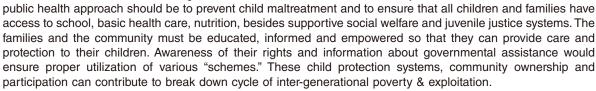
Protection of Children From Abuse and Neglect in India

Rajeev SETH*1

Abstract

In India, child rights, protection from abuse and exploitation (street children, child labour, trafficking etc.) are intimately linked to poor socioeconomic conditions in a large population base. Whose responsibility is it to ensure the safe, protective and caring environment that every child deserves? The UN CRC does not absolve either family or community or society at large. But it firmly puts the onus on the State.

The paper discusses two community intervention efforts for protection of vulnerable children at urban & village levels, New Delhi India. In India, the key





Introduction

The UN Convention of Rights of Child (UN CRC) (1989) is the most widely endorsed child rights instrument worldwide, which defines children as all persons aged 18 years and under.1 In the UN CRC, Article 19.1, Child Protection has been defined as "States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.² Failure to ensure child right to protection adversely affects all rights. Child protection is critical to the achievement of Millennium Development goals (MDG). These MDGs can't be achieved unless child protection is an integral part of program & strategies to protect children from child labour, street children, child abuse, child marriage, violence in school and various forms of exploitation.³

Several well developed countries of the world have well developed child protection systems, primarily focused at mandatory reporting, identification and investigations of affected children, and often taking coercive action. The burden of high level of notifications and investigations is not only on the families, but also on the system, which has to increase it's resources.⁴ In these contexts, the problems of child protection in India, with huge populations, and additional socioeconomic constraints, need serious and wider consideration.

India Country Experiences & Magnitude of Problem

In India, the number of children needing care and protection is huge and increasing. Uncontrolled families, extreme poverty, illiteracy result in provision of very little care to the child during

^{*1} Chair, Indian Child Abuse, Neglect & Child Labour (ICANCL) group, Indian Academy of Pediatrics Delhi (sethrajeev@gmail.com). This article is based on the 11th Takemi Memorial Oration made at the 28th CMAAO General Assembly and 49th Council Meeting, New Delhi, India, on September 13, 2013.

the early formative years. Even services that are freely available are poorly utilized. The urban underprivileged, migrating population (a very sizable number) and rural communities are particularly affected. In large cities, there are serious problems of street children (abandoned and often homeless) and child labourers, employed in menial work. Children in difficult circumstances such as children affected by disasters, those in conflict zones, refugees, HIV AIDS need appropriate care and rehabilitation.⁵

For example in India, there are about 440 million children: about 40% of them are vulnerable or experiencing difficult circumstances. Twentyseven million babies are born each year. A large majority these births are among the underprivileged section of the population, mostly unplanned and where the parents cannot provide proper care to their children. The situation of the newborn and the periods of infancy and early childhood are particularly critical and the morbidity and mortality rates continue to remain very high. Maternal under nutrition, unsafe deliveries, low birth weight babies and poor newborn care, lack of adequate immunizations, poor nutrition, neglect of early development and education are major issues that need to be appropriately addressed. Child rearing practices reflect social norms and very often adverse traditions are passed from one generation to the next, especially in illiterate and poorly informed communities, and are extremely resistant to alter. As per Government of India (2007) survey, the prevalence of all forms of child abuse are extremely high (physical abuse (66%), sexual abuse (50%) & emotional abuse (50%).6 In these contexts, India must also seek its own insights and way forward plans to protect their children.

Wider implications of "protection"

The term "protection" readily relates to protection from all forms of violence, abuse, and exploitation. However, from India's perspective, the Indian Child Abuse Neglect & Child Labour (ICANCL) group has strongly propagated the view that "protection" must also include protection from disease, poor nutrition, and illiteracy, in addition to abuse and exploitation. The 9th ISPCAN Asia Pacific Conference of Child Abuse & Neglect (APCCAN 2011) conference outcome document "Delhi declaration" re-confirmed & pledged a resolve to stand against the neglect and

abuse of children and to strive for achievement of child rights and the building of a caring community for every child, free of violence and discrimination. It urged and asserted the urgent need to integrate principles, standards and measures in national planning process to prevent and respond to violence against children.⁷

Effective Child Protection Systems

Whose responsibility is it to ensure the safe, protective and caring environment that every child deserves? The UN CRC does not absolve either family or community or society at large. But it firmly puts the onus on the State. Governments are the ultimate duty bearer. In India, the State should ensure that all vulnerable children have access to school, basic health care, nutrition, besides social welfare and juvenile justice systems.⁸ These child protection systems can contribute to break down cycle of inter-generational poverty & exploitation.

Experiment models of Child Abuse & Neglect

(a) Child protection for urban poor

In India, rapid urbanization is a challenging problem. The present urban population of India is close to 285 million. Preventive social services are abysmal, with high prevalence of abuse & neglect. It is estimated that every year about 2 million children are born amongst urban poor, all needing care and protection. The ICANCL group members volunteer their services for health care & rehabilitation to these vulnerable children at drop in centers (DIC) managed by PCI, a NGO in various slums of the New Delhi. The group also looks after health of street children at one short stay home (Shelter home) in outskirts of the city.9 The group has served more than 14,000 street children since year 2000. A shelter home was started in year 2005, where 347 children have been rehabilitated; provided with formal education, vocational skills & job placement. Home repatriation has been achieved in 350 children. 10 The group assists in the following community services to protection of these vulnerable children:

(1) Street & Working Children

In Urban metropolitan cities, street children are migrants from underserved states and have no formal education or job skills. They are subject all forms of abuse, including substance abuse & exploited as child labourers. 10 The DIC provide non-formal education, free medical care, vaccinations, counseling against substance abuse/HIV/ AIDS etc., mid day meals and vocational courses. Moreover, crèche and day care services are provided to these orphan and vulnerable children. (2) Education & Health Services for Urban Poor The group runs an ongoing campaign to put "Every Child in School," to promote child protection and optimum development. Advocacy efforts made to retain children in school within the framework of Government programs, such as sarva shiksha abhiyan & Right to Education (RTE) Act (2009). Health services were provided at DIC, as loss of daily wages & lack of transport prevents them to go to avail facilities at government hospitals. Health education and monitoring, nutritional screening, vaccinations, basic sanitation, hygiene & counseling services were provided.

(b) Protection of children in underserved rural village

The ICANCL Group has developed a model for protection of children in an underserved village Bhango, district Nuh-Mewat, Haryana, which is primarily focused on provision of primary education and basic health care. Village Bhango is situated about 70 km from New Delhi; has a Population 1,300. [Adults: 592 (M 311 & F 281) and Children: 708]. Before the group started work, the only Government Primary School had low enrollment rate, high school drop outs, poor infrastructure, no toilets, teacher absenteeism and irregular administration of mid day meals.¹¹

For the past 6 years, the ICANCL group volunteers have monitored the school program on an ongoing basis with the help of local village panchayat (local self government) education committee, which comprised of sarpanch (head man) and some senior community members. An extra English remedial teacher was hired. Repair of building, safe water and regular mid day meals were administered. The government administration was approached to report teacher absenteeism and effective implementation of their program. The group managed health care clinic for sick children and immunization at the village chawpal (meeting point). In a period of 2 years, the school had enhanced enrollment, no drop outs, and improved school performance. The key to the success of this initiative was due to a clear

responsibility and accountability of *Panchayat* officials, teachers, community ownership and participation.¹²

What we have learnt?

In the process of voluntary service in underserved regions of our country, we learnt some important lessons from the vulnerable families and communities. The most important lesson was that public awareness about child abuse & neglect has to be raised & society attitudes have to change. Children should have knowledge regarding life skills, child rights and participation. Moreover, Governments should encourage public discussions on child maltreatment. The media has an important role to play in this regard. Legislation alone will not bring sufficient impact unless awareness and public attitudes are changed! Nevertheless, adequate Legislative framework and their consistent implementation & enforcement are very important. Beyond rationalization of existing laws, the main challenge in India remains their enforcement and the fact that there is a certain degree of impunity for those violating the law. For instance, if one compares the prevalence of child marriage in India (43% of women aged 20–24 were married before they were 18) and the numbers of people prosecuted for violating the anti-child marriage law (a few hundred per year, at best), it is evident that the law is not enforced.13

Child Protection: Assigning responsibility

Ideally, the parents should be responsible for proper care and protection of their child. Every birth should be planned and all births registered. However, the child must not suffer in case the parents can't provide care and protection. It is the duty of the proximate community and the Government at large to address the issues of care and protection.

Education and empowerment of families

The magnitude and seriousness of the problems of underprivileged children are too great to be tackled through "external" measures. The child must be the responsibility of the parents, the family and the proximate community. The families and the community must be educated, informed and empowered so that they can provide care

and protection to their children. Parenting skills, alternative forms of discipline and basic support to vulnerable families must be expanded. In India, the Government cannot afford to separate children from their vulnerable families and place them in institutions. Such approaches are also being challenged in more developed countries as well. What most families need is some extra support to cater for their children, in the form of sponsorship schemes, social protection programs. Awareness of their rights and information about governmental assistance would ensure proper utilization of various "schemes."

Role of the community

Wherever the parents are unable to take care and protect the child, the proximate community and their elected representatives must take up that responsibility. Thus, in the village, *panchayat* officials (local self government) and in the urban areas, the elected members must ensure that every child is in school, receives basic health care (particularly immunizations, nutrition) and protection from child abuse & neglect.¹⁴

Role of Non Government Organization's (NGO's)

A large number of NGOs are working in the field of child welfare and child protection. However, because of the huge numbers of children requiring protection, their efforts can make only a marginal impact. However, they should coordinate their child welfare activities and need to work together. They also need to oversee implementation of various government measures that are already in place. The crucial ones include basic right to health, education, infant and young child development and prevention of child abuse & neglect.

Role of Government

The ultimate responsibility to protect its nation's children lies with the Government. By ratification of International instruments such as UN CRC & UN General comments #13, the Government's should commit appropriate legislative, administrative, social and educational measures to prevent and protect children from maltreatment. In 1992, India accepted the obligations of the UN Convention on the Rights of the Child (CRC). In the last two decades, the government has taken several steps towards publi-

cally advance children's rights. These include the Juvenile Justice (Care and Protection) Act 2000 (amended in 2006), Prohibition of Child Marriage Act (2006), the formation of the National Commission for Protection of Child Rights (2005), a National Plan of Action for children (2005), Right to Information (RTI) 2005, the Goa Children (amendment) Act 2005, the Child Labour (Prohibition & Regulation) Act, 1986 (two notifications in 2006 & 2008), expanded the list of banned and hazardous processes and occupation), Integrated Child Protection Scheme (2009) and advancing various legislations such as Right to Education Bill (2009) & Prevention of children from Sexual Offences (POCSO Act 2012) to protect, promote and defend child rights in the country.15 However still, there is a wide gap between policy & implementation/practice & outcome, and millions of children fall through

The Juvenile Justice (Care and Protection) Act 2000 (amended in 2006) was a key step in the right direction by Government of India. It established a framework for both children in need of care and protection and for children in contact with the law. However, further harmonization is needed with other existing laws, such as the Prohibition of Child Marriage Act 2006, the Child Labour Prohibition and Regulation Act 1986 or the Right to Education Act 2009. Important contradictions exist among these laws, starting with the definition and age of the child. Conflict with personal laws should also be addressed, ensuring universal protection of children, regardless of the community they belong to.

National Commission for Protection of Child Rights (NCPCR) was established by the Government of India in March 2007 by an Act of Parliament, with a wide mandate and considerable powers. The Delhi Commission for protection of child rights was started in July 2008. Similar bodies at State level have been pursuing various matters concerning child rights and protection. Telephonic help lines (CHILDLINE 1098) and Child Welfare Committees (CWC) have been established, where reports of child abuse or a child likely to be threatened to be harmed can be made and help sought.

Integrated Child Protection Scheme (ICPS)

The Ministry of Women and Child Development, Government of India has launched an Integrated Child Protection Scheme (ICPS) (2009), which is expected to significantly contribute to the realization of State responsibility for creating a system that will efficiently and effectively protect children. It is meant to institutionalize essential services and strengthen structures, enhance capacity at all levels, create database and knowledge base for child protection services, strengthen child protection at family and community level and ensure appropriate inter-sectoral response at all levels and raise public awareness. The guiding principles recognize that child protection is a primary responsibility of the family, supported by community, government and civil society. The document "The integrated child protection scheme (ICPS)—A centrally sponsored scheme of Government—Civil society partnership" gives detailed accounts of this scheme.

Prevention of children from Sexual Offences (POCSO Act 2012)

The Protection of Children from Sexual Offences Act, 2012, specifically address the issue of sexual offences committed against children, which until now had been tried under laws that did not differentiate between adult and child victims. The punishments provided in the law are also stringent and are commensurate with the gravity of the offence. Under this act, various child friendly procedures are put in place at various stages of the judicial process. Also, the Special Court is to complete the trial within a period of one year, as far as possible. Disclosing the name of the child in the media is a punishable offence, punishable by up to one year.

The law provides for relief and rehabilitation of the child, as soon as the complaint is made to the Special Juvenile Police Unit (SJPU) or to the local police. Immediate & adequate care and protection (such as admitting the child into a shelter home or to the nearest hospital within twenty-four hours of the report) are provided. The Child Welfare Committee (CWC) is also required to be notified within 24 hours of recording the complaint. Moreover, it is a mandate of the National Commission for the Protection of Child Rights (NCPCR) and State Commissions for the Protection of Child Rights (SCPCR) to monitor the implementation of the Act.

Public Health Approach

Given a large population and socio-economic constraints in developing countries, a public

health approach/ system response to primary, secondary and tertiary prevention of child maltreatment is urgently needed. More vulnerable groups with greater poverty, unemployment, migrant workers, parents with mental health problems, substance abuse, domestic violence, children with chronic health problems and disabilities are at greater risk. In order to make a social & public health impact, the Government should integrate its social welfare policies and child protection scheme; ensure their proper implementation and effective convergence at the grass root levels. Universal prevention services also need to have the ability to identify vulnerable families early enough to change risky behavior and pathway to abuse.⁴ Use of maternal & child health (MCH) services, integrated child development schemes (ICDS) can broaden the pediatric surveillance role of community workers in the community. The children subjected to maltreatment should be quickly assessed and provided treatment and appropriate secure placement to avoid further damage in situation where it is unsafe for children to remain at home. 16

In India, there is also a big need for appropriately trained human resources and adequate child protection budgets. The analysis of Indian child budget data revealed only 0.3% of child budget is allocated to child protection. The officials should also ensure that Governmental funds are properly utilized.

Role of professionals, corporate sector, religious institutions

The professionals, all educated persons, corporate sector and religious institutions must help in child protection and child welfare. A major attitudinal change in civil society is called for. The "child's voice" must be heard by the policymakers!

Attitudes, Traditions, customs, behavior & Practices refers to social norms and traditions that condemn harmful practices and support those that are protective.

Many protective traditions and practices exist, such as strong family values. However, certain stereotypes, attitudes and social norms that violate the rights of the child also persist, such as the use of corporal punishment as a way to discipline children or the social acceptance of child labour. Other harmful practices associated to gender roles, such as child marriage or gender-biased sex selection, are deeply rooted

and manifest a patriarchal and hierarchic attitude towards girls and women, who are still seen by many as a liability or as *parayadhan* (*someone else's wealth* or property of the marital family). A better understanding of those norms and attitudes, are necessary to promote social change in the best interest of the child.¹³

Monitoring, Data collection, Research & Evaluation

Monitoring effective systems of data collection, routine monitoring, research and evaluation are necessary to assess progress in the protection of children. In most countries, as well as in India, there is limited data on child protection. Existing national census and surveys can give data on birth registration, child marriage, child sex ratio etc. However, Data is difficult to find in many forms of violence, such as sexual abuse, exploitation, trafficking, etc., which thrive on secrecy. It is important to have reliable data in order to promote inter-sectoral and regional strategies and best practices in child protection and their evolution over time.

Recommendation

In India, child rights, protection and exploitation (street children, child labour, trafficking etc.) are intimately linked to poor socioeconomic conditions in a large population base. Survival, early child health care, nutrition, education, development and child protection are most crucial child rights. Illiterate parents are ignorant of their children rights. They must be made aware of child rights, must demand and fight to obtain them. Multidisciplinary child professionals should work together and monitor the government efforts in protection of child rights. They should be able to collate available national child health indicators, address key issues and concerns in their region, involve children in research and facilitate their participation in projects and policy development. There is an urgent need to assign responsibility and accountability to Government, elected representatives, policy makers, proximate community and education and empowerment of families. In any case, a child must not suffer, if the parents can't provide care and protect.

References

- UN Convention on the Rights of the Child (with optional protocols). www.unicef.org/crc.
- Committee on the Rights of the Child, 56th session General Comment No. 13 (2011) Article 19: The right of the child to freedom from all forms of violence.
- 3. Child protection: millennium development goals (2010).
- O'Donnell M, Scott D, Stanley F. Child abuse and neglect—is it time for a public health approach? Aust N Z J Public Health. 2008 Aug;32(4):325–330.
- Srivastava RN. Child protection: whose responsibility? CANCL News. 2011;11(1):4–5.
- Ministry of Women and Child Development, Government of India. Study on Child Abuse: India 2007. www.wcd.nic.in/childabuse. pdf.
- Delhi Declaration. http;www.indianpediatrics.net/delhideclaration 2011.pdf.
- 8. Srivastava RN. Child abuse and neglect: Asia Pacific Conference

- and the Delhi Declaration. Indian Pediatr. 2011;49:11-12.
- Seth R, Banerjee SR, Srivastava RN. National Consultation on Urban Poor. CANCL News. 2006;6(2):12–15.
- Seth R, Kotwal A, Ganguly KK. An ethnographic exploration of toluene abusers among street and working children of Delhi, India. Subst Use and Misuse. 2005;40:1659–1679.
- 11. Seth R. Care of the Rural Child. CANCL News. 2008;8(1):9–13.
- Mody RC, Seth R. Progress report of village Bhango: Education and health of rural children. CANCL News. 2008;8(1):23–24.
- 13. Bergua J. UNICEF India. Child Protection Basics. 2011:1–8.
- Srivastava RN. Child health & welfare, panchayats & rural development. CANCL News. 2008;8(1):3–4.
- Third and Fourth Combined periodic report on the Convention on the Rights of the Child 2011. www.wcd.nic.in.
- Aggarwal K, Dalwai S, Galagali P, et al. Recommendations on recognition and response to child abuse and neglect in the Indian setting. Indian Pediatr. 2010;47:493–504.