other sectors for addressing the vulnerabilities of families such as poverty, poor health care, unfair labour practices, impact of urban development, impact of disasters and other emergencies, lack of day care facilities for children of working mothers etc. A decentralized approach to such a programme is essential to ensure better functioning and implementation of the programme.

Meeting the infrastructural requirements of any institutional framework and mechanism is a critical input towards strengthening it. Inadequacy of the existing infrastructure for child protection clearly calls for substantive measures. Meeting some of the legal obligations under existing child protection laws in the country itself demands a major investment in infrastructure. This includes, for instance, setting up JJBs, CWCs, SJPU, children's homes, observation homes, special homes and places of safety under the Juvenile Justice (care and protection of Children) Act, 2000. Some of the other areas seeking infrastructural inputs include - establishing resource centres for data-base development and management, expanding Child Line service to rural areas and supporting Child Line in the States, establishing crisis management centres and child protection units in all districts, quality care and support for children, building a cadre of trained professionals to deal with children in distress and for capacity development of all service providers, setting up more special schools for children released from labour.

The efficacy of the institutional framework and mechanism for child protection also depends on adequate investment of human resources and their capacity development, establishment and implementation of standards of care and protection at all levels of implementation, strong financial backup, and regular assessment, monitoring and reporting. The XIth Five Year Plan must therefore pay special attention to these areas of investment.

## Recommendations and Financial Allocations on Child Protection for the Eleventh Plan

Child Protection will be developed and strengthened as an essential component of the country's strategy of placing *Development of the child at the centre of the 11<sup>th</sup> Plan*'. Violations of the child's right to protection, in addition to being human rights violations, are massive, under-recognized and under-reported barriers or *obstacles to child survival and development*. Failure to protect children has serious consequences for the physical, mental, emotional, social development of the child including loss in productivity and loss in human capital for the nation.

The NPAC 2005 has articulated clearly the rights perspective and agenda for the development of children, and provides a robust framework within which to promote the development and protection of children. In order to achieve the Millennium Development Goals also, a comprehensive approach to child protection is required.

The main endeavour of the Ministry of Women and Child, therefore, will be to carve out a broad and comprehensive framework for child protection in the Eleventh Plan and set the foundation for creating and strengthening a robust protective environment for children. Child protection concept incorporates both prevention and service interventions to deal with protection failures and lesson their impact on children. This will be carried out with strong advocacy and a detailed implementation strategy for enhancing the infrastructure for protection services, increasing the access and range of service and preventive interventions, strengthening the knowledge base for child protection and to increase the investment for protection of children.

The specific recommendations for implementation during the Eleventh Plan are:

### 7.1 A New Centrally Sponsored Integrated Scheme for Child Protection

In the light of its expanded mandate, the Ministry of Women and Child Development views 'Child Protection' as an essential component of the country's strategy to place *Development of the child at the centre of the Eleventh Plan*', as envisaged in the Approach Paper to the Eleventh Plan.

The Integrated Child Protection Scheme (ICPS) is, therefore proposed by the Ministry of Women and Child Development as a centrally sponsored scheme to address the issue of child protection and build a protective environment for children through Government-Civil Society Partnership.

#### Why ICPS?

- ?? Child protection is integrally linked to every other right of the child. Failure to ensure children's right to protection adversely affects all other rights of the child.
- ?? Child protection is also closely linked to the achievement of the Millennium Development Goals (MDGs) and policy makers have failed to see this connection or chosen to overlook it.
- ?? Most existing mechanisms on child protection cater to post-harm situations. Preventive measures to reduce vulnerability of children and their families and to prevent children from

falling out of the protective net are completely lacking in both the approach to child protection as well as programmatic intervention.

- ?? There are multiple vertical schemes for child protection scattered under different Ministries/Departments, for example, the Labour Ministry is responsible for child labour elimination programmes, Ministry of Women and Child Development takes care of juvenile justice, child trafficking and adoption related matters, Ministry of Health and Family Welfare looks into the implementation of PC&PNDT Act to check female foeticide.
- ?? There are glaring gaps in the infrastructure, set up and outreach services for children as they exist now. These include:
  - ✍ Poor planning and coordination – prevention has never been part of planning for child protection. Lack of lateral linkages with other sectors for ensuring prevention of violence, abuse or any other harm to children and protection of those outside the safety net has failed to ensure social justice.
  - ✍ Low coverage - numbers of children outside the safety net with no support and services is ever increasing and lack of systematic and comprehensive mapping of children in need of care and protection or of the services available for them at the district/city/state level results in low and poor coverage.
  - ✍ Poor Infrastructure - the minimal government structure that exists is rigid and a lot of time and energy goes in maintaining the structure itself rather than concentrating on programmatic outcomes. Moreover even the infrastructure prescribed by law is not in place, for example, JJBs and CWCs under the Juvenile Justice Act are lacking, shelter and institutional care facilities are also highly inadequate.
  - ✍ Inadequate Resources – child protection constitutes only 0.034 percent of the total Union Budget. Not only is allocation of resources poor in terms of geographical spread, even the utilization of resources is uneven.
  - ✍ Serious Service Gaps – there is a lack of services to deal with all categories of children in need of care and protection and supervision, monitoring and evaluation of programmes and services is weak. Child protection is not a priority in the States either.
  - ✍ Poor understanding of child rights and lack of child friendly approach affect both planning and service delivery.

## **About ICPS –**

### **The Approach to child protection:**

- ?? A comprehensive rights-based approach
- ?? The cardinal principles of ‘protection of child rights’ and ‘best interests of the child’ form the fundamental basis for the scheme
- ?? Both prevention and protection are central to the approach
- ?? Mobilizing inter-sectoral response for reducing vulnerabilities and strengthening child protection and setting standards for care and services are important elements
- ?? Government-Civil Society Partnership
- ?? Implementation through a decentralized structure

### The Proposed Scheme aims at:

- ?? Expansion and improved Reporting and Redressal Mechanism
- ?? Improved institutional care
- ?? Quality Non-institutional and Alternative Care
- ?? Counselling and Family Support
- ?? Training and Capacity Building
- ?? Strengthening the Knowledge-base
- ?? Child Tracking System including web-enabled child protection data management software and website for missing children

ICPS brings together multiple vertical schemes under one comprehensive child protection programme, combining existing child protection schemes of the Ministry and integrating interventions for protecting children and preventing harm.

### 13 Principles of ICPS

1. Child protection a shared responsibility
2. Reduce child vulnerability
3. Strengthen families
4. Promote non-institutional care
5. Build inter-sectoral linkages and responsibilities
6. Create a network of services at community level
7. Establish standards for care and protection
8. Build capacities of all stakeholders
9. Provide professional child protection services at all levels
10. Strengthen crisis management system at all levels
11. Reintegrate with family and community
12. Address protection of children in urban areas
13. Carry out child social audit

**Implementation of ICPS** – The scheme will be implemented through the State Governments or UT Administrations with bulk financial assistance from the Central Government. The State Government/ UT Administration shall in turn provide grant-in-aid to voluntary organizations under the different components of the Scheme.

The break up of the proposed financial outlay is as under:

Sl. No.	Component	Proposed Budget (In Rs. Crores)
1.	District level Costing	1000.00
2.	State level Costing	700.00
3.	Regional level Costing	200.00
3.	Central level Costing	100.00
	<b>Total</b>	<b>2000.00</b>

The draft scheme is set out in **Annexure-III**.

## 7.2 Expansion of the Creche and Day Care Programme

### 7.2.1 Rajiv Gandhi National Creche Scheme for children of Working Mothers

The number of creches under the 'Rajiv Gandhi National Creche Scheme for Children of Working Mothers' is 18,697. This is totally inadequate when compared to the huge numbers of working mothers and their children. The requirement of crèches to cater to the childcare needs of

the 22 crore women in the informal sector alone is 800,000<sup>79</sup>. The target set under the Tenth Plan was expansion of Creches to 30,000. The Ministry proposes a further expansion of Creches in Eleventh Plan to 1,00,000. The Ministry also recognizes that more implementing agencies need to be involved in the implementation of the scheme, as is also recommended by the Parliamentary Standing Committee of the Ministry of HRD, in its 175th report.

Up-gradation of the range and standards of care provided, of early learning, early development opportunities, social skills, infrastructure and materials, including cooking/eating utensils, cots, mattresses, pillows, cradles, fans, toys and learning materials require definition and more investment in the Eleventh Plan.

Regular training of crèche workers (the scheme proposes refresher courses every two years), cost of training institutions and trained personnel to train, are also areas to be strengthened through adequate investment of financial resources as well by establishing linkages with available training institutions.

Lateral linkages with the local PHC or sub-PHC in the area and tie up with the Anganwadi centres for inputs like immunization, polio-drops, basic health monitoring will be strengthened in the Eleventh Plan. Linkages with pre-school education facilities and ICDS will be strengthened. The revised Scheme is set out at **Annexure-IV**.

### **Financial allocation:**

#### **A. Budget Estimate of 70000 creches proposed to be set up during 11th Five Year Plan**

Year	No. of crèches during 10 <sup>th</sup> Plan	Recurring	No. New Creches	Non-recurring	Recurring	Total
2007 -08	30,000	12715.20	14000	1400.00	5933.76	20048.96
2008-09	30,000	12715.20	14000	1400.00	11867.52	25982.72
2009-10	30,000	12715.20	14000	1400.00	17801.28	31916.48
2010-11	30,000	12715.20	14000	1400.00	23735.04	37850.24
2011-12	30,000	12715.20	14000	1400.00	29668.80	43784.00
<b>Total</b>		<b>63576.00</b>	<b>70000</b>	<b>7000.00</b>	<b>89006.40</b>	<b>159582.40</b>

Non-recurring Rs. 7000.00 lakhs

Recurring Rs. 152582.40 lakhs

**Total Rs. 159582.40 lakhs**

Requirement of funds during the 11th Plan for monitoring & training of creche workers under Rajiv Gandhi National Creche Scheme:

<sup>79</sup> CLAP. Exploring Rights of the Child in Early Childhood. A Report of the Interface for Perspective Building on Legal Aspects of Early Childhood Care and Development.

**B. Creche Workers Training:****(Rs. In lakhs)**

Year	No. of Creche workers to be trained	Cost of Training @ Rs.61,900 per creche training programme for 30 workers
2007 -08	28000	577.53
2008-09	28000	577.53
2009-10	28000	577.53
2010-11	28000	577.53
2011-12	28000	577.53
<b>Total</b>	<b>140000</b>	<b>2887.65</b>

**C. Estimated cost of Monitoring of creches during 11th Plan:****(Rs. In lakhs)**

Year	No. of Creches proposed to be monitored	Cost of Monitoring @ Rs.700/- per crèche
2007 -08	15000	105.00
2008-09	22000	154.000
2009-10	29000	203.00
2010-11	36000	252.00
2011-12	43000	310.00
<b>Total</b>		<b>1024.00</b>

**Total (A+B+C)= 163494.05****7.2.2 Proposed Legislation on Crèches and Day Care in all Establishments and After-School Care Services in Educational Institutions for Young Children**

The virtual absence of a Day Care programme and facilities catering to the needs of children of all working parents irrespective of their social and economic background needs to be recognized

**Aims and Objectives of the proposed legislation:**

- ~~///~~ To ensure care of the child under six and support to working women
- ~~///~~ To establish mechanisms to reach the under-sixes by provision of care arrangements for young children in crèches/day care programmes
- ~~///~~ To provide after school care and services in educational institutions for children of working mothers

as a critical gap in protecting all children. In view of this and many other challenges before the Government of India in ensuring care and protection for all children, the Ministry of Women and Child Development proposes to introduce a legislation called the 'Crèches and Day Care in all Establishments and After School Care Services in Educational

Institutions for Young Children'.

The legislation proposes to cover all children up to 18 years of age, including the disabled child. It clearly talks of facilities for children of all working women, whether employed directly by an agency or indirectly through contractors and sub-contractors. Every establishment with 20 or more women workers and men workers (where men are the care giving parent) are required to set up and maintain a crèche for children under six years old. Even contractors employing such number of care giving parents are required to do so. For establishments with less than 10 women workers, the proposed legislation suggests setting up of a common crèche by two or more such establishments, with financial contribution from each of them. Recreational facilities, educational facilities and teaching aids, nutrition, health care and age appropriate activities are some of the provisions to be met by all crèches/day care centres along with adequate space, ventilation, sanitary conditions and a trained woman supervisor for the care of children and infants.

After-school care is to be provided by all schools within the school premises for children whose mothers are working women. One supervisor and one assistant for every 20 children and age-appropriate activities are some of the features of after-school care clearly spelt out in the proposed legislation.

A user charge is also proposed to be introduced in the legislation, depending on the income of the parent. Finally, the proposed legislation spells out a mechanism for monitoring and supervision of crèches, day care centres, after-school care. It also lays down penalty for employers or contractors for any contravention of the provisions of this law.

MWCD will work for early discussion and passage of the proposed legislation.

### **7.3 Review and Reorganisation of the Adoption System in India**

Adoption is the best form of rehabilitation for an orphaned, abandoned, destitute child who is in need of a nurturing family. Further, domestic or in-country adoption should be the first priority since a child adjusts within his/her socio-cultural environment. After exhausting all the options for in-country adoption, inter-country adoption can be exercised as the next alternative. At the same time, long-term institutional care can at best be the last option when non-institutional care alternatives are not possible.

The total number of in-country adoptions is meager (i.e. 3151 in a year) in comparison to innumerable number of destitute and orphaned children in the country. There is a need to widen the adoption programme to all States and UTs, arrest illegal adoptions and address the gaps in the existing system, such as no centralized database on all such children; myths and misconceptions relating to adoption; lack of transparency, adoption programme being confined to some selected pockets/ cities in the country; lack of availability of professional services (adoption counseling and preparation of home study report etc.); lack of comprehensive database on institutionalized children, specially in government institutions, who can be declared free for adoption; poor system of monitoring and inadequate child care standards etc.

Central Adoption Resource Agency (CARA) was set up under the direction of the Supreme Court of India and has been entrusted with promoting domestic adoption and regulating inter-

country adoption. It is also functioning as a central authority for the purpose of the Hague Convention on inter-country adoption, which has been ratified by India.

During the Eleventh Five Year Plan, there is a need for extending the adoption programme to the entire country and promote transparency at all levels. The provisions of the Juvenile Justice (Care and Protection of Children) Act 2000 have also been amended to strengthen the adoption programme in the country. Further, the proposed Integrated Child Protection Scheme (ICPS) provides for setting up of a State Adoption Cell as well as Adoption Coordinating Agencies (currently known as VCAs) in each State. Besides, it also provides for setting up of specialized adoption agencies in each district for facilitating the adoption of all orphaned, abandoned and surrendered children. Once state adoption cells become functional, domestic adoption will get a boost which will be enhanced through inter-state coordination.

The role of CARA also needs to be enlarged during the Eleventh Plan period for the purpose of training and capacity building, research and documentation, advocacy and awareness campaign and minimizing the gaps in service delivery. It is also proposed to increase the manpower for CARA at the headquarters as well as set up 2 regional offices during the second half of the Plan period. Through this system, CARA would ensure access of complete and correct information to all prospective adoptive parents for taking informed decisions with regard to adoption by maintaining a comprehensive national database on all adoptable children and prospective adoptive parents. This will also lead to bringing children into adoption umbrella and provide linkages between the district to the national level.

### **Projections for Eleventh Plan (CARA):**

Year	2007-8	2008-9	2009-10	2010-11	2011-12
Physical target	4000 adoptions from RIPA* and 1000 from other agencies**	4500 adoptions from RIPA and 2000 from other agencies	5000 adoptions from RIPA and 2500 from other agencies	5500 adoptions from RIPA and 3000 from other agencies	6000 adoptions from RIPA and 4000 from other agencies
Financial outlay	6.40 crore (includes plan and non-plan and construction of office building of Rs. 2 crore)	7.49 crore (includes plan and non-plan and construction of office building of Rs. 3 crore)	7.59 (includes plan and non-plan and construction of office building of Rs. 3 crore)	8.01 crore (includes plan and non-plan and construction of office building of Rs. 3 crore)	4.69 crore (includes plan and non-plan)

### **Total Financial outlay for 11th Five Year Plan projected: 34.18 crore.**

The above proposal includes increase of manpower for CARA at the headquarters. It is also proposed to have 2 regional offices during mid-term of the Plan period as Pilot Projects for 1 at Bangalore (Southern region) and another at Pune (Western region).

\*RIPA: Recognized Indian Placement agencies for in-country and inter-country adoption

\*\*Other Agencies: Sishu Grehs and Licensed Adoption Placement Agencies (LAPA)



## 7.4 Capacity Development

### 7.4.1 Training and Capacity Building of all Service Providers and allied systems:

Training and capacity building of all personnel involved in the child protection sector throughout the country including those working under the ICPS shall be taken up on priority basis. There is an acute shortage of professionally trained manpower to provide all kinds of services to children in difficult circumstances. There are a large number of personnel working in existing institutions, whether run by Government or by non-governmental organizations, who need to be provided with adequate skills and hands on experiences for dealing with children in an effective manner and providing them quality services. In order to meet these challenges, the Ministry of Women and Child Development proposes following strategies in the Eleventh Plan:

**Training & Capacity building of service providers:** In order to ensure effective service delivery to children in need, regular training and capacity building of all service providers (Government and Non-Government) at various intervals including at the time of induction and subsequently through refresher courses is a necessary requirement. These trainings should be made mandatory. Different packages based on category/level of staff and subject should be developed to carryout such trainings.

**Sensitization Programme for members of the allied systems:** The members of allied systems viz. police, judiciary, health care system, education system, transport, labour and telecommunication departments, media, corporate sector, elected representatives and members of community, etc. should also be reached through specialized training and sensitization programmes. These programmes should be focused on rights of the child, protection issues and services available as well as their roles and responsibilities towards children.

**Training of Trainers:** In order to ensure wider outreach of capacity building programmes, a cadre of master trainers on Child Protection issues should be developed at district, state and national levels. Skill up-gradation of these master trainers should be an integral component of any capacity development programme. This will help ensure uniformity in dissemination of information and knowledge as well as ensure continuity in capacity building of service providers at grassroots levels.

**Development of training modules and course curricula:** In order to carry out above mentioned training and capacity building courses, subject specific training modules and course curricula should be developed keeping in view the level and requirements of the personnel to be trained. The existing training modules and course curricula on child protection should be examined to see whether they cover the important aspects of child protection issues including child rights, counselling, juvenile justice, trafficking and other protection issues and on the basis of that, need based modules and curricula should be developed. In this process, help of professionals, experts and agencies (both national and international) working in the field of child protection should be taken. Facilitators' Manuals should be developed to enable trainers in effectively conducting training and capacity building programmes at local levels.

**Sharing of experiences and best practices:** Promoting sharing of experiences and best practices through district, state and national level workshops, exchange programmes and exposure visits

that provide a platform to the functionaries to interact and share their experiences and expertise with others is highly recommended. Sharing of best practices promotes healthy competition amongst the functionaries and units. During such workshops, awards and recognition to best performing unit and workers can be given as a token of appreciation and promoting healthy competition.

**Linkage with Universities and Educational Institutions:** The linkage with universities and educational institutions for formulating new courses on Child Protection issues and developing a cadre of professionally equipped manpower to deal with children is necessary.

**Mechanism for achieving this:** These shall be achieved through expansion of Regional Centres of NIPCCD and strengthening of the capacity of NIPCCD and the Regional Centres. There is a need for strong networking and coordination with NISD, NIMHANS, National Judicial Academies, Police Training Schools and Administrative Institutions/Academies, CHILDLINE and recognized schools/institutes of social work and law and other relevant experts for introducing child rights and child protection issues in their on-going training courses and also for providing necessary expertise in developing child protection training modules and packages as well as in carrying out capacity building programmes.

#### **7.4.2 Human resource development for strengthening Counselling services**

Abuse, neglect, maltreatment of children necessitate professional counseling and continued support to both child and family. Programme initiatives to offer children protection, healing care and rehabilitation are constrained by a serious lack of counselling institutions and services, and professionally trained and socially enlightened counsellors to enable children to recover from adverse experience or treatment, and to help build a caring and protective environment for them.

Many conditions and settings aggravate the need for counselling. Children in need include those who may not be in a 'visible' trauma or post-trauma situation stemming from an external disaster, but who are in socially, psychologically or emotionally 'at risk' situations, including in family or household settings, as also in settings where they come in contact with services of the State and other institutions.

Counselling skills and action are urgently required in a range of service delivery and service contact settings and infrastructures. There is need to invest in increasing training and educational capacity of institutions.

This places on the State the three-fold responsibility of (i) ensuring education and training at professional standard, (ii) development/establishment of a competent and accountable counselling infrastructure as an integral component of all relevant delivery systems affecting the child, and (iii) recruitment and placement of trained personnel.

The key responsibility and initiative will be to identify institutions, universities, Women's Development Departments through out the country who can undertake the training and initiate the creation of an accredited Course on Counselling which conforms to the standards for the protection services for children and families. Once this is done efforts to mobilize adequate number of courses to be run for developing the required cadre of counselors.

## Financial Allocation is accounted for under ICPS

### 7.5 Data systems and Research

The Ministry of Women and Child Development recognizes the need for establishing systematic, comprehensive and up to date database on vulnerable children and families, existing services for children and new and emerging child protection concerns. It also realizes the importance of developing a system of data collection and indicators consistent with the UNCRC for all children up to the age of 18 years, and disaggregated by gender, age, socio-economic characteristics and cultural identities (ethnic and religious minorities), and urban and rural settings and making this information publicly available.

Absence of child tracking systems to address missing children, child labour, children in institutions and alternate care systems and child victims of crimes and vulnerable children, undermines the information base needed for planning and implementation of policies and programmes at all levels. Strengthening the knowledge base is therefore a critical recommendation for the Eleventh Plan. The gap in knowledge base is proposed to be filled through the following measures:

- ?? Establishing a child tracking system under ICPS
- ?? Every panchayat to have a child register to record and monitor the birth, location and condition of every child in their radius
- ?? Expansion of NIPCCD resource centers
- ?? Equipping CWCs, JJBs and CHILDLINE for maintaining regular database
- ?? Commissioning research studies, situation assessments, etc. at micro and macro levels

#### Financial Allocation:

Sl. No.	Item	Proposed Budget					
		<i>(Rs. In Crores)</i>					
		Year 1	Year 2	Year 3	Year 4	Year 5	Total
1.	Commissioning research studies, situation assessments, etc. at micro and macro levels	5.00	5.00	5.00	5.00	5.00	25.00
	<b>Total</b>						<b>25.00</b>

### 7.6 Advocacy and Communication

The role of advocacy and communication in changing mind-sets at all levels is important for achieving child protection goals. There is a need to develop an effective communication strategy for this purpose. This will also require partnership with international organizations including UNICEF, UNDP, UNIFEM, UNAIDS, ILO, WHO, etc. and convergence with the Ministry of Information and Broadcasting. The Ministry of Women and Child Development should take help of the Ministry of Information and Broadcasting in getting support of Prasar Bahrati, Private televisions channels, All India Radio, Private Radio Broadcast (FM), cable operators, etc. for:

- ?? Broadcasting special child protection messages through audio-visual spots, talk shows, quiz competitions, news broadcasts, educational programmes, etc.
- ?? Regular dissemination of information regarding services available for children in distress
- ?? Building media understanding on child rights and ensuring sensitivity to child protection issues and respect for child's dignity and worth

### **Financial Allocation**

The Ministry of Women and Child Development should earmark 30% of its overall media budget for child protection advocacy and communication.

## **7.7 Strengthening the Institutional Framework and Mechanism**

Children constitute 42 percent of the country's population. Yet child protection has failed to get adequate attention. Often the problem lies with both planning and implementation, and this problem stems from the division of child protection issues between more than one Ministries. It is not just planning and implementation that becomes difficult when children get divided between various Ministries/Departments, monitoring and evaluation of efforts made to improve the status of children also gets affected. Therefore, unless the institutional framework for child protection is strengthened to deal with all categories of children and all issues of child protection under one nodal authority, any attempt at reaching the vulnerable child and measuring progress will fail in achieving its objectives.

Before the Ministry of Women and Child Development came into existence as a full-fledged Ministry in 2006, child protection was divided between the Ministry of Social Justice and Empowerment (which dealt with juvenile justice and adoption matters), Ministry of Labour (dealing with child labour issues), and Ministry of Women and Child Development (dealing with issues concerning trafficking of women and girls for commercial sexual exploitation). The year 2006 has seen a remarkable change in the institutional framework for child protection, with all relevant schemes of the Ministry of Social Justice and Empowerment being transferred to the Ministry of Women and Child Development.

The other important step would be to establish a separate and distinct Department for Child Affairs or Child Rights within the Ministry of Women and Child Development in order to ensure better and more focused attention to the child and monitor progress on a systematic and continued basis.

## **7.8 Coordination Mechanisms at all levels**

The Ministry of Women and Child Development has set up a National Coordination Group for monitoring implementation of Child Rights in the country. The members of this coordination group are the Joint Secretaries to the Ministries of Education, Health, Drinking Water Supply, Family Welfare, Social Justice & Empowerment, Labour, Youth Affairs & Sports, Information and Broadcasting, Planning Commission, some NGOs and statutory commissions such as the National Commission for Women and National Human Rights Commission of India. However, the meetings of this group have been very irregular and at long intervals of time. A group of this nature needs to be rejuvenated to become more active and take on the role of monitoring the

implementation of the rights of the child more seriously. The Ministry of Women and Child Development will take necessary steps to motivate and revitalize this important group. The National Coordination Group should meet once in every quarter under the Chairpersonship of the Secretary, Ministry of Women and Child Development, Government of India. Planning Commission to ensure that all the Ministries/Departments understand the importance of child protection and give priority to child protection concerns.

There is a need to set up coordination mechanism at State and District levels for ensuring effective implementation of the rights of the child. A State Child Rights Coordination Committee shall be set up under the Chief Secretary/Secretary (dealing with child protection services in the state). The District Magistrate/Collector shall head a District Child Rights Coordination Committee. These coordination committee should meet once in every quarter.

### **7.9 National Commissions for the Protection of Child Rights**

The Ministry of Women and Child Development will set up the National Commission at the earliest to implement the provisions of the Commissions for Protection of Child Rights Act, 2005. One of the major responsibilities of these commissions is to monitor and report on implementation of child rights in India. The Ministry of Women and Child will also follow up with State Governments to request that all the State Governments and UT Administrations constitute the State Commissions for the Protection of Child Rights at the earliest.

#### **Financial Allocation**

The Ministry of Women and Child Development will make necessary budgetary allocations for meeting the expenditure of the Commission and for implementation of its programmes and activities.

### **7.10 Child Budgeting**

Child Budgeting is an essential tool for monitoring Government's commitment to the child and the impact of investments being made. The Ministry of Women and Child Development has been analysing allocations and expenditures on children since 2002-03. This exercise in child budgeting will be institutionalized and carried out regularly to monitor the 'outlays to outcome' and examine the adequacy of investments in relation to the situation of children in India.

### **7.11 Child Impact/Social Audit**

Besides audit of programmes and schemes specifically addressing child protection, sectoral programmes of the government, particularly the social sector programmes whether directly linked to children or not, must carry out a child impact audit to assess the impact of the programme on children. This can only happen if child rights indicators become institutionalized and children's issues become a concern for all Ministries/Departments. Planning Commission needs to make a beginning in this regard.

As provided by the Juvenile Justice (Care and Protection of Children) Act 2000, annual social auditing of children's homes shall be carried out by the Central and State Government with the help of organizations working with children and autonomous bodies like National Institute of Public Cooperation and Child Development (NIPCCD), National Institute of Social Defence

(NISD), Indian Council of Child Welfare, Indian Council of Social Welfare, Childline India Foundation, Central and State Social Welfare Boards and Schools of Social Work.

## 7.12 Offences against Children Bill, 2006

In order to deal with the incidence of abuse, exploitation and neglect of children in the country, the Ministry of Women and Child Development, Government of India has considered enactment of a separate law. The Ministry has prepared a draft Bill, which aims at identifying incidence of offences against children and protecting them from offences; punishing persons who have committed offences against children; and setting up rules to fulfil its objectives.<sup>80</sup> All kinds of abuse including sexual and

physical abuse, violence and other forms of physical and mental torture against children have been made a punishable offence under the proposed Bill. The draft Bill seeks to:

- ?? consolidate and define the different offences against the child and to provide a legal remedy for] such violation of;
- ?? make the laws uniformly applicable to both boys and girls;
- ?? bring the existing laws and procedures in conformity with international, regional and national standards;
- ?? set forth good practices based on the consensus of contemporary knowledge and relevant norms and principles for the administration of justice to a child;
- ?? provide stringent penalties for any person who violates the provisions of this Bill, creating a deterrence and thereby emphasizing the country's commitment to protect its children;
- ?? ensure that criminal justice machinery functions, keeping the best interests of the child as the focal point at all stages;
- ?? ensure the speedy disposal of cases, with a view to avoiding delays, which can result in intimidation, retaliation and secondary victimization of the Child.

The Bill proposes to address the legitimate rights of children against sexual abuse, neglect, exploitation, torture, or any form of cruelty; and aims at:

- ?? Identifying offences against children and protecting children from offences
- ?? Providing for punishment against persons who have committed offences against children
- ?? Setting the rules to fulfill the objectives of the proposed Bill

In order to ensure that procedures and practices prescribed are child-friendly, the draft Bill is based on eight principles, including:

1. Principle of Best Interest of the Child
2. Principle of 'Protection' of the Child
3. Principle of Equality and Non Discrimination - "Leave no Child behind"
4. Principle of Individuality and Participation
5. Principle of Privacy and Confidentiality
6. Principle of Non-stigmatizing Semantics, Decisions and Actions
7. Principle of Avoidance of Harm
8. Principle of Non Criminalization of the Child

The Bill provides exclusive chapters to deal with different forms of offences against children including sexual abuse, neglect, exploitation, torture, or any form of cruelty. Chapter III of the draft Bill deals with sexual offences and provides for punishment for sexual assault/abuse of any child, using a child for commercial sexual exploitation, child pornography or

even grooming for sexual purposes. The next chapter deals with offences relating to trafficking and prostitution and provides for punishment for physically abusing a child, sale/ transfer of a child, trafficking in children, corporal punishment, bullying, economic exploitation of children

<sup>80</sup> Offences Against Children Bill (proposed), 2006, Ministry of Women and Child Development, Govt. of India

and other forms of child abuse. The Bill also provides for enhanced punishment on repeated offences. It also provides for punishment for attempt to commit an offence, abetment of offences against children and punishment for false complaints.

The proposed Bill makes reporting of offences mandatory and fixes individual responsibility on different categories of people including persons in position of trust or in position of authority, studio/photographer, tourist resorts and hotels, airports and airline staff. It also provides for punishment in the event of failure to report offences against children.

The other procedure and provisions of the Bill include information, jurisdiction, in-camera proceedings, summary trials, counselling, cognizability of offences, bail, compounding, prohibition of remission, release on probation and fines.

MWCD is keen that the proposed Bill is cleared and passed at the earliest so that the protective framework for children can be enhanced.

### **7.13 Grant in aid Scheme for Women and Children**

The Ministry of Women and Child Development is operating a scheme, namely, General Grant-in-Aid Scheme to Voluntary Organizations in the field of Women & Child Development for many years, popularly known as the grant in aid scheme for innovative projects or grant in aid scheme for social defence. The scheme was started with the objective to provide assistance to voluntary organizations to cover a wide spectrum of programme areas for tackling social problems for meeting the needs of client groups, which will not transgress the existing schemes but rather supplement them. It was observed that there are a number of unchartered areas not currently covered by any of the existing schemes, hence, it is not possible for the Ministry to provide support for such programmes.

The scheme is being implemented by the Ministry in the Tenth Plan. Till 2001-2002 the scheme was allocated a nominal allocation of Rs. 20 lakhs per year which was utilized every year. Since the scheme was formulated with the specific objective to provide assistance to voluntary organizations in those specific areas/projects which are not covered under any scheme of the Ministry, the scheme is useful for providing funds at the time of emergency such as flood, earthquake, violence and for innovative projects. After 2001-2002, the allocation was increased to Rs. 1 crore in the year 2003-04, and a pilot project for combating trafficking of women and children was introduced for grant to voluntary organizations, under which substantial amount was utilized.

Since it is a very small scheme for a limited purpose of innovative projects, the projects are sanctioned after utmost care and scrutiny so that they fulfill the conditions of the scheme. With the conditionality of not being funded through any other Government scheme most proposals received for grant-in-aid get rejected. However, steps have been taken to ensure that the allocated funds are utilized every year. For purpose, letters are sent to State Governments every year on number of occasions with the request to recommend as many as proposals they find suitable as innovative projects under the scheme. Sometimes advertisements are also brought out in the newspapers for publicity. Considering the limited projects, the need for evaluation of the scheme

through private/public agency has not been felt. The implementation of the sanctioned projects is monitored through direct inspection and through State Governments.

The scheme has gradually picked up momentum in the Tenth Plan and more and more funds are being utilized year by year. The performance of the scheme during the Tenth Plan period has been satisfactory. In view of above it is recommended that the allocation under the General grant-in-aid Scheme for the Assistance to Voluntary Organizations in the field of Women & Child Development be increased in the Eleventh Plan.

#### Financial Allocation:

Sl. No.	Item	Proposed Budget					
		<i>(Rs. In Crores)</i>					
		Year 1	Year 2	Year 3	Year 4	Year 5	<u>Total</u>
1.	General Grant-in-aid scheme for Women and Children	5.00	5.00	5.00	5.00	5.00	25.00
	<b>Total</b>						<b>25.00</b>

### 7.14 International Cooperation

Several International Instruments have been accepted by India to realize and protect the rights of children:

- ?? UN Convention on the Rights of the Child, 1992
- ?? Convention for the Suppression of Trafficking in Persons and Exploitation of Prostitutes and Others, 1949
- ?? Convention on Elimination of all forms of Discrimination against women, 1979
- ?? SAARC Convention on combating trafficking and commercial sexual exploitation of women and children, 2002
- ?? SAARC Convention on regional arrangements for promotion of child welfare in South Asia, 2002
- ?? Optional Protocol to the Convention on the Rights of the Child involving children in armed conflict, 2002
- ?? Optional Protocol to the Convention on the Rights of the Child involving sale of children, child prostitution and child pornography, 2002

India acceded to the **UN Convention on the Rights of the Child** on 11<sup>th</sup> December, 1992 to reiterate its commitment to the cause of children. The objective of the Convention is to give every child the right to survival and development in a healthy and congenial environment.

India is among the countries who accepted the Declaration adopted by World Summit on Children in 1990 and Millennium Development Goals adopted by Millennium Declaration in 2000. India is also party to the UN General Assembly Special Session on Children held in 2002, which adopted a World Fit for Children Declaration.

UNICEF projects are being implemented in India through Master Plan of Operations, which is an agreement prepared after mutual consultation and consensus within the framework of Basic



Agreement signed between India and UNICEF in 1978. India is the largest Country Programme of UNICEF in the world.

The Programmes are being implemented through various Ministries and Departments dealing with children. The implementing Ministries/Departments are Ministry of Women and Child Development, Department of Elementary Education and Literacy, Department of Family Welfare, NACO, Ministry of Social Justice & Empowerment, Ministry of Labour, Ministry of Information & Broadcasting, Ministry of Youth Affairs & Sports, and Department of Drinking Water Supply (Rajiv Gandhi National Drinking Water Mission).

The Ministry of Women and Child Development is the nodal Ministry for coordinating the implementation of the Master Plan of Operations. The Ministry of Women and Child Development conducts periodic review meetings to coordinate and monitor the implementation and expenditure of the UNICEF programmes in India. UNICEF's programme of cooperation is synchronized with the Government's Five Year Plan cycle.

The Ministry also undertakes reporting to the international treaty mechanisms based on the specified reporting obligation timeframes.

### Summary of proposed financial allocations for Child Protection in Eleventh Plan

Sl. No.	Item	Proposed Budget					
		<i>(Rs. In Crores)</i>					
		Year 1	Year 2	Year 3	Year 4	Year 5	Total
1.	Integrated Child Protection Scheme (ICPS)	2000.00	2000.00	2000.00	2000.00	2000.00	10000.00
2.	Expansion of Creche and Day Care	207.31	267.14	326.97	386.80	446.72	1634.94
3.	Review and re-organisation of Adoption System in India	6.40	7.49	7.59	8.01	4.69	34.18
4.	Capacity Development	Budgeted under ICPS					
5.	Data System and Research	5.00	5.00	5.00	5.00	5.00	25.00
6.	Advocacy and Communication	30% of overall media budget of Ministry of WCD					
7.	Strengthening institutional framework and mechanism	Budgeted under ICPS					
8.	Coordination mechanisms at all levels	-	-	-	-	-	-
9.	Child Budgeting	-	-	-	-	-	-
10.	Child Impact/Social Audit	Budgeted under ICPS					
11.	Grant in aid Scheme for Women and Children Innovative Projects	5.00	5.00	5.00	5.00	5.00	25.00
12.	International Cooperation	3.50	3.50	3.50	3.50	3.50	17.50
	<b>Total</b>	<b>2227.21</b>	<b>2288.13</b>	<b>2348.06</b>	<b>2408.31</b>	<b>2464.91</b>	<b>11736.62</b>

## Annexure - I

<b>BE, RE and AE for Child Protection in Union Budget</b>			
<b>Rs Crore</b>			
<b>Year</b>	<b>BE</b>	<b>RE</b>	<b>AE</b>
<b>2000-01</b>	76.8400	68.6500	67.4510
<b>2001-02</b>	108.1900	101.6900	93.6130
<b>2002-03</b>	147.7400	122.3600	111.1300
<b>2003-04</b>	137.1300	113.3000	113.6900
<b>2004-05</b>	159.2500	152.6100	147.4870
<b>2005-06</b>	176.1000	172.7300	
<b>2006-07</b>	198.6500		

Source: Demands for Grants (2000-2007) for relevant Ministries/Departments and Expenditure Budget Vol. 1 (2000-2007)

**Union Government's Allocation and Expenditure for Child Protection  
(2001-02 to 2006-07)**

(Rs. Crore)

Child Protection	2000-01	2000-01	2001-02	2001-02	2002-03	2002-03	2003-04	2003-04	2004-05	2004-05	2005-06	2006-07
	RE	AE	RE	AE	RE	AE	RE	AE	RE	AE	RE	BE
Central Adoption Resource Agency	1.500	0.468	1.800	0.950	1.300	1.300	1.200	1.030	1.300	1.150	1.300	1.500
Asst. for promoting in-country adoption	2.700	1.880	3.200	1.578	2.600	2.129	2.700	2.289	2.650	2.225	2.000	3.000
Scheme for Street Children	9.500	7.243	10.800	8.052	11.000	10.996	9.900	9.899	12.550	11.784	10.800	12.100
Welfare of Working Children in Need of Care and Protection	0.000	0.000	0.000	0.000	1.120	0.000	1.000	0.000	1.000	0.000	2.000	3.000
Programme for Juvenile Justice (Prevention and Control of Juvenile maladjustment)	10.550	10.500	11.250	15.188	14.400	14.330	14.400	16.330	18.900	19.714	20.430	25.000
Child Labour Cell	34.630	37.590	61.800	61.809	70.100	65.072	67.950	67.336	98.120	93.140	115.450	127.050
Assistance to voluntary organization for setting of short stay homes	9.770	9.770	12.840	6.033	12.840	13.26	15.350	15.689	14.400	15.260	15.000	17.500
<u>Swadhar</u>					9.000	4.042	0.800	1.115	3.690	4.213	5.500	8.000
<u>Scheme for rescue of victims of trafficking</u>											0.250	0.500
<u>Relief and Rehab of Rape victims</u>												1.000
<b>TOTAL – CHILD PROTECTION</b>	<b>68.650</b>	<b>67.451</b>	<b>101.690</b>	<b>93.613</b>	<b>122.360</b>	<b>111.130</b>	<b>113.300</b>	<b>113.690</b>	<b>152.610</b>	<b>147.487</b>	<b>172.730</b>	<b>198.65</b>

Source: Demands for Grants - Ministry of Labour, MSJE and HRD for the years 2000-01 to 2006-07

RE: Revised Estimates and AE: Actual Expenditure

**Note:** The above table does not include financial allocation for Rajiv Gandhi National Creche Scheme for Children of Working Mothers being implemented by the Ministry of Women and Child Development, Government of India, which is Rs.100 crores (BE) in the current financial year i.e.2006-07. Children in need of care and protection in Assam was a new scheme component under child protection in the year 2000-01, for which only BE of Rs. 0.01 crore was available. This scheme is therefore left out of the above table.

## State Budgets for Child Protection<sup>81</sup>

### Budget Estimates, Revised Estimates, Actual Expenditure (Andhra Pradesh)

(Rs in lakhs)

Year	BE	RE	AE
2001-02	5431.40	5954.47	5396.29
2002-03	7626.11	7543.51	6555.80
2003-04	7354.77	4514.35	6514.28
2004-05	7622.91	7351.31	NA
2005-06	7617.48	7617.48	NA

\*NA - Not Available

### Budget Estimates, Revised Estimates, Actual Expenditure (Himachal Pradesh)

(Rs in lakhs)

Year	BE	RE	AE
2000-01	417.34	417.34	347.27
2001-02	376.36	366.32	356.69
2002-03	391.93	388.25	385.56
2003-04	496.55	497.17	464.31
2004-05	485.35	485.81	NA

\*NA - Not Available

### Budget Estimates, Revised Estimates, Actual Expenditure (Orissa)

(Rs in lakhs)

Year	BE	RE	AE
2000-01			420.58
2001-02	504.56	504.75	416.65
2002-03	458.18	531.02	332.25
2003-04	447.32	568.80	483.24
2004-05	459.52	638.63	NA
2005-06	490.95	NA	NA

\*NA - Not Available

<sup>81</sup> All tables are from Child Budget Analysis work undertaken by HAQ: Centre for Child Rights for the Union Budget as well as State Budgets in Andhra Pradesh, Orissa and Himachal Pradesh.

## Annexure- II

# Terms of Reference and Composition of Sub-Group on Child Protection

### Terms of Reference of the Sub Group

- ?? Child Rights
- ?? Children in difficult circumstances such as, street children, children with disability, children of prisoners, Child beggars, Children affected by disintegrated families, children affected by HIV/AIDS etc
- ?? Children affected by disaster situation, marginalized and disadvantaged children, migrant and displaced children and child labour,
- ?? Violence and abuse, physical, mental, psychological, social and sexual.
- ?? Sexual exploitation and trafficking of children
- ?? Child pornography and child prostitution
- ?? Drug and substance abuse
- ?? Juvenile justice
- ?? Child adoption and orphan children
- ?? Child affected by armed conflict
- ?? Issues relating to child protection, which are not covered as above.

### Composition of the Sub Group

1.	Dr. Loveleen Kacker, Joint Secretary (CW), Ministry of Women & Child Development, Shastri Bhawan, New Delhi	Chairperson
2.	Shri P. Narayanmurthy, Joint Secretary, M/o Social Justice and Empowerment	Member
3.	Shri J.P. Pati, Joint Secretary, M/o Labour	Member
4.	Shri A.K. Srivastava, Joint Secretary, Ministry of Home Affairs	Member
5.	Shri M.K. Sharma, Addl. Legal Counselor, D/o Legal Affairs, M/o Law, Shastri Bhawan, New Delhi	Member
6.	Mrs. Lida Jacob, Secretary, Department of Social Welfare, Government of Kerala	Member
7.	Mrs. Vandana Krishna, Secretary, Department of Women and Child Development, Government of Maharashtra	Member
8.	Mr. S. N. Haq, Secretary, Dept. of Women & Child Development and Social Welfare, Govt. of West Bengal	Member
9.	State Secretary, Deptt. Of Social Welfare, Govt. of Manipur	Member
10.	State Secretary, Deptt. Of Women & Child Dev., Govt. Of MP	Member
11.	Mr. T. K. Malik, Ministry of Law and Justice, Shastri Bhawan, New Delhi	Member
12.	Executive Director, Central Social Welfare Board, New Delhi	Member
13.	Mr. Amod Kanth, General Secretary, Prayas, New Delhi	Member
14.	Mrs. Andal Damodaran, Indian Council for Child Welfare, Chennai	Member
15.	Ms. Razia Ismail Abbasi, India Alliance for Child Rights, New Delhi	Member
16.	Mr. Joseph Gathia, Executive Director, Center for Concern Child Labour, Delhi	Member
17.	Dr. Shanta Sinha, MV Foundation, Secunderaad	Member
18.	Ms. Vidya Ganesh, Chief, HIV/AIDS Section, UNICEF, New Delhi	Member
19.	Ms. Anu Dixit, PO, Child Protection Section, UNICEF, New Delhi	Member

20.	Ms. Karuna Bishnoi, Communication Officer, UNICEF, New Delhi	Member
21.	Ms. Bharti Ali, HAQ Centre for Child Rights, New Delhi	Member
22.	Ms. Ruchi Sinha, Asst. Professor, TISS, Mumbai	Member
23.	Ms. Archina Dhan, SOS Children's Village, New Delhi	Member
24.	Ms. Jaya Srivastava, J-12/1, DLF Phase II, Gurgaon	Member
25.	Ms. Ruchira Gupta, Executive Director, Apne Aap Women's Worldwide, New Delhi	Member
26.	Ms. Kajol Menon, Director, Childline India Foundation, Mumbai	Member
27.	Mr. Ingrid Srinath, CRY, Mumbai	Member
28.	Mr. Pravesh Kumar, Consultant, UNICEF-Ministry of WCD, New Delhi	Member
29.	Mr. J. S. Kochher, Director (CW), Ministry of Women & Child Development Shastri Bhavan New Delhi	Convener

## THE INTEGRATED CHILD PROTECTION SCHEME (ICPS)- A Centrally Sponsored Scheme of Government – Civil Society Partnership

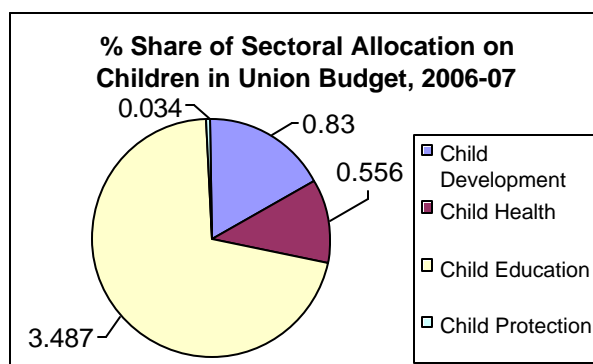
### Chapter- I CONCEPTUAL BACKGROUND OF THE SCHEME

#### 1. Introduction

India is home to almost 19% of the world's children. More than one third of the country's population, around 440 million, is below 18 years. The future and strength of the nation lies in a healthy, protected, educated and well-developed child population that will grow up to be productive citizens of the country. India must invest resources in children proportionate to their huge numbers. An exercise on child budgeting carried out by the Ministry of Women and Child Development revealed that total expenditure on children in 2005-2006 in health, education, development and protection together amounted to merely 3.86%, rising to 4.91% in 2006-07. However, the share of resources for child protection were an abysmal low of 0.034% in 2005-06 and the same in 2006-07.

Year	Total Union Budget (BE) (Rs. Crore)	Total Child Budget (BE) (Rs. Crore)	% Share of Child Budget in Union Budget
2004-05	477829.04	11695.72	2.45
2005-06	514343.82	19841.01	3.86
2006-07	563991.13	27674.58	4.91

Source: GOI Expenditure Budget, 2004-05, 2005-06 (Vols 1&2) and "what does Union Budget 2006-07 have for Children", Haq Centre for Child Rights, Delhi



There is an urgent case for increasing expenditure on child protection, so that the rights of the children of India are protected. The neglect of child protection issues not only violates the rights of the children but also increases their vulnerability to abuse, neglect and exploitation.

The Constitution of India recognizes the vulnerable position of children and their right to protection. It guarantees in Article 15, special attention to children through necessary and special laws and policies that safeguard their rights. The

Right to equality, protection of life and personal liberty and the right against exploitation is enshrined in Articles 14, 15, 16, 17, 21, 23 and 24.

The concern for children has also been expressed in various international Conventions and Standards on child protection including the UN Convention of the Rights of the Child (UNCRC) 1989, the UN Standard Minimum Rules for the Administration of Juvenile Justice (The Beijing Rules) 1985, and the UN Rules for the Protection of Juveniles Deprived of their Liberty 1990. The Government of India ratified the UN Convention on the Rights of the Child (UNCRC) in 1992. The Convention prescribes standards to be adhered to by all State parties in securing the best interest of the child. It emphasizes social reintegration of child victims, without resorting to judicial proceedings. The UNCRC outlines the fundamental rights of children, including the right to be protected from economic exploitation and harmful work, from all forms of sexual exploitation and abuse, and from physical or mental violence, as well as ensuring that children will not be separated from their family against their will.

Major policies and legislations issued in the country to ensure children's protection and improvement in their status include the Guardian and Wards Act 1890, Factories Act 1954, Hindu Adoption and Maintenance Act 1956, Probation of Offenders Act 1958, Bombay Prevention of Begging Act 1959, Orphanages and Other Charitable Homes (Supervision and Control) Act 1960, National Policy for Children 1974, Bonded Labour System (Abolition) Act 1976, Child Marriage and Restraint Act 1979, Immoral Traffic Prevention Act 1986, Child Labour (Prohibition and Regulation) Act 1986, National Policy on Education 1986, Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act 1987, National Policy on Child Labour 1987, Infant Milk Substitutes, Feeding Bottles and Infant Foods (Regulation of Production, Supply and Distribution) Act 1992, National Nutrition Policy 1993, Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act 1994, Persons with Disabilities (Equal Protection of Rights and Full Participation) Act 2000, Juvenile Justice (Care and Protection of Children) Act 2000, National Health Policy 2002, National Charter for Children 2004 and National Plan of Action for Children in 2005.

However, these policies and legislations for children have on the whole suffered from weak implementation, owing to scant attention to issues of child protection, resulting in scarce resources, minimal infrastructure, and inadequate services to address child protection problems.

'Child Protection' is about protecting children from or against any perceived or real danger or risk to their life, their personhood and childhood. It is about reducing their vulnerability to any kind of harm and protecting them in harmful situations. It is about ensuring that no child falls out of the social security and safety net and those who do, receive necessary care, protection and support so as to bring them back into the safety net. While protection is a right of every child, some children are more vulnerable than others and need special attention. The Government recognizes these children as 'children in difficult circumstances', characterized by their specific social, economic and geo-political situations. In addition to providing a safe environment for these children, it is imperative to ensure that all other children also remain protected. Child protection is integrally linked to every other right of the child. Failure to ensure children's right to protection adversely affects all other rights of the child. Thus, the Millennium Development Goals (MDGs) also cannot be achieved unless child protection is an integral part of programming strategies and plans. Failure to protect children from such issues as violence in schools, child labour, harmful traditional practices, child marriage, child abuse, the absence of parental care and commercial sexual exploitation among others, means failure in fulfilling both the Constitutional and international commitments towards children.

In light of its expanded mandate, the new Ministry of Women and Child Development views Child Protection as an essential component of the country's strategy to place '***Development of the child at the centre of the 11<sup>th</sup> Plan***'. Violations of the child's right to protection, in addition to being human rights violations, are massive, under-recognized and under-reported obstacles to child survival and development. Failure to protect children has serious consequences for the physical, mental, emotional, social development of the child, with consequences in loss in productivity and the loss in human capital for the nation.

The National Plan of Action for Children 2005 articulated the rights agenda for the development of children. The NPAC 2005 is the basis for planning for children in the XI Plan in all sectors and the principles articulated in it should guide the planning and investments for children. Moreover, to achieve the Millennium Development Goals also, such a comprehensive approach to child protection is required. All budgets for child protection schemes and programmes should be in the plan category and not in the non-plan category.



The Ministry of Women and Child, therefore, endeavors to create a strong foundation for a protective environment for children. Child protection incorporates both prevention and care and recovery aspects. Children have a right to be prevented from becoming subjects of violence, abuse, neglect and exploitation, and once victimized, are entitled to services, which hasten their recovery and reduce further trauma. The Ministry will undertake a strong advocacy and implementation strategy to enhance the infrastructure for protection services, increase access to a wider range and better quality of services, and increase the investment for protection of children.

## 2. Existing Child Protection Mechanisms

The existing mechanisms for child protection in India primarily flow from the provisions under the Juvenile Justice (Care and Protection of Children) Act, 2000 and National Plan of Action for Children 2005. These comprise several programmes and schemes implemented by different ministries and departments addressing child protection issues among which are:

- ?? **A Programme for Juvenile Justice** for children in need of care and protection and children in conflict with law. The Government of India provides financial assistance to the State Governments/UT Administrations for establishment and maintenance of various homes, salary of staff, food, clothing, etc. for children in need of care and protection and juveniles in conflict with law. Financial assistance is based on proposals submitted by States on a 50-50 cost sharing basis.
- ?? **An Integrated Programme for Street Children** without homes and family ties. Under the scheme NGOs are supported to run 24 hours drop-in shelters and provide food, clothing, shelter, non-formal education, recreation, counselling, guidance and referral services to them. The other components of the scheme include enrollment in schools, vocational training, occupational placement, mobilizing preventive health services and reducing the incidence of drug and substance abuse, HIV/AIDS etc.
- ?? **CHILDLINE Service** for children in distress, especially children in need of care and protection so as to provide them medical services, shelter, rescue from abuse, counseling and repatriation.
- ?? **Shishu Greh Scheme** for care and protection of orphans/abandoned/destitute infants or children up to 6 years and promote in-country adoption for rehabilitating them.
- ?? **Scheme for Working Children in Need of Care and Protection** for children working as domestic help, at roadside dhabas, mechanic shops, etc. The scheme provides for bridge education and vocational training, medicine, food, recreation/sports equipments, etc.
- ?? **Rajiv Gandhi National Creche Scheme for the Children of Working Mothers** in the age group of 0-6 years. The scheme provides for comprehensive day-care services including facilities like food, shelter, medical, recreation, etc.
- ?? **Pilot Project to Combat the Trafficking of women and Children for Commercial Sexual Exploitation** in source and destination areas for providing care and protection to trafficked and sexually abused women and children. Components of the scheme include networking with law enforcement agencies, rescue operation, temporary shelter for the victims, repatriation to hometown and legal services, etc.
- ~~??~~ **Central Adoption resource Agency (CARA)** is an Autonomous Body under the Ministry of Women and Child Development to help both Indian and foreign agencies involved in inter country adoption of Indian children to function within a prescribed framework so that such children are adopted legally through recognized agencies and no exploitation takes place.
- ?? **National Child Labour Project (NCLP)** for the rehabilitation of child labour. Under the scheme, Project Societies at the district level are fully funded for opening up of special school/Rehabilitation Centres for the rehabilitation of child labour. These special schools/rehabilitation centers provide non-formal education, vocational training, supplementary nutrition, stipend etc. to children withdrawn from employment.

In early 2006 the Department of Women and Child Development became a full-fledged Ministry and the juvenile justice and adoption related matters were transferred to this new Ministry. However, Child Protection has never been a programme of any one Ministry/Department and in spite of this rationalization, child labour issues continue to be dealt with by the Labour Ministry. However, for Child Protection to be dealt with more effectively there is a need for lateral linkages by the Ministry of Women and Child Development with relevant sectors such as Railways, Industry, Trade and Commerce, Rural Development, Urban Affairs, Tourism, Banking, Legal Affairs, Home Affairs, Health and Family Welfare, and Information and Broadcasting.

Some of the schemes of the Ministry of Women and Child Development under the women's welfare section address issues concerning protection of the girl child even though there is no girl child specific component and budget under these schemes. These need to be considered as child protection schemes and in the years to come they could perhaps have a clearly defined child protection component and budget. These schemes include:

- ☞ Swadhar
- ☞ Short Stay Home
- ☞ Scheme for rescue of victims of trafficking
- ☞ Relief and rehabilitation of rape victims

The Kishori Shakti Yojana is another scheme of the Ministry of Women and Child Development that can be used to meet protection goals. While its main focus is nutrition for adolescent girls, the scheme provides platform for raising protection concerns with this age group and empowering them with information, knowledge and skills to be able to protect themselves.

The Rajiv Gandhi National Scheme for the Children of Working Mothers, implemented by the Ministry of Women and Child Development, is primarily seen as fulfilling child development goals only. However, protection needs of children aged 0-6 years are also met through crèche and day care facilities and hence it may well be taken as a child protection scheme also.

There are some schemes for the disabled persons under the Ministry of Social Justice and Empowerment. Since they do not have a child focus or specific component for children, issues of disabled children get very little attention.

### 3. Limited Resources/Budget Allocations

All the above schemes put together have an abysmally low budget.. A Child Budget exercise carried out by the Ministry of Women and Child Development revealed the persistently low level of fund allocation for child protection. The total share of child protection in the Union Budget for 2005-06 was just 0.034% (see table below) and the budget estimates for the current financial year 2006-07 has remained the same. Scarcely any allocations have been made for child protection since independence, a reflection of the low priority this sector has received in government's own planning and implementation, resulting in scant State interventions toward child protection.

#### Union Government's Budgetary Provisions for Child Protection (2001-02 to 2006-07)

(Rs. Crore)

Child Protection	2000-01	2000-01	2001-02	2001-02	2002-03	2002-03	2003-04	2003-04	2004-05	2004-05	2005-06	2006-07
	RE	AE	RE	AE	RE	AE	RE	AE	RE	AE	RE	BE
Central Adoption Resource Agency	1.500	0.468	1.800	0.950	1.300	1.300	1.200	1.030	1.300	1.150	1.300	1.500

Asst. for promoting in-country adoption	2.700	1.880	3.200	1.578	2.600	2.129	2.700	2.289	2.650	2.225	2.000	3.000
Scheme for Street Children	9.500	7.243	10.800	8.052	11.000	10.996	9.900	9.899	12.550	11.784	10.800	13.000
Welfare of Working Children in Need of Care and Protection	0.000	0.000	0.000	0.000	1.120	0.000	1.000	0.000	1.000	0.000	2.000	3.000
Programme for Juvenile Justice (Prevention and Control of Juvenile maladjustment)	10.550	10.500	11.250	15.188	14.400	14.329	14.400	16.330	18.900	19.714	20.430	25.000
Child Labour Cell	34.630	37.590	61.800	61.809	70.100	65.072	67.950	67.336	98.120	93.140	115.450	127.050
Assistance to voluntary organization for setting of short stay homes	9.770	9.770	12.840	6.033	12.840	13.26	15.350	15.689	14.400	15.260	15.000	17.500
Swadhar					9.000	4.042	0.800	1.115	3.690	4.213	5.500	8.000
Scheme for rescue of victims of trafficking											0.250	0.500
Relief and Rehab of Rape victims												1.000
<b>TOTAL – CHILD PROTECTION</b>	<b>68.650</b>	<b>67.451</b>	<b>101.690</b>	<b>93.612</b>	<b>122.360</b>	<b>111.128</b>	<b>113.300</b>	<b>113.688</b>	<b>152.610</b>	<b>147.486</b>	<b>172.730</b>	<b>199.550</b>

Source: Demand for grants - Ministry of Labour, MSJE and HRD for the year 2000-01 to 2006-07

\*\* Other Schemes includes schemes for street children, assistance to home for infant and young children for promoting in-country and inter-country adoption, CARA and scheme for welfare of working children and children in need for care and protection (Ministry of Women and Child Development)

RE: Revised Estimates

**Note:** The above table does not include financial allocation for Rajiv Gandhi National Creche Scheme for Children of Working Mothers being implemented by the Ministry of Women and Child Development, Government of India, which is Rs.100 Crores (BE) in the current financial year i.e.2006-07

### Percentage Share of Sectoral Allocation on Children in Union Budget

Year	% Share of Child Development in Child Budget	% Share of Child Health in Child Budget	% Share of Child Education in Child Budget	% Share of Child Protection in Child Budget	% Share of Total Child Budget in Union Budget
2004-05	0.422	0.423	1.567	0.033	2.445
2005-06	0.658	0.527	2.638	0.034	3.857
2006-07	0.830	0.556	3.487	0.034	4.907

Source: GOI Expenditure Budget 2004-05, 2005-06, 2006-07 (Vols 1&2) and Haq Centre for Child Rights, Delhi

The share of child protection in the Union Budget has remained at 0.03 percent. However, over the years the share of child protection in the overall budget for children has seen a decline. Child protection is an overarching issue, which if not covered will affect each and every right of children. The meager financial resources invested in child protection translate into serious gaps in child protection measures and programmes.

#### 4. Glaring Gaps in Services

A close examination by the newly created Ministry of Women and Child Development of existing child protection schemes has revealed major shortcomings and gaps in the infrastructure, set up and outreach services for children. The minimal government structure that exists is rigid and a lot of time and energy goes in maintaining the structure itself rather than concentrating on programmatic outcomes. Existing programmes and schemes are marked by limitations such as:

##### *Poor planning and coordination*

- ?? Lack of linkages with essential lateral services for children for example education, health, police, judiciary, services for the disabled, etc.
- ?? No mapping has been done of the children in need of care and protection or of the services available for them at the district/city/state level;
- ?? Lack of coordination and convergence of programmes/services;
- ?? Supervision, monitoring and evaluation of the juvenile justice system is weak.

##### *Low coverage*

- ?? Large percentage of children in need of care and protection are outside the safety net and get no support and services;
- ?? Allotment of negligible resource to child protection and uneven utilization of allotted resources in terms of geographical spread
- ?? Existing Schemes inadequate in outreach and funding leading to marginal coverage of destitute children
- ?? Realising that poverty and desire for a better life is leading to a large scale migration of rural populations to urban and semi urban centers, which in turn has created a large number of vulnerable children in urban situations, demands focused strategies and interventions
- ?? Inadequate addressal of issues like child marriage, female foeticide, street children, working children, discrimination against the girl child, etc.
- ?? No interventions for children affected by HIV/AIDS, drug abuse, militancy, disaster (both manmade and natural), abused and exploited children and children of vulnerable groups like commercial sex workers, prisoners, migrant population, etc.

##### *Poor Infrastructure*

- ?? Inadequate implementation of laws and legislations in terms of structures prescribed by those legislations not being in place;
- ?? Lack of institutional infrastructure to deal with child protection;
- ?? The CWCs and JJBs not provided with requisite facilities for their efficient functioning, resulting in delayed enquiries and disposal of cases.

##### *Inadequate Human Resources*

- ?? Inadequate number of Child Welfare Committees (CWC) and Juvenile Justice Boards (JJB);
- ?? Training of personnel working under the juvenile justice system and on other child protection programmes is inadequate and inequitable among States.

##### *Serious Service Gaps*

- ?? Lack of support services to families at risk leads to more children becoming vulnerable;
- ?? Overbearing focus on institutional support and non-institutional services negligent;
- ?? Inter-state and Intra-state transfer of children specially for their restoration to their families have not been provided for in the existing schemes.

- ?? Lack of standards of care (accommodation, sanitation, leisure, food, etc.) in children/observation homes due to lower funding norms and also due to lack of supervision and commitment
- ?? Most 24-hour shelters do not provide all the basic facilities required, specially availability of shelter, food and mainstream education;
- ?? Not all programmes address issues of drug abuse, HIV/AIDS and sexual abuse related vulnerabilities of children;
- ?? None of the existing schemes address the needs of child beggars;
- ?? Minimal use of non-institutional care options like adoption, foster care and sponsorship, etc. to children without home and family ties;
- ?? Number of Shishu Grehas are inadequate leading to few adoptions;
- ?? Lack of rehabilitation services for older children not adopted through the regular adoption process;
- ?? Aftercare and rehabilitation programme for children above 18 years are not available in all States, and where they do exist they are run as any other institutions under the JJ Act 2000;

## Chapter- II

### THE INTEGRATED CHILD PROTECTION SCHEME

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The Integrated Child Protection Scheme concretises the Government/State responsibility for creating a system to protect children in the country. Such a system is influenced by the nature of regulatory frameworks, structures, resources, professionals, and the relationships between them. When the child protection system functions in the best interest of the child, adequate state and voluntary institutions, services and structures are put in place, backed strongly by policies, laws and regulations. Professionals providing services for children are competent and bound by professional standards. Children's views are taken into account.

The Integrated Child Protection Scheme is based on the cardinal principles of "protection of child rights" and "best interests of the child". The ICPS aims to promote the best interests of the child and prevent violations of child rights through appropriate punitive measure against perpetrators of abuse and crimes against children and to ensure rehabilitation for all children in need of care and protection. It aims to create a protective environment by improving regulatory frameworks, strengthening structures and professional capacities at national, state and district levels so as to cover all child protection issues and provide child friendly services at all levels.

#### 1. Principles of ICPS

The following key principles underlie the ICPS approach:

- (i) **Child protection a shared responsibility:** The responsibility for child protection is a shared responsibility of government, family, community, professionals, and civil society. It is important that each role is articulated clearly and understood by all engaged in the effort to protect children. Government has an obligation to ensure a range of services at all levels.
- (ii) **Reducing child vulnerability:** There is a need for a focus on systematic preventive measures not just programmes and schemes to address protection failures at various levels. A strong element of prevention will be integrated into programmes, converging the provisions and services of various sectors on the vulnerable families, like livelihood support (NREGS), SHGs, PDS, health, child day care, education, to strengthen families and reduce the likelihood of child neglect, abuse and vulnerability.
- (iii) **Strengthen family:** Children are best cared for in their own families and have a right to family care and parenting by both parents. Therefore a major thrust will be to strengthen the family capabilities to care for and protect the child by capacity building, family counselling and support services and linking to development and community support services.
- (iv) **Promote non-institutional care:** There is a need to shift the focus of interventions from an over reliance on institutionalization of children and move towards more family and community –based alternatives for care. Institutionalization should be used as a measure of last resort after all other options have been explored.
- (v) **Intersectoral linkages and responsibilities:** Child protection needs dedicated sectoral focus as well as strengthening protection awareness and protection response from other sectors outside the traditional protection sector including in emergencies and HIV/AIDS programming.
- (vi) **Create a network of services at community level:** An appropriate network of essential protection services is required at all levels for supporting children and communities.
- (vii) **Establishing standards for care and protection:** All protection services should have prescribed standards, protocols for key actions and should be monitored regularly. Institutionalisation should be for the shortest period of time with strict criteria being established for residential placement and all cases of institutionalization reviewed periodically.

- (viii) **Building capacities:** Protection services require skilled, sensitive staff, equipped with knowledge of child rights and standards of care and protection. Capacities of all those in contact with children require strengthening on a continuing basis, including families and communities.
- (ix) **Providing child protection professional services at all levels:** There is a need for varied special services for the many situations of child neglect, exploitation and abuse, including for shelter, care, psychological recovery, social reintegration, legal services etc. which have to be professional and child-focused.
- (x) **Strengthening crisis management system at all levels:** First response and coordinated inter-sectoral actions for responding to crisis need to be established and institutionalized.
- (xi) **Reintegration with family and community:** systems to be put in place for efforts to reintegrate children with their families and community and regular review of efforts instituted.
- (xii) **Addressing protection of children in urban poverty:** Children in urban poverty are at high risk/ increased vulnerability; constantly under threat of eviction; denial or exclusion from basic services; social turmoil; and the stretched capacity of the adults to function as adequate caretakers due to their poverty. This indicates the need for developing a strong social support and service system.
- (xiii) **Child impact monitoring:** all policies, initiatives and services will be monitored for their child impact and reports made public, including for children themselves through child-friendly reports.

## 2. The Approach

In order to reach out to all children, in particular to those in difficult circumstances, the Ministry of Women and Child Development proposes to combine its existing child protection schemes under one **centrally sponsored** scheme titled “**Integrated Child Protection Scheme (ICPS)**”. The proposed ICPS brings together multiple vertical schemes under one comprehensive child protection programme and integrates interventions for protecting children and preventing harm.

It does not see child protection as the exclusive responsibility of the MWCD but stresses that other sectors have vital roles to play. The Ministry looks at child protection holistically and seeks to rationalize programmes for creating a strong protective environment for children, diversify and institutionalize essential services for children, mobilize inter-sectoral response for strengthening child protection and set standards for care and services.

ICPS will function as a **Government – Civil Society Partnership** scheme under the overarching direction and responsibility of the Central/State Governments. It will work closely with all stakeholders including government departments, the voluntary sector, community groups, academia and, most importantly, families and children to create a protective environment for children in the country. Its holistic approach to child protection services and mechanisms is reflected in stronger lateral linkages and complementary systems for vigilance, detection and response. The scheme visualizes a structure for providing services as well as monitoring and supervising the effective functioning of child protection system, involving:

?? **Government:** To hold primary responsibility for the development, funding and operation of the service covered under the scheme. In order to ensure effective functioning of the system, the Government shall provide flexibility by cutting down rigid structures and norms. To attract the best professional talent and strengthen public-private partnership, the scheme proposes to hire services of professionals on a contractual basis.

?? **Civil society organizations**

- ☞ Voluntary sector: To provide vibrant, responsive and child friendly services for detection, counselling, rehabilitation for all children in need as well as provide technical support; these may be financially supported by the State.
- ☞ Research and training institutions: To carry out activities related to research and capacity building of existing manpower as well as support creation of a cadre of professional manpower.
- ☞ Media and advocacy groups: To promote rights of the child and child protection issues with sensitivity and promote child's dignity and worth
- ☞ Corporate sector:

?? **Community groups and local leaders, youth groups, families and children:** To provide protective and corrective environment for children, to act as watchdog and monitor child protection services as well as service providers, both Government and NGO functionaries.

### 3. Target Groups

**Child in need of care & protection** means a child who:

- | is found without any home or settled place or abode and without any ostensible means of subsistence;
- | resides with a person (whether a guardian of the child or not) and such person has threatened to kill or injure the child and there is a reasonable likelihood of the threat being carried out, or has killed, abused or neglected some other child or children and there is a reasonable likelihood of the child in question being killed, abused or neglected by that person;
- | is a mentally or physically challenged or ill child or a child suffering from terminal diseases or incurable diseases, and/or having no one to support or look after him/her ;
- | has a parent or guardian and such parent or guardian is unfit or incapacitated to care for or exercise control over the child;
- | does not have a parent/parents and no one is willing to take care of him/her, or whose parents have abandoned him/her or who is a missing and/or runaway child and whose parents cannot be found after reasonable inquiry
- | is being or is likely to be grossly abused, tortured or exploited for the purpose of sexual abuse or illegal acts
- | is found vulnerable and is likely to be inducted into drug abuse or trafficking,
- | is being or is likely to be abused for unconscionable gains
- | is victim of any armed conflict, civil commotion or natural calamity

**Children in conflict with the law** is one who is alleged to have committed an offence.

**Children in contact with law** is one who has come in contact with the law either as victim or as a witness or due to any other circumstance.

**Any other vulnerable child including, but not limited, to:** Children of potentially vulnerable families and families at risk, Children of socially excluded groups like migrant families, families living in extreme poverty, lower caste families, families subjected to or affected by discrimination, minorities, children infected and/or affected by HIV/AIDS, orphans, child drug abusers, children of substance abusers, child beggars, trafficked or sexually exploited children, children of prisoners, and street and working children, would also be covered under the scheme.



#### **4. Objectives of the scheme:**

- (i) To create a safety net for children in need of care and protection and children in conflict with law by building a protective environment for them, keeping their best interests in mind;
- (ii) To promote preventive measures to protect children from falling in the situations of vulnerability, risk and abuse
- (iii) To promote preventive measure to address the vulnerabilities of families and build their ability and capacity protect their children;
- (iv) To supplement and strengthen the infrastructure established under the Juvenile Justice (Care and Protection) Act 2000;
- (v) To build capacities of families, communities, and NGOs to strengthen care, protection and response to children;
- (vi) To create State and District Child Protection Units as well as State Adoption Cells;
- (vii) To promote in-country adoption and regulate inter-country adoption as well as ensure minimum standards;
- (viii) To provide services to the more vulnerable categories of children through specialized programmes;
- (ix) To establish linkages for restoration of children to their biological families and placement with adoptive families or foster families, where necessary;
- (x) To provide specialized institutional care to infants and children up to 6 years of age who are either abandoned or orphaned/destitute;
- (xi) To check and end female foeticide and infanticide in the country;
- (xii) To provide services to street and destitute children, including child beggars;
- (xiii) To provide for care and support services for children affected by HIV/AIDS;
- (xiv) To establish CHILDLINE in every district, for creating access in emergencies by providing counseling, restoration and rehabilitative services to children along with linkages to other available services under various schemes of the Government of India/State Governments;
- (xv) To train and sensitize local bodies, police, judiciary and other concerned departments of State Governments to undertake related responsibilities;
- (xvi) To strengthen the knowledge base by undertaking research and documentation, resource mapping of services, the creation of a Management Information System (MIS) for tracking vulnerable children, and database management;
- (xvii) To carry out advocacy and spread awareness about child and family-related issues for supporting the family;
- (xviii) To network with the Allied Systems i.e. Government departments and Non-Government agencies;
- (xix) To initiate any other need-based specialized innovative services through families, community and panchayats/local bodies, including child guidance and counseling, especially to combat drug abuse, sexual abuse, child marriage, and discrimination against the girl child.

#### **5. Strategies**

The ICPS will be guided by the critical child protection strategies and priorities visualized under the National Plan of Action for Children, 2005. These strategies will be based on four major parameters, including:

##### **Prevention**

?? Preventing destitution & exploitation of children through care, protection & developmental programmes

?? Achieving 100% registration of births, deaths and marriages by 2010

- ?? Establishing support services for families at risk
- ?? Eradication of harmful, traditional and customary practices that put children at risk, particularly of trafficking and sexual exploitation
- ?? Ensuring survival, development and protection of the girls child and restoring her dignity by eliminating harmful, discriminatory and unethical traditional practices, and providing legal, medical, social and psychological support services and opportunities for development of their full potential
- ?? Ensuring enforcement of all laws relating to children, particularly the Child Marriage Restraint Act, PNDT Act, ITPA, Juvenile Justice (care and Protection of Children) Act, Child Labour (Prohibition and Regulation) Act, amongst others
- ?? Prevention of cross-border trafficking and creation of nodal authorities and other infrastructure to deal with all kinds of child trafficking
- ?? Adoption of a national law to deal with child trafficking, including ratification of the international instruments such as the UN Protocol on Trafficking in Persons
- ?? Ensuring access to mainstream education for all child labourers by 2012 and access to nutrition, clothing and protection from all forms of abuse and neglect
- ?? Elimination of child marriages
- ?? Eliminate disability due to poliomyelitis by 2007
- ?? Creation of effective links and quick referrals between ICDS, Primary Health Centres, mother and child programmes and hospitals (paediatric units) for early detection of high risk babies and children with disabilities
- ?? Access to neighbourhood schools and inclusive education, accessible and disable friendly infrastructure, early childhood care for the disabled child, inclusion of children with mental illness in all existing schemes for children with disability, vocational training, capacity building of care givers, access to services, support and protection, implementation of the disability law
- ?? Prevention of mother-to-child transmission of HIV/AIDS
- ?? Requisite counseling, awareness generation and support services for adolescents to prevent them from becoming vulnerable and protect them from harm
- ?? Contingency planning and emergency preparedness
- ?? Convergence with related Ministries / Department at Central & State levels
- ?? Enlisting support from the private sector
- ?? Ensuring child specific interventions in all urban planning

### **Protection**

- ?? Special measures for protection of children in urban and semi urban situations
- ?? Special attention to certain categories of children requiring greater focus such as, child beggars, child labour, street children, children in need of care and protection and children in conflict with law as covered by the juvenile justice act, trafficked children, child victims of sexual abuse and exploitation, children affected by natural and man made disasters, children of sex workers and prisoners, children affected by armed conflict and civil disorders.
- ?? Ensuring a supportive and enabling environment for care and protection of children affected by HIV/AIDS
- ?? Quality health care and services, including free Anti-Retroviral therapy for children infected with HIV virus
- ?? Development of special packages for children abandoned on account of HIV/AIDS
- ?? Promoting community based care and rehabilitation for all children in difficult circumstances
- ?? Childline & other necessary support service, infrastructure, referral for children in emergency situations
- ?? Promotion of quality institutional and alternative care
- ?? Up-gradation of standards of existing services

- ?? Infrastructural support to NGOs for destitute, orphan children through in- country adoption
- ?? Combating trafficking of narcotic drugs, psychotropic substance to prevent the use by children and creating Mechanisms for rehabilitation of child substance abusers
- ?? Drop-in-shelters which encourage children's voluntary attendance and participation in activities such as music, theater, yoga & meditation, computers, games and other creative activities so as to ensure their overall development, care and protection and to reduce social deviance
- ?? Implementation of juvenile justice law
- ?? Creation of child-friendly judicial and administrative procedures for dealing with children
- ?? Free legal aid and advice for children in conflict with law
- ?? Assistance to child victims of abuse and exploitation for their full physical and psychological recovery, development and social reintegration
- ?? Institution of a rights based uniform definition of child labour and bonded labour
- ?? Elimination of all forms of child labour by linking it with ensuring right to education for all children
- ?? Convergence with related Ministries / Department at Central & State levels
- ?? Enlisting support from the private sector

### **Awareness and Capacity Building**

- ?? Public awareness, sensitization and mobilization of parents, caregivers, community and other actors in civil society
- ?? Professional counselling services for children in psychological trauma and establishment of accredited training courses/institutions for creating a cadre of trained counsellors
- ?? Large-scale investment in capacity building of all caregivers and service providers
- ?? Sensitize allied systems to the problems of children
- ?? Convergence with related Ministries / Department at Central & State levels
- ?? Enlisting support from the private sector

### **Research and Documentation**

- ?? Development of a system of identification, investigation, reporting, follow-up & referral of children at risk within and outside homes/institutional care
- ?? Maintaining disaggregated data-base for all categories of children in difficult circumstances, including child labour, child marriage, disabled children etc. through Census and programme specific Management Information System (MIS)
- ?? Convergence with related Ministries / Department at Central & State levels
- ?? Enlisting support from the private sector

## **Chapter- III**

### **PROGRAMME FRAMEWORK**

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Through ICPS, the Ministry of Women and Child Development envisages to carve out a broad and comprehensive framework for child protection in the XI plan and set the foundation for creating and strengthening a robust protective environment for children. Child protection concept incorporates prevention, protection and rehabilitation aspects. Children have a right to be prevented from becoming subjects of violence, abuse, neglect and exploitation, and at the same time if they do become victims, the State has a duty to address the impact of violation of their rights through appropriate law, policy and action. This should be carried out with strong advocacy and a detailed implementation strategy for enhancing the infrastructure for protection services, increasing the access and range of services and increasing the investment for protection of children.

The Integrated Child Protection Scheme will focus on mapping of needs and services for children and families at risk and preparation of child protection plans at district and state levels, strengthening the service delivery mechanisms and programmes including capacity development of service providers, counseling and family support, strengthening knowledge base, awareness and advocacy. ICPS aims at greater outreach by bringing the existing programmes under one umbrella and initiating new interventions. The programme components of IPCS include:

#### **1. Improved Reporting and Redressal Mechanism**

##### **1.1. CHILDLINE Service:**

CHILDLINE is a 24 hour emergency phone outreach service for children in need of care and protection linking them to long- term services for rehabilitation. The service can be accessed by a child in difficulty or an adult on his behalf by dialing 1098. At present the CHILDLINE service is operational in 74 cities of the country. In order to create a protective environment for children in the country, it is important to expand the CHILDLINE service to all the districts/cities.

##### **CHILDLINE India Foundation (CIF) and it's Four Regional Centres:**

The CHILDLINE India Foundation is a voluntary organisation established by the Government of India in 1999 as the nodal agency for the CHILDLINE service to initiate and monitor the performance of CHILDLINE service in new cities and to conduct training/sensitization, research and advocacy at the national level on child protection issues.

Under the ICPS, CIF shall be given the status of a "Mother NGO" for running CHILDLINE Service in the country. The Ministry of Women and Child Development shall provide a bulk grant to CIF every year in two installments of 50% each, which shall be further released to the partner NGOs of CHILDLINE network by CIF. The Scheme shall strengthen the capacity of CIF by launching its Four Regional Centres in the country, besides supporting CIF's Headquarters in Mumbai.

In order to support CIF and its Four Regional Centres in carrying out the nodal responsibility of expansion and monitoring of CHILDLINE services in the country, the Scheme shall provide financial support. The detailed guidelines are being prepared.

##### **1.2. Special Juvenile Police Units (SJPU):**

The Juvenile Justice Act 2000 provides for setting up Special Juvenile Police Units in every district and city to coordinate and upgrade the police interface with children. All the police officers designated as juvenile/child welfare officers in the district or city are members of the SJPU. While some States/UT's have formed the SJPU, there are many State/UT's who have either not setup SJPU or are in the process of

setting up. The scheme shall provide for two social workers in each SJPU for supporting the unit. This is also a statutory requirement as the Juvenile Justice Act 2000 provides for two paid social workers to be placed in each SJPU. The District Child Protection Unit (refer page-29) in consultation with the Police Department shall appoint these social workers on contractual basis and their performance shall be evaluated at the end of the year before extending their services for another term.

The Scheme would facilitate the setting up of SJPU in each district or city expeditiously by providing financial assistance to the State Government. The detailed guidelines for setting up Special Juvenile Police Unit are being prepared.

### **1.3. Child Welfare Committees (CWCs):**

The Juvenile Justice (Care and Protection of Children) Amendment Act, 2006 recently passed by both the houses of Parliament makes it mandatory to have one Child Welfare Committee in each district as the final authority to dispose of cases for the care, protection, treatment, development and rehabilitation of children in need of care & protection and to provide for their basic needs and protection of human rights. While many State Governments and UT Administrations have setup the CWCs, there are still some State/UT's that are yet to set up the CWCs. Further, the number of CWCs constituted in many States/UT's are not adequate leaving a gap in implementation of the Juvenile Justice Act 2000.

In an effort to facilitate setting up of CWC's in every district and ensure their effective functioning, the Scheme shall provide adequate infrastructure and support in addition to financial assistance to the State Government and UT Administration. The detailed guidelines for setting up Child Welfare Committees are being prepared.

### **1.4. Juvenile Justice Boards (JJBs):**

The Juvenile Justice (Care and Protection of Children) Amendment Act, 2006 recently passed by both the houses of Parliament makes it mandatory to have one Juvenile Justice Board in each district to deal with matters relating to juveniles in conflict with law. There are many States/UT's in the country, which have not yet established JJBs. Even in those States/UT's where JJBs have been established, the infrastructure is inadequate making it difficult for the JJBs to effectively discharge their duties. In some States/UT's the number of JJBs are inadequate in terms of overall coverage of the total number of juveniles in conflict with law, which puts a lot of burden on the existing JJBs. All these ultimately result in unnecessary delays in disposition of matters pending before these Boards.

In an effort to facilitate setting up of a JJB in each district and ensure their effective functioning, the Scheme shall provide adequate infrastructure and support in addition to financial assistance to State Governments/UT Administrations. The detailed guidelines for setting up Juvenile Justice Boards are being prepared.

## **2. Improved Institutional Care**

### **2.1. Shelter Homes:**

The Juvenile Justice Act empowers State Governments to recognize reputed and capable voluntary organisations and provide them assistance to set up and administer Shelter Homes for children in need of care and protection. These homes function as a drop-in-centres cum night shelter for children in need of urgent support brought to such homes.

In order to facilitate and expedite setting up of Shelter Homes in every district or group of districts, the scheme would provide financial support to the State Governments and Union Territories. The detailed guidelines for setting up Shelter Homes are being prepared.

## **2.2. Children's Homes:**

The Juvenile Justice Act empowers the State Government either by itself or in association with the voluntary organisations to set up Children's Homes in every district or group of districts for the reception of the child in need of care and protection during the pendency of any inquiry and subsequently for their care, treatment, education, training, development and rehabilitation.

In order to facilitate and expedite setting up of Children's Homes in every district or group of districts, the scheme would provide financial support to the State Governments and Union Territories. The detailed guidelines for setting up Children's Homes are being prepared.

## **2.3. Observation Homes:**

As provided for under the Juvenile Justice Act, 2000, the State Government is empowered to establish and maintain either by itself or under an agreement with voluntary organisations, observation homes in every district or group of districts for the temporary reception of juveniles in conflict with law during the pendency of any inquiry regarding them under the Act.

In order to facilitate and expedite setting up of Observation Homes in every district or group of districts, the scheme would provide financial support to the State Governments and Union Territories. The budgetary allocation for setting up Observation Homes is being prepared. While setting up an Observation Home, the Minimum Standards of Care for Juveniles in institutions setup under the Act shall be adhered to.

## **2.4. Special Homes:**

The State Governments are empowered to establish and maintain either by itself or under an agreement with voluntary organisations, special homes in every district or group of districts for the reception and rehabilitation of juveniles in conflict with law.

In order to facilitate and expedite setting up of Special Homes in every district or group of districts, the scheme shall provide financial support to the State Governments and Union Territories. The detailed guidelines for setting up Special Homes are being prepared.

## **2.5. Special Shelter and Care measure for Children infected and affected by HIV/AIDS**

The growing epidemic of HIV/AIDS in India has affected the lives of children in many ways. Majority of them affected by the prevalence of HIV/AIDS include those children who have either lost their parents/siblings/extended family or those who are vulnerable because of their existing situation. There is a direct effect of the infection on children's health, nutrition, education and emotional well being. The indirect effects can be seen in increase of poverty, homelessness, malnutrition, discrimination including lack of access to mainstream resources like school and health care, psychological distress, neglect and maltreatment. The gender related risks like female foeticide, child sexual abuse, child marriage, etc. also increase.

In order to provide protection, care and support to meet both psychological and material needs of children infected/affected by and vulnerable to HIV/AIDS, the scheme shall support setting up of specialized shelter homes. These shelter homes shall create necessary infrastructure and promote all round development of children. Such homes shall have a child friendly atmosphere. The detailed guidelines for setting up Shelters Homes for Children infected and affected by HIV/AIDS are being prepared. The Scheme shall also support non-institutional care for children infected and affected by HIV/AIDS, which is part of the Sponsorship and Foster Care Placement programme at district level.

### 3. Quality Non-institutional and Alternative Care

#### 3.1. Shishu Grehas cum Cradle Baby Reception Centres

It is an accepted fact that the child develops best in his or her own cultural and social milieu in a family environment. Thus placement of a child through adoption in an indigenous setting is ideal for his or her growth and development. Inter-country adoption, i.e. adoption of Indian children by adoptive parents residing abroad, shall be resorted to only if all efforts to place the child with adoptive parents residing in India prove unsuccessful. Generally, in all matters concerning adoption, whether within the country or abroad, the welfare and interest of the child shall be paramount.

In order to encourage voluntary organizations to take on the responsibility for providing care, protection and nurturing of orphaned/abandoned children as well as to find placement for them in families for ensuring their proper growth and development, the scheme shall support setting up Homes (Shishu Grehas) for children in the age group of 0-6 in all the districts/cities of the country. These Shishu Grehas shall also function as Cradle Baby Reception Centres to receive abandoned babies for attempting to reduce and check female feticide/infanticide.

#### Cradle Baby Reception Centre

At least 60 million girls who would otherwise be expected to be alive are "missing" from various populations, mostly in Asia, as a result of sex-selective abortions, infanticide or neglect.<sup>82</sup> In India too female infanticide is a cause of growing concern, especially in states like Punjab, Haryana, Himachal Pradesh and Gujarat, where the ratio has "drastically declined" to fewer than 800 girls for every 1,000 boys. A national decline from 945 to 927 in the number of girls per 1,000 boys aged 0-6 between 1991 and 2001 indicates the seriousness of the problem.<sup>83</sup>

In order to address this issue, the scheme shall support the existing Shishu Grehas for setting up Cradle Baby Reception Centres in every district. Further, the scheme shall also provide for financial support in placing cradles in all the Primary Health Care Centres, Shishu Grehas and in the office of District Social Welfare or Women and Child Development Department of States/UTs to receive abandoned babies.

The detailed guidelines for setting up Shishu Grehas cum Cradle Baby Reception Centres in every district and placing cradles at important locations are being prepared.

#### 3.2. Adoption Coordinating Agency:

The Hon'ble Supreme Court in its judgment dated 27<sup>th</sup> September 1995 in the case of L. K. Pandey Vs. Union of India, observed that there may be Voluntary Coordinating Agency (VCA) in a State or in a city where there are more adoption agencies, for facilitating the search for a suitable Indian parent for the child within the country before he/she is proposed for inter-country adoption.

In order to facilitate VCAs (which are redesignated as Adoption Coordinating Agencies (ACAs) under the Revised Guidelines, 2004 laid down by GOI-CARA on Adoption) to achieve the objective of promoting the cause of in-country adoption for the permanent rehabilitation of orphaned, abandoned and surrendered children in family environment, and to popularize the concept of un-related adoption for wider acceptance in Indian society, the scheme shall provide financial support. The programme and activities of the Adoption Coordinating Agencies along with the details of financial assistance to be provided by the Central Government under this scheme is being prepared.

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<sup>82</sup> State of Worlds Population, UNFPA, 2005

<sup>83</sup> [Missing: Mapping the Adverse Child Sex Ratio in India](http://www.unfpa.org/news/news.cfm?ID=388), UNFPA, <http://www.unfpa.org/news/news.cfm?ID=388>

### **3.3. Sponsorship and Foster Placement Agencies (SFPA)**

Recognizing the family as the best place for a child, the scheme shall make sincere efforts to place an orphaned, surrendered or relinquished child in a family through adoption. However, if a suitable family for placing the child in adoption is not found, the next effort would be on identifying a foster family for the child. Fostering is an arrangement whereby a child lives with an unrelated family, usually on a temporary basis. Such an arrangement ensures that the birth parents do not lose any of their parental rights or responsibilities.

Sponsorship includes providing financial assistance to the family for preventing disintegration and increasing the capacity of the family to take care of the child. It prevents institutionalization of the children or relinquishment in case of severe economic crisis. The main objective is to help the family in difficult circumstances for a temporary period till they are able to take care of the children. Therefore, sponsorship programme shall not only cover those children who are in institutions, but also those children who are within their families and it is difficult for their family to meet all the basic needs of the child.

In order to promote foster care and sponsorship, the scheme will support setting up of a Sponsorship and Foster Placement Agency (SFPA) in every district. The SFPA shall be a registered voluntary organisation with experience of having worked on children's issues for a minimum period of three years which will be responsible for the placement of children with foster families in accordance with the provisions laid down under the proposed Foster Care and Sponsorship Guidelines. The SFPA shall promote, coordinate and monitor the foster care and sponsorship of children in need of care and protection at district levels under overall supervision of State Adoption Cell and the District Child Protection Unit. (Refer page-29 & 30). The SFPA shall identify a pool of competent foster carers in each district, who can provide children with care and protection while maintaining ties to family, community and cultural groups. The agency shall provide support and counselling services to foster carers at regular intervals first to prepare them for foster care and later for handling children and providing the child with proper care and protection. The SFPA shall encourage establishment of Foster Care Associations at district levels to enable the foster carers in providing mutual support and contribute to practice and policy development.

SFPA shall be responsible for sponsorship programme and it should be carried out through individual-to-individual sponsorship, group sponsorship or community sponsorship. On experimental basis the Scheme shall pilot Conditional Cash Transfer in three districts. The detailed guidelines for setting up Sponsorship and Foster Placement Agencies and piloting Conditional Cash Transfer in three districts are being prepared.

### **3.4. Drop-in Shelters for all Children in Need**

Nearly 29% of the India's population lives in urban areas. An average of 50% of the urban population live in conditions of extreme deprivation - compounded by lack of access to basic services and legal housing and poor urban governance.<sup>84</sup> The urban population is also rapidly expanding due to large-scale migration to cities for a possible better life. The cities and towns are also expanding but the sheer volume of people compromises the ability of the city to meet their basic needs. A large proportion of this migrating population ends up residing in slums in inhuman conditions. As a result, urban poverty and hunger are increasing.<sup>85</sup> All of this has led to a huge number of homeless children, pavement dwellers, street and working children and child beggars, who are left alone to fend for themselves.

In order to provide for the growing needs of all children in need, the Scheme would facilitate setting up of drop-in shelters, which would largely be established in urban areas with high numbers of children in need

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<sup>84</sup> Consortium for Street Children 2004, <http://www.streetchildren.org.uk/>

<sup>85</sup> Nutritional Problems in Urban Slum Children, <http://www.indianpediatrics.net/july2004/682.pdf>



of care and protection. Such centers shall focus on providing space for children where they can play and engage themselves in creative activities through music, dance, drama, yoga & meditation, computers, indoor and outdoor games, etc. and use their time productively. These activities would encourage meaningful peer group participation and interaction. This will ensure their overall growth and development, and keep them away from socially deviant behaviours in addition to fulfilling their basic requirements of food, nutrition and health. These shelters shall also have provisions where children can safely keep their belongings and earnings. Financial assistance shall be provided through the State Government/UT Administration to voluntary organizations for establishing such Drop-in Shelters. The detailed guidelines for setting up Drop-in Shelters for all Children in Need are being prepared.

### **3.5. After-care Organisations:**

The Act outlines for setting up an After-care Organisation and empowers the State Government to recognize a voluntary organisation as “After Care Organisation” to function as transitional homes to take care of juveniles or children after they leave special homes and children’s homes to enable them to lead an honest and industrious life. The objective of these After Care Organisations shall be to enable children/youths to adapt to the society and during their stay in these transitional homes these children/youths shall be encouraged to move away from an institution-based life in to the mainstream society. The aftercare organisation is meant for both the categories, juvenile in conflict with law and children in need of care and protection. The key component of these After Care Organisation shall be setting up temporary homes for a group of youths, who can be encouraged to learn a trade and contribute towards the rent as well as the running of the home. A voluntary organisation designated as After Care Organisation shall work towards preparing children/youths to assume self-reliance and to integrating them fully in the community through the acquisition of social and life skills. The organisation shall provide for regular educational and vocational training opportunities to children/young people for helping them to become financially independent and generate their own income. Child/youth in after care programme shall also be provided access to social, legal and medical services together with appropriate financial support. Once a child/youth is reintegrated in community/society, the after care organisation shall ensure regular follow up and support. The participation of members of community, panchayat and local bodies shall also be ensured to create an enabling environment for reintegration of children into the mainstream society and thereafter for follow up and support.

The Scheme shall provide financial assistance for carrying out after care programme for juvenile in conflict with law and children in need of care and protection. The detailed guidelines for setting up After-care Organisations are being prepared.

### **4. Counselling and Family Support:**

Programme initiatives to offer children protection, healing, care and rehabilitation are constrained by a serious lack of counselling institutions and services, and a tied lack of people who are professionally trained and socially enlightened to provide children in need the kind and standard of counselling they require, to enable them to recover from adverse experience or treatment, and to help build or re-build a caring and protective environment for them.

Many conditions and settings create or aggravate counselling needs. Children in need include those who may not be in a ‘visible’ trauma or post-trauma situation stemming from an external disaster, but who are in socially, psychologically or emotionally ‘at risk’ situations, including in family or household settings, as also in settings where they come in contact with services of the State and other institutions.

Besides children, counseling for families at risk as well as families of children in difficult circumstances will be an integral component of the ICPS. The Counsellors in the District Child Protection Units shall be responsible for providing counseling services to children and families.

Counselling skills and action are urgently required in a range of service delivery and service contact settings and infrastructures. There is need to invest in increasing training and educational capacity of institutions.

This places on the State the three-fold responsibility of (i) ensuring education and training at professional standard, (ii) development/establishment of a competent and accountable counselling infrastructure as an integral component of all relevant delivery systems affecting the child, and (iii) recruitment and placement of trained personnel.

The ICPS shall address the priority need for improved and expanded provision of training in counselling and child rights, and aim at a significant increase in the provision of counselling services to children in need and at risk. The detailed guidelines for strengthening human resource for counseling and family support are being prepared.

## **5. Training and Capacity Building**

Training and capacity building of all personnel involved in the child protection sector throughout the country including those working under the ICPS shall be taken up on priority basis. There is an acute shortage of professionally trained manpower to provide all kinds of services to children in difficult circumstances. There are a large number of personnel working in existing institutions, whether run by Government or by non-governmental organizations, who need to be provided with adequate skills and hands on experiences for dealing with children in an effective manner and providing them quality services. Besides, there is a need to train a cadre of professionals who are currently not a part of the child protection service delivery mechanism. Such personnel need to be trained and groomed to join the child protection workforce to provide child friendly services at all levels. In order to meet these challenges, the ICPS shall adopt following strategies:

**5.1 Training & Capacity building of service providers:** In order to ensure effective service delivery to children in need, regular training and capacity building of all service providers (Government and Non-Government) at various intervals including at the time of induction and subsequently through refresher courses is a necessary requirement. These trainings should be made mandatory. Different packages based on category/level of staff and subject should be developed to carryout such trainings.

**5.2 Sensitization Programme for members of the allied systems:** The members of allied systems viz. police, judiciary, health care system, education system, transport, labour and telecommunication departments, media, corporate sector, teachers, elected representatives and members of community, etc. should also be reached through specialized training and sensitization programmes. These programmes should be focused on rights of the child, protection issues and services available as well as their roles and responsibilities towards children.

**5.3 Training of Trainers:** In order to ensure wider outreach of capacity building programmes, a cadre of master trainers on Child Protection issues should be developed at district, state and national levels. Skill up-gradation of these master trainers should be an integral component of any capacity development programme. This will help ensure uniformity in dissemination of information and knowledge as well as ensure continuity in capacity building of service providers at grassroots levels.

**5.4 Development of training modules and course curricula:** In order to carry out above mentioned training and capacity building courses, subject specific training modules and course curricula should be developed keeping in view the level and requirements of the personnel to be trained. The existing training modules and course curricula on child protection should be examined to see

whether they cover the important aspects of child protection issues including child rights, counselling, juvenile justice, trafficking and other protection issues and on the basis of that, need based modules and curricula should be developed. In this process, help of professionals, experts and agencies (both national and international) working in the field of child protection should be taken. Facilitators' Manuals should be developed to enable trainers in effectively conducting training and capacity building programmes at local levels.

**5.5 Sharing of experiences and best practices:** Promoting sharing of experiences and best practices through district, state and national level workshops, exchange programmes and exposure visits that provide a platform to the functionaries to interact and share their experiences and expertise with others is highly recommended. Sharing of best practices promotes healthy competition amongst the functionaries and units. During such workshops, awards and recognition to best performing unit and workers can be given as a token of appreciation and promoting healthy competition.

**5.6 Linkage with Universities and Educational Institutions:** The linkage with universities and educational institutions for formulating new courses on Child Protection issues and developing a cadre of professionally equipped manpower to deal with children is necessary. The scheme shall work with Universities and Educational Institutions for formulating new courses on Counselling and other specialized child protection issues for building a cadre of professionally equipped manpower to work for the child protection sector in the country. Proposals for such innovative courses shall be welcomed by the scheme and it would provide financial assistance to such Universities and Educational Institutions for formulating and launching such innovative courses.

**5.7 Life Skill Education for Children:** Children in difficult circumstances especially those in institutions shall be provided life skill education to enable them to deal effectively with demands and challenges of everyday life and promote their physical, mental and emotional well being. Life skills education would help these children prepare themselves for facing the realities of life and effectively manage the demands and challenge. The scheme shall provide financial assistance for developing course curricula and conducting such life skill education programmes for children to bring out a behaviour change and facilitate them to improve their thinking levels.

These shall be achieved through the Regional Centres of NIPCCD. The scheme (ICPS) proposes to set up a Child Protection Section within NIPCCD to facilitate implementation of all child protection training and capacity building activities. Strong networking and coordination shall be developed with NISD, NIMHANS, National Judicial Academies, Police Training Schools and Administrative Institutions/Academies, CHILDLINE and recognized schools/institutes of social work and law and other relevant experts for introducing child rights and child protection issues in their on-going training courses and also for providing necessary expertise in developing child protection training modules and packages as well as in carrying out capacity building programmes.

The scheme shall provide bulk grant to State and District Child Protection Units and State Adoption Cells for implementing training and capacity building programmes. The detailed guidelines for supporting training and capacity building initiatives are being prepared.

## **6. Strengthening the Knowledge-base**

A protective environment for children requires an effective monitoring system that records the incidence and nature of child protection abuses and allows for developing informed and strategic responses. Lack of data adversely affects planning of appropriate access and nature of services required for children. Under the ICPS following specific measures shall be developed and strengthened:

### **6.1. Child Tracking System including web-enabled child protection data management software and website for missing children**

Under this component, the ICPS intends to create a systematic and centralized mechanism for data collection and management to follow up on and track children in institutional care or other non-institutional care alternatives and children who remain out of safety net. It would develop a system of data collection and indicators consistent with the Convention and disaggregated by gender, age, social status (Scheduled Castes and Tribes), marginalized groups and urban and rural area and make it publicly available. This system would cover all children up to the age of 18 with specific emphasis on those who are particularly vulnerable, are marginalized, have disabilities, HIV/AIDS, etc. it would enable the Ministry in developing information systems and regular monitoring and analysis of key indicators on child protection. It would help promoting reporting on key child protection indicators to policymakers, general public and regional and international monitoring mechanisms.

The Ministry of WCD, with support of UNICEF, has already started working on developing an effective system for child protection data management and reporting as well as a tool for monitoring the implementation of all its child protection schemes. This is to be achieved by developing a web-enabled data management system on child protection by creating a resource base for child protection issues within the National Institute of Public Cooperation and Child Development (NIPCCD) and at State and District Child Protection Units. It is also planned to develop a national website for tracking missing children and their ultimate repatriation and rehabilitation. The website will be linked to the State and District Child Protection Unit, all Police Stations and Childlines. The project is part of the present GOI-UNICEF Annual Work Plan of Cooperation for 2006 under which the process of developing data management system as well as website for missing children is ongoing. UNICEF proposes to support the entire activity for initial project period of 23 years after which the project is to be handed over to a fully trained manpower within NIPCCD. A separate cell has been proposed at NIPCCD for carrying out this activity, which will be manned by the contractual staff under GOI-UNICEF Project for initial period of 2-3 years, during which a permanent team comprising of Government Officials within NIPCCD will be appointed and trained. The Scheme shall provide assistance for establishing the Data Management Cell within NIPCCD and in the State and District level structures for implementation of the scheme. The detailed guidelines are being prepared.

### **6.2. Research and Documentation**

The focus shall be on strengthening capacities at various levels (including those of children and adolescents) to conduct rapid assessment of protection issues related to children in difficult circumstances as well as analyzing and applying data and research on child protection. This would help in planning, monitoring and strengthening policy and programme implementation at different levels. Child impact studies will be undertaken when planning programmes relating to economic and social policies. The scheme would facilitate in carrying out comprehensive studies to assess the causes, nature and extent of specific child protection issues like trafficking and commercial sexual exploitation of children; violence; children in conflict with the law and any other area for which data and information cannot be gathered through regular systems.

The scheme would also support to investigate and research areas of potential or new threats to child protection to build knowledge, evidence and integrate into policy and programmes, such as livelihood security, migration, internal displacement, internet and other technologies and their relationship to child rights. The State and District Child Protection Units shall have adequate budgetary provisions for supporting such activities. The detailed guidelines are being prepared.

## **7. Advocacy and Communication**

It is an accepted fact that the awareness about child protection issues is almost negligible in the country. Not only that, even the understanding of the term 'Child Protection' is almost non-existent. The role of

advocacy and communication in changing mind-sets at all levels is important for achieving child protection goals. People are not aware about the rights of the child and existing mechanisms in terms of policies and legislations to protect those rights of children. Every day thousands of children become victims of neglect, abuse and exploitation in the country.

There are various schemes/programmes being implemented by Government of India and State Governments on child protection. However, the awareness about such programmes is generally poor and therefore people are not able to avail services under those programmes. People are not even aware about the competent authority in their State/district to provide for care and protection of children in difficult circumstances. The lack of awareness about adoption programmes amongst childless parents works as a barrier to promotion of child adoption as a form of alternate care.

ICPS shall facilitate and evolve an effective communication strategy for child protection, seeking partnership with international organizations including UNICEF, UNDP, UNIFEM, UNAIDS, ILO, WHO, etc. and convergence with the Ministry of Information and Broadcasting. The Ministry of Women and Child Development would take help of the Ministry of Information and Broadcasting in getting support of Prasar Bahrati, Private televisions channels, All India Radio, Private Radio Broadcast (FM), cable operators, etc. for:

- ?? Broadcasting special child protection messages through audio-visual spots, talk shows, quiz competitions, news broadcasts, educational programmes, etc.
- ?? Regular dissemination of information regarding services available for children in distress
- ?? Building media understanding on child rights and ensuring sensitivity to child protection issues and respect for child's dignity and worth

In addition, a comprehensive media campaign on child protection in the country will be launched under the ICPS through all the means of mass media including television, newspapers, periodicals, magazines, cinema halls, radio, etc. The campaign will include advertisements in newspapers, periodical, magazines, etc. on child protection issues and services; printing and dissemination of Information, Education and Communication (IEC) materials like Posters, Pamphlets/handbills, Booklets, etc. on child protection issues; consultations and Advocacy Workshops with members of allied systems, communities and local bodies and awareness generation programmes through folk media (street plays, puppet shows, etc.). The detailed guidelines for developing and implementing advocacy and communication strategies are being prepared.

### **8. General Grant-in-aid for Need based/Innovative Interventions**

While an attempt has been made to incorporate all major interventions/services for all children in difficult circumstance in the ICPS, the Ministry recognizes the importance of supporting other need-based/innovative intervention programmes also. Such programmes shall depend on the specific needs of a district/city and can be initiated as pilot projects. There shall be an impact assessment and evaluation of the project and based on the assessment report and its recommendations the project can be extended for the required period. Under this component the Scheme shall provide flexibility to the State Government to initiate innovative projects on those issues, which are not covered under the components of this scheme. The State Child Protection Unit shall have a general grant-in-aid fund under which such projects can be supported. Detailed guidelines for providing financial support for running need based/innovative child protection projects/interventions under ICPS are being prepared.

### **9. Monitoring and Supervision**

The monitoring and supervision of the implementation of the ICPS shall be taken up at various levels. At State level, the State Child Protection Unit and State Adoption Cell would carryout supervision and monitoring of all the District Child Protection Units and all other child protection schemes and programmes being run in the State/UT. At district level, the District Child Protection Unit shall monitor

and supervise all the child protection programmes. The reporting authority at State level would be the State Secretary heading the State Child Protection Unit and at District level the District Magistrate. At local and grassroots levels local bodies, panchayats and voluntary organizations including CHILDLINE will be involved in planning, monitoring and supervision of child protection programmes under the overall ambit of public-private partnership. At central level the Ministry of Women and Child Development shall monitor and supervise the entire programme. The scheme shall provide flexibility to the Ministry of WCD for having the monitoring and supervision exercise conducted by independent agencies once in three years.

At State levels, the disbursement of grant-in-aid to voluntary organizations shall be on the basis of their performance leading to course correction. The detailed guidelines for monitoring and supervision are being prepared.

**Chapter- IV**  
**PROGRAMME IMPLEMENTATION (SERVICE DELIVERY) STRUCTURE**

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**1. State and District Child Protection Units**

The National Plan of Action for Children, 2005 formulated by Government of India in its objectives on Child Protection has asserted the need for creation of an effective support system for all children in all kinds of difficult circumstances and vulnerable situations through the creation of an appropriate Authority for Child Protection.

In order to put this objective of the National Plan of Action for Children, 2005 in to practice, the Scheme proposes to setup a “**State Child Protection Unit**” in each State/UT and “**District Child Protection Unit**” in each district to ensure effective implementation of Juvenile Justice (Care and Protection of Children) Act 2000 and ensure the coordination of associated child protection services for vulnerable and destitute children including juveniles in conflict with law. The unit shall implement, supervise, monitor and evaluate all the child protection programmes being implemented under the Integrated Child Protection Scheme including Grant-in-aid schemes. An officer of the rank of Secretary to the State Government/UT Administration dealing with child related programmes/services shall head the Unit.

Duties of State Child Protection Unit

The specific duties of the State Child Protection Unit shall include:

1. Implementation, supervision and monitoring of the Integrated Child Protection Scheme (ICPS) and all other child protection scheme/programmes and agencies/institutions at State levels;
2. Guide, support and monitor functioning of the District Child Protection Unit and ensure proper flow and utilization of funds to the districts through ICPS and other grant-in-aid schemes;
3. Ensure effective implementation of the Juvenile Justice (Care and Protection of Children) Act, 2000 by:
  - Supporting creation of adequate infrastructure, viz. setting up of JJBs, CWCs and homes in each district
  - Supporting inter-state and intra-state transfer of children to ensure restoration to their families
  - Training and capacity building of functionaries (Government/Non-Government) working under juvenile justice system
  - Supervision, monitoring of all institutions in the State/UT being run under the Act
4. Ensure effective implementation of other legislations and policies for child protection in the State viz. National/State Plan of Action for Children, 2005; Hindu Adoption and Maintenance Act (HAMA), 1956; Guardians and Wards Act (GAWA), 1890; Child Labour (Prohibition and Regulation) Act, 1986; Child Marriage and Restraint Act, 1979 and Immoral Traffic Prevention Act, 1986, etc. and any other Act that comes into force during the implementation of this scheme and deals with child protection issues;
5. Network and coordinate with all other departments/organizations dealing with child related issues, viz. Department of Health, Directorate of Education, State AIDS Control Society, Urban Basic Services and Department of Labour, etc. so as to establish linkages for providing effective services to children;
6. Carry out need-based research and documentation activities at state-level for assessing the number of children in difficult circumstance and creating State-specific databases to monitor trends and patterns of children in difficult circumstances;
7. Training and capacity building of all personnel (Government and Non-government) working under child protection system to provide effective services to children;
8. Quarterly Progress report to the Ministry of Women and Child Development, Government of India on programme implementation and fund utilization;

9. Liaisoning with the Ministry of Women and Child Development, Government of India and State Child Protection Units of other States/UTs.

#### Duties of District Child Protection Unit

The District Child Protection Units shall coordinate and implement all child protection activities at district levels. The specific duties of the District Child Protection Unit shall include:

1. Identify families at risk and children in need of care and protection through effective networking and linkages with the ICDS functionaries, Sponsorship and Foster Placement Agencies (SFPA), NGOs dealing with child protection issues and local bodies viz. Panchayats, Gram Sabhas, Urban Local Bodies, etc.;
2. Implement, supervise, monitor and evaluate the Integrated Child Protection Scheme (ICPS) and all other child protection programmes/schemes and agencies/institutions at district/city levels;
3. Ensure effective implementation of the Juvenile Justice (Care and Protection of Children) Act, 2000 at district/city levels by:
  - Supporting creation of adequate infrastructure viz. setting up JJBs, CWCs and homes in each districts
  - Supporting transfer of children at district levels for either their restoration to their families or placing the child in long/short-term rehabilitation through adoption, foster care and sponsorship
  - Training and capacity building of functionaries (Government/Non-Government) working under juvenile justice system in district in consultation with Joint Director (Training) from the State Child Protection Unit.
  - Supervision, monitoring of all institutions in the district being run under the Act
4. Ensure effective implementation of other legislations and polices for child protection in the State viz. National/State Plan of Action for Children, 2005; Hindu Adoption and Maintenance Act (HAMA), 1956; Guardians and Wards Act (GAWA), 1890; Child Labour (Prohibition and Regulation) Act, 1986; Child Marriage and Restraint Act, 1979 and Immoral Traffic Prevention Act, 1986, etc. and any other Act that comes into force during the implementation of this scheme;
5. Support State Adoption Cell in identifying adoptable children from the district preparing a district-level database of adoptable children;
6. Promote and facilitate adoption, foster care and sponsorship in the district with the help of Shishu Grehas cum Cradle Baby Reception Centre and Sponsorship and Foster Placement Agency (SFPA);
7. Network and coordinate with all other departments/organizations dealing with child related issues, viz. Department of Health, Directorate of Education, State AIDS Control Society, Urban Basic Services and Department of Labour, etc. so as to establish linkages for providing effective services;
8. Carryout need-based research and documentation activities at district-level for assessing the number of children in difficult circumstance and creating district-specific databases to monitor trends and patterns of children in difficult circumstances;
9. Develop parameters and tools as well as supervise and monitor child protection programme in the district;
10. Develop and manage a child tracking system at district levels including management of online data management system and website for missing children;
11. Supervise and monitor all institutions/agencies providing residential facilities to children in district;
12. Train and build capacity of all personnel (Government and Non-government) working under child protection system to provide effective services to children;
13. Organize quarterly meeting with all stakeholders at district level including CHILDLINE, SFPA, superintendents of homes, NGOs and members of public to review the progress and achievement of child protection activities;
14. Submit quarterly report to the State Child Protection Unit and State Adoption Cell on status of implementation of its programmes and services;



15. Liaison with the State Child Protection Unit, State Adoption Cell and District Child Protection Units of other districts.

Detailed guidelines for setting up State/District Child Protection Units along with financial support to be provided by the Central Government under this scheme are being prepared.

## **2. State Adoption Cell**

The In-Country Guidelines of Central Adoption Resource Agency (CARA) for regulating in-country adoptions of children provides for setting up a State Adoption Cell in every State/UT. However, a very few States/UTs have set up these Cell so far. The ICPS shall provide support to the State Governments/UT Administration in setting up such Cells.

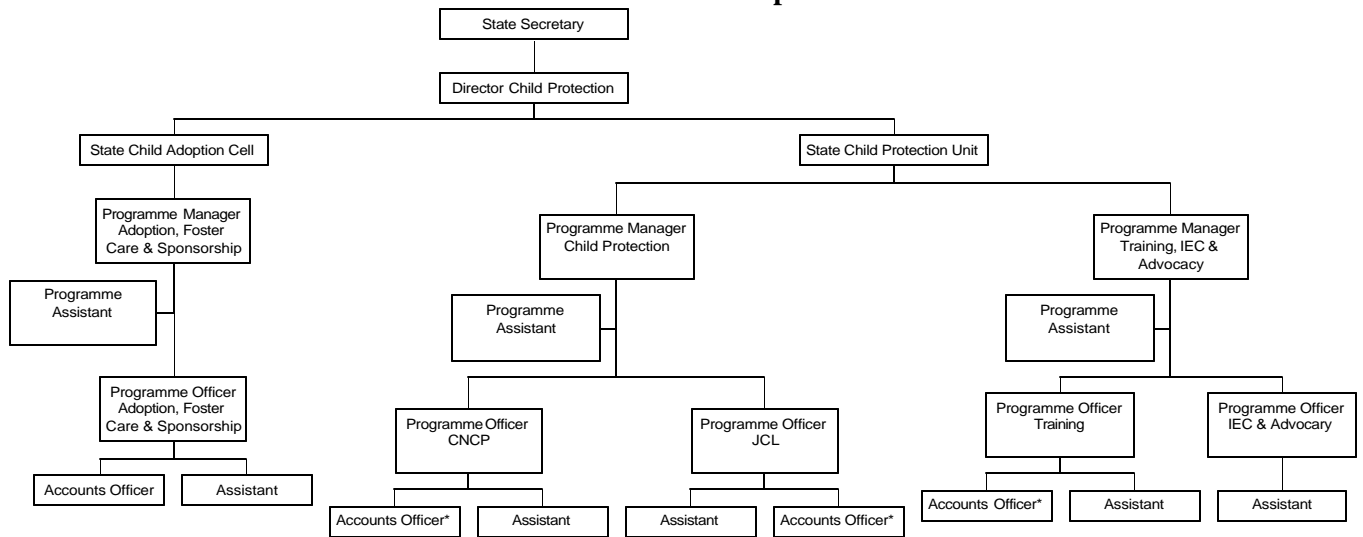
The State Adoption Cell shall be setup at each State/UT to facilitate, supervise and monitor all the adoption programmes and agencies at State levels with support of the Central Adoption Resource Agency (CARA). The Cell shall liaison with the District Child Protection Unit at District levels and provided technical support to the Child Welfare Committees and Juvenile Justice Boards in carrying out the process of rehabilitation and social reintegration of all children through adoption, foster care and sponsorship. The specific roles and responsibilities of the State Adoption Cell shall include:

### Duties of State Adoption Cell

- ?? Ensure that all Adoptions/permanent placements of children are done in accordance with the Laws & Guidelines of the Supreme Court of India and Government of India;
- ?? Promote in-country and regulate inter-country adoptions;
- ?? Identify adoptable children with the help of District Child Protection Units, ICDS functionaries and local bodies and maintain a centralized (state-specific) database of adoptable children;
- ?? Coordinate the Adoption Coordinating Agency (ACA) and Sponsorship and Foster Placement Agencies (SFPA);
- ?? License Child Care Institutions (CCIs) to do Indian Adoptions and recommend to CARA appropriate CCIs to be recognized as Inter-Country Placement Agencies;
- ?? Maintain a comprehensive List of CCIs involved in adoption;
- ?? Ensure that all adoptable children are registered and place adoptable children with prospective adoptive parents (PAPs) and to handle matters incidental thereto;
- ?? Act as the clearing house of adoption information at the state level;
- ?? Furnish the list of adoptable children and prospective adoptive parents to CARA and facilitate inter-state placement of children, where necessary;
- ?? Enhance capacity of district level functionaries involved in adoption including child protection officers and counselors;
- ?? Provide comprehensive and desegregated adoption data to CARA in the prescribed format on monthly basis;
- ?? Take necessary punitive action when malpractices occur in the adoption programme whether by licensed /recognized adoption agencies or by unlicensed individuals or organizations;
- ?? Check and take necessary action in all malpractices in adoption including illegal adoptions;
- ?? Awareness generation for promoting adoptions in the State.

Detailed guidelines for setting up State/District Child Protection Units along with financial support to be provided by the Central Government under this scheme are being prepared.

### 3. Structure of State Child Protection Units and State Adoption Cell

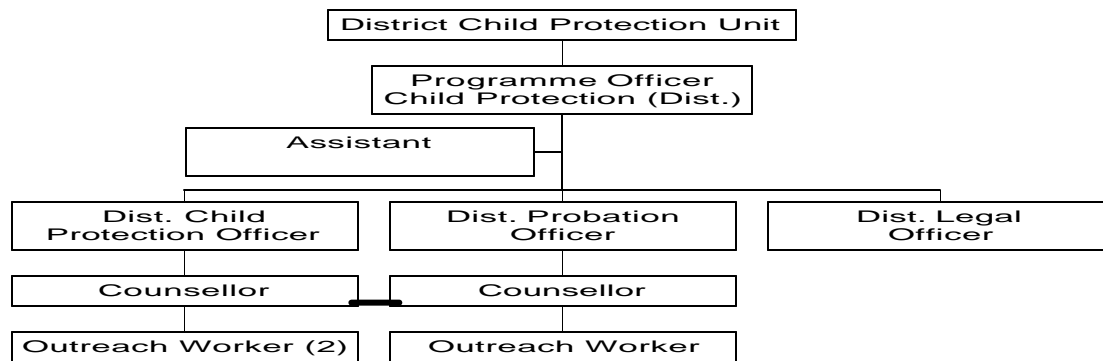


\*Same person, one Accounts Officer for the State Child Protection Unit.

**Note:**

- ?? Except State Secretary and Director dealing with child related services all other staff members to the unit shall be engaged on contractual basis. The scheme shall allow the flexibility to increase the number of staff on the basis of the geographical spread and population of the State.
- ?? At District level the State Adoption Cell shall coordinate with the Programme Officer Child Protection and District Child Protection Officer
- ?? Programme Manager Training shall be responsible for training and capacity building of all personnel including those working in Adoption System

### 4. Structure of District Child Protection Units



**Note:**

- ?? All the staff members to the unit shall be engaged on contractual basis. The Probation Officer already on the existing pay scale of the State shall continue to receive the same scale, however, the new recruits on the post of Probation Officer shall receive a consolidated salary as indicated in the budget under the detailed guidelines given at Annexure-I. The scheme shall allow the flexibility to increase the number of staff on the basis of the geographical spread and population of the State.
- ?? One Counsellor shall be appointed in a District Child Protection Unit and the same person will work under both Dist. Child Protection Officer and Dist. Probation Officer

## **Rationale for Government – Civil Society Partnership**

A programme of this magnitude and nature requires multidisciplinary staff that is professional and committed to children and their rights. It has been consciously decided to have these personnel on a contractual basis for the following reasons:

- ✍ Implementation of scheme would be more effective if staff is recruited on contractual basis- minimum of three years and extendible for a period of 5 years based on performance. They can be paid consolidated remuneration with built in increment provisions that is performance based;
- ✍ It will attract professional talent, strengthen public-private partnership and reduce permanent liability on government;
- ✍ Contractual employment, outsourcing and performance linked promotion will ensure that the establishment is trim, active and responsive to the needs of the children;
- ✍ By doing away with rigid government structures, the programme will have flexibility and scope for innovation

**Chapter- V**  
**RESOURCE REQUIREMENTS & RESOURCE LEVERAGING- FUNDING FLOWS AND COST**  
**NORMS**

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The Ministry of Women and Child Development is in the process of finalizing this chapter with detailed budgetary provisions along with cost norms for each component of this scheme. The cost is being worked out keeping in view the requirements at District, State, Regional and National levels. In the meantime, the Ministry of Women and Child Development has worked out an estimate cost for the implementation of the ICPS nationwide. The break up of the proposed financial outlay is as under:

<b>Sl. No.</b>	<b>Component</b>	<b>Proposed Budget (In Rs. Crores)</b>
1.	District level Costing	1000.00
2.	State level Costing	700.00
3.	Regional level Costing	200.00
3.	Central level Costing	100.00
	<b>Total</b>	<b>2000.00</b>

The detailed budget estimates along with the cost norms and guidelines would be submitted separately.

## **Revised Rajiv Gandhi National Creche Scheme for the Children of Working Mothers**

### **I. INTRODUCTION**

With increased opportunities for employment for women and the need to supplement household income more and more women are entering the job market. With the breaking up of joint family system and the increased phenomenon of nuclear families, working women need support in terms of quality, substitute, care for their young children while they are at work. There has, however, been very slow growth of Crèche/ Daycare facilities, resulting in failure to meet the needs of working mothers in terms of extent, content and quality of services. Crèche and Daycare Services are not only required by working mothers but also women belonging to poor families, who require support and relief from childcare as they struggle to cope with burden of activities, within and outside the home. Effective day care for young children is essential and a cost effective investment as it provides support to both the mothers and young children. It is also a protection measure as it addresses issues such as child labour, school drop outs, child prostitution, out reach for medical and health programme female literacy etc., Hence, there is an urgent need for improved quality and reach of child day care services for working women among all socio-economic groups in both in the organized and unorganised sectors.

The need for child care services has been emphasized in the National Policy for Children, 1994, National Policy for Education, 1986 and National Policy for Empowerment of Women, 2001 and the National Plan of Action for Children, 2005. The Parliamentary Standing Committee on demand for grants for the year 2002-03 has also pointed out that all sections of the society should be allowed to avail the services of the creches. Labour Legislations also contain provisions for child care facilities for women workers. The National Common Minimum Programme also emphasises enhancement of child care and development services in the future. Thus there is need for an expanded and effective scheme for childcare facilities.

### **II. PHYSICAL INFRASTRUCTURE AND SERVICE DELIVERY**

A crèche centre must have a minimum space of 6-8 sq. ft. per child to ensure that they can play, rest, and learn without any hindrance. The Centre should be clean, well lighted with adequate ventilation. A fan should also be installed in the Centre where electricity supply is available. The centre must have clean toilet and sanitation facility that caters to the needs of small children. There should be adequate safe play area outside the Centre also. Within the Centre, there should be sleeping facilities for children, i.e. mattresses, cradles, cots, pillows and basic infrastructure to meet the requirement of the children.

Essential play material and teaching and learning material must be available to meet the needs of pre-school children. The cooking area must be located at the place, which is away from the activity area of the children to avoid accidents. Basic cooking equipment like stove, gas cylinder or the traditional chulhas must be available and safely placed. Attendance Register must be maintained at every Centre, duly filled up. It should be available for inspection at any time during the working hours of the crèche centers.

Implementing Agencies and the Crèche Workers must ensure linkages with the local Primary Health Centre or sub-Primary Health Centre in the area. They should also have a tie-up with the nearby anaganwadi centres and its workers for health care inputs like immunization, polio drops, basic health monitoring. Community support including support from Panchayati Raj Institutions is also envisaged in the Scheme to ensure their participation and to supplement the grant of the Government. The provision of non-recurring grant has been made in the scheme to enable the implementing agencies to provide the basic minimum facilities to ensure that the children in the centre have a hygienic, healthy and child friendly environment for their proper growth and care.

### **III. FOOD AND OTHER ESSENTIALS**

- ?? The centre must at all times be equipped with a basic First Aid Kit containing pediatric medicines for common ailments like fever, vomiting, cough and cold, dehydration, common stomach ailments, minor injuries, ointments, band-aids, cotton wool, disinfectants.
- ?? The Centre must have adequate cooking facility, cooking utensils, utensils to feed the children- which should be cleaned regularly before and after use. They should be kept in an identified space.
- ?? The Centre must have a safe and regular drinking water source. If necessary, chlorination or boiling of drinking water must be done.
- ?? Food provided to the children must have adequate nutritional value and there should be variety in the food that is given to the children every day.
- ?? The food should be acceptable to the babies and children. For this, the workers should know what are the nutritious preparations suitable for babies and children and they must cook food with due care and cleanliness.
- ?? Weekly visits by doctors should be carried out for treatment and checkup.

### **IV. USERS CHARGES**

Users charges @ of Rs. 20/- per child per month may be collected from children from BPL families and Rs, 60/- per child per month from other families. This will ensure of participation with the community and also increase the centres' resources, which can be utilized as rent or for better facilities at the crèche. It should be ensured that 50% of the children coming to these crèche are from BPL families.

### **V. CRITERIA FOR SELECTION OF NGOS**

The new creches will be sanctioned to the present Implementing Agencies, viz, Central Social Welfare Board, Indian Council for Child Welfare and Bhartiya Adim Jati Sevak Sangh. The Creches will be allocated to a State/UT on the basis of the proportion of child population. Uncovered districts/tribal areas under the Scheme will be given highest priority while extending the scheme to ensure balanced regional coverage. Priority will be given to 87 uncovered districts, i.e. those districts that do not have even one creche.

### **VI. CRÈCHE WORKER'S TRAINING**

The component of Training has been added to the Scheme to orient the Crèche Workers as well as the Implementing Agencies to provide better services and to build up child friendly environment in the Centre. A short term training will be provided to every crèche worker and helper. The training module, which will be made with the help of NIPCCD will be provided through training agencies that will be identified with the help of State Governments. The following points must be kept in mind for imparting training:

- ?? A crèche worker and helper will undergo a short-term training after he/she joins.
- ?? Training will emphasize on areas such as childcare, health –first aid, Cardio Pulmonary Resuscitation, emergency, handling hygiene.
- ?? Pre-school education has to be provided to children in the age group 3-6 years. This will be based on Early Childhood Education guidelines for which the crèche workers will be trained. They will be taught how to engage children in a variety of pre-school activities with adequate teaching and learning material.
- ?? The crèche workers will also be trained to teach the children basic and personal hygienic habits.
- ?? The crèche workers will be trained on nutrition and methods of cooking healthy, tasty and nutritious food. To develop basic understanding among the crèche workers about the need and importance of day care for children.

- ?? To enable them to develop better understanding of critical issues of child survival, growth and development with special reference to children below three years and to orient them to integrated approach to child development.
- ?? To develop skills in them for organizing various activities to promote all round development of children.
- ?? To develop skills in addressing the psycho-social care of young infants and toddlers.
- ?? To enable the participants to plan and prepare need based programme for holistic development of child.
- ?? To develop in them an appreciation about the need of parent participation and community involvement in the crèche programme.
- ?? Develop the capacity to work with parents. After training the Creche workers will be expected to perform following functions:
  - ✍ Organize pre-school education activities for children between 3 to 6 years of age based on the ECE guidelines provided during training.
  - ✍ Organize stimulation activities for children below 3 years.
  - ✍ Prepare low cost teaching learning aids.
  - ✍ Teach Personal hygiene Habits to the Children.
  - ✍ Prepare Nutritious food for children attending the crèche centre.
  - ✍ Keep the centre and its surroundings neat and clean.
  - ✍ Motivate parents for immunization and obtain assistance of health staff in ensuring immunization of children.
  - ✍ Provide proper arrangements for sleep and rest of children.
  - ✍ Ensure regular home visits and mothers meetings to elicit community participation.
  - ✍ Create awareness about better child care in the community; and
  - ✍ Maintain records and register.
  - ✍ Ensure weekly visits by doctors/healthworkers.

## **VII. MONITORING OF THE CRECHES**

To ensure effective running of the Scheme and also ensure that the beneficiaries get all the elements of the scheme. There should be regular monitoring of the creches. Monitoring of the Creches being run under the Scheme will be conducted through independent agencies, to be identified in each State, which will submit reports direct to the Central Government. It is expected that every crèche will be inspected at least once in period of two years. Schools of Social Work, Women's Studies Centers and other reputed agencies will be engaged to monitor crèche units. They will be regularly provided list of sanctioned units in their respective areas with complete address and details of the NGO. A lump sum one time grant of Rs. 10,000/- would be given to each nodal agencies and Rs. 700/- per crèche visited and inspected.

A uniform format will be provided to the Monitoring Agencies to ascertain that the basic minimum requirements are being met with in each Crèche Center. The Monitoring Agency must review the Centres in all aspects. They must in the course of the inspection also assess the motivation and capacity of the Implementing Agencies.

## **VIII. TYPE OF ACTIVITIES TO BE ASSISTED**

Assistance will be provided for developing comprehensive day-care services for the babies (0-6 year) of working and other deserving women provided the monthly-income of both the parents does not exceed Rs. 12000/-.

## **IX. SCHEMATIC PATTERN**

The present scheme will provide assistance to NGOs for running crèches for babies (0-6 years) and would provide assistance to ensure sleeping facilities, health-care, supplementary nutrition, immunization etc.

for running a crèche for 25 babies for eight hours i.e. from 9.00 A.M. to 5.00 P.M. The schematic pattern of expenditure is indicated below:

#### Recurring Grant

S. No.	Recurring Grant admissible for	Ceiling of expenditure	of Grant
1.	Provision for workers per crèche (two workers)	Rs. 2000/- per month	Rs. 2000/- (100%)
2.	Supplementary nutrition per crèche for 25 children @ Rs. 2.00 per child for 25 days.	Rs. 1217/- per month	Rs. 1217/- (100%)
3.	Emergency medicine and Contingencies (per crèche)	Rs. 350/- per month	Rs. 350/- (100%)

#### Non-recurring Grant

S. No.	Admissible Grant	Ceiling of expenditure	of Grant
	Non-recurring grant for the period of five years	Rs. 10,000/- and a subsequent grant of Rs. 5000/- at an interval of five years towards replacement of consumable stores on cost per cent basis.	Rs. 10,000/- (100%) once in the beginning of every new crèche) Rs. 5000/- (100% at five years intervals)

### **X. EXTENT OF ASSISTANCE**

The Government assistance can only be on a limited scale and should not induce too much dependence on the part of the voluntary institutions on such help and the efforts of the voluntary sector should be to utilize the Government assistance towards snowballing resources for widening the scope of the programme with increasing voluntary contributions. The government recognizes the need for more creches and day care facilities and realizes that, as the scheme comes to be implemented not only would the children looked after properly, but their parents would have greater freedom to work without norms and that would lead to an increase in their efficiency. The Government assistance will be limited to 90% of the schematic pattern (except salary of crèche workers and helpers) or actual expenditure whichever is less and the remaining expenditure will have to be borne by the Institution/Organization concerned.

If an institution has already received or is expecting to receive a grant from some other official source for a project for which application is being made under this scheme, the assessment of central grant will normally be made after taking into consideration the grant from such other official sources.

### **XI. PROCEDURE FOR SUBMISSION OF APPLICATION**

Application will be received through State Units of Central Social Welfare Board, Indian Council for Child Welfare and Bhartiya Adim Jati Sevak Sangh with their recommendations. It will, however, be open to the Central Social Welfare Board to entertain an application direct from an institution/organization of an All- India character.



The application for grant-in-aid from Central Social Welfare Board, Indian Council for Child Welfare and Bhartiya Adim Jati Sevak Sangh, for a particular year should reach to the Department by the 31st March of the preceding financial year. Application received during the year may also be considered subject to availability of funds.

## **XII. CONDITIONS FOR GRANTS**

Grants will be paid in two installments, the first installment being normally released on receipt of acceptance of conditions enumerated in the letter of sanction project. Application for the release of second or subsequent installment, made after the close of the financial year in which the project was approved shall be accompanied by a statement of accounts of the expenditure incurred during the year. Final installment shall be released only after audited accounts and a Utilization Certificate, signed by a Chartered Accountant, is received and found in order. The utilization certificate should be in the following form attached.