



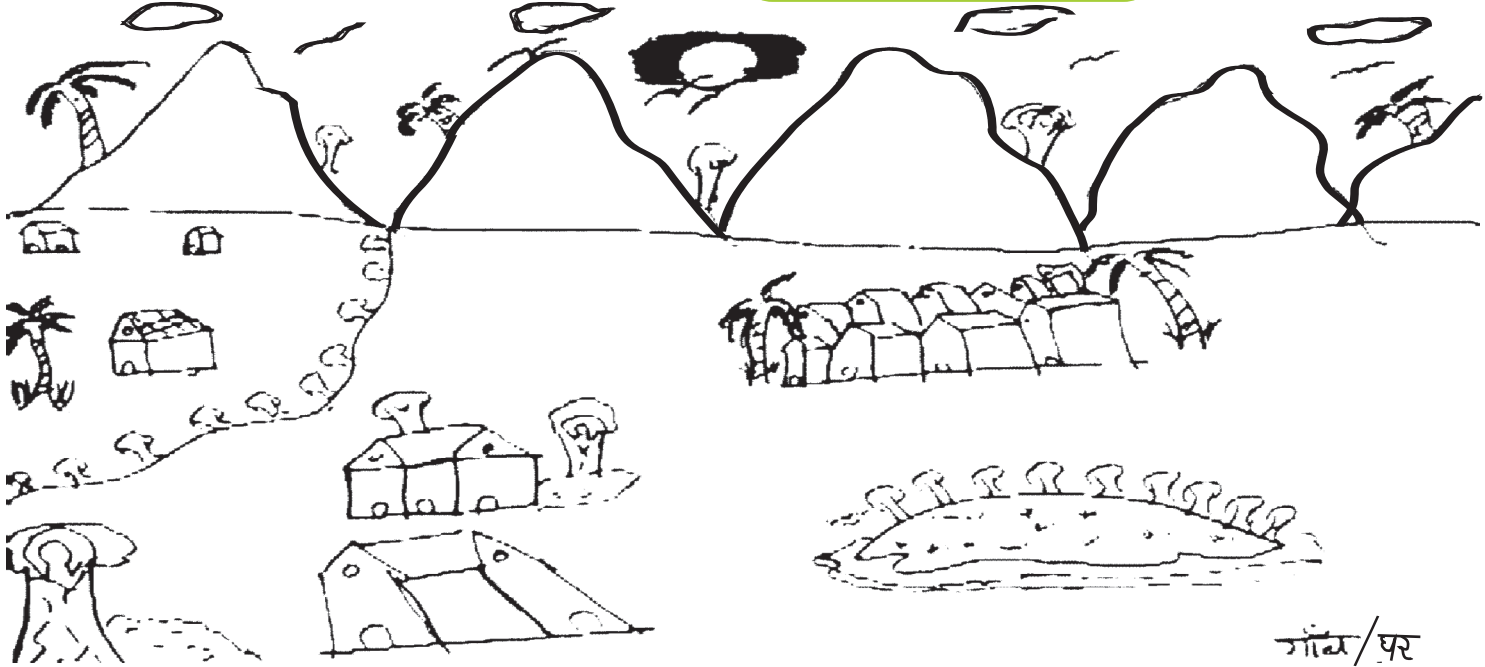
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2006



**CHANGING**

**SPACES**



गोबिंद/पर

An Action Research by



Understanding the effectiveness  
of children's institutions -  
The child's perspective

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## FOREWORD

The idea for this study came up during a meeting with Vandana Krishna, Secretary, Department of Women and Child Development, Government of Maharashtra. We were discussing the issue of children running away from institutions. She was keen to understand why this happens and tackle the problem from its root.

Aangan has been working in the area of psycho-social rehabilitation across Mumbai/Thane's institutions since 2002. During this time we have worked closely at the ground level with both staff and children and believe that their input about such issues is invaluable. We shared one such idea that came up during a group session in a Mumbai home. In this session, children admitted it was very hard to adjust to life in a closed institution. Although they were getting food and shelter, they were constantly preoccupied with thoughts of running away. "Because it feels like a jail here...if I were the head of this institution, I would run it like an ashram instead."

This eight year old child's simple statement contains a big idea about the need to make institutions feel less "threatening" and make them constructive "safe spaces". In fact India's Juvenile Justice (Care and Protection) Act, 2000 stresses that children's institutions must be child-friendly and have a rehabilitative environment. But implementation of such principles is still far from satisfactory. Although home staff and authorities are aware of the Act in principle, operationally, institutional care continues to be defined at a very basic level of food, clothing and shelter.

Why is this so? What can be done? What can Aangan do to reorient definitions of effectiveness? And increase it? For answers, we decided to turn first to the key institutional actors: children and staff. This action research was designed to understand their perspectives, ideas, challenges. We knew that such knowledge would help us find a way to define effectiveness, operationally.

The effort had already begun proactively under Ashwani Kumar, Commissioner, Department of Women and Child Development, (Government of Maharashtra) and he was extremely supportive, emphasizing the need to work together on practical viable recommendations. His team from the Commissionerate includes Ravi H. Patil, Deputy Commissioner, Women Development, D. V. Desavle, Deputy Commissioner, Child Development and Jayant Pavnkar, Officer on Special Duty. They have worked closely with us, sharing their ideas and vision of institutional management and effectiveness.

Interestingly, we found most of our recommendations from within the system itself - in the success stories, innovations and efforts at the ground level. And this became the basis of our implementation strategy. Aangan's objective is to facilitate the sharing of such ideas, innovations and successes. To give them space and structure - so that they can be operationalized at the institutional level and become the basis for an effective model. A model that can be replicated in children's institutions across the state.

**Suparna Gupta**  
Director  
Aangan

## ACKNOWLEDGEMENTS

- **The Flora Family Foundation** for funding this study.
- **Vandana Krishna**, Secretary, Department of Women and Child Development, Government of Maharashtra for asking all the right questions, wanting the answers and initiating the research.
- **Ashwani Kumar**, Commissioner, Department of Women and Child Development, Government of Maharashtra for wanting to go beyond the study and focusing on recommendations.
- **Ravi H. Patil**, Deputy Commissioner, Women Development, **D. V. Desavle**, Deputy Commissioner, Child Development and **Jayant Pavnkar**, Officer on Special Duty for advice and ideas.
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- **The Aangan Team**

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**Documentation:** Ankit Macwan, Uma Gopalakrishnan and Meghna Vesvikar.

**The institutional authorities and staff:** All District Officers, Superintendents and staff in institutions who took the time to talk to us and share their challenges and success stories.

**The children:** All the wonderful, bright, creative children in the institutions who inspired our ideas and helped us find the answers.

## INTRODUCTION

The features added to the Juvenile Justice Act of 2000 (J.J. Act) make it more rehabilitative rather than punitive as compared to its predecessor. The predecessors of the J.J. Act were the Bombay Children's Act of 1928 and The Punjab Children's Act which were State Acts and did not apply to children outside the state's purview. The J.J. Act of 1986 also limited its reach to boys below 16 years of age and girls below 18 years. This differential treatment deprived a large number of adolescent boys of the benefits of bail, probation etc., and left them at the mercy of a criminal justice system geared to meet adult needs.

Juvenile Justice systems across the world broadly follow two philosophies: *parens patriae* and *in loco parentis*. As per the former, the state plays the role of a mediator in circumstances where there exist minor problems within a family, such as conflicts between parent and child. For example if there were a conflict about an alcoholic parent, the Court would probably mandate the parents and child to go for counseling sessions. However more prominent and more applicable to our context is the *in loco parentis* philosophy where the state steps in and completely takes over the parents' role in case of major problems. For example: If a child is being abused by a family member, the child will be placed in protective state custody (in an institution) to prevent further abuse. This is the philosophy guiding the J.J. Act, 2000 and is implied in its preamble as well as in Chapter 4 of the Act. The preamble mentions that "The objective of the act is to cater to children's developmental needs, and adopt a child-friendly approach in the adjudication and disposition of matters keeping in mind the best interests of the child as well as ensuring the child's ultimate rehabilitation through various institutions established under this enactment."

As stated above, the state assumes the role of a temporary or, in many cases, the permanent guardian. However, in reality the State tends to restrict itself to providing the child with a living space, food and to some extent security. The fulfillment of these three needs, in whatever manner, is often considered the only criterion for measuring the institution's success. Facilities that aid most in reintegrating a child in mainstream society after release are often neglected e.g. education, vocational training, counseling, legal aid, health care and even recreation.

Keeping in mind that the State comes in lieu of the parent, it is expected that it should go beyond simply being the protector of the child and also become responsible for fulfilling the child's developmental needs and also providing parental care to the child. However, in most cases during the process, the State does not ever revert to its **actual function**. Given these conditions, how safe and

happy is the child inside an institution? How does he/she feel about staying confined within the walls of a Home? How do closed walls cater to a child's development needs and exhibit a child-friendly approach as is the stated objective of the J.J. Act, 2000? Even when s/he is given access to all the basic amenities that a child has a right to, why does s/he want to run away to the world outside the walls which even s/he is aware is not as safe as the home/institution?

Aangan's research project in collaboration with the Department of Women and Child Welfare (DWCD), Maharashtra is set against this background and tries to explore the reason why a children's institution sometimes feels more like a prison rather than an "ashram" or a "home" as stated by 42% of the children interviewed. Where has the State failed? What exactly do children yearn for, the lack of which coerces them to take drastic measures like indulging in rioting and violence and eventually to run away from the institution?

The J.J. Act advocates that each child's best interests be considered before any action is taken. Hence, it is important that we look at this problem of running away from close quarters. A child running away from an institution is a symptom of a deep-rooted malaise which often does not receive the attention it requires. The staff believes that greater security will mean a lower rate of running away. The children however perceive it as a measure that further enhances the prison-like impression of the institution.

In such a case, merely installing security guards outside the home to man the perimeter would not be enough. It could only be a short term solution. But what could be the long term measures that would obviously be related to not just security but also comfort levels inside and instilling a sense of hope about a child's future? Perhaps it means giving back the child, a bright and sunny childhood as well as adolescence which are fundamental in shaping him/her into a responsible and independent individual. This research project attempts to explore, define and re-define the entire concept of "child-friendly institutions" from both, the staff's and mainly the child's point of view.

**Uma Gopalakrishnan**  
Program Associate

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## METHODOLOGY

### Objectives of the Study:

- To study the effectiveness of Observation Homes and Children's Homes in Maharashtra:
  - Through the child's perspective.
  - Through the staff's perspective.
- To compare and contrast the perspectives of the staff and the children to evolve an operational definition of effectiveness.
- To develop concrete practical suggestions with operational guidelines to improve effectiveness in institutions.

### Sources of Data:

1. **Primary Data:** The primary source of data are individual interviews with the children and staff of the Observation Homes and Children's Homes.
2. **Secondary Data:** The secondary sources of data include books, news paper articles, journals, reports and the internet.

### Sample Identification:

For the purpose of this study a simple random sampling method was used. Researchers would reach institutions, hold focused group discussions with children as well as personally select respondents randomly from the population for individual conversations. In case of the staff, the researchers would hold an in-depth interview with the head of the institution (Superintendents or Probation Officers - POs) as well as randomly select staff from different levels. This included caretakers, teachers, clerks and so on.

**Sample Size:** The sample size for this study is:

- In-depth interviews with CICL children (children in conflict with law): 60
- In-depth interviews with CNCP (children in need of care and protection) : 93
- In-depth interviews with Staff : 82
- Focused Group Discussions with CICL and CNCP. Group size: 350

### Sample Criteria:

The respondents for this study are from observation home and children home in Maharashtra. The criteria for selecting them are as follows:

- **Children:** Both CNCP and CICL, they should be residing in either Observation Homes or Children's Homes for more than two months.
- **Staff:** Should be working in either Observation Homes or Children's Homes.

## PROCEDURE OF DATA COLLECTION

The study covered all six regions of Maharashtra, 34 districts and 92 institutions:

Region	Mumbai	Pune	Nasik	Aurangabad	Amravati	Nagpur
District/No. of Homes	Mumbai - 7	Pune - 7	Nasik - 5	Aurangabad- 4	Amravati - 4	Nagpur - 5
District/No. of Homes	Thane - 6	Satara - 3	Dhule - 2	Jalna - 2	Washim - 1	Bhandara Gondia - 1
District/No. of Homes	Raigad - 1	Sangli - 3	Nandurbar-1	Hingoli- 1	Buldhana-2	Chandrapur-2
District/No. of Homes	Ratnagiri - 2	Solapur - 6	Jalgaon-2	Parbhani - 1 Wardha - 2	Yavatmal - 1	Gadchiroli - 1
District/No. of Homes	Sindhudurg-1	Kolhapur-3	Ahmadnagar-5	Nanded - 2 Beed - 2	Akola - 1	
District/No. of Homes				Osmanabad-2 Latur - 4		

### Period of Data Collection:

The data collection process started on November 23rd 2005 and ended on December 15th 2005.

### Tools for Data Collection:

For the purpose of this study, a semi-structured interview schedule was used. The interview schedule had both open ended and close ended questions. The open ended questions were later categorized according to a cluster of similar responses. The interview schedule traced the processes of an institution through pre-admission, admission, stay, and exit.

### Scope and Limitations of the Study:

The findings of this study could help evolve an operational definition of effectiveness in such institutions and therefore help us develop and standardize guidelines around this definition. This we believe could greatly improve and enhance the working of government staff and non-governmental organizations working with the Observation Homes and Children's Homes.

In terms of limitations, there were instances where the researcher doubted the candidness of children and staff.

### Concepts and Operational Definitions:

- 1) **Child's Perspective:** For the purpose of the study, the child's perspective means the child's thoughts, perceptions, observations, feelings, reactions, wants and ideas, problems as identified by the child, their solutions and his/her experiences.

- 2) **Staff's Perspective:** For the purpose of the study, the staff's perspective means their thoughts, perceptions, observations, feelings, reactions, wants and ideas, problems as identified by the child, their solutions and their experiences.
- 3) **Effectiveness:** For the purpose of this study effectiveness was understood through:
- The **procedure followed** during the child's admission, stay and release.
  - The **role played by each staff member** of the home.
  - The **facilities provided by the home** (education, health care, vocational training, counseling), as well as the kind of activities being carried out in the home (drama, dance, music classes, study groups etc.)
  - **Organizational rules and regulations.**

**Abbreviations:**

1. **C. H.:** Children's Home
2. **O. H.:** Observation Home
3. **P. O.:** Probation Officer
4. **Suptd.:** Superintendent
5. **CNCP:** Children in Need of Care and Protection
6. **CICL:** Children in Conflict with the Law
7. **CGC:** Child Guidance Clinic
8. **J.J. Act:** Juvenile Justice (Care and Protection) Act, 2000
9. **VMO:** Visiting Medical Officer
10. **DWCD:** Department of Women & Child Development
11. **NGO:** Non-Governmental Organization
12. **JJB:** Juvenile Justice Board
13. **CWC :** Child Welfare Committee
14. **CBO:** Community Based Organization
15. **VO:** Voluntary Organization

\* All names have been changed to protect privacy unless otherwise indicated.

## IMPLEMENTING RECOMMENDATIONS

As an organization, we were always clear that we did not want this merely to be a study, but rather a springboard to start working with recommendations. What was required was a body of practical suggestions which are viable to implement.

Our recommendation and implementation strategy was to:

- Look within the system
- Identify best practices/ innovative ideas
- Facilitate exchange and sharing
- Standardize systems

Aangan's entire effort (from the research to implementation) is to take rules and guidelines laid down by the JJ Act and translate them into standardized operational guidelines. This, we believe will make it far easier to implement them at the ground level and help bring the rehabilitative, holistic child-friendly stance of the JJ Act into the actual workings of institutions.

A simple example: The JJ Act includes a guideline about each institution having a "reception unit" for new admissions. NO institutions have such an unit – either because they neither have the space nor resources; or maybe because they do not understand the importance or function of a reception unit. If we were to break this concept down into operational guidelines about the kind of space, objectives, material, content, systems and personnel needed – it would be fairly straightforward to implement.

We were honored when the Commissioner invited us to be a part of the implementation process in partnership with the Department of Women and Child Welfare and are currently developing and piloting three recommendations:

1. **Operational Manual** : An operational manual of standardized guidelines, it lays down practical guidelines, pre-empts FAQs, illustrates examples with success stories from within the system; and is easy to use. The unique feature of the manual is that it illustrates the entire journey of a child right from the factors bringing him to the home, his preadmission experiences, entry, stay and exit. Aangan in consultation with DWCD will provide practical suggestions which is customized to the child's differing needs according to each stage.
2. **Performance Evaluation and Goal Setting**: The monitoring process has three components – The Monitoring Tool, Goal Setting and Vigilance. The unique feature about this tool is that it is not a bureaucratic "inspection" exercise. But requires heads of institutions to monitor and grade themselves, work with authorities on setting objectives for the quarter. This will be complemented by a Vigilance Committee (currently consisting of Aangan staff). They will visit numerous districts periodically in order to conduct surprise checks on their institutions and to ensure that goals are being met.
3. **The Staff Recognition Program**: At this juncture it is important to reiterate that Aangan's stand is not an anti-government one. Rather our role is to enhance their efforts. The Staff Recognition Program aims at acknowledging the contribution of staff, popularizing the successes of institutions and giving them a forum and a scale.

These three efforts we hope will culminate in beginning a dynamic process of giving space and structure to innovation and ideas. These will then be operationalized at the institutional level and become the basis for an effective model.

**Ankit Macwan**  
Program Coordinator

## Broad Recommendations

### Broad Recommendations

#### *Recommendation I: Staff-Child Interaction*

The operational manual aims at providing guidelines on the following five points which we found to be of the utmost importance in enhancing the functioning of institutions.

Challenge Area	Need	Recommendation	What Aangan Can Do
Accessibility of staff Quality of interaction Information Orientation Disciplinary Action	Positivize interaction of staff and child	<ul style="list-style-type: none"> <li>Standardized interaction guidelines</li> <li>Focus on entry level intervention for new admissions</li> <li>Exit level intervention planning for children leaving</li> <li>Standardized discipline code</li> <li><b>Role definition:</b> Interaction responsibilities assigned to key staff</li> </ul>	<ul style="list-style-type: none"> <li>Create child-friendly orientation / informative material and reception unit model</li> <li>Develop standardized discipline code</li> <li>Capacity building of staff to use this material to make children feel reassured, informed, safe.</li> </ul>

#### *Recommendation II: Staff Motivation*

Challenge Area	Need	Recommendation	What Aangan Can Do
Staff attitude Staff apathy "Offences" by staff	<b>Staff motivation</b>	<ul style="list-style-type: none"> <li>Standardized motivation and Reinforcement Program across state</li> </ul>	<ul style="list-style-type: none"> <li>Develop a state level recognition award system based on identifying best practices; standardized discipline code for offences by staff</li> <li>Ensure that innovative ideas, individuals and institutions are identified and reinforced.</li> </ul>

#### *Recommendation III: Operational definition of effectiveness*

Challenge Area	Need	Recommendation	What Aangan Can Do
Need to define effectiveness of institutions - factoring on staff, children's and governing authorities' perspectives	<b>Standardized Evaluation</b> of performance, criteria & systems	<ul style="list-style-type: none"> <li>Standardize monitoring tool combining criteria related to infrastructure, interaction and activity</li> <li>External Evaluation through Vigilance Committees</li> </ul>	<ul style="list-style-type: none"> <li>Develop self monitoring tool</li> <li>Capacity building of staff to use tool for internal monitoring and goal setting</li> </ul>

## DATA INTERPRETATION

### SECTION I

#### PRIORITIES

Recently a study \*(1) was conducted on Observation Homes and Special Homes in Maharashtra by TISS \*(2) and QICCA \*(3). The study gave us a comprehensive picture of institutions, especially issues related to infrastructure and the various functionaries' perceptions. It provides extensive details about the physical environment and the services in these institutions. To find out more about the "emotional environment" in institutions, and what we should focus our recommendations on, we asked key players (staff and children) what their top priorities were.

The children's answer to our first question, about the first three things they would like to change about their institution, was clear and unanimous:

- **Staff – Child Interaction:**
  - "The staff does not understand us", said 70% CICL, 50% CNCP.
  - 45% said the Probation Officer had "never called us for a discussion or explained things to us."
- **Disciplinary Issues:**
  - "If there is a problem in the home, caretakers and monitors handle it. They beat us up", said 65% CICL, 60% CNCP.
- **Structured Recreation:**
  - "We wish they would allow us to play more and have more fun," said 24% CNCP and 19% CICL.

The staff's opinions differed a little. Their top concern areas were :

- Playing equipment for children. (57%)
- Motivation: Higher salaries; more holidays; acknowledgement from and accessibility to authorities (31%)
- Security systems (to reduce cases of running away). (31%)
- Institutional Budget - increase and timely disbursement. (17%)
- Infrastructure (building renovations, improvement etc): (4.9%)

The data is presented in four sections that cover stages of institutionalization:

- PRE- ADMISSION
- ADMISSION
- STAY
- EXIT

In presenting the data, we have focused on the key players who participated in that stage and developed broad strategies around these players. These recommendations will be explained in the operational manual that we will develop by March 2007.

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1 "Children in Conflict with the Law and the Juvenile Justice (Care & Protection ) Act, 2000" by Dr. Neela Dabir and Ms. Mohua Nigoudkar – Department of Family and Child Welfare, TISS, 1st September, 2005)

2 TISS –Tata Institute of Social Sciences

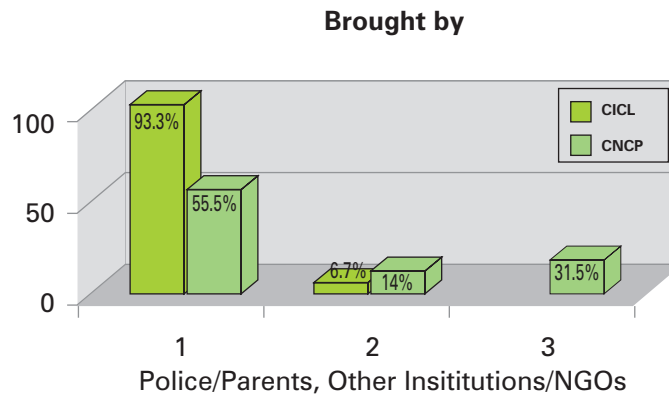
3 QICCA - Quality Institutional Care and Alternatives for Children, C/o. Saathi, Agripada Municipal School, 1st Floor, Near YMCA swimming Pool, Mumbai Central, Mumbai - 400 008. Tel.: 022-23009117  
E-mail : qicacmah@rediffmail.com

## SECTION II

### PRE-ADMISSION PROCEDURES

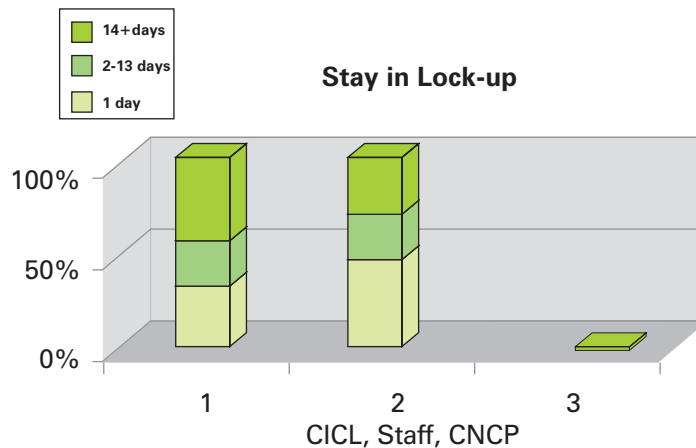
The research began with us asking the children and the staff about their experiences prior to admission in the institution. We wanted to know the circumstances, information given and key players at this stage – all this has a major impact on the child’s mental state and also affects the perception about the institution. For instance, a CICL who has been ill treated by the police in the lock-up before he is admitted will tend to perceive the home as a jail. The same applies to the CNCP as well. Often family, parents or concerned citizens who have brought the child here have not really explained the concept of a “protective home.” Colloquially many such institutions get known as “bacchon ka jail” (the jail for children) and the child’s fears are confirmed when they see it is a closed institution from which they may not come and go as they please. It is often the same with child labor who are rescued through mass raids and brought into an Observation Home. The combination of being picked up by the police, put in a closed institution (very often locked) and not having doubts clarified often has them asking, “But why are we being arrested?”

The majority of CICL (93.3%) are brought into the institutions by the police and 6.7% were referred from other institutions. Most of the CNCP (55.5%) were brought to institutions by their parents, relatives or guardians. Approximately 14% of the CNCP were brought by NGOs. The remaining 31.5% of the CNCP brought by the police often think that they must be criminals. Otherwise why would the police bring them to “such” a place, one which feels like a jail?



The police play an extremely important role in pre-admission, especially for CICL and our next set of questions were designed to understand the quality of interaction between police and child at this stage. The J.J. Act (2000) and the rules of 2002 expressly forbid the handcuffing, tying and fettering of CICL while they are in police custody. The police are also not to physically or verbally abuse a child, use antagonistic words such as 'arrest' and 'remand' or place a child in a lock-up prior to the child’s institutionalization.

The institutional staff were either not aware of or were not really sensitive about the mental state in which the child came in. 41% of the staff did not appear overly concerned about this issue, assuming that police abide with the above laws. 34% of the staff members accepted that police abuse did happen, but did not really believe anything could be done because the police did not come under their jurisdiction. As was stated by a PO –*“Haan, bachchon ko lock-up mein rakhte hain. Lekin is mein hum kya kar sakte. Police thodi hi hamari sunegi.”* (“Yes it is true, the police sometimes keep children in the lock up, but what we can do?...the police are not going to listen to us.”) However amongst the CICL interviewed (as is shown in the bar-graph below) a very high number of them i.e. 65% were kept in the lock-up ranging for a time-span of 2-13 days. An extremely positive finding was the fact that **none of the CNCP** interviewed were kept in lock-up even though they had waited in the police station for some time. This period could range from a few hours to even a few days in rare cases. However, all children were transferred to a children’s institution within a reasonable period of time. It is therefore evident that the police seem to take up a more stringent stance when it comes to the CICL as compared to the CNCP.



From here we moved on to the treatment meted to the children while they were in the police station. What is again commendable is the attitude of the police personnel towards the CNCP. The children we interviewed stated that they had been treated with care by the police. Some of the police officials had even been very affectionate towards them taking care that the child did not go hungry and by spending money from their own pockets.

But CICL treatment was drastically different, with 67% of the CICL reporting that they were physically abused. Of these we found that the intensity varied with children being slapped (66.7%), tied and beaten severely (30%), whipped with a belt (31.7%), hung from ceiling and beaten (15%) and sexually harassed/abused (1.7%). These statistics depict complete insensitivity levels of the police in dealing with CICL as well as ignorance/disregard for the law.

*\*Allah Rakha, 18, survived the hell that was the police-lock up, euphemistically known as judicial custody. Only to end up in a worse hell – Mumbai’s Arthur Road Prison. Here, beatings were routine. Exceptional cases were taken to the central region of the prison, the dreaded circle, where beatings were in full view of the other convicts and officials. Allah Rakha remained in prison from June 2004 to February 2006.*

*\*Ali, 17, snatched a woman’s purse at a crowded railway station, desperate for money because his brother was to undergo surgery. Caught by the police, he was also charged for theft and with riding pillion on his friend’s motorcycle which was stolen. He was repeatedly transferred from the Antop Hill Police Station to the one at Kurla – judicial custody. Ali speaks of being woken up in the early hours of the day – to abuses and beatings with a leather belt with “Yahan par goonge bhi bolte hain” (This place can make even the mute speak) inscribed on it.*

*These instances mar India’s standing in the field of child rights as India has ratified the UN Child Rights Convention in 1982.*

Parents, family and guardians are the other key players in the pre admission process. Often they do not themselves have adequate information about the role of the institution (which acts as a mediator between the parent and state) prior to the admission of the child. As a result, they do not prepare their child. As a caretaker at a Children's Home said, “*Palak sansthela kay mhanun olakhtat te tyananch mahit!*” (“*God alone knows what parents perceive the institutions as.*”) Sometime parents themselves are responsible for setting up wrong impressions. The Superintendent at an Observation Home narrates an incident where a father brought his daughter to the Home and threatened to leave her there if she didn’t behave. She retorted that he couldn't do so as it was a Boys' Home. Despite the change in nomenclature from being 'Remand Homes' to 'Observation Homes', this incident demonstrates that the public’s notion of these spaces being essentially punitive in nature has not changed and is probably being communicated to children.

\* Name changed.

## RECOMMENDATIONS FOR PRE-ADMISSION STAGE

Key issue	Key Players	Recommendations
<ul style="list-style-type: none"> <li>• Illegal detention of minors in lock-ups</li> <li>• Verbal, physical or sexual abuse in lock-ups</li> <li>• Lack of information/alternatives to parents</li> <li>• Lack of orientation to children about homes</li> </ul>	<ul style="list-style-type: none"> <li>• Police authorities</li> <li>• Concerned citizens</li> <li>• Institutional staff</li> <li>• JJB / CWC</li> <li>• Parents/Guardians/families who are placing children in state custody</li> </ul>	<ol style="list-style-type: none"> <li>1. As per the Law each police station is required to have a Child Welfare Officer. This individual is to be trained and specifically aware of JJ Act Rules. However the police are often not aware of this. Simply assigning and training one resource – Child Welfare Officer in the police station will make a huge difference. This could be ensured by local NGOs, citizens or the police themselves.</li> <li>2. The Suptd./PO who fills in the intake sheet must have information on what kind of treatment was meted out to each child in the Police station. This must be presented to the JJB or the CWC during their sitting.</li> <li>3. Each home Suptd./PO could make a list of the closest police stations from where the CICL usually come in. Regular meetings with these police officials to discuss feedback from children and the rules of J.J. Act.</li> <li>4. Every police station must also put up the rules that should be followed when a CNCP/CICL is brought in, including rules about phone calls as well as helpline numbers (like Childline 1098).</li> <li>5. Setting up Self Monitoring Committees (SMC) to check illegal detention of minors in adult prisons. The Committee may include police personnel, institutional staff as well as concerned citizens and NGO personnel. The SMCs should submit a report to the JJB for every quarter. This could be taken up by an NGO or concerned citizens.</li> <li>6. Positive reinforcement for police stations sensitized to the rights of minors.</li> <li>7. Child Welfare Committees could enforce rule that before a child is placed in the home, prescribed communication about institution is given. to help explain to parents the viability of institutionalization in each case. They should also be provided with a directory of local NGOs and GOs providing needs-based services as an option to institutionalization.</li> <li>8. Children’s institutions (for long term institutionalization) should conduct a pre-admission meeting. This three way meeting between staff, parent/guardian and child could be used to answer FAQs and clear doubts of the child.</li> </ol>

## SECTION III

### Admission

Once a child is brought inside the institution, the first person he generally meets is the Superintendent or the PO for the first intake session. They are then sent to the living space, usually without any further orientation except for the banal statement, "Yahan achchhe se rehna." 58% of children felt lost and alone at the time of admission. On the other hand, 42% were angry and aggressive. The others were homesick, depressed or confused.

We then moved on to questions that explored the entry-level interaction between the staff and child. We got an unanimous response both in case of the CICL and CNCP that the first person they met was the PO or Superintendent. However the problem arose when it came to discussing how the meetings progressed. Almost 63% of the staff claimed to have spent a minimum of 30 minutes with new admissions while 60% CNCP children said it was less than 30 minutes. 31% of the CICL stated that their 'orientation' lasted for 10-15 minutes.

Here it is important to mention the content of these sessions. Children and staff both agreed that initial meetings comprised of:

- a) **Gathering Information Through Straight Questions:** 66% of the CICL and 95% of the CNCP were the main content of the meeting between Suptd./PO and child. Most of the children were asked straight questions i.e. name, age and their family background, etc. The indifference on the part of the staff at this crucial stage acts as a trigger to series of misconceptions that have far-reaching effects but could also have been avoided. This observation seems trivial, but it is the first impression that the child has about the institutions – From here he would have to deal with all of his doubts and conflicts on his own. Nobody was going to help him. "*Jab main pehli baar yahan aayi, tab bhi mujhe yeh jagah jail lagi thi, aur ab bhi jail hi lagti hai,*" - Nasreen, 11, from a Children's Home.
- b) **Questions and Probing About Child's Case History:** With trust levels already dismally low, the staff now has the uphill task of filling in the intake sheet. So far the rapport between child and staff is nil or negligible. However vital information has already been collected from peers inside (according to 65% of the children), and this makes it extremely difficult for the staff to get candidness and honesty out of the child.

*\*Akbar was seeing the interior of the Children's Home for the first time. One of his acquaintances from the railway station \*Abdul was also there. Abdul had been here often. With the benefit of hindsight, he told Akbar not to tell his real name when the PO asked for it. This is because if Akbar was "caught" a second time, the staff would have with them all the information they needed about Akbar. Saddam has always been a popular name for most destitute Muslim boys. But Akbar was in for a surprise. When he told his new name to the PO, the PO replied, "If you are Saddam, then I'm George Bush!"*

\* Name changed.

- c) **Orientation:** Although a substantive 62% of the staff said that orientation about the institution did happen, only 32% of the CNCP and 26% of CICL and said that they had been oriented about some rules. following which they were usually asked to behave and sent inside the living space

Fear, apprehension and lack of information, guidance and support from all quarters increase depression and anxiety levels.

*"I am so confused, nobody tells me why and till when I will be here," - \*Sangeeta, 11, from a Children's Home.*

The emotional distress at this point is manifested in numerous ways such as self-mutilation, drug abuse, severe withdrawal or angry outbursts. A Superintendent talks about how a girl refused to eat for the first few days and would fling food away in protest. This anxiety levels are even higher in case of the CICL who are labeled the moment they enter as "case-wale," and continue to be clueless as to what was the status of their case and languish inside for months with no JJB sittings allotted to them and no information on their case, despite repeated efforts to find out. Rising frustration and anger levels give rise to violent measures like beating up the staff, looting, rioting, as recently happened in a Mumbai institution.

*Yes they orient us. But all they say is - "Yahan achche se rehna," - \*Smita, 12, from a Children's Home.*

#### RECOMMENDATIONS:

**Key players:** Superintendents, POs.

Key issue	Sub-Issue	Recommendations
1. Child's perception of the institution 2. Lack of sensitivity demonstrated by staff during admission stage 3. Lack of categorized information about service-providing	1. The child must be given a brief orientation about the institution wherein a lot of the confusion that he/she has initially is cleared. 2. Rather than merely providing information, it would help if the staff also reassured the child; built rapport and showed empathy. 3. The PO is also overloaded with paperwork and the intake-sheet process is time-consuming and not comprehensive. 4. Also once the intake-sheet interview is over, no subsequent sessions are held in the initial weeks where his/her emotional and behavioral problems are addressed.	1. Local NGOs and volunteers can be brought in to do entry-level sessions with new admissions where creative processes (art, craft, music etc.) are used. This will help in welcoming, re-assuring and making the child comfortable in the institution. 2. Institutional staff should create a comprehensive piece of communication and assign a resource to ensure that new admissions are thoroughly oriented. 3. Intake case sheets can be reviewed to make them as close-ended as is advisable. Also, they can break the information gathering process up over 2-3 sessions, so the child does not feel pressured to divulge too much information in one shot. 4. Frequent sessions should be scheduled by the PO for new admissions along, especially in the first 2/3 weeks. 5. Children should be informed at the time of their entry itself about the chain of communication to be followed in case of conflict as well as the rules & regulations.

\* Name changed.

## SECTION IV

### Stay

The tone of the child's stay in an institution is further confirmed by his/her interaction with the functionaries he first meets. As a result, at this juncture, it is important for the staff to understand and address the child's perceptions. Here, the accessibility of the staff as well as the quality of its interaction with the children gains importance. Our research findings show particular trends being common in the three chief strata of the functionaries:

- **Superintendent / PO:** 81.7% of CNCP were sent to the living space as soon as they were brought and met the Superintendent the next day. This indicates a marked absence of adult guidance or mentorship, for both CNCP and CICL. The first intake session is often characterized by callous questioning to obtain factual information about the child.
- **Caretakers:** Only 10% of CNCP mentioned that they had met the caretakers when they first entered the institution. The JJ Act Rules do not specify any maximum limit to the number of children a caretaker can supervise. This directly affects the quality of care when the numbers are large.
- **Teachers, Doctors etc.:** Most institutions being overpopulated, these functionaries come in limited contact with the children, especially CICL.

### A) Activities

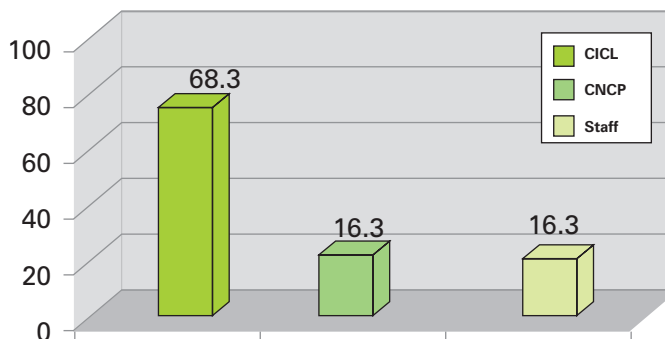
#### Perception of the Institution:

75.3% of the CNCP perceived the institution as a hostel whereas only 8.3% of the CICL agreed to this view. 68.3% of the CICL felt that the institution was a Jail as did 16.1% of the CNCP.

18.3% of the CNCP assumed that the institution was a temporary shelter as did 25% of the CICL.

On the other hand, 75.3% of staff perceives the institution as a hostel, 18.3% as a temporary shelter and 16.1% as a Jail.

Perception about the institution-jail



The findings here reveal that the moment a child enters the institution, he forms certain perceptions that need to be clarified. This is even more prominent in case of the CICL who in 100% cases come through the police. After being treated like adults (lock-ups, physical abuse) while in the police station, they naturally presume the next stop will be the prison. It is important that the child realizes as soon as possible that the institution is not a jail but a home where he will be safe and where his needs are taken care of. This also helps in dealing to a large extent his initial fears and somewhere puts him at ease with his surroundings.

*Once the age-verification tests concluded that \*Ali and \*Allah Rakha were minors, the jailor told them that they were being taken to the "Bachchon Ka Jail". The overcrowded, ill-lit and ill-ventilated place cemented their perception of a jail. The high walls accentuated the notion as did the beatings – by the staff as well as the monitors. The notion of juvenile justice had come full circle...*

#### **Conflict with Authorities:**

Both CICL (48 %) and CNCP (31%) have conflict with authorities. However, only 20% of the staff accepts the phenomenon of conflict.

22% of the CICL and 22% of the CNCP concur that in case of conflict with authorities, the problems are discussed among the children themselves leading to more fights and higher incidences of running away. However, almost 75% children are unaware of the next step to be taken in case of such conflict. This indicates the staff's ignorance of their role as well as their indifference in dealing with such issues even though these issues often result in escalated violence.

*The children in an Observation Home are scared of Gangaram. They say that when Gangaram starts talking, everybody else falls silent. He arrives when one of the children has been caught attempting to run away, and sometimes for no reason at all. But what is so scary? After all, Gangaram is just an innocuous brown stick...*

*Incidents like these underline the need for taking cognizance of issues and attempting to resolve them instead of taking the easy way out by beating the children into submission and thereby not treating the root cause of the problem.*

#### **Conflict with Peers:**

All categories of respondents, viz. CNCP (78%), CICL (44%) and staff (52%) agree that conflicts between children are constant in every institution.

According to 47% of the CICL, the Superintendent and Probation Officers take decisions regarding conflict resolution whereas according to 37% of the CICL, ground level staff does so. The findings are similar for CNCP and the staff. 51.7 % of the CICL stated that, there is no intervention by the staff in case of conflict, resulting in increased in-fighting, punishment by the staff and groupism. A marginal 10 % of the CICL mentioned intervention by the Superintendent in the form of counseling.

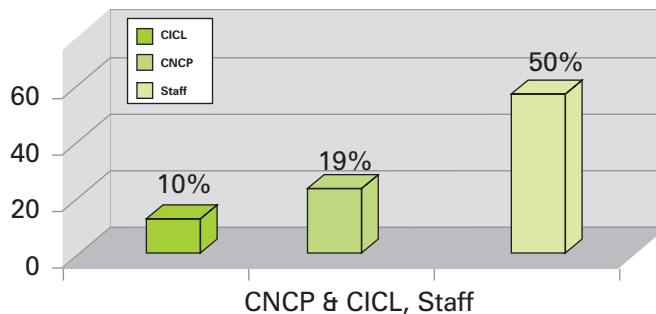
Similarly 77% of the CNCP commented on the lack of staff intervention with only 17.2% mentioning counseling by the staff. In contrast, 48% of the staff claims that they counsel children in case of conflict.

These contradictory findings further highlight the staff's apathy and the child's frustration who expects the staff to intervene and resolve such issues. Also what

\* Name changed.

further surfaces from these statistics is also the lack of role clarity. Most homes that we had been to had children telling us that mostly whoever was present at that time (usually the caretaker) would handle the situation. According to a majority of the CICL, the staff present usually waits for the issue to die down or utilizes physical punishment or segregation of the opposing parties.

**Does the staff intervene during conflicts with peers?**



*\*Anil, 10, a CNCP child fed up with CICL aggression said, "Inke wajah se ab ham ko bahar jane nahin dete, us din inhone murgi khaya, unlogo ko josh aaya aur sab cheej tod diya, in sabko murga banake yahan se bhaga dene ka man karta hai!!!!"*

#### **Presence of a Counselor and Methods Utilized to deal with Behavioral Problems:**

54% of the staff mentioned individual and group meetings with the children that aimed at identifying and dealing with emotional/behavioral problems. But the trend of differential responses by the staff and children continue in this section also. According to 56% of the CICL, behavioral problems are not dealt with at all. 22.6% said that staff intervenes only when problems get violent. 21.5% mentioned that beatings were they only "technique" used.

83 % of the CICL and 48 % of the CNCP voiced that they would like to be able to share their feelings and problems with an adult. 70% of staff also say they would prefer to leave this job to a professional counselor. The good thing about this finding is the fact that the staff is not averse to NGOs and psychologists coming in to provide such services. This is especially relevant in case of homes in remote areas where it might not seem feasible to set up a Child Guidance Clinic (CGC). The best solution would be to identify local volunteers. Staff members specializing in counseling techniques such as CGC personnel could also form a core team to train staff in efficiently handling behavior problems.

- *"Bachche subah sham hamare chehre ko dekh ke bore ho jate hain. Koi bahar ke log (NGO wale) sanstha me aane chahiye," believes \*Tukaram Shinde, a care taker in a mofussil town's Senior Home.*
- *One of the Superintendents we met believed that counseling was very important to help children adjust initially. The children in her institution said, "We love her because she talks to us and that too individually."*

\* Name changed.

### Security / Running away:

Almost 50% of the staff denied that children run away or even attempt it. In the light of this, it is obvious that running away is rarely addressed up front, and preventive measures are almost never taken.

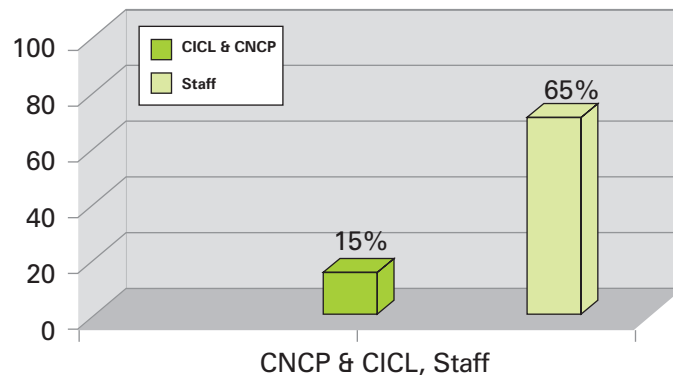
On the other hand 80% of the CICL and 65% of the CNCP mention that children do run away, attempt to run away or have running away at the top of their minds. This could be for different reasons. For instance a CICL feel restless and anxious because of irregular Juvenile Justice Board sittings. Believing that their case is unlikely to move forward in the near future they often see running away as the only option. CICL also quote physical abuse by the staff as well as confusion and lack of information about case status as common reason to attempt running away.

As far as actions taken by the staff in case of children (both CICL & CNCP) trying to run away are concerned, the respondents have more or less given a similar response. The CNCP (65%), CICL (60%) and staff (55%) have confirmed that action is taken in case of children attempting to run away.

The staff (50%) saying it is and must be the Superintendent who takes the action. But in the case of the CICL it is usually the caretakers or the monitors who take action while almost 30% of the CNCP have said that it is the superintendents and the caretakers who are entrusted these duties.

However the more disturbing trend relates to the nature of these actions. 65% of the staff has said that the immediate intervention in case of a child who had attempted to run away was to counsel and orient him about the hazards of running away. This was compared with the CICL and CNCP responses wherein only 10-15% of the respondents have stated that they had been verbally counseled / admonished by the staff.

**Does the staff counsel children who try to run away?**



40% of the CICL and 38% of the CNCP have quoted that usually the staff would beat them up while a small proportion of them stating that sometimes this would be severely. In case of the CICL one trend that almost tallies with the staff is the authority that monitors enjoy. Almost 40-45 % of the staff as well as the CICL have stated that it is the monitors who beat up a child who was caught running away. While children say that these monitors are assigned by staff "to do their

dirty work”, staff claim that these monitors are given authority by the children themselves. Sometimes this also involves collective caning if a child was caught running away.

Rather than work in a preventive way to ensure that children do not run away, the staff believe that the key is to beef up security in their homes.

*In an Observation Home we visited, when a child is caught attempting to run away, the caretakers just ask him two questions. They hit him with sticks on the legs and ask, “What does your left leg say,” and “What does your right leg say?” This continues till the child replies in the negative. Whether he means it or not is anyone’s guess.*

*‘Jab hamne home mein drugs andar aana band karvaya, tab kuch ladko ne hamein chaku se dhamkaya aur bhaag gaye, kyunki hamare paas security hi nahin thi,’ said \*Rajaram Mohite, 42, a senior caretaker of an Observation Home.*

## RECOMMENDATIONS:

**Key Players:** Superintendents, POs

Key issue	Sub-Issue	Recommendations
1. Absence of comprehensive rehabilitation plan.  2. Discipline (Conflicts with staff and peers; physical & sexual abuse; running away; monitors; contraband)	1. Important components of the child’s psycho-social rehabilitation such as staff interaction with the child during his stay; interaction with peers; communication with the child’s family; follow-up after release etc. are not structured.	1. Child-friendly material should be created along with capacity building workshops for staff on how to use this material at the time of the child’s entry. The objective would be to welcome and reassure the child and prepare him/her for the interview with the PO.  2. As POs are often overworked and the interview process is time consuming, interview guidelines can be standardized with regard to the duration and number of meetings, monitoring of the case etc. The PO could be trained for special counseling techniques and could divide children into cases and groups based on relevant themes like entry-level, impulse control etc.  3. The child’s emotional and behavioral issues are highlighted in the first few weeks of stay. In order to reduce the rate of running away, whether due to fear or depression, it is suggested that the child’s initial stay routine be standardized to include bi-weekly meetings with the PO. Subsequently these meetings will be reduced to once a week once the child has settled down. These meetings should specifically bring up issues related to homesickness, peers and running away. The PO must also maintain a chart wherein he can keep track of the number of sessions he has had. He can divide his week in a way that he can conduct counseling sessions (individual as well as group), go for home visits and also devote time for documentation.

\* Name changed.

Key issue	Sub-Issue	Recommendations
		<ol style="list-style-type: none"> <li>4. Platforms such as weekly Bal Panchayats can be provided to children to air their grievances, along with individual meetings for serious or personal issues such as sexual abuse.</li> <li>5. NGOs can be brought in to provide counseling through creative and therapeutic activities.</li> <li>6. Increasing security for the perimeter.</li> <li>7. Enhanced security for children and visitors especially in cases who are known to be trouble-makers or indulge in drug-abuse.</li> <li>8. Implementation of the discipline code. In severe cases of physical or sexual abuse the PO could also conduct group sessions with the perpetrators on relevant themes.</li> <li>9. Make sure that interaction between staff &amp; children takes place as prescribed in the monitoring tool.</li> <li>10. The institution can ask local psychologists and psychiatrists to assist in special cases. Besides, they can establish a referral system with nearby local government and private hospitals.</li> </ol>

Disruptive behaviors in an institution can range from minor infractions such as bullying younger or new children, to tardiness and verbal abuse. However, institutions are not new to physical abuse; substance abuse; theft of other's and institutional property, as well as use of weapons, verbal or physical aggression against staff and sexual abuse. Such issues are common to all institutions and hence require a common solution which can be implemented across the state. As a result, **Aangan**, in consultation with our panel of staff and NGO personnel, has compiled a Discipline Code which will be made public in March 2007.

#### **Visiting Hours/Phone Calls/ Letters- Communication with Family:**

All three categories of respondents mention regular meetings with family members. Hence, entry-level orientations; interaction with the authorities during the stay as well as exit-level orientation need to be focused on.

According to 80.5 % of the staff, children are always allowed to make phone calls. However, 61.7 % of the CICL and 15.9% of the CNCP disagreed. This indicates the need for establishing systems with regard to communication with the children's families and explaining the institution's policy in this regard. This is necessary because in most institutions the telephones could only receive incoming calls. 61.3% of the CNCP, 45% of the CICL and 80% of the staff mentioned that letters were permitted.

However, the fact that the remaining children are denied this mode of communication remains a cause for concern. The literacy levels of the children and parents also influence this exercise.

The walls of an institution also often deny the children information on current

events. Most institutions have television sets which are functional only at particular times such as before dinner, and are often monopolized by the elder children. Also, there is no structured system of information dissemination such as newspaper groups even when the children are old enough to be organized into such groups. Discussions between the staff and the children on such issues are rare.

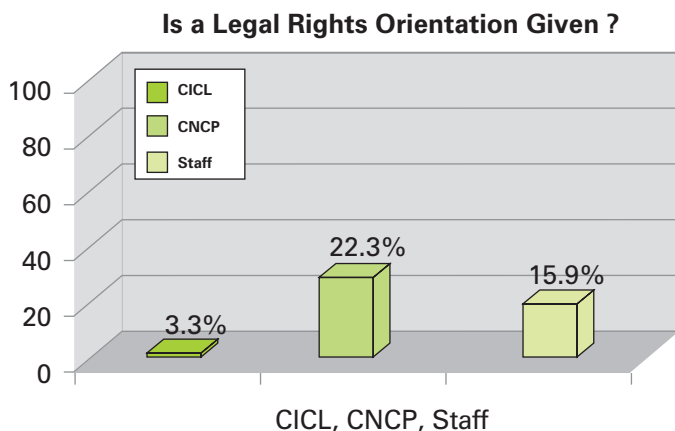
**RECOMMENDATIONS:**

**Key Players:** Superintendents, POs

Key issues	Sub-Issue	Recommendations
1. Lack of communication between the child and his/her parents which increases the confusion. • Lack of general knowledge; access to the world outside. When the child is released (s)he has no idea about goings on in the world outside.	• Confusion regarding the status of their case be it CICL or CNCP • Homesickness or conflicts with peers	1. Volunteers can be brought in to assist with letter writing, telephoning and contacting the child’s family during a designated period of time regularly and under staff supervision. The visiting hours must be fixed and one member from the staff should be assigned the task of guiding and briefing the parents and relatives. 2. Monthly meetings must be held with the parents which can also act as a grievance redressal forum for them. • Newspapers, monthly debates/discussion, news (if there are televisions)

**Legal Rights Orientation:**

Only 15.9% of the staff mentioned orienting the children. 77.4% of the CNCP and 96.7% of the CICL said that they were not told about anything related to their legal rights. This is especially important in case of the CICL who need to be oriented on the status of their case and also the available options like bail and



legal aid. Most of them remain clueless about these issues thus giving rise to increased levels of anger that visibly manifests itself in the form of physically abusing the staff, destroying institution property etc.

- *"I was never taken to any sitting since the time I came to the home", said \*Shivaji a CICL.*
- *"If we tell them about their legal rights, they will insist on having them and we can't have that," said an Observation Home's trustee.*
- *"Hamein is room ke allava kahin bhi bahar jane nahi dete. Bahar khelne ke liye doosre bacchon ko bhejte hain, case walon ko bahar nahi bhejte. Hum log yahan din bhar pade rahte hai," said CICL boys in an Observation Home.*

## RECOMMENDATIONS:

**Key Players:** Probation Officers and Teachers.

Key issues	Sub-Issue	Recommendations
<ul style="list-style-type: none"> <li>• CICL often disturb the daily routine of the institution and have a higher incidence of running away; greater involvement in rioting etc;</li> <li>• Often when such children return to the outside world they are vulnerable to exploitation, abuse, police harassment etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of updated information about their cases</li> <li>• Absence of legal aid</li> <li>• Discriminatory treatment towards CICL.</li> <li>• Children need to know they DO have rights as children – to education; free healthcare; legal aid; etc. They need simple information about how to access these rights</li> </ul>	<ol style="list-style-type: none"> <li>1. CICL need to be informed about their legal rights at the time of their entry itself. They also need to be regularly updated about the status of their cases.</li> <li>2. Local NGOs can be partnered with to provide free legal aid.</li> <li>3. Legal aspects of their case must be emphasized during their entry level session using the entry-level communication tool.</li> <li>4. Sessions on child rights, health rights, women's rights which incorporate local help line numbers or teach simple things like filling up a form in a public hospital or helps the child know how to deal with the police, are to be conducted.</li> </ol>

**Education:** The disturbing trend was that almost 95% of the CICL stated that they never attended school while in the institution. This somewhere forces us to conclude that the CICL seem to bear the brunt of the inadequacies in the system and hence remain the most deprived lot. Beginning from the time they come in contact with the police to the point they are committed or acquitted there is a gross violation of human rights in their case. The rights-based approach talks about empowerment by providing the marginalized with those facilities which help them realize their rights. In this case the child especially the CICL is denied

\* Name changed.

the basic “Right to education” which in itself puts a hold on the entire rehabilitation process and also contradicts the very purpose of an institution’s existence. In the absence of a school the child does not have a choice but to indulge in activities like substance abuse, physical/sexual abuse and even rioting.

In most long-stay institutions children are sent to outside schools which is a positive step. However, the performance of these teachers and their motivation levels are redoubtable. In one home, the teacher could not answer clearly when she was asked what subject and topic she was supposed to teach today.

*The CICL boys in an Observation Home have never been to school. “Agar hum bhaag gaye to?” “Aur teacher ne bola ki woh hamein nahin sambhal sakti.”*

*‘Jisko class jaana hai vo jaata hai, baki bangle mein pura din sota hai nahin to mara mari karta hai’, said \*Ramesh, 14, another CICL boy.*

## RECOMMENDATIONS:

**Key Players:** Superintendents, Probation Officers and Teachers.

Key issues	Sub Key Issue	Recommendations
<b>Education</b>	1) CICL not attending school. 2) Mediocre performance of the CNCP in school. Also, their performance is not monitored.	1) Separate schools for CICL which would be run on a short term basis. Pratham to be brought in for the purpose wherein emphasis will be on reading techniques. This program will last for a minimum of 3 months. In cases where no extra space is available, the living space could be divided and used as classes. 2) Structured schedule for teachers and training that will help them in improving their academic performance.
	3) No Standardized Role of the teaching staff.	1) Clearly defining the role and distinguishing it from the other staff.
	4) No exam-specific intervention for children.	1) The teachers in the OH should plan and allot time specifically for tutoring elder children. The teachers must try to arrange for local volunteers or local coaching classes to assist children especially the ones in 10th Std.
	5) No appropriate educational assessment of the child when he enters the institution.	1) The PO has to assess the child and assign him to the related level. The subsequent segregation must be done on that basis and this is especially important in case of the CICL. There must be further assessment done by the teacher.

\* Name changed.

**Health and Hygiene:**

In most institutions, medicals exams are conducted within the stipulated period of 24 hours which is a positive finding. Long-stay homes often conduct them only after 2-4 days once all the children have returned. However, regular health camps are not conducted in most homes. Neither are all medical entries recorded in the children’s case sheets.

**Statistics:** 71% of the CNCP, 55% of the CICL and 75% of the staff mentioned that they had adequate access to health care services in their institution. This is a heartening statistic as most institutions have visiting medical officers and take emergency cases to the nearest hospital for treatment.

- *In an Observation Home during a conversation on AIDS and sexual abuse, a child was asked, “How do you acquire AIDS?” His reply, “You get AIDS when you do hanky panky with women.”*
- *A Superintendent quotes, “We don’t have a toilet block but we do have 81 acres of open land – one of the largest campuses in the state.”*
- *Another Superintendent quotes, “Ok so there are quite a few rats in the kitchen, but I would rate my kitchen A grade.”*

**RECOMMENDATIONS:**

**Key Players:** Superintendents, Probation Officers and VMOs.

Key Issues	Sub Issue	Recommendations
2) Health and Hygiene	1) No specific intervention or procedure followed in case of infectious diseases and drug abuse.	1) The initial medical examination must include T.B, Scabies and Leprosy tests. The institutions must co-ordinate with local hospitals and get health partners to organize camps. Also they must look for agencies that specialize in drug-rehab and refer these cases to the JJB and CWC. These cases then could be referred to the nearby hospitals for detox and rehab.
	2) No structured presence and functioning of the VMO (Visiting Medical Officer).	2) The VMO must have a clear daily schedule wherein he comes in at least thrice a week for a total of 4-5 hours. He and the nurse must be entrusted the task of arranging monthly and quarterly health camps. The Superintendent and VMO must work in tandem to make sure that there is a sufficient stock of medicines and liaise with local donors for the same. The sick room staff must also select children for the purpose of supervision as well as maintaining cleanliness. The former will be fixed while the latter will be on a rotational basis.

\* Name changed.

Key issues	Sub Issue	Recommendations
	3) Poor maintenance and in some instances absence of toilets	3) <ul style="list-style-type: none"> <li>• Budget allocation for toilets with a toilet-to-child ratio of 1:25.</li> <li>• Inculcate toilet habits amongst children.</li> <li>• Get local donors and politicians to build toilets.</li> <li>• Awareness and treatment camps for relevant issues like AIDS, Scabies etc. Volunteers and other health-based NGOs could be roped in for the same.</li> </ul>
	<ul style="list-style-type: none"> <li>• Lack of sick room.</li> <li>• Even if they are there, they are used for storage or accommodating staff</li> </ul>	The utilization of a sick room needs to be monitored in order to ensure its proper functioning.

**Vocational Training:** Vocational training was not available in 75-80 % of the homes. Even the miniscule proportion which did have such facilities included industrial training courses like electrical training, welding, fitter, tailoring etc. The questionable aspect here is how market-friendly are these trades. There is also no denying that as of now the limited openings also have almost reached a saturation point. In addition these professions usually guarantee nothing but stagnancy in any person's career. The prospects for a brighter and better future are bleak. A child after being released from an institution in most cases goes back to his family and the community, usually criminogenic, and without any added skills. Also the stigma attached to a CICL is mitigated only when he has a legal and financially secure job to fall back on. This means that merely providing vocational training is not enough, it is also necessary to arrange for job placements.

*"Jhadoo banane se, kapda silne se ya thaka-thak (carpentry class) se kitna paisa milega? Isse achcha to do robbery karo aur jo paisa milega usse apna zari karkhana kholneka," said \*Umesh, 21, a CICL who had spent time in the Arthur Road Prison for murder. The carpentry and tailoring classes conducted in an OH probably did not enthruse him to earn a honest living.*

#### RECOMMENDATIONS:

**Key Players:** Superintendents, Probation Officers and Vocational Teachers.

Key Issue	Sub Issue	Recommendations
<b>3) Vocational training</b>	Absence of vocational training programs.	<ol style="list-style-type: none"> <li>1) Need to differentiate between income generation and vocational courses.</li> <li>2) Facilitate organizations like Jan Shikshan Sansthan to come in where trainers don't exist. In places where there are teachers, they must be trained to coach them in courses that are market friendly. Also these courses must be ones that would be useful in acquiring employment in the neighboring companies, i.e. they must be relevant to the population and area.</li> </ol>

\* Name changed.

Key Issue	Sub Issue	Recommendations
		3) Each home must identify a vocational partner within the area. 4) CBOs and the local VO's, especially those areas from which the CICL usually come from, must be roped in to assist in job placement after the child has left the home. 5) Not too much emphasis to be laid on vocational courses for children below the age of 14 yrs. The budget allocated for these could be diverted to more courses for elder CICL or CNCP boys.

**SECTION V**

**Exit:**

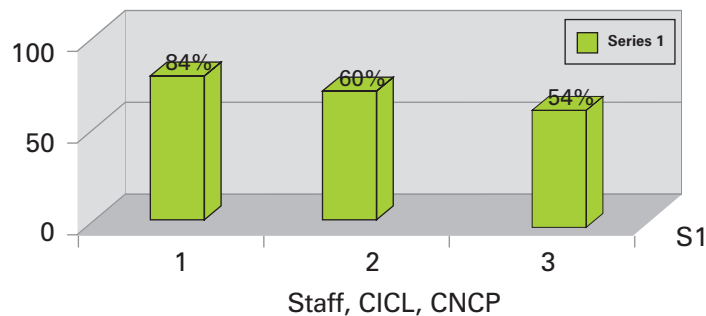
The trend of contradictory replies continues even in the last section of the research. 84% of the staff said that they inform the children about their exit while 60% of the CICL and 54% of the CNCP said that they have not been informed about anything related to their exit from the institution at all. In terms of "preparing" the child to cope with the outside world, content was extremely limited.

With regard to the CNCP, 23% of the staff asked them to behave well, 23.2% provided career guidance and 12.9% spoke about marriage.

In case of CICL, 43.3% of the staff asked them to behave well.

No staff member or child mentioned discussing vocational courses outside the institution, coming back to the institution when in need of guidance, further studies, employment, supervision or community participation.

**Exit - Level Communication**



This indicates that in spite of the Act's emphasis on the child's rehabilitation and social reintegration, the institutional staff lack role clarity regarding who should be in charge of orienting the child prior to his exit or collaborating with local organizations and leaders for reintegration etc. There is also a lack of information regarding the content of this discussion e.g. Understanding one's interest areas,

identifying related courses in education and vocational training, shelter, providing information on free government systems such as health and police. There also appears to be an underlying subtle gender bias as girls are often asked to behave in a socially desirable manner with emphasis being on marriage and generally not on further education for pursuing a career. Hence, the implementation of other more time

consuming measures for rehabilitation such as adoption, sponsorship and foster care also is redoubtable.

- *“Hum unko achchhe se rehne ke liye kehte hain. Bahar jaakar masti naa karein isliye.” – PO from a girls’ Special Home.*
- *“Ladkiyon ke liye marriage bureau kholna chahiye,” believes a caretaker from a girls’ home. (A marriage bureau should be opened for such girls.)*
- *‘Hamein ek din pehle batate hain aur jaate time sirf achchhi ladki banke raho aur shaadi kar lo, aisa kehte hain,’ \*Seeta, 17, from a Special Home. (“They just tell us a day before we leave the home “Be a good girl, get married.”)*

## RECOMMENDATIONS:

**Key Players:** Superintendents, Probation Officers, CWC, JJB.

Key Issue	Sub Key Issue	Recommendations
<ul style="list-style-type: none"> <li>● Lack of clarity among institutional staff about who shall handle exit processes</li> <li>● Lack of clarity about content of exit level orientation</li> <li>● No follow-up.</li> </ul>	<p>Important components of the child’s psychological rehabilitation such as</p> <ul style="list-style-type: none"> <li>● communication with parents;</li> <li>● supervising the child &amp;</li> <li>● re-starting school/job are ignored.</li> </ul>	<ol style="list-style-type: none"> <li>1. Capacity building programs should be conducted with the staff in order to provide role clarity with special emphasis on exit-level intervention.</li> <li>2. The child’s reintegration in the community can be enhanced by ensuring the maximum participation of CBOs, NGOs and local leaders. For this purpose a directory of organizations providing need-based services and their intake policies can be provided to Superintendents, POs, CWC and JJB.</li> <li>3) Exit level communication kit should be created</li> </ol>

\* Name changed.