Child Rights Today
Foundation Day Publication

Odisha State Commission for Protection of Child Rights (OSCP CR)
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The complexity of child abuse, its pervasive nature and the number of challenges involved in addressing it make it a difficult problem to assess and tackle but the task of dealing with it must be responsibly shared. By its very nature, no one profession or service can manage it in isolation and it demands a certain type of synchronized response if children's welfare and safety are to be effected and early interventions to take place. One of the weakest areas is non-availability of reading material, research papers and publications on child rights and childhood issues.

One of the mandates of Odisha State Commission for Protection of Child Rights (OSCPCR) is to take up study, research and surveys in the field of Child Protection. For realization of this mandate OSCPCR had organized a consultation to promote and encourage research on child-related issues with emphasis on child rights in universities/colleges and educational institutions. To take the initiative further, an annual publication 'Child Rights Today' has been conceived with writings from experts around the country.

Protection of child rights is a complex subject and is a key issue for early years' services, and for parents. It is the managed combination of diverse skills, resources and expertise that offers the best possibilities for children whose needs are not being otherwise met. Good professional practice in early years' settings is the most effective means of keeping children safe from exploitation and abuse. This edition of 'Child Rights Today' explores many of these issues from the academic, policy and practitioner perspectives.

Child Rights Today is an annual publication which contains articles on special theme issues, practice improvement-oriented pieces, and new directions on children rights. The articles reflect the perspectives of a broad range of disciplines and contribute to a greater understanding of children’s rights and their impact on the concept and development of childhood.

We look forward to your suggestions to improve and diversify the contents of Child Rights Today.

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Introduction and conceptual framework:

Orphaned and vulnerable children or children without parental care often have a long trail of painful experiences. Nothing can take away the pain of the children who have lost one or both parents due to illness, accident, and conflict, else whose parents due to circumstances are not able to care for them. Children without parental cares are sending to Child Care Institutions (CCIs) either or left with family members. We do not have a very systematic and robust mechanism to deal with the child whose parents are not with the children due to various reasons. Studies shows the hostels or child care institutions are not adequate to accommodate the need of the child and more likely to have negative effects on child development, no matter how well they are. The care of children by their parents typically provides the best conditions for a child’s healthy development. Where this is not possible, an alternative should be provided. While no form of care is inherently perfect, and any form of care can be provided. Research and decades of program experience around the world have shown that, care provided by a family in a child’s own community is generally the best option. The fact that family-based care options may not yet exist in a particular setting, so institutional care is an acceptable, long-term alternative there. It simply means that better forms of care need to be developed.

The Convention on the Rights of the Child (CRC) recognises that children have the best chance of developing their full potential in a family environment. The primary responsibility for their care rests upon their parents and legal guardians, who are entitled to support with government provisions for children. When parents are not able or willing to fulfil this responsibility, kinship and community resources may be relied upon to provide care for the children. However, the ultimate responsibility
falls on the government to ensure that children are placed in appropriate alternative care.

**Defining alternative care**

Exploring informal alternative care is to determine the conceptual boundaries of 1) alternative care, then 2) informal forms of alternative care.

Conceptualising “alternative care” is somewhat challenging because the standards under the CRC and the Guidelines differ in a potentially significant way. Neither document defines “alternative care”, but under Article 18 of the CRC, “parents, or, as the case may be, legal guardians, have the primary responsibility of the upbringing and development of the child,” and Article 20 mandates that alternative care be provided when a child is “temporarily or permanently deprived of his or her family environment” (Part 2). The Guidelines, however, imply that a child’s right to alternative care springs into effect when he or she is deprived of “parental care” (Part 1–1). “Family environment” is defined by cultural and social norms while “parental care” is more clearly established, although in some cultures who is a “parent” can be questioned as well.

Despite these difficult conceptual issues, the important point of this discussion is to focus on those children who are somewhere in the continuum between parental care and State care, where little is known of their experiences. Potentially all children who are not being cared for by at least one parent or legal guardian are candidates for alternative care, and the next question is: what kind of alternative care?

**Forms of alternative care**

Alternative care is divided into two forms:

1. Informal care is defined as “...any private arrangement provided in a family environment, whereby the child is looked after on an ongoing or indefinite basis by relatives or friends (informal kinship care) or by others in their individual capacity, at the initiative of the child, his/her parents or other person without this arrangement having been ordered by an administrative or judicial authority or a duly accredited body”.

2. Formal care is defined as “...all care provided in a family environment which has been ordered by a competent administrative body or judicial authority, and all care provided in a residential environment, including in private facilities, whether or not as a result of administrative or judicial measures”.

Following are some of popular alternative care arrangements;

**Foster Care**

The term “foster care” is used in a variety of ways. In the industrialized world, it is generally refer to formal, temporary placements made by the state with families that are trained, monitored and compensated at some level. In many developing countries, however, fostering is kinship care or other placement with a family...

**Kinship Care**

Kinship care is the full-time care of a child by a
relative or another member of the extended family. This type of arrangement is the most common form of out of home care throughout the world...

**Adoption**

Adoption is the formal and permanent transfer of parental rights to a family other than a child's own, and the formal assumption by that family of all parenting duties for the child...

**Child Headed Households**

A child-headed household is one where there are no adult carers available and children live on their own. Typically an older child will care for siblings, cousins, nephews or nieces...

**Situations separate children from their families**

Children become out-of-home care for a wide range of reasons, including:

- Death of one or both parents,
- Family break down due to chronic poverty or cultural practices,
- Unintentional separation from parents who cannot be immediately traced due to communal violence or natural disaster,
- Children of unmarried mothers,
- Relinquishment or abandonment by parents, for economic or other reasons,
- Temporary or permanent incapacity of the parents due to imprisonment, illness etc.
- Seasonal Migration and trafficking.

**Specific problems encountered by children without parental care**

**Economic hardship:** With the family's main earning sources threatened and savings spent on care, household capacity to provide for children's basic needs declines. An increasing number of children are being forced to take up the daunting responsibility of supporting the family instead of going to school.

**Lack of love, attention and affection:** The loss of a parent often means that young children are left without consistent responsive care. They can also be deprived of interpersonal and environmental stimulation and individualized affection and comfort.

**Withdrawal from school:** Economic pressure and the responsibilities of caring for parents and siblings can lead children to withdraw from school, even while their parents are alive. In case of death of parents, the child dropout percent is very high.

**Psychological distress:** The illness and death of their parents can cause extreme psychological distress in children, along with increased fatalism that is worsened by the stigma of being an orphan.

**Loss of inheritance:** Orphans are often deprived of any belongings or property, which is rightfully theirs.

**Increased risk of abuse:** Impoverished and without parents to educate and protect them, children face an increased risk of abuse. Many are forced into harmful child labour and / or sexual exploited for cash or to obtain protection shelter and / or food.
Malnutrition and illness: Children without parental care are at increased risk of malnutrition and illness and are less likely to get the medical care they need. Infection, diseases with transmitted infections and unwanted pregnancies are as serious threat.

Stigma, discrimination and isolation: Dispossessed children are often obliged to leave their homes and to live in unfamiliar and sometimes unwelcoming places. Children orphaned by disability, chronic illness are more likely to be rejected by extended family than those orphaned by other causes. The stigma of disability is often felt within the family and within the community.

Drug use and crime: as children without parental care often have to feed themselves, the risk of using drugs and/or to become involved in other anti social activity like crime is high.

Institutional Mechanism

Juvenile Justice (Care and Protection) Act, 2000: Chapter IV of the J.J.Act deals with rehabilitation and social reintegration of a child, wherein it is stated that social reintegration of children shall be carried out alternatively by (i) adoption, (ii) foster care, (iii) sponsorship, or (iv) sending the child to an after-care organization.

Section 42 deals with foster care, which is defined as for temporary placement of those infants who are ultimately to be given for adoption.

The Integrated Child Protection Schemes (ICPS): The Ministry of Women and child Development, Government of India, through its Integrated Child Protection Scheme (ICPS) affirms the rights of the child to grow up in a family. It focuses “To promote and strengthen non-institutional family-based care options for children deprived of parental care, including sponsorship to vulnerable families, kinship-care, in-country adoption, foster care and inter-country adoption, in order of preference”.

The approach of ICPS is promotion of Family-based care: The scheme would pursue a conscious shift to family-based care including sponsorship, kinship care, foster care and adoption. Periodic review of children in institutional care for restoration to families would also be undertaken.

Based on this, Integrated Child Protection Schemes – ICPS in its guiding principles have clearly mentioned that institutionalization of Children have to be the last resort. However; in the faces of growing threat to the children without parental care, a need has emerged to shift the focus of intervention from an over reliance on institutionalization of children to design family and community based alternatives. Institutionalization process must not lag behind; rather it can be given the second preference.

Good Practice in Care Arrangements

The United Nations Convention on the Rights of the Child states that interventions must be in the best interests of the child (article 3), they should facilitate the return of children to their families (articles 8-10) and all placements must protect children and be subject to periodic reviews (articles 20 & 25). Following aspects needs to be looked in to while programming alternative care strategies;

I. Assessment and placement monitoring
II. Child participation
III. Permanency planning
IV. Use of guardians
V. Gate keeping for placements in care

Assessment and Placement Monitoring

An assessment is the dynamic process of gathering and analysing information in order to undertake informed interventions. This can include an individual assessment of a child and family, or a situational analysis in case of large numbers of vulnerable children, e.g. in an emergency.

An assessment is an essential first step in providing protection services and its importance should not be underestimated. Its recommendations might have far-reaching
consequences for the affected families, and will influence the proper use of an organisation's resources. It is a vital gatekeeping tool to ensure children to receive appropriate services, without interfering the care system unnecessarily.

The content and procedures for an assessment will vary according to the context, organisational approach, and childcare policies of a country. In an emergency context, assessments will include a rapid and ongoing situational analysis in relation to groups of children at risk. This research allows for the planning of resource allocation for the protection of large numbers, and lays the framework for the process and type of care provision. It requires careful analytical skills of numerous variables and the cooperation of the local population, government, and multiple agencies relating to protection, security, sanitation, food, shelter, health and education.

Any child at risk or in need requires an assessment of their well being and the family’s ability to care for them. This is a skilled process through which information is sought, analysed, and acted upon. Assessments should be child centred, evidence based, rooted in child development, and focused on the individual situation and context of the child. Assessments should be inter agency in nature and with the full participation of the child and family members. It should be continued over a period of time in order to prepare for the child’s reunification with family, or alternative permanency planning. Assessments therefore should be reviewed regularly in order to address the changing needs of the child. Services, which are needed to protect and support the child or family, should not wait for an assessment to be completed.

Assessments should identify and build upon the child and family’s strengths, as well as areas for development. A comprehensive assessment should include the causes and areas of concern, the needs of the child and family, the necessary action to safeguard the child, and the desired resources and timescale. It should include an overview of the child’s developmental needs, e.g. health, education and relationships; the parent’s capacity to provide for the child, e.g. safety, warmth, stability; and important family and environmental factors such as relationships, housing, and available resources.

It is vital that all children who have been identified as at risk or in need are regularly monitored to ensure their health and wellbeing. This includes children who are in out-of-home placements such as in kinship, foster and institutional care, and also children who have returned to live with their families or who are newly adopted. Such monitoring and assessment of standards of care, helps to protect children from abuse and exploitation and reduces the incidence of family breakdown and separation.

The resources in this section include forms and guidance on situational analysis, children and family assessments, and placement monitoring information.

Children have the right to participate in matters affecting their lives and should be enabled to give their opinions, and to have those opinions taken into account. Through participation, children learn self-expression, empowerment
and ultimately greater self-esteem. Children are a diverse group and therefore children of different ages, abilities, backgrounds, races, and both genders should ideally be included in a consultation process.

The views or wishes of children should never be assumed or overlooked, and such a process will ultimately help to formulate interventions, which are more responsive. Whether investigating abuse, assessing a child's needs, undertaking permanency planning, or evaluating standards of care, children's opinions must form an integral part of the decision making process. The appointment of an independent guardian is a safeguard to ensure that the child has a voice and that his or her rights are protected.

The process of encouraging participation requires skill in communicating with children. Children should not be told what to say, intimidated, or judged. An environment of safety and respect is necessary to help the child feel comfortable to express her opinions, and therefore care should be taken regarding who else is present, the physical environment, and the way information is sought.

Children should be given a choice regarding participation, and where possible, parents and caretakers should be fully aware of the consultation process. Confidentiality of information is paramount and children should not be put in danger as a result of expressing their views. It is the responsibility of all professionals involved in the care of children to ensure that the process of participation is safe and that children will have support available where follow-up is necessary.

This section includes guidance on the process for consulting children, and example participation projects.

**Permanency Planning**

Permanency planning is the process of assessing and preparing a child for long term care when in out-of-home placements such as kinship, foster care or institutions. A care plan must centre on what is in the child's best interests, and therefore requires an ongoing assessment of the child and his/her needs.

The ultimate goal of permanency planning is to ensure a secure environment with lifelong bonds that will support the child into adulthood. For most children this will be provided by their birth parents and relatives, and therefore family reunification should be the primary goal. Where reunification is not in possible or suitable for the child, adoption or Islamic ka falah is usually the next best option since it offers more stability and enables the child to develop a lasting attachment to carers.

Each child is an individual and brings a unique set of requirements. The choice of placement must therefore consider the child’s cultural and religious background, abilities and any special needs, attachments to significant people and how such relationships can be maintained, their education, health and overall development. Ideally, children should be kept close to their original communities in order help maintain their identity and to reduce disruption to their everyday lives.

While short-term care such as fostering can provide a safe place for a child and time to assess their needs, it is often an unsuitable long term option since it is a temporary arrangement that is prone to breakdown. Social workers or other child protection para professionals in the community must determine the use of short term care and the development of longer term plans with the full participation of the child, birth family, and prospective caretakers, sharing opportunities with each other, and preparing all for moves.

All placements should be monitored regularly to ensure the child is safe and his/her physical, emotional, and educational needs are met. This includes children who have been recently returned to their birth family or who are newly placed with adoptive parents. Monitoring
enables the provision of family support services, and helps to reduce placement breakdown and incidences of abuse.

The resources in this section focus on the factors that should be considered when planning a child's care, and the advantages and disadvantages of placement options.

**Use of Guardians**

A guardian is a legally appointed adult representative for a child. The guardian's function is to ensure that a child's rights are upheld and the child's best interests are protected. The existence, process and duties of a guardian will vary from country to country. When no formal guardian system exists, alternative systems can be created for having a legally recognised representative for a child. This is particularly important when children are likely to be orphaned or made vulnerable by HIV/AIDS, or unprotected by adult caretakers such as child headed households.

Guardians are particularly beneficial when there are disagreements regarding the care of a child between the family, child, or local authority. In such instances the guardian may undertake an independent assessment of the child's needs, and will spend time with the child to understand his or her opinions. They usually represent the child in legal proceedings, providing evidence and recommendations regarding the care plan for the child. The guardian may be appointed by the local authority or selected by the child or family.

In countries, which do not have a system of guardianship, it is the protection workers responsibility to uphold the child's rights and act in his/her best interests. This requires a thorough assessment of the child's needs, listening to the child, and developing a permanent care plan, which ideally results in the successful reunification of the child with their family.

This section contains papers relating to the importance and use of guardians in care planning.

**Gatekeeping**

"Gatekeeping," is the process of referring children and families to appropriate services or care arrangements with the aim of limiting the number of inappropriate placements. Gatekeeping is an essential tool in diverting children from unnecessary initial entry into alternative care, and reducing the numbers of children entering institutions. Gatekeeping is often carried out by social welfare professionals or trained staff at institutions, but is often aided by members of the community and local service providers.

Effective and fair gatekeeping requires a system of safeguards and monitoring to prevent system abuse, and to ensure access to services for those who are most vulnerable. It is dependent upon an assessment and allocation process, which is systematic and fair, and the availability of a range of family support services and community based care options. Such supports may include economic strengthening, social assistance programmes, family services, including day care, and health or education provision.

To support family unity and prevent the unnecessary entry of a child into the care system, a thorough assessment of the child's individual needs is required in order to determine the most suitable family support service or alternative community care option. This should be combined with a high threshold for admission into care. The care plan for the child and the available services require regular reviews, with the emphasis on the best interests of the child.

Gatekeeping reduces the institutionalisation of children care. It requires a commitment to appropriate child care policies at state level. Resources and staff must be sufficient to assess needs and service entitlement, and provide services for children and their families. Such efforts require a high level of coordination between providers from government and non-governmental childcare organisations.
Effects of Institutional Care

Institutional care has been shown to cause a wide range of problems for children. Institutional care does not adequately provide the level of positive individual attention from consistent caregivers, which is essential for the successful emotional, physical, mental, and social development of children. This is profoundly relevant for children under 3 years of age for whom institutional care has been shown to be especially damaging.

Common issues for children in institutional care are a significantly increased risk of sexual and physical abuse, a lack of stimulation, and harsh discipline. Children in institutions are less likely to attend school, and are frequently isolated from their traditional communities. Long periods in an institution make it harder for a child to assimilate back into a family and community, and deny them access to the life-long attachments and community support systems that family relationships and communities can provide.

For funders and implementing bodies, care in the community is a significantly more effective and sustainable use of resources since it avoids the high maintenance costs of institutions, and prevents many of the problems posed by institutional care.

It is widely accepted that institutions should be used as a last resort only. Countries which have traditionally relied on institutional care are now transforming their institutions into small family style group homes and actively pursuing preferences for community-based care options based around small family style units. This policy shift is urgently required in HIV/AIDS affected countries or countries where lot of children heaving their biological families residing in the institutions which are taking a backward step in resorting to the use of institutions to care for children orphaned or affected by the disease.

Child Development Information

All childcare and protection workers should have the tools and knowledge to adequately assess how to support a child. This includes knowledge on:

i. The effects of institutional care
ii. Child development information

Knowledge of child development is the foundation for work with children, and therefore is a requirement for all those seeking to protect children. It influences every aspect of a child from physical growth and mental abilities, to how they express emotions, think and behave.

Healthy development takes children through stages, whereby they obtain an increasing number of physical, mental, and emotional skills in order to become independent adults. These stages provide benchmarks for determining if a child is developing normally. Without knowledge of the normal developmental stages of a child, a worker cannot identify developmental delays, assess the impact of abuse, or make recommendations regarding the child’s physical, mental or emotional health. Understanding what a child is capable of allows adults to communicate on their level and provide age-appropriate responses and interventions.
Knowledge of early childhood development and attachment behavior is particularly important for protection workers. The physical health and care of an infant will affect his/her development into adulthood. A child needs to have experienced a positive attachment by the age of 3 in order to develop cognitively, physically, socially, and psychologically. Healthy attachments come from the close bond a child experiences when provided with the responsive and stable care of at least one adult. In a residential home, children are less likely to receive the amount of individual attention from a permanent caretaker that they require. Children under 12, in particular, benefit more from a kinship, foster or adoption placement where they can experience closer relationships.

Observation of a child’s attachment to caretakers will influence the type of care, permanency plan, and level of support services offered. It can also aid in the identification of abuse.

**Conclusion and way forwarding**

Alternative care, on the very basic end of the childcare gambit, is a very large yet often invisible system laden with many complexities. Majority of children in informal care, perhaps 90 per cent in some regions, are living within their extended family network, and a critical mass lives with grandparents. Children in industrialised region also experience abuse, neglect, separation and other harm due to parents’ personal problems and poverty.

Informal care, by definition, is unregulated. Children in informal care need to be identified and provided with the same degree of protection that other children enjoy, such as the right to birth registration, right of inheritance, access to services which require parental permission or guidance, and protection from premature adult roles.

There is a critical need for States to collect better data on informal care and establish policies regarding informal care. The Guidelines must have articulated a set of components that should be included in a legal framework addressing the needs and rights of children in informal care. The CRC provides broader guidelines. In establishing policies, other relevant international instruments, such as the ILO conventions on child labour and child trafficking, should be considered. States should harmonies Integrated Child Protection Schemes (ICPS) and other child welfare schemes so that the various parts correspond with and reinforce each other.

In order to create an effective policy, more must be known about the very real and widespread phenomenon of informal alternative care. Areas of much-needed research include the types and prevalence of children in informal care, the causes for such placements, the need for protection for children and their caregivers, and the current and desired roles of government and civil society in improving policies and access to essential services. Other urgent research questions include the psychosocial needs of caregivers, cost-effective means of family preservation, effective methods of public campaigns addressing the needs of children in servitude, and ways to increase support for family preservation, reunification and other preventative services. Combining knowledge with sound policy and resources, supported by a sense of collective ownership, will provide the impetus for reaching the millions of children currently in informal care.
Need to Understand Resilience of Children and Their Parents for Protection and Promotion of Child Right

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Abstract:
Dignity and opportunity are two most important factors for resilience to participate in process of child right protection and promotion by children and their communities. Child right work of PVCHR learnt that breaking of silence by empowerment based on self-esteem of Hope, Honour and Human dignity is breaking the poverty in rights based way.

Keywords: Child right, child participation, child protection, resilience, empowerment

“I was studying in Government primary school after class – VIII all my classmates dropped out from school except three [two belongs from upper caste and one from other backward caste (OBC)]. I grownup in the place near to Baghawanala area and found that the children of the 99% of the families are not going to the school. We selected this slum and working here for last 14 years and now young generation are leading their own campaign and ITE (Integrated Technology based Education) are integrating in the process. This is the model of the hope based on the resilience against the culture of silence for India in particular and South Asia in general”.

The three young girls Chanda, Jyoti and Pooja of Munshi Prem from this area with the support of other children of Chandra Bal Panchayat, Baghwanala, Varanasi flagged a campaign ‘Will not do kitchen, I want to get educate’ campaign against child marriage in 2010. They are the first generation people among their family to receive education and protesting child marriage.

The inspirations of these girls were the activists of child right centric model villages and teachers of the non – formal education center (NFE) initiated by Jan Mitra Nyas/PVCHR with the support of the Child Rights and You (CRY), support from Ashoka fellowship and later by Sir Dorabji Tata Trust (SDTT). The NFE centre was
inaugurated by PVCHR patron Justice Z.M Yacoob, Sitting Judge Constitution Court of South Africa & Chancellor of University of Durban, South Africa. Process of child theatre against child marriage for right of girls made them to understand the consequence of the child marriage. These three sit together and discussed Mere sath hota toh mai kya kartya (If these things happened with me than what I will do) they know that it is not only the girl child who bears the consequences of early marriage but it equally impacts the lives of those around them.

They lit the campaign from opposing their own children marriage but also prevent other to do so. They are creating awareness in their area through meeting of Bal Panchayat, street march, open letter, signature campaign, slogan, distributing promotional materials and showcasing their theatre play Sindhoornahi Sikha, which shows the demerits of the child marriage.

They vigil in there are and after getting information of Manisha child marriage they immediately called joint meeting of Munshi Premchandra Bal Panchayat and Kishori Baithak and called Manisha parents. After having long discussion Manisha’s parents agreed to send Manisha to her in-laws house after she attains the age of 18. But next day Manisha husband forcefully took her to his house.

When these girls came to know about this incident, they went to Manisha's in-laws house and argued them sent back Manisha to her parent house. After a long discussion they agree to bring Manisha back after she attains the age of 18. After this no child marriage is happening in Baghwanala.

The journey was not easy for them they faced several problems to break this deep rooted evil which have become a part of Indian society for several centuries. They faced challenges and resistance from their own relatives, community and parents of their friends. Mere phupha bole ki yeh dusro ke mamle mein bol rahi hai is liye ham log iski shadi class 10 ke bad kardenge. (My uncle said she is speaking in the matter of others so, we will do her marry after class 10). The parents of my friends were not allowing to send them because they think there child will also “Yeh log bahut bolti hai aur man ki badhi hai tum logo ke sath rahkar hamari ladki kharab hojayegi” (These girls speak a lot and are open minded. my daughter will ruin after coming along with you). The people from there area torn the poster and washed the slogan written on the wall “Bal vivah band karo) stopped child marriage but few people in the community supported by signing the petition.

The Manish’s father came to Chanda’s mother shop and threatens her “Apni ladki to samjha dijiye nahi toh ham usko uthwalenge” (Make your child understand otherwise we will kidnap her).

These hurdles were not sufficient to stop the mission of these three girls without any fear they continued their struggle. They performed the street play not only in Baghwanala but also in many different places showing high rate of child marriage.

In personal life these girls are running pillar to post for their survival and working hard to complete their vision to be on the responsible post for eradicating social evil, says Jyoti. Pooja wants to become teacher for giving valuable
education to the next generation. Now they are studying in B.A – II year from Uday Pratap College, Varanasi with the scholarship awarded from Raj Dulari Foundation, Sweden and Ms. Parul Sharma.

Now they are receiving well support from the community, parents of their friends. Their mission worked as many parents stopped doing child marriage and providing opportunity to their girls for further study and provide space for their right to expression. Now not only three but other 19 children joined in their mission. It is extraordinary inculcating process to curb down the concept of masculinity, which is decreasing the violence in families and community too. Now with the support from SDTT ITE initiative started and Smart phone for education concept of Henrik, Germany are in process for next milestone of empowerment. The children learned video documentation from their own voice of India.

Shruti Nagvanshi, leader of child right initiative of PVCHR says, ‘when we initiated the school first teacher gave resign and then we appointed a women teacher who faced domestic violence in her life. We initiated adult literacy, campaign against police torture and the illegal activities by the criminal in that area. Whole process in the grass – root are mostly implemented by the women activist and responsible men for women rights so, a gender perspective is very strong in process against the existing concept of masculinity.’

Now in Baghwanala three centres built with support from German Ministry NRW via GiZ GmbH, Indo – German Society of Remscheid, Germany, dalit team, Remscheid, Germany and Jan Mitra Nyas:

- Women centre for women was built after the donation of land by Ms. Urmila Singh (mother of Ms. Shruti Nagvanshi).
- Community center and office for the weaver the land was donated by the community
- Raja Suhail Dev Jan MitraSikshan Kendra was donated by the community.

Inculcating process of child participation and resilience of children & young established 15 children panchayats. Where, it depends upon situation – when exams they may not meet for 2-3 months; otherwise they have regular monthly meetings. It is more of an individual approach – any child member if observes something such as child beaten up, abused, they report – if a teacher beats a child at school, the victim may remain quiet but the other child will tell. Likewise, if a child works as labour, then in neighbourhood another child reports for the same. They thus, perform individual role. Then they took collective decision on the same in their meetings. They talked about children's situations, analyzed their own problems and tried finding solutions.

Children at bal panchayat visited police station. They were sent to exposure visits – post office, hospitals, and police stations. They posed many questions. They also visited Pindra’s SDM court and saw how cases are taken up in the court. They compared it with the court scene they often see in movies/television.

Not only this, they also met children of their blocks and understood the issues they are facing so in a way they got their horizon/understanding wider.

PVCHR workers often would observe the balpachayat meetings and listed the gaps in understanding of children. Once they found that the children lacked understanding of importance of birth certificate. The workers took one full class telling the children significance and process of formulation of birth certificate. It is the first proof of Indian citizenship. After knowing the importance of birth certificate, children started talking about it at home and neighbourhood wrote slogans on it asked each
other and created awareness about it. Now they knew the process. Earlier village panchayat secretary used to make it and was not regular. Children complaint against him and he started coming regularly. Children also ensured that in their families and neighbourhood pregnant mothers go for institutional delivery. One ANM used to charge money for making birth certificate. They reported complaint against her and she had to return money to people. Children again created awareness that birth-certificate is made free of cost and that ANM had to return money. So, children spread awareness about anything very quickly. So child participation is creating follows:

**Building self-esteem:**

A child having self-esteem is creative, happy, and active and has more confidence. Children derive confidence about themselves from the way they are treated, mostly by their family/community/therapist/social worker/society at large.

Considering that we work with the marginalized children, who have experiences of deprivations of various kinds, building self-esteem among these survivors assumes greater importance.

Self-esteem refers to the sense of personal worth and ability that is fundamental to an individual’s identity. The term self esteem can be explained as an essential quality that one should have, to become a confident and independent person. It is also called as self pride, where the person feels proud of himself/herself and the things s/he does. A person with high self esteem considers himself/herself capable to achieve whatever s/he sets out to do. S/He not only knows about his/her strengths, but also his/her weaknesses. On the other hand, a person with a low self esteem doubts his/her abilities for every step s/he takes, and this attitude may lead to failure in his/her professional as well as personal life. This surely shows the importance of having a high self esteem.

**Facilitating Critical thinking:**

Critical thinking is a process, the goal of which is to make reasonable decisions about what to believe and what to do. Philosophers emphasize the importance of child’s exposure to causality and logic. Improvement in child’s cognition allows them to produce new ideas and confront problems by reasoning through them. This ‘critical thinking’ allow children to explore their own concepts, derive conclusions and dispute the reasoning of others.

Because we all are continually making decisions, critical thinking is important to us in personal and vocational, as well as societal aspects of our lives.

**Education for life:**

The challenges marginalized communities today faces are many, and they need to develop skills beyond the mere numerical and literacy skills.

Education for life should be one that is able to have an all round development of the marginalized children. She/he should try to develop life skills that will make him/her an asset to society and re-build the society based on the principle of social justice. Education for life in the 21st century includes the ability to lead change, think critically, work in teams, create and quickly adapt to new changes - technology, be a self-managed learner, communicate effectively, and understand the needs of the communities in which we live and contribute.

**Developing Leadership:**

The objective is not to teach children how to become a leader but to enable them to develop their full potential and teach them basic ethics and values so that they become strong individuals with the capabilities to become a leader. The best way to teach children about leadership is by first telling them why individuality and ethics are important. Leaders are the most pro-active people in any group so children need to be taught to take the initiative. Discussions with real life examples of leaders and fighting survivors will inspire and motivate survivors.
Helping children analyze a situation and take in a lot of different perspectives is also an effective way of teaching how to approach situations differently. Learning from each experience is a very important trait of a leader. Leaders are knowledgeable, so encourage children to read the newspapers and books regularly. Reading can be a great source of inspiration for aspiring leaders.

And lastly, teaching children to set goals and high standards. This does not mean we force children to achieve the impossible, but enabling them to aim for the best. And more importantly, empowering them how to get there too!

The child right centric model village processes are based on resilience theory as breaking the culture of silence and positive conflict resolution in the most marginalized communities of 40 villages and slums of Uttar Pradesh which is inculcating self – transformation.

The targeted communities of children in village and slums are at high risk facing police torture, institutional discrimination, slavery (bonded labour), and organized violence based on caste system and masculinity and are deprived and neglected from all government schemes.

The follows methodologies used in the process are:

1. Identification of the village, community on the basis of anthropological, cultural, economic and political context.
2. Evaluation of the needs of communities and target groups.
3. Community based child right centric strategy formulation and implementation of the community based interventions.
4. Monitoring & evaluation and then re-strategy formation and then again implementation:

These processes inculcate hope, dignity, honor and capacity among community and its leaders but also creating opportunities for involvement and the demonstration of competence and increasing involvement, bonding and attachment between communities and external factors.

The processes also create the resilience of the community towards the children, youth and the women and strengthen their role in their family and community with their active role in decision making process. Women community leaders are playing active role in various forum as a member of School Management Committee (SMC) under the Right to Education Act. Children and Youth instead of becoming helping hand for their parents in work and taking care of their sibling are now going to school.

In child centric model village children create the resilience towards their parents thought on issues deeply related to them such as child labour, child marriage and child sexual abuse etc. This process a created a dynamics of resilience in young people like Mangala, Sandhaya, Shobhnath and Anand who came from communities and now working for the upliftment of their own communities.

Resilience is creating more democratic space for marginalized poor which eliminate poverty too. Sakara and other village are example for that. Resilience against torture and organized violence is resilience for poverty alleviation too, which is backbone to stablishing rule of law in true sense at grass roots.
Mentoring - A Programme that helps Build Success Linking Mentoring with the After Care Programme for Children who exit institutions

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A large number of these children find their way into child care institutions known variously as Orphanages, Homes, Hostels, Ashrams, Destitute Cottages etc. for long term care, to be discharged only when they reach adulthood. It is reliably acknowledged that a larger majority of these children in institutions have families who have sought institutional care for their children as a solution to poverty and to access education. This is not surprising as 21.9% of our population or 270 million persons live in dire poverty despite economic and social progress as projected by the Planning Commission of India. These children would fall within the target group of the revised Integrated Child Protection Scheme of the Ministry of Women and Child Development formulated “to create a protective environment for 40 per cent of India’s vulnerable children who are experiencing difficult circumstances” pegging the numbers at 168 million.

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1http://planningcommission.nic.in/news/pre_pov2307.pdf
2wcd.nic.in/icpsmon/pdf/icps/final_icps.pdf

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Children in institutions

The current response to the problem of child destitution in India is the extensive institutionalizing of children. The profile of these vulnerable children would include orphans, abandoned and destitute children, working and street children, juvenile offenders, children of sex workers/child sex workers, children engaging in substance abuse, children of families “at risk”—such as refugees, migrant and construction workers, chronically and terminally ill (aids, cancer, Tuberculosis, leprosy) prisoners and single parents, AIDSs affected children, children with disability, victims of natural calamities, emergencies or manmade disasters among others all of whom are included within the purview of the JJ Act as children in need of care and protection.
To meet the growing needs of children living in destitution, child care institutions have proliferated across the country with a large number sustained by the professional and public mentality (“at least he gets three meals a day here and an opportunity to go to school”, is the oft heard comment) and donor belief that through feeding “orphans” one gains religious merit contradicting the pledge made in the National Policy for Children 2013 that it “shall endeavor to ensure family and community-based care arrangements including sponsorship, kinship, foster care and adoption, with institutionalization as a measure of last resort, with due regard to the best interests of the child and guaranteeing quality standards of care and protection”.

Institutional care deprives children of their Constitutional guarantees to be provided “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”. It also regresses on India’s a commitment to implement the provisions in the UN Convention on the Rights of the Child\(^1\) and the Juvenile Justice Care and Protection Act, 2000 which provides for institutional care for children as a temporary measure with the prime objective of promoting restoration, rehabilitation and social integration through family and community based alternatives.

The number of children in institutional care and those who leave institutional care on reaching adulthood are hard to come by as the registration of institutions mandated under the JJ Act has yet to be universally adhered to. The numbers plummet as one goes down south in India with Tamil Nadu and Kerala leading the list with more than 2000 such institutions each with thousands of children in care. In Maharashtra too there are thousands of children in institutions and concerns about their well being has led to an activist filing a writ in the Hon’ble Supreme Court [ Writ Petition(Civil) No 303 of 2012Rajendra Anbhule versus Union of India &Ors] under Article 32 of the Constitution which seeks redressal of the grievances of the orphans/ destitute above the age of 18 years for provision of educational fees, scholarships, hostel accommodation and reservation in employment and further to declare Right to Rehabilitation of the Orphans as a fundamental right under Article 21 of the constitution. It seeks directions to the State government to issue orphans ration and voting cards and domicile certificates for enabling them to seek various entitlements. Acting on the PIL, notices were issued to all state governments seeking a reply on 20 November 2012.

**Adolescents exiting institutions**

Being bereaved of parental care and being raised in a closed setting has manifold implications. Many children get discharged from the system without any real education to empower them to lead economically independent life. Their all round development is dwarfed and they exhibit poor nutritional status, appear stunted in growth and grapple with emotional and behavioral difficulties and poor social skills. Children exiting institutions as teenagers because of their limited family contact and community living experiences, poor social network, the marginalized status of their families and their inability to guide them or to fall back upon them have little hope for the future. In fact children in need of care and protection who are not effectively rehabilitated consequently fall into the cycle of poverty as did their parents and are prone to enter into the cycle of crime, more in order to survive.

\(^1\)Article 3 and 37
Adolescence can be a difficult period in anyone's life and for children departing institutions after a lifetime spent there, it can be worse. NCPCR's document on "Status of Children in 14-18 Years: Review Of Policy, Programme and Legislative Framework 2012-2013" articulates the status of children in the 14-18 years age group as those who constitute 100.2 million children in our country, majority of whom have been forced to assume the role of adults, grapple with poverty, economic and personal security, ill health, early marriage, lack of education and exploitative environment from an early age both at home and in society. These are the young persons in our country who have not been able to realize their fullest potential.

Further, the document points out that the "challenge is really in ensuring that adolescents are regarded as subjects in their own right requiring all support to exercise agency in reconstructing their life with dignity and selfhood. Their critical consciousness is to be developed, leading to their empowerment and to becoming politically, socially and culturally active and respecting them as productive persons with dignity, sense of well-being and ability to realize their creative potential."

The Juvenile Justice Act includes an After Care Program for children without family or other support who leave institutional care after they attain 18 years of age to sustain themselves for up to three years during the transition from institutional to independent life. The ICPS has recognized this need and intervention in the continuum of care and offers grants to States (for less than 15 districts a grant of Rs 15 lakhs and up to 45 lakhs for States with 30 districts) to release financial assistance to organisations willing to take up the After Care programme. This includes Rs.2000 per month per young adult for meeting the basic needs including food, clothing, health care and shelter; age appropriate and need based education and vocational training; stipend and any other requirements like loan for youths aspiring to set up entrepreneurial activities.

The ICPS provides the option of community group housing for groups of 6-8 young persons or institutional housing model for up to a period

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5 Ibid
Mentoring could start well ahead of institutionalized children reaching the age of 18 years. A mentor could be included in the “care plan” for all children reaching the age of 15 to 16 years to provide the required hand holding and support for early discharge if found appropriate. A personalized approach is expected to underline every Child-Mentor relationship which springs from each child’s individual needs. It could begin with planned informal meetings and social outings to strengthen and build trust in the volunteer-youth relationship. The mentor assists youth set goals for the future beyond his/her limited life circumstances by meeting with the teenager regularly to provide guidance and “hands on” experience in dealing with problems which may be encountered.

Education is a means for not only enabling children grow to their fullest potential, but also to realize other rights and address child rights violations. The mentor could rally community support through NGOs for providing access to formal education, specialized training for skill development/employment opportunities/possible apprenticeship etc. and draw financial support from the Sponsorship and Foster Care Fund placed at the disposal of the DCPU for covering living costs for the newly discharged children. Such assistance could open employment opportunities for children and lead to careers and independent futures. Additional support could also be mobilized for the youth and their families such as counseling, inclusion of family in a poverty alleviation scheme such as MNREGA or old age or disability support, housing etc. to raise their living standard. Needless to state that these rehabilitation plans undertaken in consultation with the children themselves and their families.
would empower them and build a more fulfilling future.

Every DCPU under the ICPS needs to include the recruitment mentors as a key responsibility under its job tasks. Through outreach with NGOs who are in closer community contact such recruitment could not be difficult. Newly recruited mentors need exposure to the living conditions of children in institutions and those who have returned to community living and orientation on the rights based approach to providing support for rehabilitation. Periodic mentor support meetings to share experiences and challenges faced and opportunity to dialogue with experts in the development sector and mental health professionals could provide the necessary guidance to mentors and consolidate the programme. All institutions caring for children within the juvenile justice system must have access to this panel of mentors maintained by the DCPU to link them to children exiting institutions.

To society at large mentorship would break the cycle of poverty by creating career paths and assist adolescents in the natural development of social skills and confidence and create productive adults in the community. This could result in less crime, homelessness and other major social problems facing us today. Mentorship would thus not only bring about a social change benefitting these youth but tremendous benefits can accrue to society at large.

Here is where you and I can come in. As MENTORS. By giving of our time, a few hours each week, we can together reach out to hundreds of vulnerable children and make a genuine difference to their lives. It is not just a moral imperative but also brings in tremendous satisfaction and is a survival strategy for our own future too.
The Rights of Girl Child:
The State of the Art on Issues and Concerns

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The Problematic

A child is a human specie below eighteen years of age who is in need of care of and protection because of tender age and inexperienced personality, irrespective whether a boy or a girl. Webster’s dictionary defines a girl as any female human from birth through childhood and adolescence to attainment of adulthood when she becomes a woman. The term may also be used to mean a woman in becoming. A discussion on problems and rights of the girl child pertains to a brand of knowledge called gender sociology leaving wide varieties of issues open. How is it to contextulize a girl child in the gender debate? Are the problems and the rights of girl child independent of those of adults? Is it a legal problem or moral issue? Is their an element of culture in it? If so what are the culture specific problems of the predicament of girl child in India? How is the academia and civil society to go about it? The ambitions of this paper are analytically descriptive with the aim to debate these issues. To that end, reliance is placed primarily on available literature (books, papers published in journals, documents) and research reports including the publications of various organizations.

Theorizing the Rights of Girl Child

While some scholars see no difference between boys and girls as being children as such, others argue in favour of sharp differences between the two. This belief goes with the view that in most areas the similarities between girls and boys far outweigh the differences (Hyde, 2005:581-592). The emphasis is on conferring of rights with or without the claim of the same. With regard to the rights of children in general and the girl child in particular, the debates and discourses fall into two broad camps. One group believes that it is obvious for children to have rights as human
beings (Farson 1974; Holt 1975; Cohen 1980) and girl children being more vulnerable must be given their due rights. They may be called conformists or reformists. The second group is skeptical believing that given the nature both of rights and of children it is wrong to think of children as right-holders (Hart 1973; Sumner 1987; Steiner 1994). They may be called skeptics or critics. Some of them also tend to argue that children have some rights compared to adults (Mac Cormick 1982; Raz 1984; Kramer 1998).

Girl children, in particular, represent an extremely vulnerable group in many societies. Research shows that they face systematic disadvantage 'over a wide range of welfare indicators', including health, nutrition and the burden of household tasks (CGD, 2008: 2). According to a 2008 report by the Center for Global Development, girls are generally less healthy, less educated and enjoy less freedom than their male counterparts (Ibid). Such disparities, which highlight the disempowerment and marginalization of girls, result from a variety of factors including cultural and social norms. Ultimately, however, they are rooted in gender discrimination, (Ibid) which interferes with girls' ability to develop and, ultimately, prejudices their ability to have lives of dignity (IDLO, 2009). Reformists would justifiably argue that these disparities, disadvantages and discrimination are nothing but the rights issues.

"Girl children, in particular, represent an extremely vulnerable group in many societies."

Adults have their specific role responsibility and moral duty to sympathise with the problems of girl child and to ensure three things. In the first place it is a standard principle of child welfare law and policy that the 'best interests' of a child should be promoted. The best interests of the child shall be a primary consideration for families, neighbourhood, school system, communities and society at large. Secondly, the right of the child to be heard is a valuable right. Encouraging and according a weight to the expression of children's views—even where this is unlikely to affect outcomes in line with the views' content—is valuable just because the child is capable of expressing a view and deserves to be listened to (Archard and Skivenes 2009). Finally, the girl child has a right to be cared and protected.

By virtue of their age and social position, girls' opportunities and prospects are fundamentally shaped by those closest to them, particularly family members—mothers, fathers and other male relatives, mothers-in-law, and husbands. A key obstacle to ensuring that girls have access to the means of protection from areas of high risks and vulnerabilities is that domestic legal frameworks often fall short (CGD, 2008: 2). In the developing world, girls can exist outside of...
the rule of law and, in some cases, domestic laws and enforcement mechanisms may themselves serve as source of oppression. A key starting point for increasing the level of girls’ protection is hence ensuring that local legal frameworks eliminate gender-based discrimination and protect against the abuse of girls’ rights and freedoms.

On the occasion of the Third Meeting of Women Speakers of Parliament in the context of the Commission on the Status of Women, March 2, 2007, UN New York, Dr. Musimbi Kanyoro, General Secretary, World YWCA said “I am a strong proponent of the theory that empowerment of children is intrinsically linked to empowerment of their mothers. The connection is more than umbilical. Empowered women often transfer their empowerment to their children, families and whole communities and they begin a virtuous cycle of empowerment. The women’s movement has made these connections for a very long time”.

Devising means of protecting the fundamental rights of girls presents serious challenges; strategies must involve multiple components, including refining the domestic legal framework; strengthening enforcement; eliminating societal discrimination against girls; and empowering key protection agents, particularly mothers, to better understand and assert the rights of girl children.

The United Nations Convention on the Rights of the Child (1988) and Millennium Development Goals (2000) promoted better access to education for all girls and boys and to eliminate gender disparities at both primary and secondary level. Worldwide school enrolment and literacy rates for girls have improved continuously. Most jurisdictions accord children legal rights. Most countries—though not the United States of America—have ratified the United Nations Convention on the Rights of the Child which was first adopted in 1989. The Convention accords to children a wide range of rights including, most centrally, the right to have their ‘best interests’ be ‘a primary consideration’ in all actions concerning them (Article 3), the ‘inherent right to life’ (Article 6), and the right of a child “who is capable of forming his or her own views … to express these views freely in all matters affecting the child” (Article 12) (United Nations 1989).

However it is normal to distinguish between 'positive' rights, those that are recognised in justiciable law, and invisible 'moral' rights, those that are recognised by some moral theory. That children have 'positive' rights does not then settle the question of whether they do or should have moral rights. Indeed the idea of children as rights holders has been subject to different kinds of philosophical criticism. At the same time there has been philosophical consideration of what kinds of rights children have if they do have any rights at all. The various debates shed light on both the nature and value of rights, moral responsibility of society at large and on the moral status of children. Child’s moral status should be adequately secured and protected and this is assured by discharging our obligations as adults to children. Statistics on the situation of the girl child in India do not make for comfort. There is no end the formulation of laws, yet is the little beginning of their implementation. By implication, the moral issues go unresolved in India, nay the world.

For a global understanding of the current childhood and rights issues, the different international bodies, conferences, web sites and reports that have been drafted in support of the girl child offer an important basis and legal/moral backdrop to approach the current
needs and problems of the girl child. UNICEF, 
WHO, UNFPA, Save the Children UN General 
Assembly Special Session on Women, INSTRAW 
backed by the CEDAW and CRC, and the PIA from 
Beijing, have all developed programs and plans 
that focus specifically on the needs and rights of 
girl children worldwide. Many international NGOs 
have adopted the rights of the girl child as a piece 
or cornerstone of their development work.

A number of international non-governmental 
organizations (NGOs) have created programs 
focussing on addressing disparities in girls’ 
access to such necessities as food, healthcare 
and education. CAMFED is one organization 
active in providing education to girls in sub-
Saharan Africa. IDLO has identified the following 
seven factors as key in enhancing the economic 
empowerment of girls and ensuring that their 
legal and human rights are respected: 1. Access 
to birth registration; 2. Access to education; 3. 
Access to property rights; 4. Freedom from child 
labor; 5. Freedom from trafficking; 6. Freedom 
from commercial sexual exploitation; and 7. 
Freedom from underage marriage (IDLO, 2009).

PLAN International’s “Because I am a Girl” (2011) 
campaign and research have shown that 
educating girls can have a powerful ripple effect, 
boosting the economies of their towns and 
villages. They have also created a campaign to 
establish an International Day of the Girl. In 
March 2011, Canada’s Parliament unanimously 
adopted a motion requesting that Canada take 
the lead at the United Nations in the initiative to 
proclaim September 22 the International Day of 
the Girl. PLAN International’s 2011 Annual 
Report points out that man have more influence 
and may be able to convince communities to 
curb early marriage and female genital 
mutilation (FGM) more effectively than women.

**Culture Element in Problems and Rights of 
Girl Child**

Children’s rights have often to be seen in societal 
and cultural contexts and hence cannot be made 
into a separate rubric, as can be done with the 
overall discourse on human rights. Ours is 
basically a patriarchal society with a small 
segment of population that adheres to 
matriarchal beliefs and values. Within the 
national culture there exists a “son syndrome” 
which entails giving preference for sons over 
daughters and placing a greater value on the 
male child as compared to the female child. This 
cultural norm subsequently breeds gender 
discrimination in families, schools and 
communities; something that is reflected in 
everyday life, at both individual and collective 
levels – the girl child is an “issue” i.e. she is not a 
value to the family or in the larger sense to 
society, but rather a problem to be dealt with 
(Nayar,2011:12). There are apparent double 
standards—both public and private—for dealing 
with concerns of girls’ development, in contrast 
with their male counterparts (Nayar, 2011:13). 
Male members in Indian culture are socialized to 
have differential attitudes and behaviors towards 
the girl child and boy child. This attitude supports 
the development of stereotypes: intellectual and 
practical life skills of independence for the boys, 
and nurturing life skills for the girls, even though 
the girls may perform well in academics and in 
intellectual arenas (Ibid). The patriarchal norms 
are culture driven and predominate over gender 
equity at large, even in cities.

There are several illustrations of girls being 
neglected, denied equity in food, education, 
health care, being subject to serious physical 
and sexual abuse ( Govt. of India, 2007), and 
marginalized in opportunities for developing 
and expressing their independent identity. They 
are subjected to what can be considered the 
rhetoric of a society in which they are considered 
“paraaya dhan” (which literally translates to 
property of another/other). There is an over-
emphasis on the female’s domestic role— i.e. 
daughter, daughter-in-law, wife, mother,
mother-in-law, grandmother and other domesticated social roles. These roles become enlarged in her psychic conditioning at home, at school and in the community, throughout the process of her growing up—both directly, as well as indirectly. Participation of children and listening to them would go a long way both at home and society at large in healthy development of confident generation of children in India, more so the girl child.

**Girl Child: Problems from Womb to Tomb**

The perspective is now clear that the hardest challenge to take in life is being a girl child. Discrimination, differences, dominance, disadvantage, drudgery and discrepancy are six most Vitamin D deficiencies under social pathology that hamper the journey of every female from womb to tomb. Starting from her presence into her mother’s womb to infancy, childhood and finally to adulthood and age, she is under the stranglehold of notorious traditions and stereotypical myths. Social disadvantage outweighs natural biological advantage of being a girl.

Despite their social and economic vulnerability, girls are key contributors to their family income and local economies. They perform unpaid and unrecognized labor including household assistance (cooking, cleaning, shopping and gardening), care-giving responsibilities (for younger children, and sick or elderly relatives), as well as other labor roles (harvesting crops, rearing livestock and producing handicrafts). However, denying girls opportunities — whether purposefully through discriminatory laws or tacitly through policies that fail to deter abuse, ensure control over reproduction, or prevent life-threatening disease — substantially undermines the creation of human capital endowments in society. The fact, that improvements in a woman’s economic position do have a positive spill-over effect on the social welfare of her children (Free the Children, 2009)

It should be noted that there is somewhat of a causal connection between “means of protection” and “protection risks” in that poor access to birth, education and property rights (all regarded as means of protection) have the potential to increase exposure to risks such as child labor, trafficking, commercial sexual exploitation and underage marriage. Such risks relate directly to the exploitation of girls, and have many flow-on effects in terms of impeding the ability of girls to realize their full potential and participate effectively in society. There is also often a causal link between risk factors and means of protection, as where underage marriage or trafficking can lead to diminished possibilities for access to education. The following table sizes up the experiences of gender differences and sexist discrimination between a girl and a boy child or a human female and a male from womb to tomb.

“The perspective is now clear that the hardest challenge to take in life is being a girl child.”

<table>
<thead>
<tr>
<th>Gender</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girl</td>
<td>discriminated, dominated, disadvantaged, drudged, discrepant</td>
</tr>
</tbody>
</table>
### Table 1
Experiences of Gender Differences and Discrimination from Womb to Tomb

<table>
<thead>
<tr>
<th>Phase of Life</th>
<th>Girl/Female</th>
<th>Boy/Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prenatal</td>
<td>Unwanted, Not welcome, Sex selective abortion, Foeticide</td>
<td>Wanted, Welcome, Son preference</td>
</tr>
<tr>
<td>Early years</td>
<td>Socialized to private in-home roles as they grow up. Girl's oppression begins with the first institution of contact: the family. Female infanticide. The girls fed last and least and malnourished.</td>
<td>Socialized to public roles as they grow up. More valued than their sisters and may not be allowed to express their emotions or behave in ways not considered 'manly'.</td>
</tr>
<tr>
<td>Childhood</td>
<td>Emotional and physical abuse, differential access to food and medical care. Genital cutting. Little time to play games and sports as they are busy with household chores and caring for siblings. Low enrolment and more drop outs. Social and cultural norms and stereotypes restrict girls' mobility, reducing the public spaces they may enter safely. Submissive, dependent and sober by nature.</td>
<td>Exposed to larger world: community and school, society. More time to play games and sports. They are prioritised over their sisters at school. Less dropout and lesser restrictions on movements compared to girls. Little restriction on where to go, how far to go and when to go. Controlling, dominant and aggressive by nature.</td>
</tr>
<tr>
<td>Adolescence</td>
<td>Early marriage. Girls are far more likely than boys to experience sexual harassment and violence on the way to school and in the classroom, sometimes from their male peers. Sexual abuse in the workplace, rape forced prostitution. Legal discrimination deprives girls of property, land and inheritance rights. Job- family Balancing. Commercial Sexual exploitation, Honor Killing, Indecent Representation and Defamatory Publicity.</td>
<td>With the onset of puberty, boys are increasingly expected to behave in stereotypical 'masculine' ways– to be strong, tough, and even aggressive and not show their feelings. They may engage in risky behaviour to 'prove' their manhood– dangerous driving, drugs, and unprotected sex– that can have damaging effects on their health and serious consequences for the women they have relationships with. Trafficking.</td>
</tr>
<tr>
<td>Adulthood</td>
<td>Reaching adulthood includes both conformity and liberation for girls who begin interacting with wider social institutions, including the workplace. Women are restricted to certain low-paid jobs and are unable to break through the glass ceiling and make it to top managerial positions. Women are considered the primary care-givers for children and the family. Abuse of women by intimate partners, marital rape, dowry abuse and murders, partner homicide, psychological abuse</td>
<td>Young men are expected to find work and are often still seen as the providers for their family. If they are unemployed, this can lead to feelings of worthlessness and depression and even violence. As fathers, they may be distant from their children. Masculinity, Patriarchy and dominance. Not taking women's roles unless very necessary.</td>
</tr>
<tr>
<td>Old Age</td>
<td>Abuse of widows, elder abuse, neglect Forced Suicide, homicide</td>
<td>Abuse of widowers, elder abuse, neglect, Abetting Suicide and Murder</td>
</tr>
</tbody>
</table>
The girl specific problems disaggregated from the above table are foeticide and infanticide, girl's health and malnourishment, girl child labour, early marriage, child trafficking, honour killing, literacy and drop-out and indecent representation and defamatory publicity.

The Way Forward

Thus what has been attempted in this paper is not merely to discuss the problems and rights of the girl children as such but to spell out the intricate issues underlying them. Looking back to the questions raised in the beginning, this concluding section ends up with summarizing the analytical stakes and the praxiological strengths of the issue at hand. The last quarter of twentieth century saw a vigorous debate over the nature of rights in general to child rights in particular to that of girl child around gender concerns. While reformers claim that children have all the rights that adults do. Critics deny this, either believing that children have no rights or believing that children have only some of the rights which adults possess. They further argue that the ascription of rights to children manifests a misunderstanding of what children are like and of the nature of family relationships. Those who deny children all or some of the rights possessed by adults nevertheless believe that children, as humans, have a certain moral status that ought to be protected. Each side declared its conceptual analysis to be closer to an ordinary understanding of what rights there are, and to an ordinary understanding of what rights do for right holders. Neither side could win a decisive victory, nor the debate ended in a standoff (Sumner 1987).

Those who say that drawing a line between adults and children in respect of their possession of rights is arbitrary may mean different things. To deny that different capacities are progressively acquired at different ages is implausible. To insist that drawing a line as such is wrong ignores the point of doing so, and recourse to the alternative of a competency test is not appropriate or practicable. On the standard view children have welfare but not liberty rights, whereas adults have both. Adults also have the right that their childhood selves shall grow up to be adults of a certain sort. Children do not have an interest in remaining in childhood. The best-interest principle should arguably have only limited application. It is not possible unambiguously to interpret the best interests of a child in terms of a hypothetical adult self, and any objective interpretation will be the subject of contested views. A child's right to be heard in matters affecting its interests is a substitute not a complement to the right of choosing for herself. It is not merely the rights of children as such but the most vulnerable, the girl child. One possible resolve of this stranglehold is to take it as much a moral issue as a legal one requiring adequate response from community, neighbourhood, civil society, governance system, culture and the society as a whole.
Coming to praxiological concerns, it must first of all accept that the country has not done materially enough for its children, especially for the girls. The reason for such gross violation of the rights of the girls is in the absence of a social norm in favour of her survival, dignity, care and protection. The country has to feel a sense of shock and outrage that there is the practice of female foeticide and infanticide. No modern, cultured nation can be called civilised if it continues to tolerate such a perpetration of violence on its 'un-born' and 'new-born'. The government too must ensure that children are protected and make available all the institutions function to give security to these children.

In emphasising on abolition of child labour in 'hazardous' industry alone girls are left out. Armed with such an atmosphere, there could be pressure built to rescue girls from child labour, child trafficking and early marriages. The government too must be more committed about its policies on abolition of child labour. Girls' work which is hidden and invisible, that keeps them out of school and renders them illiterates, must be recognised as child labour. There are several young children, who have taken courageous steps to defy the authority in the family and society to get away from marriages and join schools. Such children are to be encouraged and given full support. For in their success lies the future of girls in our country.

Eleanor Roosevelt (1958) said 'a woman is like a tea bag – you never know how strong she is until she gets in hot water'. There is enough evidence that investment in the girl child results in making a better, healthier, happier, and more creative family, community and society (Nayar, 2011:20). When family, schools, neighborhood and Communities take this as the agenda for action, it is likely to result in a great contribution for the present and future generations of the nation. To make girls' care and protection a reality for every girl in every place requires not only our resources and policies, but also our voices and actions. But more than that, love, respect and support for girls must be the reality of all our homes, schools and communities. The answer of security of girls is not in their protection and restriction of being under the supervision of brother, father, husband or economic security given by male members of the family rather it is in honoring citizenship to girls and boys alike to enjoy the freedom and confidence of being in a society living with peace and basic human rights. Save a boy is to save a person, but save a girl and save a generation.

References

Eleanor Roosevelt (1958) said 'a woman is like a tea bag – you never know how strong she is until she gets in hot water'.

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Child Sexual Abuse: Parental Role in Prevention

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Ms. Bhawna Mailk

Abstract
In Indian culture talking about sex is a taboo. Parents too find it difficult to talk to their children about it. On the flipside, child sexual abuse is exorbitantly high. Even preschoolers are being sexually abused. There is a dire need that children are made aware of sexual abuse so that they can prevent and protect themselves. In this context, parents have the prime responsibility to educate their children about sexual abuse. The present research addresses issues related to parental communication with children on various issues including child sexual abuse. It aims to find the correlation between parents’ educational status, their awareness about child sexual abuse and their discussion about it to their children. Findings show a positive correlation between educational qualification and awareness about sexual abuse. Some parents have superficial knowledge about the connotation of ‘sexual abuse’. Despite majority of parents knowing about rising incidences of child sexual abuse, they are not having corresponding perception and drive to take a lead to inform their wards about it. There is not much clarity about the forms of sexual abuse among many parents. In the light of findings, suggestive interventions are chalked out.

Introduction
Indian tradition has it – childhood, characterized by innocence, cheer, and tranquil, is valued as divine. We have celebrated childhood as godliness, through childhood of Krishna, Rama and the like. However, rampant cases of sexual abuse of children shown in media pose serious questions about our values, philosophy and concerns and safety measures for our children.

It is generally asserted that parents should play a salient role in the sex education of their children. However, for most, any communication about sex between parents and children is not easy. In the same wavelength, educating children about
child sex abuse puts parents in somewhat awkward position.

Rubenzehland Gilbert (2008) point out that sexual education should be seen as developmental in nature, beginning in early childhood and continuing through adolescence. And this should also include educating about Child Sexual Abuse. The sooner it starts the better equipped will children and parents are to deal with it. The cultural value of remaining silent on sexual matters is taking a heavy toll on the physical and mental health of children.

The parent child relationship is one of the most dynamic and multifaceted relationships and involves physiological as well as environmental influences (Walters and Walters, 1980). The parent-child relationship is strengthened through consistent and enduring interactions between them. Role of a positive family environment in shaping the personality of the child cannot be negated. Parents teach the child skills to face the challenges in the world.

On the flipside, families where parents are unable or unwilling to discharge their parenting role in an effective manner, children from such families bear lifelong consequences. A study in US done in 1978 reported that abusive and neglected families have lower rates of interaction and that they are much more likely to emphasize the negative aspects of their relationship with each other. Thus, parents play critical role in the socialization of the child.

**Objectives:**

Parental role in educating their offspring about sexual health and abuse cannot be undermined in any way. Moreover, the education of parents, their thinking patterns, attitudes and values, have significant impact on their children. Education is an important component that moulds our personality, influences our thought and actions. In this regard, the present study intends to see if education of the parents has any linkage with the education of children about child sexual abuse (CSA) and their own awareness about CSA. It also aims to document the strategies parents adopt to provide information to their wards about sexual abuse and what interventions they expect from other stakeholders like schools.

**Methodology**

To appraise parents’ role in educating children about CSA, two schools in Delhi were selected. One is a reputed public school which has children from financially and educationally affluent families and another is an MCD school. Thirty parents each from both the groups were
selected for the study. Using descriptive research design, interviews were carried out with parent(s) of the children below 12 years of age. Sixty parents (either father or mother) were interviewed.

**Findings**

In the study, respondents have been categorized into those who are graduates or above (henceforth called 'Well educated' and those who have completed senior secondary education and below (henceforth called 'Less educated'). The categorization has led to two distinct groups – well educated parents and less educated parents. Study results mainly revolve around the question – what bearing educational status has on parental awareness of CSA and their preparedness and willingness to educate their children about it. Prominent findings of the study are as follows:

**Awareness about CSA**

In India, two out of every five children are sexually abused (see: Malik, 2012). Sexual abuse, though rampant, is discussed behind closed doors, and many people even claim to be unaware of this horrendous practice. In the study, around 97 percent of well educated parents have heard about CSA in contrast to 70 percent less educated parents. Most parents claimed to have heard about it either in television through newspapers. Though most parents are aware of CSA, 30 percent less educated parents are ignorant about this evil in the society. Though 83.3 percent of parents claim that they are aware of CSA, it is important to understand what they actually comprehend with this concept. It would have implications on creating awareness about CSA among their children. Faulty knowledge on the part of parents will result in faulty and incomplete knowledge being disseminated among children. Table 1 provided below presents the details. The results are shocking. More than 63 percent well educated and nearly 83 percent less educated parents could not describe which offences or acts comprise of sexual abuse. Though they claim that they have heard about it and they know what it is but they were at a loss when it came to explaining what it means and what does it imply. In both the categories of parents, 10 percent each regard only rape as sexual abuse. To them, molestation, inappropriate touch, fondling, etc., are not covered under the gamut of sexual abuse. One may assume that such myopic views of parental knowledge of CSA would omit out cases of molestation and other forms of sexual abuse from being recognized even.

Nearly 27 percent of well educated parents and merely 7 percent of less educated ones have the 'correct knowledge' about the concept of CSA. Quite surprisingly, a few parents believe that sexual abuse can happen only with girls and not boys.

<table>
<thead>
<tr>
<th>Education of parents</th>
<th>Extreme (only Rape)</th>
<th>Touching inappropriately/fondling/showing pornographic material etc.</th>
<th>Not Aware</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well educated</td>
<td>10%</td>
<td>26.7%</td>
<td>63.4</td>
</tr>
<tr>
<td>Less educated</td>
<td>10%</td>
<td>6.7%</td>
<td>83.3</td>
</tr>
</tbody>
</table>

“In India, two out of every five children are sexually abused.”
implies that with such perceptions, parents may not at all tell their boy-children about CSA while in reality boys are as vulnerable as girls. A respondent, while trying to explain meaning of CSA, said “haan jo choti bachchiyon ke saath badtameezi karte hai” (yes, it is when someone misbehaves with very young girls).

One of the educated parents even explained CSA as “jo bachche gharon mein ya factories mei kaam karte hain” (when children are made to work as domestic help and in factories). Some parents irrespective of the education background could not elaborate on what they mean by CSA and showed disbelief and surprise when explained by the researcher.

Educating children about CSA

Now-a-days, increasingly, the researchers, social scientists and psychologists are propagating the importance of parents communicating about child sexual abuse to their wards. It is taken as an important strategy for preventing sexual abuse among children. During interviews, when asked about the same, most of the parent-respondents were initially clueless. After the researcher explained the significance of having open discussions among parents and their offspring on child sexual abuse, around 93.3 percent well educated parents stated that it should be spoken about and children should be aware about it compared to 66.7 percent less educated parents. Still among the more well educated group 30 percent parents have not spoken to their children about it. It is interesting to note that though there is noticeable difference in the two groups but still more than 50 percent of the less educated parents responded that children should be made aware in order to prevent CSA and that is an important stepping stone towards reducing the incidents of child sexual abuse. However one should not be too content with it as every parent should realize the importance and strive to educate their children about CSA.

For children to be aware and hence safe from CSA, the first and the most important step it for parents to speak to the children. As we saw that most parents from both the groups agreed that CSA is an issue which should be spoken about but it must also be seen that how many parents have indeed gone ahead and fulfilled their responsibility. Table 2 has the details.

Data show that almost two-thirds of well educated parents have spoken about CSA to their children while only 13.3 percent less educated parents have done so. It is quite alarming that 86.7 percent of less educated parents have not talked about CSA to their wards yet. It is also interesting to note that though 80 percent parents altogether said that it is an important issue and should be spoken about only 40 percent have spoken to their children, which is not a satisfying figure.

It is quite unfortunate that though most parents agree that it is a menace and should be curbed but they are not taking the right steps towards it. This data also point towards the fact that it is not just the less educated parents but also the more educated ones who are not taking appropriate steps towards restraining CSA.

Comfort levels of parents

Issues like sexual abuse are still considered a

| Table 2 | Association between education of the respondent and spoken about CSA |
|---------------------------------------------------------------|
| **Education of the Respondent** | **Have Spoken** | **Not Spoken** | **Total** |
| Well educated | 66.7% | 33.3% | 100 |
| Less educated | 13.3% | 86.7% | 100 |
About 56.7 percent well educated parents are, reportedly, very comfortable while discussing such issues with children. On the other hand, just 20 percent of less educated parents were comfortable discussing such issues with their children. In the same group however, around 43 percent of well educated parents said that they would not feel comfortable discussing such issues. One of the respondents replied “bachcho se aesi baat kaese kar sakte hain? Hume to laaja ayegi” (I cannot talk to the children about it, I'll feel awkward). Among the more educated parents, 13.3 percent confided that they wouldn’t feel comfortable discussing such issues. So we can see that though the parents are aware about this evil in the society, they acknowledge that children should be made aware but do not feel very comfortable given the socio cultural norms of our society.

**Educating about same sex perpetrators**

A common perception is that sexual abuse only happens with females and men are the perpetrators but they are not aware that not just girls but even young boys can become victim of sexual abuse. And it is not just the opposite sex that children need to be cautious of but children can be abused by people of the same sex i.e. both men and women can become perpetrators. Research shows that the number of women offenders is on a rise due to the changing socio economic and cultural factors. It, therefore, becomes important to see how informed the parents are about this and if they have conveyed it to their children.

Findings show that only 43 percent of well educated parents have told their children to be cautious of same sex perpetrators while more than 50 percent have not. And none of the less educated parents has done that. Further, 3.3 percent well educated parents and 53.3 percent less educated parents were not aware of such things happening in the society. This is a large number as more than half of the population is not aware of this. Of the people who are educated and aware of this happening, around 30 percent claimed that it never occurred to them that it should be told and 3.3 percent did not feel that it is important enough to be told. It is perhaps a greater trauma as one does not expect to be abused by same sex perpetrator. Therefore, it becomes even more crucial to educate the parents as well as the children about it.

**Attending CSA awareness programmes**

Given the low level of awareness of parents the need of the hour is to educate the parents about different aspects of this problem and how to discuss it with their children given the sensitive nature of the problem. However, for that it is necessary to know the willingness of the parents for any such program or interaction that can apprise them about the problem at hand and also if the education of the respondents has an
The data show that 76.7 percent of well educated parents agreed to attend any workshop or programme that can acquaint them with the problem and help them in educating their children about the different issues, compared to 60 percent less educated parents and also belong to the lower economic group. Twenty six percent responded in a negative mostly citing time as a problem. As one responded “madam ji time hi kahan hai iske liye, duty pe jana hota hai aur fir bachcho ko bhi dekhnahai hai ghar pe” (there is no time for all this. After coming from work I have to look after my kids at home).

Being unaware makes the children more vulnerable to abuse as they do not realize that something wrong is happening to them and at times if they are uncomfortable or uneasy they do not know how to explain and to whom to share with? As the child is in a major dilemma it becomes crucial that the child shares his anxiety with his parents and for parents to ensure that the sharing is such that it leads to free and unbroken communication so that the child can discuss with the parents without any fear or inhibition.

It is important to appraise the linkage between the education level of the parents and the comfort level and openness the parents think they share with their children. Though there is no significant difference that is seen between the two groups. A majority of parents replied that their child will come up to them and share with them in case anyone misbehaves with the child followed by those who feel that it’s difficult to tell now if their child will feel comfortable enough to come up and share with them.

Interestingly around 51.7 percent of the total respondents replied that awareness level is quite low among people so spreading awareness should be the main agenda and stepping stone towards preventing it, out of which 30 percent respondents were well educated parents and 21 percent less educated parents. Only 5 percent well educated and 1.7 percent of well educated parents want stringent laws and severe punishment as retribution for this heinous crime. One of the respondents claimed that if at all something like that happens to her daughter she will not stop from killing that person or getting that person hanged. Unfortunately 10 percent well educated parents and 25 percent less educated parents could not suggest any intervention to stop children from being sexually abused. Again this could be because of lack of awareness regarding child sex abuse, accompanied by denial and disbelief.

Since family is the first institution of socialization, so the basic education concerning the child’s safety should start from the parents. However, since the children start going to school at a very young age these days, the importance of school and hence the teachers cannot be negated.

When discussed this with parents, the data bring out that among the well educated parents 56.7 percent responded that the major responsibility for teaching children lies both with parents and
teachers. Whereas, among the less educated parents, 43.3 percent maintain that parents have a major role to play in making children aware about CSA. And the second highest proportion of people replied that it is the teachers’ responsibility to teach children about such safety issues. Here the parents need to realize that the role of teachers is important nevertheless the parents cannot and should not shy away from their responsibility. The reason could be their lack of awareness or not being comfortable with the subject, but parents have to be aware and comfortable with the issue so that children’s safety is not jeopardized.

The age of the child, the content, the inadequate information with the parents and the inability to share it in an informative manner that is comfortable and non-threatening to the children are areas of grave concern for the parents.

**Conclusion**

Child sexual abuse is rampant in India. So, making children aware of it is of critical importance. Only well aware and conscientized parents can educate their children about this menace. The present research finds the gaps in the levels of parental understanding about conceptualization of child sexual abuse. Well educated parents were more prompt in educating their children about CSA as compared to their less educated counterparts. Awareness about same sex perpetrators and boys being equally vulnerable as girls to sexual abuse was lower, which is an area of concern. About one-third of parents with less education have not even heard about the term. How can one expect to make the children aware if parents have themselves not heard about child sexual abuse?

Indian society propagates the culture of silence. Talking about sex is a taboo. Though parents have been socialized to refrain from discussions on sexual matters, they have to shed away their hesitation and come forward to educate their children. Responsibility lies with the school system too to ensure that their pupils are well aware. Since awareness is the solid step towards prevention, collectively, we all need to join hands together to create a social environment where children, free from all forms of abuse, enjoy their childhood and parents and guardians celebrate the most serene period of human life with rejoice.

**References**


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Inclusive Education for Children with Special Needs

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Introduction

Education is the right of all children to the age of fourteen years and for children with disabilities till the age of eighteen years. Despite encouraging developments in the field of primary and secondary education, it is recognised that current strategies and programmes have largely been insufficient or inappropriate with regard to needs of children with disabilities. Many special components have been developed targeting them, but these have functioned outside the mainstream – special programmes, specialized institutions, and specialist educators. Notwithstanding the best intentions, too often the result has been exclusion: poor standard educational opportunities, name sake learning, trainings that do not guarantee skills needed for employment, leaving children with disabilities outside the mainstream of school life and later, as adults, outside community life in general.

Legislations

The passage of the landmark legislation, The Persons with Disabilities (PWD) Act, 1995 ushered in a new era for the education of children with disabilities in India. A major emphasis of this law was the inclusion and full participation of students with disabilities in regular schools. It guaranteed non-discrimination and removal of barriers, both physical and psychological, to facilitate the inclusion of students with special needs into regular schools. It urged policy makers, educators, parents and other service providers to consider the premise that special education should be seen not only in the context of separate education but also as an integral part of regular education. The Convention on the Rights of the Child (CRC) declares the rights of disabled children to enjoy a full and decent life, in conditions that promote self-reliance and facilitate the child’s active participation in the community. The UN Convention on Rights of
The UN Convention on Rights of Persons with Disabilities (UNCRPD) asserts to safeguard the right of education for children with special educational needs. The process of including children with disabilities in mainstream classes as a way of addressing and responding to individual learning needs has been accepted as the preferred method for providing education for the majority of children with disabilities across the world. The right to education and access to quality education, which are key components of CRC, UNCRPD and several other international agreements, are also affirmed by India. Right of Children to Free and Compulsory Education Act, 2009 further strengthened the rights of children with disabilities by stating: Every child of the age of six to fourteen years shall have a right to free and compulsory education in a neighbourhood school till completion of elementary education. In Odisha progress has been made in providing access to education for children with disabilities but still a lot remains to be done.

**Strategies for Successful Inclusion in Classrooms**

When inclusion of a child with disability into regular class-rooms has to be realised, the school curriculum, teaching-learning practices and assessment procedures must be in alignment. Furthermore, professional support in the form of in-service training and collaborative networking with parents and professionals is needed. In addition, supplementary funding resources to provide teacher aides, smaller class sizes and appropriate teaching resources are essential. Teachers also need time for collaborating with colleagues, exchanging information and designing appropriate teaching methods and materials to support inclusion efforts. For making inclusive education successful adequate and equal attention has to be paid to legislation and policy guidelines, infrastructure development, enabling accessibility to a child-friendly environment, professional training of the teaching staff, creating a flexible curriculum, tutorials, extra classes for children with disabilities and use of appropriate teaching-learning methods.

**Strategies**

a. **Appropriate legislation and policies**

Adopting appropriate legislation and developing policies or plans of action are important starting points to achieve inclusion for all. Overall, there is a lack of information about how to translate international standards, such as Article 24 of the Convention on the Rights of Persons with Disabilities, into practice. Odisha needs to have ambitious inclusive education plans for educating all children with disabilities, as part of its education sector strategy.

b. **Infrastructure and transport accessibility**

The distance from home to school and inaccessible infrastructure make getting to, and around, the school difficult for children with mobility impairments. In sparsely-populated rural areas, where the distance to and from school is far, the cost of transport and the time
and effort involved in accompanying a child on the journey often deter parents from sending their child with a disability to school. Many parents of children with disabilities see the absence of a specialised transport system from home to school in rural areas and the lack of subsidised support for rickshaw/auto rickshaw transport as major constraints. Regulations on school design can play an important role in tackling this: if education authorities have regulations, for instance, on school design, or providing subsidised transport, this can set standards to which to adhere. Infrastructure accessibility is not limited to physical ramps. It encompasses accessible ramps, doorways, toilets, proper lighting, sound systems and communication. Providing government regulations on school buildings will make schools accessible and relevant for all.

c. Teacher’s training and support system

The state does not have adequate numbers of skilled and trained personnel for supporting inclusive practice to meet the needs of different types of disabilities. Apart from teachers, therapists, special educators, tutors etc. are needed to complete the process of classroom learning. The existing handful of teachers lack the necessary competency to work with children with disabilities, and in particular with children with mental retardation, autism and multiple disabilities, at school level because of the necessity to modify the teaching methodology and learning materials to make them more child-friendly. Over eighty seven percent of the teachers do not have access to support services in their classrooms. It is therefore not surprising to see them rating themselves as not competent to teach disabled children. Research indicates that negative attitudes of teachers and their lack of skills impede the successful implementation of inclusive education programs. Hence regular teachers at pre-service and in-service levels should be trained to address the issue of education of children with disabilities so that they can be better equipped to work in an inclusive environment. One of the most promising approaches in supporting classroom teachers with inclusion is to provide support from a collaborating teacher. In many cases, this teacher is a former special education teacher given a new mandate and role. Instead of providing direct service to students, the support teacher places emphasis on providing professional assistance in planning and teaching strategies to the classroom teacher. This assistance may be focused on meeting the unique learning needs of the students or on developing classroom strategies and activities for day-to-day use. Support teachers also, assist in working with parents, and they may deal with outside agencies involved with the child. They help the teacher with all the other complications associated with providing high quality instruction to special needs students in a regular class.

d. Teaching-Learning Methods

One of the most important principles of inclusive education is that no two learners are alike, so teachers therefore must consider a wide range of learning modalities (visual, auditory, kinesthetic, etc.) in designing instruction. This will not only enhance the way in which educators provide supports and accommodations for students with disabilities, but will also diversify the educational experience of all students. When students are provided with alternatives to traditional written tasks, such as oral presentations, role plays, murals, or other creative projects, they are enabled to use their learning strengths (e.g. visual, auditory, tactile, and kinesthetic) rather than their deficits. Active tasks will increase the engaged behavior of students both with and without disabilities. The option to use technology as an instructional adaptation has
also shown to increase achievement of children with disabilities. It can be used as an alternative instructional medium (e.g., for auditory and visual presentations) or as an alternative for student responding, such as occurs when students use augmentative communication devices, type stories, or present computer or slide show projects to demonstrate their knowledge in place of written assignments.

It is important that teachers learn how to assess the needs and abilities of children and about specific methods and interventions for increasing the learning and life skill abilities of each child. The focus on evaluation for children with disabilities needs to go beyond academic achievement.

e. Curriculum

Curriculum, which is central to the process of inclusion, is often prescribed at the state level. There is a need to find ways to ensure that the curriculum is flexible and responsive so that teachers can make modifications to accommodate the needs of the individual.

f. IEP

Each child with disability must have an Individualized Education Program (IEP). Each IEP must be a truly individualized document. The IEP must be developed by teachers in collaboration with parents, special educators and other professionals like therapists etc. The IEP guides the delivery of special education supports and services for the student with a disability. The IEP describes how the student learns, how the student best demonstrates that learning and what teachers and service providers will do to help the student learn more effectively. Developing an IEP requires assessing students in all areas related to the known disabilities, simultaneously considering ability to access the general curriculum, considering how the disability affects the student's learning, forming goals and objectives that correspond to the needs of the student, and choosing a placement in the least restrictive environment possible for the student.

g. Books in alternative formats and educational supports

Government should produce books and other learning materials in a range of formats that can be used by children with different impairments. For example, books in Braille, books with large font and high-contrast backgrounds, books for older children with simple language, picture books with limited words, and books with sign language pictures next to the text. New Information Communication Technologies (ICT) offer a host of ways to support this.

Besides, aids and appliances should be provided after assessment by doctors. Along with TLM should be developed as per specific needs of various disabilities. Educational supports like alternative and augmentative communication devices; customized desks, computer peripherals etc. must be readily available.

h. Redefining role of NGOs

The role of NGOs in responding to the educational needs of children with disabilities and in initiating practices of inclusive education...
has been established much earlier and been more pronounced than that of governments. They must be involved in early education and pre-school or school preparatory programs. The special schools/NGOs could play a major role in preparing children for regular schools and also providing support to the neighborhood schools in addressing the needs of diverse children with disabilities for their better learning outcomes. Preparing disabled children through early childhood development centres on the one hand will provide the means for early detection and identification of the disability and thus interventions, and on the other hand will increase their chance to be mainstreamed into regular schools with learning outcomes close to their non-disabled peers.

i. Other needs of children with disabilities

Apart from educational, children with disabilities have other needs like medical needs – for example, spasticity care or medications; personal care needs – for example, help with toileting or help at meal times; and other needs – for example, behaviour support needs or help with social interaction. The schools should develop plans for managing these needs. The plans should be clear about what needs to be done, when, by whom and where. Very importantly, it should also make sure that the child’s needs are managed in a safe, dignified and respectful way. Support for children with disabilities should also include addressing barriers outside the school. Support provided only to schools is insufficient – attention must also be given to the economic status of families, the health and self-sufficiency of children with disabilities, and physical and emotional barriers outside the school such as transportation, parental/societal attitudes, etc. Better cooperation from outside the education sector will help in identifying problems, providing necessary support services and instilling a sense of confidence among the parents of children with disabilities.

j. Awareness

Attitudinal barriers prevent children with special needs from coming to schools. Unless these barriers are demolished, success in bringing children with special needs to school may be in question. Hence, it is important to undertake widespread awareness on the need, importance and potential of children with special needs. Various modes like ma-beti mela, bal sammelan, print and electronic media, success stories etc. should be used. The training of community leaders in SSA should also have an essential component on inclusive education. Mother Teacher Association/Parent Teacher Association/School Management Committee (MTA/PTA/SMC) could be used as a powerful medium to inform the parents on the care, need, management and potential of children with special needs. Parents of children with special needs should receive counselling and training on how to bring them up and teach them basic survival skills.

Conclusion

Inclusive education does not simply mean the placement of students with disabilities in general education classes. This process must incorporate fundamental change in the way a school community supports and addresses the individual needs of each child. As such, effective models of inclusive education not only benefit students with disabilities, but also create an environment in which every student, including those who do not have disabilities, has the opportunity to flourish.

The author is the Chairperson of OSCPCR. She has over 25 years of experience in the field of disability and especially the rights, care and protection of children with disability.
Child Protection
The Family Based, Non-institutional Alternative Care Approach

Child Protection: A Rights Based Framework

The natural environment for a child to grow up in is a nurturing family. Growing up in an institution is not a preferred option since both experience and research findings have showed this. Being separated from one’s parents in childhood leaves behind a long lasting trauma, pain, grief and irreparable scars. The isolation of children from their families and growing up in residential care leads to difficulties in adult life. Causes of children growing up in institutions are often linked to poverty and compelling socio-economic cultural circumstances. To address this issue it becomes mandatory to have a systems analysis, a holistic integrated perspective and family based intervention strategies for children without parental care. The term “children outside parental care” and children in need of care and protection (CNCP) refers to all children not living with parents or in families at risk, for whatever reason and in whatever circumstances.

The United Nations (UN) guidelines for Alternative Care for children is a response to enhance the implementation of United Nations Convention on the Rights of Children (UNCRC). The UN guidelines for the Alternative Care of Children define children without parental care as “All children, not in the overnight care of at least one of their parents, for whatever reason and under whatever circumstances. This includes children living in residential / institutional care, in extended or foster families, in child headed households, in drop in shelters or on the streets”.

Some of the key elements necessary in creating a protective environment for children include:

- The commitment of the State / Government to ensure the prevention of Neglect, Abuse, Violence and Exploitation of children.
- Legislative Policies, Plans of Action and Intervention Strategies for child protection.
have to be harmonised with UNCRC from the macro to micro level as well through intersectoral collaboration.

- The child has to be at the centre of all interventions and Best Interest of the Child is the cardinal principle that must guide all areas of child protection.
- The UNCRC must be translated from being document of intent to a document of action and ensure its implementation.
- Ensuring that there is a spirit of participation, convergence, dovetailing between the activities of the government and civil society organisations (NGOs).
- Recognising the child’s Right to be brought up in a nurturing family, all policies and interventions must preferably be family based, community oriented and non-institutional in nature.

Some key principles and values that need to be reflected in all policies and practice:

- Rights Based Framework
- Social Justice, Non-Discrimination and Entitlement
- Equity and Equality
- Appropriateness, Necessity and Need
- Dependency and Adequacy
- Inclusion and Mainstreaming
- Child Centred Interventions
- Participatory Approach
- Holistic and Integrated perspective
- Multi systems analysis and action

**“Best Interest of the Child is the cardinal principle that must guide all areas of child protection.”**

- It is the right and entitlement of every child to grow up in a family – since it is the natural setting for a child’s development and well-being –
- “The child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding.”
- The theme of the entire convention is that children not only have a Need, but a Right to be brought up in a family with their parents. (Article 18.1)
- CRC reiterates and confirms the knowledge and research findings concerning children and child development that the children's development in a nurturing family environment is the most fundamental need and right. (Article 5)
- Parallel to this and simultaneously the CRC also reiterates the States obligations to arrive and facilitate the parent's responsibility for the child's upbringing – and this constitutes “Family Strengthening”. (Article 3:2, 24, 26, 27)
- In the event that children are unable to be cared for in the family and are deprived of their family environment, the state is obliged to intervene and the child is entitled to special “alternative care, protection and assistance” – such as foster care, adoption, Kaffala (Article 20)
- The UN Committee on the Rights of children, which is the authorized interpreter of the UNCRC, interprets this Article 20 as stipulating that institutional placement of children should be seen as a very last resort, when no other options are available.
Why is Institutional Care such a common alternative?

There are several factors that contribute to the overuse of institutional care, and often seeking it as the first or only option for children in need of care and protection.

- **Weak gatekeeping criteria and processes**: Gatekeeping is essentially a combination of criteria and process designed to target services to a specific group of users. Good gatekeeping governs admission to institutional care by prioritizing family preservation and family and community based alternative care, and is important to ensure that institutional care is used as a last resort. Often poor gatekeeping criteria and processes allow children admission to institutional care without a systematic assessment of a child’s situation or consideration of the available alternatives, and often poverty alone is a legitimate reason for admission.

- **Lack of alternatives to institutional care**: Due to lack of family support services and other alternative care programmes, institutional care is often seen as the only recourse immediately available to children in need.

- **Families at risk**: Families at risk often see institutions as an economic coping mechanism and as a place where children can receive schooling, health care, and accommodation. If institutional care is less available to families and communities, they are more likely to consider alternatives that protect the best interest of the child.

- **Insufficient emphasis on reintegration and permanency**: Institutional care is to be a temporary arrangement. There are no systematic mechanisms for ensuring that institutional care placements are accompanied with concrete rehabilitation plan and no individual care plan is made for each child who is admitted to institutions. Planning for reintegration and permanency can be supported by the establishment and regular review of individualized care plans for every child. These plans should specifically detail actions to reunify separated children with their families where possible and to place children in nurturing family based arrangements.

- **Institutional care should be a last as well as a temporary resort**: Child rights principles enshrined in international legal instruments all emphasize the priority of family based care. Institutionalization should only be used when absolutely necessary, after exhausting other family and community based alternatives, and with a view to a permanent, family based arrangement.

- **For most children, institutional care is not the best alternative**: Childcare institutions are intended primarily for long term care of the small minority of children who can
neither be returned to their family nor placed in a family or community based alternative care arrangement. Institutions are commonly used for both long and short term care, and placement procedures may not promote investigation of family support or other alternatives.

- **Institutional care fails to meet children's needs:** Mounting evidence from around the world suggests that institutional care fails to meet children's physical, emotional, and social needs, limiting children's cognitive development and as a result their social and economic performance as adults. Institutional care is not conducive to providing the individual attention, emotional support, intellectual stimulation, and guidance that children need for holistic development.

- **Reintegration is difficult:** In general, institutional care services lack mechanisms as well as capacity for reintegrating children into families and communities. This means that children placed in institutional care may stay there for a long time.

**Gatekeeping**

Gatekeeping is the term used here to describe the process of assessment and planning of children's needs and circumstances which should precede admission into residential care, and contribute to their onward progression of reintegrating them back to their families or into a form of substitute family care, or in the case of older youngsters, moving on to some form of after care and independent living. Gatekeeping policies and practices are significantly deficient or wholly absent and need to be developed as part of prevention of institutionalisation.

**WHY – Institutional Care as a last alternative – some possible negative impact of long term Institutional / Residential Care**

It is universally accepted that even the best institution cannot substitute for the nurturing care that a family can give to a child. However, there are some children for whom that may be the only option. So, it is important to improve the quality of child care in institutions, and simultaneously develop alternative services. Studies and experiences have shown that a child who has been deprived of family care and brought up in an institution may show some of the following problems:

- **Lack of individual attention**, individualisation, one-to-one caring and interaction makes it difficult for a child to feel secure and bonded to one caregiver.

- **“Multiple Mothering” syndrome** - when a child is cared for by changing staff, the child is unable to form an attachment with any one person. This leads to a lot of emotional isolation and insecurity in the child.

- Inadequate stimulation may lead to delayed milestones of development.

- Limited range of emotions is present in the “institutionalised child”. The child does not get a opportunity to experience a variety of emotions and this sometimes lead to a “Blank” look or a vacuum of feelings.

- The “Institutionalised Child” syndrome is also evident in the child’s “self-concept”. Some children may have a poor self-esteem and self worth, which may reflect itself in interpersonal relationships.

- Inability to form lasting, meaningful relationships. The child finds it difficult to trust people in authority or even peers when he has had too many negative experiences.

- **Excessive “Routinisation” and “Regementisation”** does not take into account individual needs of the child and hence the child either becomes very reticent and submissive or may react by becoming defiant and rebellious.
Due to the psychological, emotional and nutritional deprivation these children may also show poor academic performance.

Behavioural problems like enuresis, thumb sucking, nail biting, truanting, aggressiveness, defiance, lying, stealing could also be present in older institutionalised children.

There are various other manifestations of the adverse developmental conditions that institutional life involves, like mental disturbances, emotional trauma, lack of empathy and compassion for others, difficulty in developing trusting relations with others and integrating into societies becomes difficult for children who have spent a large part of life in residential care.

Children can be returned to their families, through a programme of financial and social support through family strengthening schemes.

Only a small minority of children living in children’s homes are there because they have been permanently abandoned by their immediate family or are fully orphaned, so they can be reintegrated into their families.

Rationalisation of Institutional care: Gatekeeping policies and practices are essential if institutional care is to be used as an appropriate and last alternative. Minimum use of institutionalisation and rationalising residential care is essential.

Parents rarely perceive the disadvantages of residential care, and they need to be counselled to understand that residential care is a wholly inappropriate response because it is likely to create long-term problems for the child who spends an extended period in residential care.

Residential institutions exert a pull effect because of the immediate advantages they offer of shelter, food and education as per the perception of parents.

It is the availability of residential care rather than an objectively determined need that is evident in many admissions to children’s homes. So in such circumstances, deinstitutionalisation is an important to restore the child into the care of his own family.

The approach of custodial care in an institution is being replaced because of a strong conviction that the Right to Family is one of the most basic rights of a child. Recognising this right of a child to a family, all child protection programmes must try and ensure that the physical, social, emotional and educational needs of the child are met in a secure, nurturing family environment. The primary focus is the strengthening of the family, prevention of family disintegration and abandonment of children.

Traditionally in India, the child without parents was looked after by the joint / extended family, but the systems slowly disintegrated and the problem of destitution has been on the increase. Institutional care has been one of the alternatives, however due to changes in approach in child protection, one realises that it cannot be a substitute for the individualised care that a family can provide.

De-institutionalisation through Family Strengthening Programmes

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III. Non-institutional Alternative Care

What is Alternative Care?

Alternative Care refers to the spectrum of services available to children whose parents are no longer able to provide adequate care. Children outside parental care often live with their extended families in kinship care arrangements or in other types of alternative care, such as adoption and foster care and many other variations of family and community based care. Institutional care is the most common type of care provided by the State. In some countries, it is the only option formally supported, and recognised by the government. There are
growing concerns about the situation of children outside parental care and the provision of suitable alternatives that are preventive, community oriented and family based.

Inadequate care environment can impair a child's emotional and social development, and leave children extremely vulnerable. They are at high risk of violence, exploitation, abuse and neglect and their well-being is often insufficiently monitored.

Kinship care is the spontaneous arrangement of care for a child within his or her extended family, and it represents the primary response to children outside parental care. Kinship care often protects child's identity through the preservation family relationships, cultural norms, and social networks. However, living with relatives provides no guarantee of a child's welfare or protection while in care. This form of care is often not formalised and hence unrecognised by national governments and kinship care arrangements are unsupervised, unregulated, and unsupported. The move away from residential forms of care has, to a large degree been prompted by a growing awareness of the potentially damaging effect on children of some of the characteristic features of institutions, especially on young children, and also been motivated by financial consideration, based on a cost benefit analysis.

Adoption is the best non-institutional programme for the orphaned, abandoned, surrendered child since it provides permanent substitute care in a family.

Objectives and Overview of Family Strengthening and Non-Institutional Alternative Care Programmes (FS & NIAC)

1. Ensure the child's right to a family.
2. To strengthen the family as a unit and prevent family disintegration.
3. To develop preventive, supportive, community-based, family-oriented outreach programmes for the Children in Need of Care and Protection (CNCP)
4. To provide the necessary counselling support to families “at risk” in order to prevent abandonment and institutionalisation of the child due to social and economic circumstances.
5. To arrange for substitute family care when the child's own family of birth cannot look after him due to compelling circumstances and crisis.
6. To work towards de-institutionalising the child and reinstate/rehabilitate him in his own biological family or a substitute adoptive or foster family.
7. To mobilise resources within the local community so that the innate capacities of the people are developed, leading to people's participation in child protection issues.

Adoption

Adoption is the best non-institutional programme for the orphaned, abandoned, surrendered child since it provides permanent substitute care in a family. The biological family should be supported and preserved wherever possible and no child should be deprived of care by biological parents solely because of economic need.

When the birth parents relinquish a child permanently, due to circumstances beyond their control, an adoptive family would be the best alternative for this child. Prior to adoption, several formalities need to be completed in order to ensure child protection. Pre-adoption
counselling prepares a couple to be emotionally ready for adoptive parenthood.

Since a child adjusts best within his own socio-cultural milieu, rehabilitation through in-country adoptions would be the first option after which inter-country adoptions could be considered for the child who is legally free for adoption. Children should not languish in an institution, indefinitely, and a rehabilitation plan must be made for each child.

**Foster Care**

Foster Care provides temporary, substitute care for children, whose parents are unable to care for them due to illness, death, desertion of one parent or any other crisis situation. It is different from adoption where the child severs all ties with his own natural parents. It could also be a service for prevention of abandonment to the single, unwed mother who does not want to give up her child irrevocably in adoption but needs support for a temporary period. In foster care, the child is placed in another family for a short or extended period of time, depending upon circumstances. The child's own parents usually visit regularly and eventually after the rehabilitation, they may return to their own homes.

Whilst locating a foster home, it is important to assess the suitability, competence and motivation of the foster parents and the home must be as close as possible to the child’s ethnic, socio-cultural and economic background. This compatibility facilitates the process of adjustment and the transition from the natural home to the foster home and vice versa so that the emotional trauma for the child is minimised. Kinship and Foster Care is also another alternative, where a child’s own relative would care for the child.

The Foster Care Scheme must provide financial support to the foster family in order to care for the child as well as support to the natural parents towards rehabilitation so that they may take the child back when possible.

**Sponsorship**

The Sponsorship Programme is recognised as one of the most effective programmes to provide supplementary financial support to families who are unable to meet educational and other needs of their children. The sponsorship assistance meets with medical, nutritional and educational and other needs of their children and improves the general quality of life.

The unique feature of sponsorship is that the child is not taken away from the family and continues to enjoy the security of a family environment that is necessary for healthy growth. To work with the family as a unit is a very effective approach in sponsorship.

Through the process of assistance for education, the families are empowered to become independent and long-term rehabilitation plans are also worked out for sustainable development. There are various modalities for implementation of this programme like the Individual to Individual sponsorship, Group sponsorship or Community sponsorship.

**Community Centres and Outreach Programmes**

Vulnerability and the consequent destitution of children are high in the deprived and underprivileged sections of society. Community-based and family strengthening support services like Family Counselling Centres, Child Guidance Clinics, Juvenile Guidance Bureaus, and Self Help Groups should be set up so that families at risk have easy access to such assistance. These multi-purpose counselling centres are very effective in controlling juvenile offences, family disintegration and institutionalisation of children.
Counselling

Counselling is the most integral, intangible component of all the non-institutional services. By providing the necessary emotional support, families who are “at risk” and in crisis are helped to mobilise their own strengths to cope with crisis situations so that they do not seek institutionalisation of children as a solution to the problem. The counselling services gives them support when their own coping mechanisms fail to function effectively, professional intervention helps them tide over the crisis. The rehabilitation of abandoned and destitute children through institutional care has been the practice so far. However, the emphasis in future should be on programmes for considering more community-based, non-institutional services.

IV. Way Forward – A Paradigm Shift

Recognising the Child’s Right to a Family, it becomes essential to develop and promote community based family strengthening programmes for the care of orphaned and destitute children, and to develop substitute family care for children who cannot be cared for within their own families and communities. To find ways of developing child-centred but affordable alternative approaches to residential care is the challenge before child protection policy makers and practitioners.

Actionable agenda: Strategies for Action

- Appropriate policy for FS & NIAC in the National Policy and Plan on Children

Harmonising laws, policies and programmes with UN guidelines on alternative care

- Studies have shown that majority of children in institutional care have one or both parents alive. Due to poverty and absence of adequate family support from the state and community families are compelled to resort to institutional care. Hence family strengthening policies will have to be closely linked and associated with poverty reduction. Policies of economic development that provide employment reduce poverty and have a social distribution policy like Conditional Case Transfer will help in family strengthening. A good family strengthening policy, health and education access for all, family support programme and family based child care services will contribute to reduction in institutional care.

- Universal Education – The RTE is closely linked to child protection – often children are institutionalized for the purpose of education – the focus for free and compulsory education will be a focal point for prevention of child labour.

- Day care facilities for child protection – as one of the strategies, day care would be a good option for working parents – so they may not consider putting the child in residential care.

- Children with disabilities – There is a prevailing attitude amongst the families that children with disabilities are best placed in

“Multi-purpose counselling centres are very effective in controlling juvenile offences, family disintegration and institutionalisation of children.”
in institutional care because they would be well looked after and not be a “burden” on families. When C. W. D. are a part of the RTE, this too would have opportunity for integrated education in normal schools and is a good preventive then residential care.

- Adopting a Preventive Approach and Strategy: Identifying families in the “risk zone” “at risk” – and giving them support to look after their own children better. “Parenting Skills” workshops are very important in enhancing the capacities of families (part of family strengthening) (Parent training) – Mother’s training, with some incentives.

- Single Parent / Mother – support programmes for single parents is very critical since a large number of children in institutions are of single parents. Awareness through family life education will prevent unwanted pregnancies and children who may be abandoned or surrendered.

- Special support to CNCP – through various alternative care programmes.

- Mobilising networks of NGOs.

- Inter Disciplinary, multi systems approach with all community networks and from the macro to micro level.

**Need for Paradigm shift in looking at Institutional Care**

The concept of institutional care must be questioned whenever such care is promoted in situations where families and communities, even under stress, have the capacity for providing care for homeless children. When children admitted into institutional care could be adequately cared for within their own families or communities, the family based alternative should be the preferred option.

- Create awareness among organizations, policy makers, politicians about the disadvantages of institutional care. Organise training of staff for sensitization about child care and motivate them to see children from a Right based framework.

- Simultaneous intervention of improving quality of child care in institutions since there are some children who have to be in institutions - since that may be the only alternative.

- Alternative family based service / interventions / programmes for abandoned, orphaned, destitute, surrendered children – First priority would be kinship care by relatives or extended family environment for the child without a family, adoption would be the last option since to provide permanency planning – adoption within the child’s country of origin and in the same socio-cultural milieu would be the first consideration / alternative. For children who need temporary care, due to crisis in their birth family. Foster care is the preferred option since the child has the opportunity to grow in a family environment.

**Quality Care in Institutions**

To make institutions “Good Enough”, improving the quality of care is a simultaneous intervention that becomes a must – especially because the transition from Institutional care to family based non-institutional care is a process that can take time – and for some children, institutional care is the only alternative. The UNCRC (article 3.3) lays down that the signatory states must ensure that services for children must adhere to standards established by competent authority. Some key areas are good health care, educational facilities and access, right to protection against exploitation and abuse, individual care plan for rehabilitation. This can be achieved to capacity building training and sensitization programmes for the staff. Right through participation must be implemented and children must have a voice in...
expressing their views on decisions that impact their life.

A statistical data is necessary to understand the magnitude of problems – number of children in institutional care, number of street children, orphans, abandoned and destitute children data – as well as number of institutions in the state/country, types of institutions – all the data will facilitate the implementation of FS & NIAC. Advocacy, Awareness, Research, Documentation and Dissemination measures for the promotion of the concept and practice of FS & NIAC. CNCP need to be put on the National Agenda so that need based and appropriate intervention strategies and services are developed for Child Protection.

Focus on alternatives to institutional care: Protecting children outside parental care is a big challenge. Institutional care persists as the dominant response. We must shift the focus to better alternative care programmes through reducing support to the proliferation of institutional care facilities. Instead, it is necessary to promote family and community based solutions.

Recognize State responsibilities: Children living in institutional care often have one or both parents alive. This suggests that good gatekeeping and active family support could help prevent separation and family breakdown. The State has the responsibility to make this happen. There is a need to develop systems that promote diversion from institutional placement by linking admissions and gatekeeping procedures with governmental and non-governmental organisations that can also be helpful to support families in crisis through the non-institutional services approach to child protection.

Promote reunification and reintegration of children in institutional care: The high percentage of institutionalised children with living parents highlights the potential impact of good reunification and reintegration practices. Deinstitutionalisation of children through sponsorship support to families is a good strategy to achieve this. Family and community reintegration should be a goal for all children. Encouraging consistent contact between children and families can support this process. Also, finding ways to connect institutional care to community based services such as schooling can help children build and maintain links with the community.

Conclusion:
The main thrust of international development cooperation and National Policies should therefore be to minimize the number of children placed in institutions. Most institutions for children can be reduced, however there must be a parallel emergence of alternative forms of family strengthening and protection programmes for children. There will probably be certain situations for some children where there are no feasible options other than institutional placement. Existing institutions should therefore be improved in such a way as to provide quality standards of care and safeguard the rights of the child. Comprehensive measures...
should be provided for responsible parenthood and for support for families at risk, in order to assist them in their child-rearing responsibilities in the light of articles 18 and 27 of the UNCRC, thus limiting of institutionalized children and limiting the recourse to institutionalization as a measure of last resort. Short term institutional care can be considered as an option during an interim period when other alternatives are being explored. We cannot do away with institutions completely, because for some children that could be the only option, but the two approaches of Institutional and Non-Institutional care should be seen as complementing each other.

A paradigm shift from the “Welfare” to the “Developmental”, from the “Needs” to the “Rights” and from “Institutional Care” to “Non-Institutional Care” are significant changes in intervention for “Families at Risk” and “Children in Need of Care and Protection” (CNCP). The rehabilitation of abandoned and destitute children through institutional care has been the practice so far. The emphasis in future should be on improving the quality of child care in residential institutions, ensuring participation of children and simultaneously developing family based alternatives. This broadening of concern ensures that problems of child vulnerability and child protection are best approached through PREVENTIVE, COMMUNITY BASED, FAMILY STRENGTHENING, NON-INSTITUTIONAL ALTERNATIVES. It is important that the UN-CRC is converted from being a declaration of intent to an effective tool for ensuring Child Rights.
Compatibility between Child Labour (Prohibition & Regulation) Act, 1986 and Right to Free & Compulsory Education Act, 2009

I
In ordinary parlance, child means a person below a particular age (say 14 or 16 or 18). On a deeper analysis, however, a child represents the most precious human resource and an invaluable gift of the creator to humanity. It also represents pristine purity, simplicity, innocence, guilelessness, nobility and intrepidity of human character. Childhood is undoubtedly the most tender, formative and impressionable stage in the cycle of the human life. Such a stage is meant for singing, dancing, cartooning, painting, sculpting, playing and learning not merely the three Rs but a wide range of skills such as life skills, communication skills, survival skills, leadership skills, entrepreneurial and managerial skills and so on. It is certainly not the stage for being pushed involuntarily to work, which is harsh, gruelling, arduous, drudgerous and hazardous, will be crippling human initiative, drain human energy, batter and dehumanize a tender human resource beyond imagination.

II
There is a clear scientific rationale behind a minimum age of entry to the world of work. Such a rationale lies in the following undisputed facts:

- There must be a minimum biological energy to deal with the physical stresses and strains of work;
- There must be a minimum level of emotional and psychological maturity to deal with situations as they come at the work place and to take timely and appropriate decisions which will help to make the work productive.
- There must be an ability to distinguish between the important & unimportant, immediate and remote, rewarding and losing and so on.

Such an age should ideally be eighteen and cannot be less than fourteen.

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This notwithstanding, law makers, policy formulators and programme implementers have not been on the same wavelength as far as fixation of a minimum age of entry to the world of work is concerned. In Factories Act, 1881 (since repealed) such an age was fixed at an inconceivably low level of seven. Subsequently and on the basis of recommendation of the Royal Commission on Labour, 1929 the age of entry to the world of work was fixed at twelve. The situation did not improve with subsequent enactments like Children (Pledging of Labour) Act, 1933 and Employment of Children Act, 1938 (since repealed). Till date we do not have an omnibus law with a uniform age of entry to the world of work which will be uniformly applicable to all parts of the country. In Factories Act, 1948, Plantation Labour Act, 1951, Merchant Shipping Act, 1958, Motor Transport Workers' Act, 1961, Beedi and Cigar Workers (Regulation of Employment) Act, 1961 it is fourteen, in Mines Act, 1952 it is eighteen for regular employees and sixteen for apprentices and in Building and other construction workers (Regulation of Employment & Conditions of Service) Act, 1996 it is eighteen. In Shops & Commercial Estts. Acts enacted differently by State Govts & UTs the age of entry to the world of work varies between twelve to fourteen.

There are 2 basic limitations in having an accurate determination of the age of a child. One is non-compliance with requirements of Registration of Births & Deaths Act, 1969 and the second is a state of pervasive malnutrition. A state of acute malnutrition makes the task of determination of the age of children doubly difficult. Protein energy malnutrition (PEM), Vitamin A deficiency, anaemia, iodine deficiency are various forms of malnutrition which adversely affect the lives of Indian children. According to the findings of National Family Health Survey III (2005-06) 46 PC of children below 3 years of age were under weight, 38 PC were stunted, 19 PC were wasted, the proportion of anaemic children of 6-35 months was 79 PC and a very large no. of children were either suffering from vision impairment or had gone completely blind due to vitamin A deficiency.

Malnutrition is a cause for special concern in early childhood as it retards physical growth, retards cognitive/intellectual development and contributes to infant mortality.
Determination of age of a malnourished child becomes extremely difficult as a boy or girl at 18 or 16 would look much younger and, therefore, adjudication of a disputed age becomes a problem for the prescribed medical authority appointed by Govt. u/s 10 of CL (P&R) Act. Determination of age through ossification i.e. bone test has not been foolproof either.

Child labour, regardless of the difficulties associated with determination of age of entry to the world of work is objectionable on a number of counts such as

- It robs children of their childhood and all the excitement and joy associated with childhood;
- It exposes children to hazards of work (dust, heat, fume, toxic and gaseous substances) at a very tender, formative and impressionable stage of development; it carries them to the brink of near total destruction;
- It deprives children of their Constitutional and statutory right to free & compulsory elementary education;
- As children cross the threshold of childhood and enter adulthood not much energy will be left in them to make them responsible, responsive and productive adult parents;
- Once lost, childhood with its quintessential purity and innocence can never be regained; it is lost for ever.

Child labour exists in India despite such clear and convincing reasons as above. It not only exists but is growing in number year after year. India accounts for the single largest number of children in the whole world (12.59 million according to 2001 decennial census). There is not one but a bundle of causes & factors which have over the years contributed to this regrettable phenomenon. These are:

I. There is a dichotomy between provisions of Art 24 and Art 21 A. Art 24 prohibits employment of children in factories, mines and hazardous employments. It is a qualified and restricted prohibition and not a total prohibition. Nowhere either in the Constitution or in the law it has been defined as what is hazardous. Few questions which emanate from the above Constitutional provision are:

- If employment of children is prohibited in factories, mines and other hazardous employments, does it by necessary implication mean that children can be employed in non-hazardous occupations & processes?
- If employment in non-hazardous occupations and processes is permissible, where is the scope for exercise of the right to free and compulsory education for children in 6-14 age group as in Art. 21 A which has been inserted after 86th amendment of the Constitution in 2002 in the wake of J.P. Unnikrishnan Vs. State of AP (1993)?
- Does it mean, as the Hon’ble Supreme Court has observed on 10.12.96 in M C Mehta Vs. State of Tamil Nadu & others in CWA 465 of 1986, that children can continue to work and study at the same time?
- If so, would they have the freedom and leisure, time and energy as also the mental equilibrium to do justice to both?
- If so, what will be curriculum, course content and textual materials, what will be the timing and duration of work and study, who will be responsible for coordinating both & evaluating the impact?

II. The Child Labour (Prohibition & Regulation) Act which was enacted in 1986 largely tolerates employment of children in India. The legislation
may be attributed to the dualistic recommendations of Sri. M.S. Gurupada Swamy Committee report on elimination of child labour. The Committee was constituted during the International year of the child in 1979 and submitted its report to Govt in 1981. In its report it had said that child labour perse is not objectionable; it is only exploitative child labour which is objectionable. The report gave rise to emergence of what is now known as hazardous and non-hazardous occupations & processes. This is an invidious distinction which cuts at the root of Art 21A envisaging provisions of free and compulsory education to all children in 6-14 age group as the statutory responsibility of the State.

III. The basic problem in the existing child labour law is that it combines prohibition with regulation. A proposal was placed before the labour Minister’s conference held on 8th July, 1997 to make prohibition of employment of children in all industries/occupations/processes absolute & universal. Regretfully, however, no consensus could be obtained in the Conference on the idea of 100 PC prohibition of employment of children.

IV. Such a combination is flawed on account of the following reasons:

➢ There is no direct employer - employee relationship as most of the jobs are carried on through contractors;
➢ There are numerous layers of sub-contracting;
➢ Majority of the contractors and sub contractors will have no concern for the plight & predicament of children; they do not want to make any investment in health & safety at the work place;
➢ The working environment will generally be unclean, unhygienic and unsafe fraught with occupational risks & hazards;
➢ Working hours in an informal & flexible work environment cannot be easily regulated. Under the Central Minimum Wages Rules, 1950 children are expected to work not more than 4½ hours a day while in actual practice they are made to work for more than even 8 to 9 hours without any spread over as is evident from a UNICEF study of workers in brick kilns of Pune;
➢ As the work operations are scattered and fragmented, the enforcement machinery which has a large jurisdiction, is truncated & immobile can hardly do any justice to its mandate;
➢ To identify as to what is hazardous and what is not we need an institutional mechanism. S.5 of CL (P&R) Act provides for such a mechanism called child labour technical Advisory Committee. It is headed by DG ICMR with a number of distinguished scientists as members (10). On account of their heavy pro-occupations, they have not been very mobile and therefore, have been unable to identify the whole range of occupations and processes which are hazardous & which are
not; Without their recommendation, MOL&E will not be able to issue any notification prohibiting employment of children by making additions to part A & part B of the Schedule of CL(P&R). So far such notifications have been issued prohibiting employment of children in 65 processes & 18 occupations over a period of nearly 3 decades. There are, however, a very large no. of occupations & processes which have been left out which are definitely hazardous to the health, psyche & development of children but which are yet to be brought within the purview of schedule A & B.

V. Mindsets of parents, of employers/contractors/ sub-contractors, of the civil society and to some content of the working children themselves are no less responsible for creation and perpetuation of child labour. Parents perceive education as promise for a job; they think and believe that a job, even though it is for a short period, is more beneficial than spending years in a school. They also think and believe that children can substantially contribute to the process of incremental income generation for poor and large families. Parents and in particular, parents who are carpenters, cobbler and blacksmiths and others skilled in a variety of professions advocate child labour on the ground of transfer of intergenerational skills.

VI. Employers/contractors/ sub-contractors regards every working child as a person who works for low wages, is easily pliable, does not involve the employer in trade disputes, has nimble fingers and is, therefore, more productive than an adult worker. They discourage education of children on the ground that (a) children once educated would start asserting their rights (b) they would refuse to submit to authority (c) education of children would usurp the system of easy supply of labour.

VII. The civil society turns a blind eye to the phenomenon of child labour. It (like M.S. Gurupadaswamy Committee) draws a distinction between child labour and exploitative child labour and, therefore, is not in favour of universal prohibition of child labour.

VIII. The working children by and large look upon their jobs as training for skill, as an experience for getting better jobs at higher wages. Most of them, tragically enough, regard schooling as a boring and drudgerous experience. They think, feel & believe that curriculum is not job oriented; it does not help in any manner in securing employment. Besides, schooling implies dependence on the family for 5 to 7 years and many children would abhor such dependence. Many children would also regard their employment as a means to help and support their poor parents & young siblings.

What is the way out of this impasse? Is it demystification of mindsets? Is uninhibited and free access to universal education which is inclusive, which is rooted to life’s basic needs and which rests on 100 PC enrolment, 100 PC retention, 100 PC participation in teaching learning process and 100 PC achievement on the part of all learners the desired levels of proficiency in arithmetic, mother-tongue, sciences (physical & social) and environmental studies?

It is both and are possible and achievable. We need to launch a massive country wide campaign (exactly the way we did for adult literacy in 80s & 90s) for both.
More than anything else, it is political will, commitment & determination which would pave the way for universal elimination of child labour and universal literacy & education. History is replete with such examples. Amongst the developed countries, Japan, New Zealand, Australia, UK, USA, USSR (Russian Federation) and South Korea achieved the feat of universal developed countries, Japan, New Zealand, Australia, UK, USA, USSR (Russian Federation) and South Korea achieved the feat of universal literacy, education & elimination of child labour much earlier than expected. Among the developing countries, Cuba, Nicaragua, Ethiopia, Myanmar, Sri Lanka, Thailand, Indonesia and Vietnam achieved this distinction on account of grit, courage and determination of the political leaderships obtaining in those countries. Nearer home, in my own home State Odisha, Sri Naveen Chandra Patnaik, Hon'ble CM Odisha demonstrated similar political will, commitment & determination for universal prohibition of child labour in 2005-06. To recount what happened in Odisha around 2005-06, MOL&E issued a notification prohibiting employment of domestic help below the age of 14 on 10.10.2006. Hon'ble CM, Odisha immediately convened a high level meeting at his level, took a no. of decisions for withdrawing all domestic help below the age of 14, enrolling them in the formal school system and issued executive directions to make elimination of child labour in other occupations and processes a reality in Odisha.

Apart from working children within the State, there are children who accompany their migrant parents to States (AP, KN, KL, MP, MH) outside Odisha and remain victims of educational deprivation in those States. They deserve equal or even more urgent attention. Either opportunities for their stay in hostels and access to education within Odisha should be created (a small beginning, I understand, has been made in this direction) or text books in state standard language (oriya) should be procured, Oriya teachers should be recruited & training imparted to them and teaching learning process should be initiated in the destination States. For this a dialogue & discussion between the originating and destination States should be initiated and all the steps as mentioned should be carried to a logical conclusion.

The Special schools under NCLP which were set up in late 80s and which gathered momentum in 90s & beyond donot come within the definition of a 'school' as defined in Section 2 (n) of RTE Act, 2009. These schools may not, therefore, continue as part of NCLPs very long. That, however, does not minimize the importance of having a need based curriculum, course content & textual materials for the working children who in 6-14 age group a reality. The Action Plan was submitted to the State Govt through the CS. The then Minister of State for Labour – Sri Pushpendra Narayan Bhanja Deo got the Action Plan thoroughly discussed in a meeting with about 30 NGOs of the State who are active in the field of elimination of child labour. I attended this meeting as a special invitee. The Action Plan was endorsed by all NGOs. This was in Nov. 2007. However, nearly 7 years later, I have to state with much regret that the Action Plan which rests on a convergent approach i.e. collaboration of nearly 20 Deptts. of the State Govt to make total elimination of child labour in Odisha a reality is yet to be translated to action.

I happened to be Special Rapporteur, NHRC (2006-2011) then. Being inspired & motivated by this very timely and splendid initiative of Hon'ble CM, I spoke to Sri Ajit Tripathi, then CS to Govt, came to Bhubaneswar, sat for 3 days & 3 nights in the Circuit House, Bhubaneswar and drafted a Comprehensive Action Plan to bring universal prohibition of child labour and universal access to free and compulsory education for all children
have been withdrawn from work and have been enrolled in the spl. schools of NCLP, many of whom are continuing, have given a good account of themselves and have inspired & motivated similar schools elsewhere in the country by their success stories.

I particularly recollect 2 such success stories centering round NCLP Kalahandi & Malkangiri districts which as Union Labour Secy (1996-2000), I had circulated all over the country.

The guiding principles which lie at the root of the National Curriculum Framework (NCF), 2000, later revised in 2005 are very much applicable to all learners in spl. schools of NCLPs as they are to be mainstreamed sooner or later to the formal school system. The principles have been clearly, lucidly and forcefully brought out in the report of the Committee appointed by MHRD captioned ‘learning without burden’ under chairpersonship of Prof. Yash Pal. To quote from that report:

- Learning can be a joyful experience only if we change our perception of child as a receiver of knowledge and move beyond the convention of using text books as the basis of examination.
- The impulse to treat the child as an object and teach him/her everything arises from lack of faith in the child’s own creative instinct and his/her capacity to construct knowledge out of his/her experience.
- Flabby text books and the syllabi they cover symbolize a systemic failure to synthesize knowledge, treat it holistically and address children in a child centered manner.
- Learning without burden’ report released in early 90s recommended a major change in the design of syllabi and text books; it also recommended a change in the social ethos which places stress on children to become aggressively competitive and exhibit precocity.

- The report recommended a fundamental change in the matter of organising the school curriculum and in the system of examination which currently forces children to memorise information and reproduce it.

The National Screening Committee under Chairmanship of Prof. Yas Pal with 34 members which drafted the National Curriculum Framework in 2005 retained the same guiding principles as in the report of the earlier committee. To quote from the report some of the seminal principles:

- Connecting knowledge to life outside the school;
- Ensuring that learning is shifted away from the rote method;
- Enriching the curriculum to provide for overall development of children rather than remain text book centric;
- Making examinations more flexible and integrated into class room life.

The curriculum was also required to respond to certain new developments and concerns such as:

- Importance of including and retaining all children in school through a programme that reaffirms the value of each child;
- It enables all children to experience dignity and confidence to learn;
- It ensures that children from different social and economic backgrounds with variations in physical, psychological and intellectual characteristics are able to learn and achieve success in school;
- Disadvantages in education arising from disparities and inequalities of gender, caste, language, culture, religion need to be addressed both through policies & schemes as also through design of learning tasks & pedagogic practices right from early childhood.
Together with this there are 2 basic principles which need to be embedded in a child centered pedagogy. These are:

- Children will learn only in environment where they feel they are valued.
- The association of learning with fear, discipline (extending to corporal punishment), stress, trepidations etc is detrimental to learning. It is worth questing the inimitable lines from Viswakabi Gurudev Ravindranath Tagore:

  'Where the mind is without fear
   Where the head is held high
   Where knowledge is free'.

RTE, 2009 is refreshingly different from similar legislation enacted by about 14 States in 80s & 90s (all of which stand repealed with enactment of RTE) in as much as

- It speaks clearly & categorically of a system of inclusive education where there will be no discrimination, no board examination up to class VIII, no denial of admission, no capitation fee, no holding back children, no expulsion, no physical punishment and no mental harassment etc;
- While the curriculum & evaluation procedure lay down learning through activities, discovery and exploration in a child friendly & child centered manner with all round development of the child as the main goal there is clear be emphasis on continuous & comprehensive evaluation of the child’s understanding of knowledge and his/her ability to apply the same (S.29 & 30 of RTE, 2009).

In other words, the performance of the child in the classroom should be under close vigilance of the teacher, the same would be documented (Rule 21 of RTE) and every such evaluation will be non-invasive and fully participative.

The judgement of the Hon'ble Supreme Court in JP Unnikrishnan Vs. State of AP (1993) came like a breath of fresh air. For the first time, it lifted the right to free and compulsory education of all children in 6-14 age group from Directive Principles of State Policy in part IV policy to the domain of Fundamental Rights (A.21 A) in Part III of the Constitution. It took 9 years for the Constitution to be amended in 2002 (86th) and another 7 years for the enactment of RTE but the same is demonstrative of the basic axiom that full time formal school system and not at the work place, not even at NFE centres. This is a composite piece of legislation which will make a lot of sense if every section is read with the corresponding rule in a composite manner (like S. 8 to be read with Rule 9(2) and Rule 9(4), S.14 with Rule 14, S 18 with Rule 15 & 16, S.21 with Rule 3, S.22 with Rule 4, S.23 with Rule 17 & Rule 19, S.30 with Rule 21, S.31 with Rule 7(2) & Rule 27(3))
To conclude, universal prohibition of child labour (without the invidious distinctions between child work & child labour, hazardous & non-hazardous occupation & process) and constitutionally & statutorily guaranteed fundamental right of all children in 6-14 age group to free & compulsory education must go together; one is incomplete without the other; as one supplements, complements & reinforces the other. This is not the time for raising alibis & pretexts as were raised at the time of enactment of the law in 1986 which made it a impractical & unworkable combination of prohibition & regulation as also in the State LM’s conference in 1997. This is the time for planned, coordinated & concerted action to bring about an integration between the two possible, feasible & achievable. This is the time for pooling of resources from a variety of sources, integrate the same in an imaginative manner and go in for a convergent and determined implementation of both. The political leadership of the State which had set a series of laudable activities in motion soon after MOL&E's notification on prohibition of employment of domestic help below 14 dt. 10.10.06 is very much there; it is but normal and natural for people of the State to pin their hopes and aspirations in the same leadership to make universal prohibition of child labour through universal access to free & compulsory education a reality.
