For more information, please contact:
Aangan Trust
15 Tardeo AC Market, Tardeo,
Mumbai 400 034
Tel: (022) 23525832
Email: aangantrust@rediffmail.com
www.aanganindia.com

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Relationships

It is only natural for a child who is returning home after a reasonable period away, to be apprehensive about how they are going to reintegrate back in to the family. Sometimes, there are children who dream so much of going home that they forget about some of the problems and realities that they might face. It is important to share the joy of leaving, but gently remind the child that there might be awkwardness in the beginning and reassure them that this is natural. Help children identify the family members they believe might be unfriendly or hostile as well as those who will be supportive. Remind them that living at home requires them to live by the rules of the family. When it comes to girls, many of them faced situations of abuse before they were sent to the Home. Gently prepare them with ways to cope when returning to a family where abuse is a possibility, for example, make sure you are not alone with the relative, or, try and confide in a supportive family member. Also help the child identify and maintain people that they can go to for advice and support perhaps forming a peer network, keeping in touch with institutional authorities.

Lead

Before children leave the institution, help children make a little directory of leads that include emergency numbers (childline 1096), vocational centers, educational institutions and hospitals and of course the Home’s own number, to give them the security that they can always be in touch and that there will be someone to help them. This gives children options that can help them make proper, informed proactive decisions once they leave the Home.

Follow up

A follow up system needs to be in place, prior to release, in order to ensure rehabilitation and social integration. Community based organizations are required to monitor children once they are released.

RESULT

When children are given a proper and thorough exit orientation, it completes the rehabilitation and all the good work the staff have put in. It helps the children to think about their future, make informed and appropriate choices, gives them support through the transition period and makes them take small but positive steps towards integrating into society and towards a bright and fulfilling future.
These are a few important areas that must be covered in the exit interaction prior to release:

**Education, training and employment**

Help the child think about their work life and consider the option of higher education or specialized education/skill training that will eventually help them find work. You must motivate the child and give them a sense of confidence and balance by guiding them toward practical, viable options, rather than have them thinking of options that are unrealistic and be disappointed later on. It would help if you have local numbers and addresses of educational institutions or vocational centers that are in the vicinity. There is a list attached at the end of this chapter that you could go through with the child.

**Accommodation**

When a child is leaving an institution, they may be moving into independent or semi-independent living. Help them to make this decision in a discerning manner. For instance, what are the options in terms of work if they return to the village versus remaining in a town? Or, what are the costs of a local hostel? Or, what are the benefits of sharing accommodation with friends? Or the options for government after care facilities. There is a list attached at the end of this chapter that you could go through with the child.

**Government schemes**

Explain to the child that the government has several schemes that they could benefit from and keep a few forms handy to show them how to fill these forms. For example: reservations for schedule caste, education schemes for girl children, vocational training in districts and so on.

**Health**

It is important to remind children that they can access free medical help at the closest government hospital. If the child is returning to a home state, if possible, help them identify hospitals close to home. Most importantly, talk to the child about how to apply for this help so that when the time comes they are not intimidated or hesitant. Please refer to the list of hospitals at the end of the chapter.
Exit level intervention aims at the following goals:

- To give the child background information regarding the new home.
- To provide the child with the names of key personnel so that the child feels that they know whom to approach.
- To talk about rules and to remind the child to respect them.
- To acknowledge the child's fears and apprehensions and reassure them that they can keep in touch with friends and staff through letters.
- To prepare the child for possible problems that they may encounter at the new home like feeling homesick, lonely and isolated. Encourage children to give themselves time to adapt and to make new friends.
- To help children identify opportunities in the new home to study, learn or even just to have fun.
- To give the child an emergency number (maybe of the present institution) in case the child needs to call someone.

Release

As already discussed, support and assistance at the exit stage can help to make this rather confusing and difficult transition smoother for the child.

Exit level work can be done in the course of one to three individual sessions. Sometimes though, the transfer takes place at very short notice but even in these cases, a single session can make a big difference. The idea is to remind the child about decisions and situations in the outside world and to get them to start thinking about them. Rather than give answers to the child, it is more beneficial to help children think of possible problem situations and coping strategies themselves. Try and individualize the interaction and session or work with a small group that has similar backgrounds and experiences.
STEPS TO A BETTER FUTURE

Leaving a Home can sometimes be just as stressful for children as when they first arrive. If the child is being transferred to another institution, then they will have to adapt to a new environment, new people, and new rules. Even if the child is leaving to be independent or is being sent home, it will be a big readjustment to a new life. For all these reasons, children need a proper explanation and need orientation about when and why they are leaving the institution and what to expect upon their release.

Exit level orientations could be for two reasons: (1) Transfer to another institution (2) Release

If the child is being transferred to a different home

According to the JJ Act; a transfer should take place because it is in the best interest of the child. The child needs to know the reason for the transfer or release, which could be:

Further education or special training which is not available in the current Home.

The child is in need of a change of environment or climate based on health grounds, or for medical treatment, which is not available in the current Home.

To bring the child closer to their family or to rehabilitate them.

Any other reason that is for the welfare of the child.

*The Superintendent should make the proposal for transfer of the child with proper justifications. The child may also make a request for transfer to any competent authority.*

Exit level

*Orientation for transfer to a new home*

For exit level orientation sessions, take into account two crucial factors

- The reason why the child is leaving the institution

- Where the child will go next
PREPARING TO LEAVE

THE EXIT...
Note on Child Labor

The Child Labor (Prohibition & Regulation) Act was enacted in 1986. The Act prohibits employment of children in certain specified hazardous occupations and processes and regulates the working conditions in others.

A National Policy on Child Labor was formulated in 1987. The Policy seeks to adopt a gradual and sequential approach with a focus on rehabilitation of children working in hazardous occupations and processes.

Groups of child laborers who are rescued in raids are most often brought to the Observation / Children's Home. These children are then taken to the CWC (Child Welfare Committee) who helps repatriate and rehabilitate them. Those who have nowhere to go are provided shelter in a Children's Home.

Note to the P.O. / Superintendent: Sometimes too many children are brought to the Home at the same time and it is difficult to manage such a large group all of a sudden. However, it is important to be prepared for such situations at least by having some basic amenities ready, like the space they are going to live in, bedding, clothing, toiletries, etc.

Next step: It is imperative to give the child access to other facilities like education (at least non-formal), recreation and vocational and health facilities attached to the Home. Gradually, if the child is going to stay longer, it is important that arrangements be made to admit the child to a formal school, keeping in mind the child's educational background.

When the child leaves the Home: When leaving the Home it will be encouraging and helpful if the child is given a certificate for the educational accomplishments or vocational skills that have been developed in the Home. This is because many people equate the Observation Home a jail, and hence when the child leaves, it is difficult to get a job. It is also recommended that you give the child a letter or certificate explaining the reason for which they were placed in the home so that they have a way of explaining their situation if needed.
**Right to protection (CRC, 1989)**

Cruelty to the child is punishable
Whoever, having the actual charge of, or control over, a juvenile or the child, assaults, abandons, exposes or willfully neglects the juvenile or causes or procures him to be assaulted, abandoned, exposed or neglected or gives the child any intoxicating liquor or narcotic drug or psychotropic substance in a manner likely to cause such juvenile or the child unnecessary mental or physical suffering shall be punishable with imprisonment for a term which may extend to six months, or fine, or with both.

**Right to participation (CRC, 1989)**

In the Child Rights Convention the participatory right of children is ensured. To ensure such rights in the institution the following activities should be adopted:

(i) A committee among children to decide their daily menu within the admissible limits of scales or rates. The committee should coordinate with the kitchen staff in the preparation of the menu; however, the staff in the institution will be responsible for the cooking.

(ii) A Cultural Committee, Campus Maintenance Committee, Sports Committee, Literary Committee etc. should be formed

(iii) Any rehabilitation plan for a child including the option of higher studies must take into consideration the interest of the child.

The tenure of the Diet Committee and Campus Maintenance Committee should three months. The tenure of other Committees should be six months. No child should be a member of more than two Committees.
That there are no vacancies in any of the special homes, which is one of the options available for rehabilitation, so the child may have to stay in the Observation Home for a longer time.

A child's case will be heard by a special Juvenile Justice Board

A child can get released on bail irrespective of the offence with or without surety, except in the following situations

- Release will bring the child in association with a criminal
- Exposes the child to moral/physical dangers
- Defeats the ends of justice

A child has the right to phone calls and letters while in the institution and to meet with family members on a regular basis and as and when needed, like on birthdays, during illnesses, etc.

For working of the JJB please refer to the note in the admission section

Things All Children Should Know.

It is important that all children whether inside or outside institutions know they have rights. A special 'Legal Week' could be set up every few months (to cover new arrivals) so that the children are aware of their rights and they can be asked to present posters or plays about their rights. You could also train a group of peer educators to conduct regular sessions on rights. Posters could be displayed in the Reception Unit with a brief outline of the child's rights.

Right to survival (CRC, 1989)
Food
Clothing
Health and nutrition
Medical facilities
Adequate standard of living (fans, light, ventilation, bedding etc)

Right to development (CRC, 1989)
Education
Health facilities
Vocational training
Recreation
It is important for children to know their rights, whether they are inside or outside an institution. Most children are not aware of things that they are legally entitled to and if they do, it might help them to feel that they can have an active voice in their own case, as is their right.

This section is divided into rights that children need to know that are specific to the institution, as well as rights that children need to know when they are in the outside world. It is also divided between CICL and CNCP children.

First and foremost, all children should know about the JJ Act, that it is a law set up for the care and protection of children, and that they will be dealt with under the provisions of it. They should understand that it was specially developed keeping in mind that children have specific needs and require a certain amount of direction and protection.

**Things for Children In Conflict with the Law to Know:**

The doubts and fears that are uppermost on the child's mind, can be easily clarified and put to rest at the very start. Listed here are some of the basic things about the law that you should tell a child who is in conflict with the law.

- A child cannot be sentenced to death or life imprisonment or committed to an adult prison.
- A child cannot be charged with or tried for an offence with an adult.
- The inquiry into the child's case has to be completed within 4 months. However, sometimes due to practical difficulties, it may take longer. Some of the reasons for the delay could be:
  - Inability to trace the child's parents, or that they live far away and cannot be contacted.
  - That the parents cannot arrange for the bail amount or proof of age, education or residence and other documents.
  - That the child refuses to be honest about giving their case details or their correct home address.
  - That the child has more than one case pending before the Juvenile Board.
  - Overburdened JJB and the increasing number of pending cases.
Institutions that respect child rights must let their children know how to access them.
An example of a scheduled recreation program can be as follows:
The P.O. / Superintendent can identify resource persons for recreational activities such as

- dance
- theatre
- story-telling
- art etc.

These resource persons can be volunteers, NGOs or even older children in the home.
Once they have been identified, a space and time-slot can be allotted to them.
This timetable can be followed up by a biannual 'mela' or an annual competition for each activity.

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**RESULT**

Play is what children do. Through play, they learn about their world. Play allows children the chance to explore their environment, to learn how it works and how they relate to it.

A child can express feelings and emotions through various types of play activities (play, art, stories, etc.) far earlier than they can express them in words. For older children, play may be the outlet through which they convey emotions that they are either unwilling to share verbally. It is therefore extremely important to allow time for the children in the Home to play and encourage it, as children who play together happily, will also live together happily.
"Staff Speak"

Many Mumbai institutions have liaised with local NGOs to conduct art, craft and theatre workshops. If one does not have access to such organizations, then simply giving children the freedom to play for at least two hours everyday would help. Assign days for art, sport, dance, music and so on.

??? Sawal aur Jawab !!!

"But we can't let the children out! They'll run away!"
The objective of providing structured recreation is to give the children space and time that is entirely their own, where their activities are not constantly monitored. Security is always a concern but it can be addressed by providing adequate and appropriate supervision.

"But we don't have the budget for creating such a space!"
A child-friendly space need not be a high-budget exercise. Often, embellishments are of a very low price. Also, the kind of activities being conducted in that space contribute more to the space becoming child-friendly rather than just the aesthetics or look of that space.

"But we don't have budgets to celebrate or play"
There can be simple, economical ways to provide things for play. A few examples:
1. One cricket set
2. A football
3. 2-3 skipping ropes
4. Carom board
5. Balloons and water
6. Small utensils from the kitchen for pretend play

Anything can become a toy like two chairs with a sheet over it can make a lovely tent and keep children busy for hours.

Even for festivals, you need very little to make it interesting for the children. Examples:
7. Small diyas to paint for Diwali. This becomes a craft activity and on the day, they can light the diyas.
8. A play for Dussera
9. Hand painting for Holi (to use color safely)
10. Making kites for Sankrant

It doesn't take a lot to keep children occupied so be creative and have fun!
• Recreation Committee

It is a good idea to appoint a peer organization committee to ensure that there are enough opportunities for children to play, have fun and enjoy themselves. Children will thoroughly enjoy the planning and responsibility. While selecting the committees, ensure that you have 2-3 committees, to handle children of different ages, so that nobody is left out. Rotate these committees regularly and monitor them so that bullying is minimized.

A Recreation Committee can be set up and older children can be put in charge of different teams, for instance, Carom team, Dance team, Cricket Team etc. Games should be organized and mini tournaments can be held with small prizes to encourage the children to play. Non-threatening games should be chosen for this. The games need to be supervised in a subtle manner because the children should not feel that even their play is supervised but you need to be watchful for any aggression, bullying etc.

• Celebrate festivals and special days

The Recreation Committee could create a calendar of festivals that the Home will celebrate, so that the excitement builds. Please note, these celebrations do not necessarily require big budget allocations. Involve the children in decorating the home (rangoli or flowers), putting on a cultural performance that they could plan and organize themselves, and adding a treat to the menu that day. Try to be appropriately secular in choosing festivals. You could also celebrate birthdays through a simple ritual where you announce the names of children and the rest of the institutions sings or claps for them.

• Additional Support

There are a number of NGOs who can help you plan and initiate fun creative recreational activities in your Home. They can be brought in to conduct art, drama and other recreational activities. This is especially useful for new arrivals who may be given extra time for recreation, that is supervised by the staff or teachers. NGO partners / donors / volunteers can also be approached to organize annual outings, picnics etc.
The best and most precious part of childhood is the freedom you have at this age to play. Not only is it fun, but it is also a very important part of social and physical development. When children play, they learn how to deal with others, how to share, team spirit, the joy of companionship and how to live together. Free play as well as structured play are both important for children. Children need to be physically active - to run around the place, explore and discover. Though it may not always be possible to provide vast open spaces, homes can provide a similar experience. For this, it is necessary that a time-slot for recreation be incorporated into the home’s timetable. Playtime, and the happiness that comes from it, is one of the main ways to make an institution feel like a home away from home.

Given below are 5 simple ways to help you plan, improve and maintain recreational activities in your home.

- **Assign a Place**

A separate space for play gives the children a change of environment from the other parts of the home. This space needs to be cheerful and friendly. This does not requires a lot of money or effort just clearing an area, surrounding it with plants if it is outdoors, or arranging it with basic toys will suffice. If it is an indoor area, it might be nice to divide the space according to age, i.e. keeping younger children’s toys in one area with a chat for them to sit on, and older children’s games at another end, so that they all have enough space. Age separation also reduces potential for conflict and bullying.

- **Assign a Time**

A time slot needs to be assigned for play everyday. The slot for recreation can be customized in each institution according to the children’s schedule, for example, some children attend school between 7am-12pm and others between 12:30pm-5pm.

This time slot should allow free play and structured play.

Free play is very important but you should try to ensure that the children are not just hanging around doing nothing during playtime.
RECREATION
STEPS TO SOME
FUN AND GAMES
What about Bullying? With children of varied ages and profiles, there will almost always be incidents of bullying that staff will need to deal with. Based on how severe the bullying is, you could decide on disciplinary action.

Don’t ignore it: Allowing bullying to continue might result in the bullied child being hurt physically or psychologically. It is crucial to let children know in no uncertain terms what is acceptable.

One warning. Give the bully an opportunity to explain their behavior, but expect them to downplay their actions or place the blame on the victim. If you are confident that the child was engaging in bullying, let them know that further incidents will not be tolerated. Tell the child that you and other staff will be monitoring their behavior very closely and disciplinary action, including notifying the CWC/JJB, and action will be taken if another incident occurs. (Or you might decide that the incident is serious enough to warrant disciplinary action rather than just a warning.) After putting the bully on notice, try to elicit their cooperation. Tell the bully you don’t believe they really want to hurt another child and ask for their ideas about resolving the problem. You might find that a sympathetic approach elicits kinder and gentler behavior.

Deter, but do not humiliate or try to embarrass the bully. Insist that the bully return any items they have taken from the victim. You also might want to exclude the bully from places or activities where they have harassed other children, withold privileges, or give them detention. Notify her parents immediately of what she has done and ask that they have a serious talk with their child about her behavior.

Hold a group meeting to discuss bullying. In a child panchayat set up, talk to children about the bullying incident, without mentioning names or personal details. Ask other children what they might do if they see a child being bullied. Encourage them to either take action to stop the bullying, without resorting to violence themselves, or to report it to an adult.

Encourage the child to make friends. Isolated children are the most likely targets for bullies. Help them become involved with their peers by arranging for friendly and accepting students to invite them to join activities. You also might arrange for students who are loners to engage in activities together. Similarly, bullies are also often children who are insecure themselves, or who do not have friends.

Encourage children to be kind to one another. Praise bullies for their kinder, gentler behavior, and all children who act in a kind or sensitive way towards their peers. You also might recognize children who display those behaviors by giving certificates or rewards at public gatherings in the Home.
Penalties are also effective

- **Verbal reprimands and Redirection**: let children know what behaviours are unacceptable and non-negotiable.

- **Apologies and Contracts**: Children must learn to take responsibility for their actions and understand consequences. If there are victims involved as in instances of bullying or physical abuse, this could include making amends to victims and institutional authorities through apology letters, or verbally face to face. Depending on the severity of the wrongdoing, apologies could be made individually or in the presence of other children.

- **Detention** after school/during recreation or TV time.

- **Written reports and assignments**: these may be more beneficial if they are connected in some way to the incident for which they are being penalized.

- **Open Circles and Child Panchayats** to encourage peer mediation and group discussion.

- **Make a note in the child's file** that is later brought up before the CWC or JJB.

- **Community services** and restitution.

- **Time-out**: separate the child from the group to remove positive reinforcement or attention when the child misbehaves.

- **Withholding privileges** is a very effective discipline technique, especially for older children. Find things that the child likes or especially enjoys (playing games, watching television) and then take it away, making it clear that this is a consequence of misbehaving. Children should learn that privileges come with responsibility and they need to be earned. In order to be effective, this technique should be used infrequently. A privilege that is valued by the child, such as watching television, festival celebrations or playing with friends, should be removed.

For serious disciplinary problems like, using or possessing drugs, or keeping weapons or intimidating and extorting younger children, you could use a combination of the above measures.

### RESULT

Children are helped to develop socially acceptable behavior by encouraging and reinforcing acceptable behavior and a constructive staff response to inappropriate behavior.
4) Register complaints:

Let children have a platform to register their complaints. Simply placing a Complaint Box in the campus could go a long way. But do make sure that the entire staff responds appropriately to these complaints by maintaining confidentiality, responding promptly to every genuine complaint and by never punishing a complainant.

5) Be reasonable and fair:

Sanctions cannot be physical or unreasonably harsh. The Model Rules notified by the Ministry of Social Justice and Empowerment in 2001 lays down a principle of No Harm, No Maltreatment (Principles, 4)) which states that "The juvenile or child who is placed in any institution under the said Act or under any placement cushion, shall not be subjected to any harm, abuse, neglect, maltreatment, corporal punishment or solitary confinement."

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**Praise is effective**

**Praise works**: praise responsible, considerate, appropriate behavior with attention, thanks, praise, thumbs-up, recognition and special privileges.

**Tell others**: Tell a staff member or other children, "You should have seen how helpful Raju was during class today."

**Make the child take responsibility**: Tell the child to "take a break" and think about what they could do differently that would work better or be more constructive. Tell them that they can come back (to the group, or activity) as soon as they are ready to try again.

**Talk in private**: try not to humiliate the child in front of others. Move to a private place to talk when there is a serious problem.

**Two-way communication**: Listen as well as talk. Give the child a chance to explain their side.

**Stay calm** and be firm - but never be mean.

**Redirect alternatives and options**: point out the more appropriate options and alternative actions that the child had in the situation. Also, let the child know what their options are now.
It is extremely important for institutional staff to set the correct tone for what is acceptable and appropriate behavior and what is not. There is no one single way to do this and the best examples are probably ones that take the child’s individual needs into account. But broadly, it is important for staff at all levels to agree to actively:

a) Make it a point to reinforce and be positive about acceptable behavior

b) Address unacceptable behavior through appropriate, proportionate, relevant and pre-decided disciplinary action.

Here is a five point check-list to help you start out

1) Form a policy for your institution:

The first thing to do is to hold a staff meeting and talk about some of the most common staff problems. Brainstorm about creative and relevant sanctions and rewards that you feel might be effective. Even if this takes 2-3 meetings, come up with a basic written guideline for your institution and let each staff member have a copy. This will help ensure that disciplinary measures are fair and consistently applied.

2) Be innovative:

The consequences of unacceptable behaviour are likely to be more effective when measures applied are relevant to the incident, reasonable and carried out as close to the incident as possible. For example: in an incident of one child stealing something from another the disciplinary action could require the child to give up something of their own that they value.

3) Individualize measures:

Measures taken should account for the age, understanding and individual needs of the child. For instance, it is natural for adolescents to be rebellious and to question authority to a certain extent. One measure that could be adopted when they are objecting to a rule could be to encourage them to express their opinions, but in an appropriate manner, perhaps through a poster campaign, a play or a debate. Also, be observant about patterns and trends that may be caused by illness, disabilities such as autism, or communication difficulties.
Behavior Management
Session 8: Ways to memorialize the person who died, termination of the group

Opening ritual: (you could add a variation)

Activity:
Narrate a story about how an individual was able to cope with the death of a loved one.

Discussion:
Focus on areas that have already been emphasized in each of the sessions.
Remind the members of activities that they performed that benefitted them.
Encourage them to stay in contact with each other.

Closing ritual:
Use a sentence-completion exercise

"Before I joined this group, I felt _______ and now I feel _______"

followed by your usual closing ritual - breathing, relaxation, shaking hands and saying bye, etc.

[Adapted from "Approaches to Group Work": Using Arts in a Bereavement Group for Children: By Lisa M. Carbone]
Session 6: Access feel and express feelings unique to each child's grief experience

Opening ritual: (you could add a variation)

Play soothing instrumental music in the background.

Each child is given clay, and while listening to the music, they are to think of the person who has died and create whatever they would like.

Sharing: In the sharing circle, encourage them to share whatever they have created. Comment gently on the underlying feelings in their creation.

Closing ritual: Example - breathing, relaxation, shaking hands and saying bye, etc.

Session 7: Ways to memorialize the person who died.

Opening ritual: (you could add a variation)

Make a list of ways people know and remember things.

Provide scissors, lots of magazine pictures, glue.

Ask them to make a collage of memories of that important person who has died.

These may be happy, sad, concrete or abstract memories.

Take plenty of time to discuss termination of the group as the next session would be the last.

Allow any expression of feelings and asking of questions.

Sharing: In the sharing circle, discussing termination may trigger issues of pain and loss the children brought in the first session.

Encourage them to stay in contact even after the group ends.

Closing ritual: Example - breathing, relaxation, shaking hands and saying bye, etc.
Session 4: Understand that the person who died is no longer present and will not return

Opening ritual: (you could add a variation)

The group draws important occasions that are celebrated at home, like birthdays, festivals, holidays, etc. Place all these drawings in the middle of the room together like a calendar of important events this year. Now ask each child to draw the same occasions, but this time, not at home. This is almost a rehearsal for those times when the child is likely to miss that person most intensely.

Sharing: In the sharing circle encourage ideas on how the same occasion might be "celebrated" without that person. Point out similarities in children's stories of loss and normalize the situation, validate their feelings.

What to expect: This is a more sedate session than the last music activity.

Closing ritual: Example- breathing, relaxation, shaking hands and saying bye, etc.

Session 5: Identify and express feelings unique to each child's grief experience

Opening ritual: (you could add a variation)

Choose in advance different pieces of music that evoke different feelings when listened to. Play a selection and model how the body wants to move, encouraging the children to join in. Then ask them to draw the feeling that was evoked through shapes and colors while moving to the music.

Repeat three times with different kinds of music.

Sharing: Ask them to talk about their drawing and how the game made them feel.

Comment gently on the underlying feelings in the drawing

Closing ritual: Example - breathing, relaxation, shaking hands and saying bye, etc.
Session 3: Understand the permanency of the situation

Opening ritual: (you could add a variation)

Activity:
Introduce the exercise, which is to examine feelings in times of change, for example, when school is over to going home, or when summer is over and the monsoon begins.

Now describe how each of these feelings can be expressed in different ways.

Pass a musical instrument around, encouraging the group to "play" how they are feeling. (It could a tambourine, hand bell, or even a steel plate and spoon).

Let them see the difference between light airy happy sounds and heavier discordant disturbed sounds and loud aggressive angry sounds.

Give the children different scenarios and gently lead them to their loss situation.

Like "I liked to play with my important person. Now I can do that anymore because that person died." If they want they can create sounds in groups or pairs. Sometimes it feels safer to do everything together.

Sharing: Let each child talk about their experience and help them to understand that music is a way of expressing feelings anytime we need to.

What to expect: Don't worry if the children's expression of emotions related to the abandonment are lackluster. This is probably the child's first time in identifying and express feelings of loss and so they may find it difficult to share. Also handle the amount of noise in an organized manner by setting ground rules.

Closing ritual: Example- breathing, relaxation, shaking hands and saying bye, etc.
Session 2: Gain support of peers

Opening ritual: (you could add a variation, for example, greeting everyone, breathing etc; preferably keep a common opening ritual for all sessions).

Activity:
Introduce a game about different statements to which they can hold up colored cards signifying

YES

MAYBE

NO

SOMETIMES

Move from non-threatening statements like "I like ice cream," to more sensitive ones:

"I feel sad when nobody visits me on visitors' day."

Or, "It's my own fault that my important person died."

Once this is done ask the group to draw a picture of statements that meant something to them.

Art is a way to symbolically express fears and anxiety such as stress.

At this time it is helpful for the group to feel the counselor's presence and support without it feeling intrusive. Circulate around the room, commenting on the drawings emphasizing the concepts not the drawing quality.

Sharing: Ask them to talk about their drawing and how the game made them feel.

Comment gently on the underlying feelings in the drawing.

Closing ritual: For example, breathing, relaxation, shaking hands and saying bye, etc. (preferably keep a common closing ritual for all sessions)
Design of Sessions:

Opening ritual: The children could decide how they would like to start themselves, as it will increase their sense of belonging. Sharing something each week like a favorite food, movie, etc.

Activity: Creative activity

Sharing: About the creative activity

Closing ritual: Spend a brief moment with each child.

Ask them for a simple statement about something they learned.

Session 1: Introduction

Introduce an opening ritual of your choice.

Play an introduction game, using each child's name frequently so he or she feels welcomed.

Highlight similarities between members and start creating links between children. (Other than the fact that they have both been abandoned).

Give a free art activity and later ask them to share about it.

Review why they have gathered together and tell them it is because they all share a feeling of grief and betrayal because they are no longer with their families.

Set some ground rules and guidelines, encouraging the children to form these themselves.

Tell them the format of the session.

Introduce a closing ritual of your choice.

What to expect: For the first session anxiety and distress levels will be very high and this will manifest in various ways. Be calm and accepting. In the first session children may be shy or feel unworthy of drawing or showing their artwork. Make it clear that sharing is always optional and praise as frequently as possible.
Smith (1991) lists three necessary tasks of resolving grief:

- Understanding that the important person (parent, guardian) is no longer there
- Feeling the feelings associated with this knowledge
- Reinvesting in life.

This group uses the arts as it gives the children a non-threatening way to grieve and so the child’s ability to understand and express feelings grows. In this group children are given symbolic ways to express their feelings using art, music, movement and other non-verbal strategies. Children can access thoughts and feelings that they would otherwise be unaware of or afraid to reveal directly. This occurs in a safe and supportive atmosphere where they can also learn how to manage the feelings that come up.

**Goals of the Group:**

Gain the support of peers.

Reach an understanding of the situation.

Find and express feelings unique to this experience.

Find ways to memorialize a person or a situation.

**Choosing and Planning for the Group:**

The groups can have 7-10 children with up to two years between them. Avoid children with major psychiatric concerns (individual counseling will be more appropriate). If there is one parent who visits, a short interview will help, though you will not necessarily have access to a parent. Discuss the format of the group with other staff who work with the child so that they can continue the processes outside the sessions. It is better to schedule the group and ensure regularity. A quiet private space is a must, for which you may have to find a space in the Home.
Example of Focus Group: Self Esteem

Activity for adolescent group: 'Self Box'

All you need are old boxes and a "junk box" which includes old material like scraps of paper, cloth, shiny sweet wrappers, buttons, stones, pencil shavings, thread or wool. Using available materials the group is asked to decorate the box in a way that represents themselves best. This is followed with a discussion along the lines of:

❖ what the box looks like on the outside and how the world sees us.
❖ what the box looks like on the inside and how we are inside.
❖ are the two different?
❖ how would we like the world to see us?
❖ what does one box have that another box doesn’t?
❖ what are my strengths and weaknesses and how everyone has both.
❖ what makes my box different and me unique?

Example of Support Group: Bereavement

The anger, resentment and grief that a child feels due to a death in the family is often left unexpressed and therefore unresolved. Children are unable to express their feelings because of their immature cognitive or language abilities. If they are adolescents they may be inhibited about showing their pain. Most children living in Homes are at a developmental and cultural disadvantage when it comes to expressing their pain. It is hoped that this group will help the child with complete expression of the pain and move into a place of healing. One thing to remember is that even members of the group who do not speak, but watch quietly also learn and heal. Even when children do not express feelings verbally those emotions will be seen symbolically (Segal, 1984).
Session 6: summarizing and practicing skills acquired.

The purpose of this final session is to tie up any loose ends, review and reflect on the methods presented, and the changes/successes that were seen in the past few weeks and bring closure to the group.

It also involves summing up what has been learned and appreciating the successes that have occurred over the past sessions.

Activities:

Opening: Summary of the 5 sessions and practice by giving different situations role-play - as applicable.

Closure: Making them write their reflections with specific questions such as:

What was your most common conflict response during the first three weeks?
What was your most common conflict response during the last few sessions?
What techniques that we have learned, have you found the most helpful?
How would you describe your success?

Children may then be given an opportunity to share their reflections with the group.

[Adapted from "Approaches to Group Work": Effective Communication for Conflict Situations: By Marci Warnecke]
Session 5:

This session comprises of rehearsing what happens in a trigger situation and also the way to communicate when one is angry.

This involves differentiating between an aggressive and assertive response.

The theme here is effective communication through practice. As the children begin to utilize their new skills in a variety of role-play situations, they will become more comfortable with the idea of using these methods in life outside the group.

Activities:

The next activity is one in which a child volunteers her or his situation for role-play.

The child presents the trigger situation and two members act it out.

The group is then asked to identify possible feelings of the people involved in the conflict and possible alternate explanations or misunderstandings that could have led up to this conflict.

In other words, during the role-play, "freeze frame" the action to discuss how the situation is unfolding.

Ask the children who are observing the role play about the suitability of words and actions.

Draw out possible words, and actions and then continue with the role-play.

The facilitator should guide the group members on how to respond assertively and not aggressively.

Give as many children as possible an opportunity to participate in the actual role-playing roles.
Closure: Progressive muscle relaxation should be practiced.

Quick Relaxation

Loosen your clothing and get comfortable.

Tighten the muscles in your toes. Hold for a count of 10.

Relax and enjoy the sensation of release from tension.

Flex the muscles in your feet. Hold for a count of 10. Relax.

Move slowly up through your body—legs, abdomen, back, neck, face—contracting and relaxing muscles as you go.

Breathe deeply and slowly.

Long-Term Relaxation:

Get in a comfortable position. Minimally tighten your right fist so that you feel only the smallest amount of tension. Hold it at this level. Be sure you continue to breathe… Now let go and relax… Observe the difference in feelings between the right and left arm and fist.

Now minimally tighten your left fist. Hold at this level so that you just feel the tightening… Let go and relax. Let the relaxation spread through the arms and the rest of the body.

Now tighten ever so slightly the different parts of the body—scalp, shoulders, neck and throat, buttocks, feet, calves etc. Hold it and let go and relax.

Now minimally tense every muscle in your body so that you just feel the minimum tension… jaws… eyes… shoulders… arms… chest… back… legs… stomach… Be sure you keep breathing. Feel the minimum tension in every part… Let your whole body relax. Feel a wave of calmness as you stop tensing.

Now, with your eyes closed, take a deep breath and hold it. Note all the minimum tensions… Exhale and feel the relaxation and calmness developing… Note the feeling of heaviness.
Activity 2:

The children may then be introduced to 'active listening' as a method of gathering the necessary facts in a situation.

Active listening skills include:

Paying attention to both verbal and non-verbal communication (body language).

Clarifying and asking questions to get a clear picture and showing interest. ("You mentioned your brother------is he older or younger than you?")

Rephrasing and reflecting statements back to the speaker and checking on the feelings of the speaker ("it sounds like you felt pretty frustrated when your brother wouldn't turn his music down")

Each partner should be given an opportunity to be both the speaker and the listener, and each individual session should last around 5 minutes.

This practice should be done several times with different topics, each followed by a brief discussion that should cover:

What the children like about active listening?

What was the most difficult thing to do and sharing with the group one interesting piece of information learned about the partner through the use of the technique?

Following this practice activity, ask the children to think of ways in which these active listening techniques could be helpful in a real-life conflict situation and to understand that when they feel angry, it would be most helpful to use active listening.
Closure: After evaluation of the anger responses, introduce a breathing relaxation technique. Have each child think of a setting in which they can feel themselves beginning to get angry. Encourage them to think about what they are feeling and the signs that show that they are starting to get angry (early warning signs). Then ask members to close their eyes and take a slow breath in through the nose, feeling the chest and stomach rise with the breath. Children should hold the breath for one or two seconds and then slowly release it through their mouths. Ask them to take four more breaths in a similar manner. This gives the children a chance to reflect on what they have learned.

Session 4: awareness of the signs of any conflict situation combined with the acquisition and practice of new skills

Purpose: The purpose of session 4 is to help children become aware of the range of reasons for conflict situations and the importance of exploring these before reacting to assumptions. In addition, the children are introduced to additional communication tools with an opportunity to practice within the safety of the group setting.

Activities:

Opening: Present a hypothetical situation and discuss it with the children in terms of the following aspects. List it down on a chart paper so that they can all see it.

What is the problem?

What are the possible explanations for the situation? (List at least 3)

What are the alternatives for responding? (List as many as possible)

What are the consequences of each alternative?

This activity may be done a second time using a situation suggested by a member. Discussion and sharing of ideas should occur after each situation. Children should be guided to recognize that for each situation, multiple explanations may make perfect sense and until all the facts are gathered, it is difficult to thoroughly assess the situation.
Session 3: Continued awareness combined with gaining of skills.

The purpose of this session is to get the children to predict a cycle of conflict. Members also begin to identify many possible conflict responses and resulting consequences. Finally, children begin to identify ways in which to deal with stressful situations.

- **Activities:**

  **Opening:** Recap of the previous session. This is followed by:

  ♦ Children should be asked to recall the characteristics of each style and be encouraged to give examples - preferably personal.

  ♦ For each style, list the pros and cons of the style and the related behaviour.

  ♦ Then ask children to make an anger awareness cycle, with a heading for each stage written at this point.

  ♦ Give brief descriptions or examples of each stage, for example, early warning stage, and then ask the children to recall a situation from the past week in which they felt angry.

  ♦ On their anger awareness cycle, members are given time to apply their particular situation to the cycle, listing specific characteristics of the anger situation under each phase.

  For example, under the early warning signs phase, a child might write face got hot, jaw got tight, hands were sweaty.

  ♦ Next, ask for volunteers from the group to share their situation by writing responses on the blackboard for all to see. This is not a time for judgment or evaluation of the initial responses.

  ♦ Following the anger awareness cycle activity, ask the children to think of as many different anger responses as they can think off (for example, hit the person, walk away).

  ♦ There is no evaluation of responses at this point. These responses should be written on the blackboard.

  ♦ Once the children have come up with a list of anger responses, they should be asked to think of the pros and cons of each way.

  ♦ Discuss which responses seem to have the most positive and least negative consequences.
Session 2

Identification of personal conflict responses and those around you

The purpose of this session is for the children to become aware of their common behaviours.

The ability of the children to feel safe is extremely important, as this session requires sharing personal experiences.

The facilitator should let the children know that conflict is a part of everyday life but different responses can result in different consequences.

This would indicate that everyone experiences conflict and may decrease a certain sense of resistance and/or defensiveness on the part of the group members.

- Activities:

  Opening:
  Get the children to design an "anger map" in which influential people in their lives (parents/guardians, siblings, friends and so on) are drawn as circles surrounding a "self-circle".

  Within each circle, the child describes how each of the people on the anger map reacts when feeling angry.

  They should then share their anger maps with the group and describe any similarities they observe, their own personal anger behaviour and those of other people on their anger map.

  Closure: The session should end with a check out, during which the children can think about their conflict style and its origin and influences. The facilitator should let children discuss the possible positive and negative consequences of each style.
• **Activity 2:**

The discussion from the first activity may lead naturally into a discussion of ground rules. If not, this would be an appropriate time to discuss ground rules and confidentiality issues. With a less mature/insightful group, you could read and discuss the ground rules. Then ask for additional suggestions from group members, to be agreed upon by the group.

The initial list may include the following rules:

- Only positive or encouraging statements,
- Ask for permission to give feedback before giving it
- Listen openly and quietly while others speak

• **Activity 3:**

The third activity in this first session would be a 'check-in' where each group member introduces themself, and describes how they are feeling at the time and tells the group what they are hoping to gain from this group experience.

Following the check-in time, introduce the concept of personal goal setting.

Explain that the goals should be challenging, yet attainable, making several short-term goals to lead up to the long-term goal.

The goals should be stated positively rather than negatively (I will-, I will not--)

Children are asked to keep a track of daily conflict. They should report honestly, without the fear of reprisal, to the facilitator each time they are faced with a conflict situation, what words/actions triggered the conflict, any accompanying physical anger signs (face heating up, sweaty palms, locked jaws, and so on), how they responded to the situations and the results of the confrontation.

**Closure:** Finally, a check out time should conclude the group. Members may be asked to describe how they feel about being involved in this group and also encouraged to share any observations, hopes, or concerns they may have regarding the group.
Outline for 6 group sessions:

Session 1

This is to establish the ground rules, build rapport with group members and make them feel comfortable.

The purpose of session 1 is for group members to introduce themselves to the group, become comfortable with one another and to understand how the group will be run. The children begin to develop relationships with one another, learn what the role of the facilitator is, and begin to find their voice and personal role in the group. The facilitator is encouraged to participate in activities and demonstrate appropriate ways of communicating with others.

In addition, the first session is an appropriate time to implement ground rules for the group.

- **Activities:**

  * **Opening:** The first activity is an icebreaker, which will help to get everyone involved together to attain a goal. It may also help to ease any tension the children may be feeling as they enter this new environment in a positive, healthy way. This can include active games with the boys, and coloring with the girls.

  * After the activity, have a brief discussion asking:

    ♦ What was most difficult about this game?

    ♦ What techniques did you discover to make the task easier?

    ♦ Was the task easier with more people, or with only two?

    ♦ What other things did you observe while playing the game?
**Session before starting the groups:**

Conduct individual meetings so that each group member can be told about the group goals, what to expect from the group and be informed about the importance of confidentiality. This means that they understand that everything they say or do will stay within the group, but also that they must respect the privacy of other children in the group.

General description of the group and a brief discussion on why the member has been asked, or has volunteered, to participate.

Anything specific that the member might want to accomplish.

Group leader expectations (for example, attendance, participation and confidentiality).

The counselor must establish a contract with each group member.

Number of sessions recommended: 6.

Duration: 45-60 mins. each.
example of a focus group

“When I get angry”

Objectives - why is this group required?

To help children recognize conflict as a normal part of life.

To help children visualize conflict as a cycle that has many alternatives at every stage.

To help children identify their conflict responses, the origins of the conflict and the origin of these responses.

To encourage children to take personal responsibility for their behaviour.

To provide children with a different way of communicating effectively and dealing with conflict.

To provide children with opportunities to practice the various methods they learn in a safe and controlled environment.

To provide support for children as they begin to try their newly acquired skills in daily life.

Choosing the members of a group:

Children who are at a similar developmental stage.

Group size 10-12. Within a larger group, a counselor may encounter the need to take on a disciplinarian’s role, which would defeat the feeling of openness and rapport building (Orton, 1996).

A larger group also means that each child has less time to speak.

The group should preferably be of the same gender.

It can be helpful to include peers who have successfully dealt with issues the group might explore or who can serve as positive role models (*Gibson, Mitchell & Basile, 1993).
"Where do we get psychologists and psychiatrists from?"

You can get them from local private hospitals or government hospitals. Tie-up with them to provide interns or doctors to take on only special cases. Also, contact colleges in your area and ask psychology and social work students to do special projects during which they will handle these cases.

"My staff does not have the requisite material or expertise to conduct these sessions."

For the intake sessions the staff does not need special skills. For future sessions, casework as well as group works the P.O./CWO or whoever will conduct these sessions can be trained. NGOs will also furnish you with the required modules for doing these sessions as well as conducting some sessions themselves.

"I simply don't have the time for such sessions."

You can maintain a schedule where the date, venue, theme and group/case are mentioned. For example if a child is newly admitted then that child must have at least two individual sessions in the first week. So make note of the date and time when you would like to meet that child and also the theme of your meeting. Then, if you feel the child has managed to adjust within a week, you can space out the subsequent sessions in a manner that ensures that you meet the child at least once every week. Peer groups and NGOs are very effective in this area and the group sessions can be conducted by them.

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**RESULT**

No rehabilitation process is complete without psychological intervention. Most of the children coming to institutions have seen a lot too early, and only a concerted psychological intervention can help them to overcome the trauma they have experienced in the past. It also prepares children for the world outside and makes the re-integration process easier. A well-adjusted child can be a role model to others and something for your Home to be proud of.
Documentation

Lastly, it is very important that all these sessions are documented regularly. Detailed analysis is not required but notes on how the session was conducted, methods used, individual remarks, group progress would be useful. These must be given to the P.O. / CWO so that they can keep track of the sessions and note significant occurrences during these sessions (for instance a child's reaction and response to certain things) as well as use this information in their own individual sessions and when making future plans for the child.

In the Nanapeth Girls home in Pune, the children told the Aangan Team (AT) that their superintendent was the best. We asked them why. This is what they told us:

"Girls: Hamari madam bahut achchi hai.
AT: Kyon. Unme aisi kya special baat hai.
Girls: Hum jab pehle din yahan aaye the, bahut deare hua the.
Humein police road se uthakar layi thi. Madam ne hum se alag alag karke aadhe ghante baat kiya. Humein kaha ki darne ki koi baat nahin.
AT: Achcha aur kya baat kiya tumse?
Girls: Unhone humein bataya ki humein yahan kyon laya gaya hai or hum kab tak rahenge. Phir wo humse hafte mein do baar milti thi. Ab mujhe yahan 1 saal hone ko aaya. Phir bhi wo humse har hafte ek baar alag se milti hai.
AT: Matlab, woh tumse akele mein office mein bulakar baat karte hain?
Girls: Haan!
AT: Kya kehte hain tumse?
Girls: Woh humein puchte hai ki hamein kuch andar takleef to nahin.
Woh hamare mummy aur papa se bhi baat karte hain.
AT: Kya bolte hain unse?
Girls: School mein padhai kaisi chal rahi hai, phalana phalana!
AT: Jo ladkiyan chod ke jaati hai, unse kya bolte hai?
Girls: Unki who kabhi kabhi shaadi karvate hain, aur unke nokri pe lagate hain...."
For individuals

Individual meetings give the children a chance to talk one-on-one to an adult in authority. It also makes them feel that they are important enough for someone to sit and listen to them and increases their self-esteem and self worth. P.O.s / CWOs should conduct these sessions based on the feedback they receive from the groups.

Research shows that listening is a very critical ingredient in the therapeutic process. In a study published in Teachermagazine, Coles found that children decide what is right and wrong largely by listening to one another and watching what goes on around them. Robert Coles, American author, developmental psychologist, and professor at Harvard University advises in his book, *The Call of Stories: Teaching and the Moral Imagination* : “The people who come to see us bring us their stories. They hope they tell them well enough so that we understand the truth of their lives. They hope we know how to interpret their stories correctly. We have to remember that what we hear is their story.” To listen deeply was, much more important than "getting a fix" on the patient or deciding on a "therapeutic agenda."

It is crucial to schedule these individual sessions with children, and to avoid canceling them, as the child feels let down and disappointed, which ends up undoing a lot of the work that has gone in to getting the child into a positive frame of mind. A simple rotation chart can help organize things so that the P.O./CWO finds the time to talk to children individually.

Counseling sessions can be set up for the children. These must be held individually as well as in groups. These sessions must focus on past trauma, adapting to the Home, as well as on the skills that children will require for the future. Through individual sessions and other feedback, the P.O./CWO may also be aware of other recurring themes and should keep a watch out for them. These could be:

- Abandonment
- Running away
- Domestic violence
- Maladaptive behaviour such as aggression, bed-wetting etc.
- Depression
- Withdrawal

There will be certain age related issues that naturally arise at different time in each child's life, such as teenagers being rebellious, and the group's facilitators and the P.O./CWO should take this in to account when dealing with the children.
Awareness of the world groups

Sometimes children in the Home can be very isolated because there are limited opportunities to leave the Home and very little contact with the rest of the world. There is a simple ways to stimulate children's interest in the world. For instance, every morning at assembly time, a few minutes can be dedicated to reading newspaper headlines. Or, have a peer lead a newspaper or current affairs club to encourage more in-depth discussion. Most institutions have televisions and the children can have a short time when they watch the news.

You could also have a monthly theme around which an activity can be organized. Peer leaders should be encouraged to play a role in planning these. For example, before an upcoming festival, children could dramatize the mythology or story behind the festival; or you could talk about different places around the world (maybe through a film); or something as basic as using your local environment to conduct a nature walk, pointing out trees, plants and wildlife.

Awareness of the world group sessions can be fun. Other ideas include: an evening session called "Life at Night" where children can be shown the night sky, and you can talk about night animals, solar system stories about the sun, moon, stars etc. A new theme could be covered every month with different activities built around it using art, craft, theatre etc. These sessions could also involve how to behave in the outside world with important themes such as civic awareness and the responsibilities of citizenship.

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**Example**

Awareness of World Group: "These are my Trees In Balkalyan Nagri, Mumbai."

11 adolescent girls role-played different tree creatures - a parrot, a squirrel, eggs-in a nest, a butterfly and a kite trapped in a tree.

As part of the role-play, three "builders" announced that they were going to cut the trees and build a shopping mall in the space.

Each tree creature had to defend its tree and persuade the builders not to go ahead with their mall project.

The exercise and presentation helped children to think about their trees and their environment, communicate effectively and negotiate with the builders.
There are a number of aids that can be used to broach and talk about different psychological and emotional subjects. For example, the group can watch a film, after which the facilitator must improvise and guide a discussion that could start from issues that arise in the film and which are relevant to the children in the group. Other ideas would be to divide the children into smaller groups and engage in poster campaigns, art, drama, debate sessions to make it more interactive, participative and to put the child in a frame of mind where they can speak freely. **Also do use available props and characters from the institution itself as seen in example 2: a session on 'Self Esteem'.** For an in-depth example of a focused group, please refer to 'When I get Angry' at the end of the chapter.

**Support groups**

Support groups are a little different than focus groups, in these groups, the **issue** becomes the reason for the group coming together. The themes will be extremely sensitive issues, like for instance bereavement, i.e. dealing with the loss of a loved one. The P.O. / CWO can form these groups based on his or her individual sessions and can then brief the facilitator about the specific children and the issues involved. Children need to be gently encouraged to attend these sessions. These groups prove to be extremely beneficial as it makes the children who are involved feel less alone and isolated, gives them courage and confidence and makes them realize that there are others like them and also people who will listen and help. Again, the facilitator needs to use creative, interactive methods like theatre, dance and music to get the discussion started and help the children be candid and frank and talk about their feelings. The age range should not vary too greatly and again, confidentiality must be maintained. Support groups could be planned across 6-8 sessions and we suggest the P.O. / CWO starts the group only when there is a definite plan for the design of the group. At the back of the manual you will find an example of a bereavement group that has worked beautifully with young children in a Mumbai home. The use of art and creative work is included and is extremely therapeutic and healing. Please refer to the example of support group bereavement at the end of the chapter.
Assessment and schedule for sessions:
The assessment process must begin with the intake sheet session soon after the child is first admitted. In this session the P.O. / CWO should assess whether the child needs professional psychological help. The P.O. / CWO can make notes in the case file about the child’s behaviour and mannerisms during this session, which may be an indicator of the child’s psychological health, and then follow up in subsequent sessions as required.

The entry-level communication can also be used for these sessions and children must be given information during this session about where they are, why they are here, for how long, and what facilities will be made available to them during their stay. Many children have been brought in after police raids, so they end up mistaking themselves to be brought to a ‘jail’ to be ‘punished’. CICL children in Observation Homes can be told a little bit about their case, and the legal proceedings that are to follow. You must reassure them that they are presumed to be innocent until it is proven otherwise, and so they are not criminals.

Group work:
Group work is often a breakthrough area as children find other children like themselves, who are dealing with similar issues, and so do not feel isolated and alone. Group work needs to be encouraged and can be led by peer groups and volunteer organizations with the support of the P.O. / CWO. The groups can be divided along the following lines:

Focus groups
Focus groups can be formed according to age and gender. Themes to be discussed can be determined by the group itself when they meet. Recurring themes and issues of personality development can be addressed and conducted in a fun manner. These could include self-esteem enhancement (especially for younger children), anger management, communication skills, and legal rights.

Confidentiality must be maintained and emphasized to the group, i.e. whatever happens or is talked about in the group, must stay in the group. The facilitator must use these sessions to determine which children need individual attention. These needs should then be reported back to the P.O. / CWO for follow up during scheduled meetings with the children.
Most children who come to the Home have experienced trauma of some kind or other whether it was torture at the hands of their employer (child laborers), or their abusive parents/relatives, or from the stress of living alone on the streets. It is natural for them to feel scared, depressed and confused about why they have been brought to the Home. Many of them think that it is because they have done something wrong, which is often not the case, and these fears need to be dispelled quickly.

Psychological and social rehabilitation sounds like a daunting task. Often it is, but this is the very reason that psychological/emotional issues need to be recognized, diagnosed and handled with care. What does psycho-social rehabilitation really require? People think that you need to be highly qualified and experienced to handle these cases. While it is true that a psychologist or psychiatrist does need to be involved for complete rehabilitation, often, children just want someone to listen to them. This can be done with patience and a little kindness by anyone in the Home.

There are times when the Home is busy, but by using the sample daily schedules provided earlier on in the manual, and good organization, it is possible to always have someone who is available to lend the child an ear. Children by nature, are not deceptive or devious and it is quite easy for the staff in the Home to detect a child who is afraid or intimidated, especially since they work with children all the time. All it takes is to talk to a child who seems anxious or upset and help them find ways of dealing with issues that they may have.

Any progress in education or vocational training is incomplete without psychological intervention. Psycho-social rehabilitation is the most important pre-requisite for the overall personality development of the child and also to simply help the child adjust to his surroundings and make him feel at home. That said, all homes must provide a more formalized system of counseling with the help of trained professionals, as mandated by the JJ Act. You can seek help from local hospitals and NGOs to find psychiatrists and counselors who will come to the home on a regular basis.

The following are some ideas and tips to help you plan, improve and maintain activities related to psycho-social rehabilitation in your home.
Sharing and caring

PSYCHO-SOCIAL REHABILITATION
Advantages of a study group

1. A deeper understanding of the study material.

2. Sharing talents: each person brings different strengths to a study group such as organizational skills, the ability to stick to a task, etc.

3. Support system: members of study groups often have common goals such as good marks. The work each person does in a group affects the other members and results in making the group members supportive of each other. Study groups also help members learn from one another.

4. Socializing: it is more fun to study in a group and this results in greater time spent studying and enjoying the work.

5. Study groups enable a child to use different learning styles.
9. Responsibilities of the peer leader:
Ensuring that both homework and revision are completed as scheduled in each session.
Using creative forms of revision such as quizzes, spot tests, debate, role-play and posters.
Noting dates and times of examinations
To decide in advance, which student will teach which topics in the next session.

10. Incentives:
The moderator can facilitate this process by determining the incentive system with the group, for example, star charts, token economy, and reverse token economy. A chart of progress can be maintained by the facilitator, teachers and peer leaders, based on which the selected incentive system can be followed. This chart can have categories such as grades obtained, attendance, initiative shown, completion of homework, behaviour during the session etc.

11. Group leader:
Assign one leader per group on a rotation basis thereby ensuring that all members of the group will then get to be monitor an equal number of times. This will facilitate equality, interest, participation and responsibility towards the group. The monitor for each session will be in charge of attendance and will steer the group back to the original topic in case there is a diversion. The monitor can also schedule breaks in consultation with the peer leader.

12. Each student will get a turn to teach a particular subject in order to help other group members, reinforce their own knowledge and enhance confidence. At the end of each week, the peer leaders can designate members and content of study for the next week. This will help the children be prepared for what to expect. Knowing what is to be achieved helps the group stay focused and to manage time. At the start of each meeting, the monitor should state the session goals, e.g. today we will revise chapter 7 and discuss the sums, and so on.

13. Maintain a fixed schedule with regard to subjects to be studied.
Each session can be divided into two parts homework and revision. This schedule may be altered for exam time, tests etc.
How to form a study group

1. **Note the children’s daily schedule** and discuss with the children, teachers and the staff when the group should meet to do their homework. Meet the NGOs partnering in education with the Home, to understand their contribution and systems as well.

2. **Meet the school teachers** and obtain lists of students in every class, and an overall performance review (weak, average, bright students) of each student. Place 2-3 bright students at the center of each group and the rest of the group will work around them.

3. **Assign a time and place for each group**

4. **Conduct groups in a place free from distractions and with sufficient space.**

5. **Form groups of 5-8 per class.** In a larger group, it is easy for somebody to be left out and smaller groups might go off the track. Children who do not wish to be a part of the study group should not be forced to, as some children may choose to or be able to study better when alone.

6. **Each session should last 1-2 hours,** depending on the age of the group. If possible, try to meet on the same day at the same time each week.

7. **Peer leaders:** Along with the teachers and/or caretakers, identify a minimum of two peer leaders for each group. This way, the peer leaders have each other to consult in times of a crisis or confusion and under less pressure. The peer leaders selected should be enthusiastic and group-oriented and with good leadership qualities, in addition to being good at academics.

8. **Orientation of peers leaders:** The facilitator should conduct an orientation session with the children selected as peer leaders. The peer leaders need to be informed about:

   - The objectives of the group
   - Their task
   - Why they have been selected for this responsibility
"But I don't have teachers to conduct remedial classes."
Volunteers as well as non-governmental organizations can be roped in with pre-determined content and techniques.

"But how useful will a study group be?"
While study groups will be initiated and continued by the children themselves they will also be monitored by the teacher and school teachers as part of their follow-up into each child's education. Study groups make the children responsible, and learning is also more enjoyable when it is done in a group.

"We don't have the budget for vocational training!"
Governmental as well as voluntary organizations provide free or low-cost income generating, market-friendly courses, for example, Jan Shikshan Sanstha. The fee is reduced further provided a sufficient number of children apply for the course.

"Our institution is located in a remote area. How do we get access to market-friendly vocational courses?"
Even if your Home is not located in a city or a town, there will still be factories and local companies in the nearby areas. You could network with them and arrange for job placements instead of vocational courses.

---

**RESULT**

If you give the children a good education, you give them a new lease on life. It is a chance for them to be successful, gain independence, be confident and maximize their potential. It can change a child's way of thinking, open up new horizons and expand their world. It is therefore very important that enough emphasis is laid on education, follow-ups and progress of the children in the Home. Well educated children will be a badge of honour for your Home.
SCHEME OF ASSISTANCE TO VOLUNTARY AGENCIES FOR EARLY CHILDHOOD EDUCATION FOR 3-6 AGE GROUP CHILDREN UNDER THE PROGRAMME OF UNIVERSALISATION OF ELEMENTARY EDUCATION (REVISED, EFFECTIVE FROM FEBRUARY, 1983)

It envisages that under the Sixth Plan a significant start will be made for the development of early childhood education for first generation learning families in backward areas. First, programs of training of ECE teachers and early childhood education centers as adjuncts of primary/middle schools will be started under the State Sector of Plan. Secondly, UNICEF has agreed to extend assistance for the development of ECE programs in 11 states during the 1981-83 period of Master Plan of Operation. Significant inputs have been offered by UNICEF on: workshop/seminars for developing & producing training materials, orienting administrative & supervisory personnel, providing short -term training of early childhood educators and supplying play materials and equipment of a selected number of ECE centers in each of the 11 States.

"Staff Speak"

"One of the main problems that short stay homes face is trying to bring together children speaking diverse languages in the same class. This is a genuine and difficult problem." The Home will see that children from outside the State are transferred back to their home state. If they are resident in the State but still speak their own language, in long term Homes, there are a few things you could do:

- Use non-formal, mainly visual education.
- Use creative techniques such as memory games, flash cards, to teach.
- Try and partner the child with another who speak the same language who could help.
7. Accessing government schemes for education

Balika Samriddhi Yojana

The objectives of the Balika Samriddhi Yojana (BSY) set up by the Central Government are:
To change negative family and community attitudes towards the girl child at birth and towards her
to mother.
To improve enrolment and retention of girl children in schools.
To raise the age at marriage of girls.
To assist the girl to undertake income generating activities.
The Balika Samriddhi Yojana will cover both rural and urban areas in all districts in India.

Target Group: The Balika Samriddhi Yojana will cover girl children in families below the poverty line
(BPL) as defined by the Government of India, in rural and urban areas, who are born on or after 15
August, 1997. Benefits under BSY will be restricted to two girl children in each household born on or
after 15.8.1997 irrespective of the total number of children in the household.

Components of the Balika Samriddhi Yojana

The girl children eligible under BSY will be entitled to the following benefits:
1. A post-birth grant amount of Rs.500/-.
2. When the girl child born on or after 15/8/1997 and covered under BSY starts attending school, she
will become entitled to annual scholarships (as described below) for each successfully completed year
of schooling: -

<table>
<thead>
<tr>
<th>CLASS</th>
<th>AMOUNT OF ANNUAL SCHOLARSHIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>I-III</td>
<td>Rs.300/- per annum for each class</td>
</tr>
<tr>
<td>IV</td>
<td>Rs.500/- per annum</td>
</tr>
<tr>
<td>V</td>
<td>Rs.600/- per annum</td>
</tr>
<tr>
<td>VI-VII</td>
<td>Rs.700/- per annum for each class</td>
</tr>
<tr>
<td>VIIi</td>
<td>Rs.800/- per annum</td>
</tr>
<tr>
<td>IX X</td>
<td>Rs.1,000/- per annum for each class</td>
</tr>
</tbody>
</table>
The Government Senior and Junior Homes in Ulhasnagar, Thane, have made an effort to get computers donated by other NGOs which are accessible to the children. The children are computer literate as they can practice in the institution what they learn in their school.

6. Vocational training and income generation

Vocational training and income generation training is perhaps the most useful education a Home can give a child. If there are eligible children in the Home, voluntary or government organizations can be asked to provide vocational training. Aptitude tests may show broad areas of interest and skill and can be conducted before training. This will help in assessing what kind of training should be given to a particular child.

It is important to differentiate between vocational training and income generation. The courses introduced need to be separate from those offered by the ITI as well as market-friendly. For example, mobile repair, refrigerator and air conditioner repair, introduction to computers etc. Income generation requires collaborating with private and government organizations for job placements along with compulsory follow-up visits.

The institution in Yerwada, Pune has appropriate vocational courses, which the children can choose from, according to their areas of interest. The courses are held within the institutional campus and therefore accessible to the children as well.
3. Education for Children in Conflict with Law (CICL)

It is difficult to organize education for children in conflict with law. Usually the length of their stay is not known and literacy levels and language vary. More importantly, they are tense and preoccupied about their case and not motivated to engage in any of the home’s activities—especially education. As a result, the teacher will end up focusing on CNCP and leave out CICL altogether! However, it is important to remember that the CICL youth are entitled to an education too. This is not only required by the JJ Act, but will go a long way in the rehabilitation process. We suggest a simple routine for CICL that includes a couple of hours of non-formal education every morning. The teacher could assess levels of education, form small groups and set work. In some districts CICL groups are very small, and the teacher can give them individual attention. Also peers could be used effectively to help each other. The study group format could be used. To motivate and engage this population you could use functional literacy to help them learn about accounting and budgets or conversational English.

4. Remedial education and study groups

It is necessary that teachers schedule time to provide remedial education to students who might not be at the level that they should be, in order to enhance their academic performance. If this is not done, the child will constantly be behind his or her potential and may feel frustrated and disinterested in studying. Older, responsible students can form study groups for these children, where they encourage the children to study, and which they monitor themselves. The P.O./ Superintendent and the school’s teachers must conduct follow-up tasks for these groups. A guide to forming study groups is provided below. A separate time should be scheduled for homework as well so that the children are responsible for completing the work, and so that it is done in a structured way, not last minute or without concentration.

5. Enhancing the institution’s educational services

Everyone likes to go to a nice place to study. It is motivating and inspiring. So all Homes must make every effort to designate and design a child friendly study space. Books, toys, even basic ones, can be kept at hand for the children to use.

It is preferred that female teachers and volunteers be assigned to girls in order to minimize possibilities of molestation, abuse etc. and immediate cognizance should be taken of any complaint in this regard.
What is the objective of education? The dictionary defines education as a system to train mentally and morally for self-reliance. The role of the Home therefore is to choose appropriate education for the children that will benefit them and give them the independence and confidence to be self-reliant and earn a living. Educational needs must be identified and services provided to meet them and to promote the child’s financial self-reliance and personal development.

Given below is a simple 7-point checklist to help you plan, improve and maintain educational standards in your home.

1. Appointment of teachers

Teachers need to be appointed in keeping with regulations (J.J. ACT). It is also important that the teachers in the Home have a detailed list and history of the various groups of students they need to attend to. Teachers play many roles in the Home and are part of other committees so their time must be scheduled so that all tasks, especially the primary teaching task, are completed. (Please refer to Roles and Responsibilities Chart at the start). There are several voluntary organizations working in the education sector and they can be tapped to both train teachers as well as tutor children in basic literacy.

2. Education for Children in Need of Care and Protection (CNCP)

Education is vital for an individual’s development. As a result, it is mandatory to ensure that all CNCP receive education, whether inside or outside the institution (J.J. ACT). It is also important that the P.O. / Superintendent conducts follow-up tasks along with the teachers, within and outside the Home, to keep track of individual progress of the children.

Very often, children may not be ready to be admitted to school in the age-appropriate category. There should be catch-up or preparatory classes to get this children ready for school by using non-formal education methods. Again, dividing the children by age into groups would get best results. For children who do go to school, the teachers in the Home should have a monitoring and follow up system (with the school or the child) to keep a check on the child’s performance and difficulties and to plan remedial work or study groups. The teacher from the Home should visit the school once a term to discuss all the children with the schoolteacher and then take any action that is required.
From literacy to self-reliance in a few simple steps.

EDUCATION & VOCATIONAL TRAINING
Most importantly, institutions should provide a variety of food, trying new recipes from their assigned rations and experimenting with new menus. This will keep children interested in food and will result in less stress and other issues during mealtimes.

**Suggestions:**
For every 100 kg of wheat, jawar and bajra, the cleaned and pounded net weight should be considered 7 kg less.
For every 100 kg of rice, lentils pulses, and ragi, the cleaned and pounded net weight should be considered 2 kg less.
For leafy vegetable it should be 25% less.
Any requirements outside of these guidelines need to be explained in the Food register.
For sick inmates a diet as prescribed by the doctor should be provided.
To celebrate national events (15th Aug, 26th Jan, etc.) and other religious festivals (any 10 that the institution selects) the institution should provide 100 gm sweets per child per festival.
Food distribution committees should be made on a monthly rotation basis.

**Nutrition Program for Adolescent Girls (NPAG)**

To address the problem of under-nutrition among adolescent girls and pregnant women and lactating mothers, the Planning Commission, in the year 2002-03, launched the Nutrition Program for Adolescent Girls (NPAG). The funds are given as 100% grant to States/UTs so that they can provide food grains through the Public Distribution System free of cost to the families of identified undernourished persons. The success of the intervention is dependent on effective linkages with the Public Distribution System (PDS).

**Target Group:** Adolescent girls (11-19 years) (weight < 35 Kg).

**Services:**
(i) 6 kg of free food-grains (wheat/rice/maize based on habitual consumption pattern of the state) per month per beneficiary.
(ii) Nutrition and health education to the beneficiaries and their families.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Particulars</th>
<th>7 to 10 age</th>
<th>11 to 20 age</th>
<th>What is expected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Wheat, Jawar, Bajri, Rice, Ragi,</td>
<td>300 gm</td>
<td>450 gm</td>
<td>Gruel / khichadi should be provided in keeping with the children's taste. Rice and chapatti should also be given in keeping with their preference.</td>
</tr>
<tr>
<td>2</td>
<td>Lentils, Pulses</td>
<td>70 gm</td>
<td>80 gm</td>
<td>Lentils and pulses should be in the same proportion. Pulses should be given at breakfast except when semolina pounded rice, sago are given for breakfast.</td>
</tr>
<tr>
<td>3</td>
<td>Leafy vegetable, vegetable, tuber</td>
<td>150gm</td>
<td>200gm</td>
<td>For lunch and dinner a variety of leafy vegetable, vegetable, tubers, salad should be given. When Non-veg is served, 50% of vegetable should also be served.</td>
</tr>
<tr>
<td>4</td>
<td>Fruits</td>
<td>100gm</td>
<td>100 gm</td>
<td>Every day</td>
</tr>
<tr>
<td>5</td>
<td>Ground nut oil</td>
<td>40gm</td>
<td>40 gm</td>
<td>Every day</td>
</tr>
<tr>
<td>6</td>
<td>Milk (6% fats)</td>
<td>250gm</td>
<td>300 gm</td>
<td>Twice in day</td>
</tr>
<tr>
<td>7</td>
<td>Curd/butter milk</td>
<td>50gm/100gm</td>
<td>50gm/100 gm</td>
<td>Every day curd or butter milk, and on the day that Non-veg is served, lemon should be given.</td>
</tr>
<tr>
<td>8</td>
<td>Ground nuts, sesame</td>
<td>15gm</td>
<td>30gm</td>
<td>Every day according to taste</td>
</tr>
<tr>
<td>9</td>
<td>Lemon</td>
<td>1 piece (For 4 children)</td>
<td>1 piece in 4 children</td>
<td>Only on Non-veg day</td>
</tr>
<tr>
<td>10</td>
<td>Bread</td>
<td>4 slice</td>
<td>4 slice</td>
<td>Once a week</td>
</tr>
<tr>
<td>11</td>
<td>Roasted Papad / pickle</td>
<td>1 unit/1 teaspoon</td>
<td>1 unit/1 teaspoon</td>
<td>-</td>
</tr>
<tr>
<td>12</td>
<td>Sugar/Jaggery</td>
<td>50 gm</td>
<td>40 gm</td>
<td>-</td>
</tr>
<tr>
<td>13</td>
<td>Red chilly powder</td>
<td>10gm</td>
<td>20 gm</td>
<td>-</td>
</tr>
<tr>
<td>14</td>
<td>Fuel</td>
<td>800 gm</td>
<td>800gm</td>
<td>-</td>
</tr>
<tr>
<td>15</td>
<td>Semolina, Pounded rice, sago</td>
<td>60 gm</td>
<td>75 gm</td>
<td>Between lunch and dinner everyday</td>
</tr>
<tr>
<td>16</td>
<td>Tea Powder</td>
<td>5 gm</td>
<td>5 gm</td>
<td>If asked for</td>
</tr>
<tr>
<td>17</td>
<td>Onions</td>
<td>20 gm</td>
<td>25 gm</td>
<td>-</td>
</tr>
<tr>
<td>18</td>
<td>Garlic Ginger and coconut</td>
<td>15 gm</td>
<td>15 gm</td>
<td>-</td>
</tr>
<tr>
<td>19</td>
<td>Iodized salt</td>
<td>As per taste</td>
<td>As per taste</td>
<td>-</td>
</tr>
<tr>
<td>20</td>
<td>Turmeric, cumin, Mustard</td>
<td>5 gm</td>
<td>5 gm</td>
<td>-</td>
</tr>
<tr>
<td>21</td>
<td>Fish chicken, Mutton</td>
<td>75 gm Once in a week</td>
<td>125 gm Once in a week</td>
<td>Once in a week, either Mutton chicken or fish. Instead of mutton 4 eggs per Child</td>
</tr>
<tr>
<td>22</td>
<td>Eggs</td>
<td>2 piece</td>
<td>2 piece</td>
<td>Once in a week</td>
</tr>
<tr>
<td>23</td>
<td>Coconut oil</td>
<td>5 gm and 3 gm</td>
<td>5 gm for girls / 3gm for boy</td>
<td></td>
</tr>
</tbody>
</table>
NUTRITION GUIDE
To maintain uniformity in diet in government run residential institutions, the Department of Women and Child Development appointed a committee on 17th Aug 2005, and based on their recommendation has set out nutrition guideline that must be followed by all Homes to promote and maintain good health of the children in the Home. These guidelines are simple, basic and easy to follow if weekly menus are drawn up in advance with the cooperation of the cook in the Home.

Children's Institution Daily Diet Quantities according to Government Regulations
(A) Age group 6 month to 6 year

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Particular</th>
<th>Quantity</th>
<th>What is expected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ragi/rice</td>
<td>10 gm</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>Lentils</td>
<td>5 gm</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>Milk (cow)</td>
<td>800 ml</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>Vegetable</td>
<td>20 gm</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>Salt, sugar, jaggery, vegetable oil</td>
<td>As needed</td>
<td>-</td>
</tr>
</tbody>
</table>

Age group 2 to 3

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Particular</th>
<th>Quantity</th>
<th>What is expected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Wheat, rice, ragi</td>
<td>160 gm</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>Lentils, pulse</td>
<td>40 gm</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>Milk (cow)</td>
<td>500 ml</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>Vegetable</td>
<td>50 gm</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>Fruits</td>
<td>50 gm</td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td>Eggs</td>
<td>1 unit</td>
<td>4 times a week</td>
</tr>
<tr>
<td>7</td>
<td>Salt, sugar, jaggery, vegetable oil</td>
<td>As needed</td>
<td>-</td>
</tr>
</tbody>
</table>

Age group 4 to 6 year

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Particular</th>
<th>Quantity</th>
<th>What is expected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Wheat, rice, jawar</td>
<td>250 gm</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>Lentils, pulses</td>
<td>60 gm</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>Milk (cow)</td>
<td>350 ml</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>Vegetable</td>
<td>100 gm</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>Fruits</td>
<td>75 gm</td>
<td>-</td>
</tr>
<tr>
<td>6</td>
<td>Eggs</td>
<td>1 unit</td>
<td>4 times a week</td>
</tr>
<tr>
<td>7</td>
<td>Salt, sugar, jaggery, vegetable oil</td>
<td>As needed</td>
<td>-</td>
</tr>
<tr>
<td>Quarters</td>
<td>Medical Officer</td>
<td>Remarks and initials of the</td>
<td>Supplendent</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------</td>
<td>-----------------------------</td>
<td>-------------</td>
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<tr>
<td></td>
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</tr>
</tbody>
</table>

**Remarks and initials of the Medical Officer:**
- Vaccination T.I.
- Any other disease
- Aids viral infection
- Skin Disease
- Neoplasms
- V.D. Primary
- Prick test
- Whooping cough
- Chicken pox
- Diphtheria
- Tetanus
- Tuberculosis
- Anemia
- Meningitis
- Diabetes
- Mental condition
- Chemesthesia, body and hair
- General Health and appearance
- Nutrition

**Deformities, posture etc.:**
- In any other part
- In musculo-skeletal region
- Glands
- Skeleton
- Lungs
- Heart
- Tongue and speech
- Teeth and gums
- Hair
- Nose and throat
- Ear diseases
- Hearing
- External eye diseases
- Eye sight L and R

**Date of Medical Examination:**

**Sex:**

**Age:**

**Identification marks:**

**Full Name:**

**Registration no.:**

**Admission date:**

**Address of the Institution:**

**Full Name of Institution:**

**Quarters Medical Checkups**
FORM FOR MEDICAL EXAMINATION

Full name of institution:_________________________________________________________

Address of the institution: ______________________________________________________

Registration no.: __________ Admission date: ______ Date of medical examination: ______

Full name: _________________________________________________________________

Identification marks: __________________________________________________________

Sex ______ Age: ______ Weight: ______ Height: _____________________________

General state of health, bodily condition: ______________________________________

Past history: __________________________________________________________________

Family history (if known to the child): ____________________________________________

Results of general examination

Eye ___________________________ Heart ____________________________

Mouth _________________________ Lungs ____________________________

Teeth _________________________ Liver ___________________________

Nose _________________________ Spleen ___________________________

Throat ________________________ Skin _____________________________

Ear ___________________________ Deformities ______________________

Posture _______________________

Special remark, if any, including those on contagious or infectious disease of nervous system, injuries or marks of violence if any

Medical finding

1) Blood test if any
2) Urine test if any
3) Vaccination

Whether suffering from contagious or communicable infectious disease

Mental health issues

Diagnosis:

Investigation:

Treatment:

Medical officer
Observation Home / Children's Home

CERTIFICATE

Name of child: _______________________________________________________________

He or she is fit to be transferred to any institution.

Medical officer
"But why do I need a separate sick room? There is no place and besides isn't it better if they are kept with other children. That way they can keep an eye on the sick children."

The sick room in an institution is a mini hospital. Its presence means that a special space has been allotted specifically for health purposes. It must be a compulsory feature in every home, as this is specially needed to handle children suffering with contagious diseases or those who are recuperating. In addition, in a sick room the child is under the supervision of a qualified medical officer (doctor or nurse) for at least 8-10 hrs a day, which is better than 24 hr supervision by other children, all of whom will be susceptible to catching the infection themselves.

"But our first aid box and medicine stock is the same!"

In the institutions the first aid box is also the box where medical supplies are kept. Most institution staff told us that children hardly fall ill, so the stock is minimal. However it is suggested that the stock be proportionate to the home's capacity or at least the number of children present at that time. Also there should be a separate first aid box, which is regularly updated.

★ EXAMPLE ★

In District Probation and Aftercare Association, Children and Observation Home for Boys, Shivaji Nagar, Pune, one of the caretakers is given the responsibility for health in the home. He looks into all health issues like supervision of the sick room, ill children, health records, first aid and medicines.

RESULT

Healthy children will be happy children. That is why it is important to do everything possible to promote health and hygiene in the Home. It will minimize the spread of disease and infections and therefore lead to fewer complications. By following the routines and standards discussed above, you will be able to achieve good health for all the children in the Home.
"But the children in my home hardly ever fall ill"
It is a credit to your Home if the children are in good health. However, even if your institution is free of frequent illness or the spread of other diseases, it is necessary that all facilities be provided. This includes an operational sick room and daily and visits by a VMO or nurse. If that is not possible then the visits should take place at least 2-3 times a week, on fixed days, and should be recorded. Also the doctor/nurse must conduct regular monthly general health check-ups and maintain records of them.

"But I do not have the budget to keep all this medicine and equipment. Tests are expensive and we do not have the budgets for this."
You can network with local private hospitals or practitioners and NGOs working in the health sector to assist you in fulfilling these requirements. There could be tie-ups with pharmaceutical companies to supply medicines free of cost. Nearby hospitals could be asked to conduct health camps with the help of interns or students as part of their curriculum. In this way, problems regarding inadequate budget can be resolved.

"But my staff does not have time to take on the added responsibility of health."
Forming a Health Committee could ease the burden on one staff member, as they will be in charge on a rotation system. Older children could also be appointed as Health Monitors and form part of the committee and could also be trained to supervise the sick room and keep track of daily visits by children to the clinic.

"My VMO handles all this."
The head of the institution is accountable for the overall wellbeing of the children in his or her charge. As a result, heads needs to be aware of the activities of the medical personnel who are answerable to them.

"But children just fake illness for attention."
Children do fake illnesses for attention sometimes, but often cases may be genuine. As a result, it is important for trained health personnel to identify the gravity of the situation and treat children accordingly. If it is merely attention seeking, then the child could be given a little attention and told to rest, or someone can tell him that he is better now, provided this doesn't become a pattern or habit.
12. Hygiene and sanitation for girls

It is very important that proper and suitable personal hygiene is taught and maintained and that the Home makes every effort to promote this to avoid infections and disease. Outlined below are instructions to support and encourage good hygiene habits for girls.

**Menstrual history**

At the time of admission girls above 11 years of age should be asked about their Menstrual history by MO or nurse

Content:
- First menses (Menarche)
- Last day of menstrual period
- Menstrual history—Regular or irregular, flow - heavy or light, how many days, is there any pain? Any mood swings?
  (This should be recorded in the child’s medical history)

**Hygiene instructions:**

- New clean, cotton cloths should be given, and better still, sanitary napkins provided whenever possible.
  (Look for a donor who can provide this)

- Cotton cloth can be used and reused but not for more than 3 cycles.

- Cotton cloth **must never be** shared among girls.

- Regular baths and cleanliness of private parts should be emphasized. The P.O. / CWO or a lady caretaker should provide the girls with this information.

- Family life education sessions should be conducted for girls between the age of 11 to 13 years, as well as for 14 years and older with the help of a doctor or through any other resources. Focus on hygiene during menstruation in these sessions.

- 2 sets of underwear should be provided at the time of admission, and then again at regular intervals of 6 months. Staff should explain that undergarments should never be shared as it is unhygienic and can spread infections.
10. Discuss health-related issues with children

The best way to keep children healthy and to be responsible for their own health is if they know they have someone they can talk to. Staff on the Health Committee should encourage children to speak to them about health issues by setting up fortnightly meetings with smaller groups of children, according to the child’s age, needs, culture and wishes, to give them advice and support in relation to health and social issues. These should include:

- Personal hygiene
- Alcohol and substance abuse
- Smoking
- Family life and relationship education
- HIV/AIDS, hepatitis and sexually transmitted diseases
- Abuse, both within and outside the home
- Any other personal issues.

In case these medical services are not readily available, this objective can be achieved by involving voluntary organizations that work on health issues like substance abuse, HIV/AIDS in the locality. The home can network with these organizations to provide information to the children.

11. Mental health

The issue of mental health and its treatment is one that requires particular attention and care. Issues can go unrecognized, untreated or wrongly diagnosed as ‘bad behaviour’, when in reality, these need special consideration.

It is also essential that a psychiatrist and/or psychologist visits and interacts with these children regularly. Mental health issues will only escalate if not treated and cause more harm to the children involved.

Also, when cases are transferred, it is important to make a note of any mental health issues so that these are monitored from the beginning at the new institution, and do not go unnoticed.

--- ★ EXAMPLE ★ ---

Mr. S A Jadhav, Senior Probation Officer, Observation and Children’s Home, Umerkhadi Mumbai had the idea to tap the local medical colleges and hospitals to send their interns, students or volunteers to conduct periodic check-ups as well as health camps in rural areas.
HYGIENE CHECK LIST

The following is a mandatory checklist that will ensure good hygiene in the Home:
- Wash bedding once a month
- Clean the water tanks once in six months, and maintain a record/receipts of the maintenance work that is done
- Pest control once in six months
- Clean toilets once or twice a day, based on frequency of use. A designated cleaner/sweeper should be appointed/employed. Children MUST NOT be made to do this.

9. Hygiene habits
In order to inculcate good toilet habits and civic sense, maybe you could ask the children themselves to make posters to put up outside the toilets on the following issues:

DON'T WASTE WATER
FLUSHING MANDATORY AFTER USE
WASHING HANDS WITH SOAP AFTER USING TOILET
GIRLS (DISPOSAL OF SANITARY PROTECTION)
CLEAN UP BEFORE YOU LEAVE
ANY OTHER ISSUES THAT MIGHT BE PARTICULAR TO YOUR HOME

Also, according to Government of Maharashtra guidelines, the following need to be provided to all children in the Home.

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bathing soap</td>
<td>100 gm, 1 bar</td>
<td>Twice a month</td>
</tr>
<tr>
<td>Shampoo</td>
<td>100 ml once in week</td>
<td>Only for Girls</td>
</tr>
<tr>
<td>Washing soap</td>
<td>100 gm bar</td>
<td>4 times a month</td>
</tr>
<tr>
<td>Tooth powder/paste</td>
<td>100 gm</td>
<td>Once a month</td>
</tr>
<tr>
<td>Tooth brush</td>
<td>1 unit</td>
<td>Once a four month</td>
</tr>
</tbody>
</table>
7. Health camps

Health camps are a good way of providing and updating medical services to the children. They also offer an opportunity to reach many children at one time. Health camps should be conducted once in 3 months with the help of local networks, Government Hospitals and other NGOs. The health camps could cover areas such as E.N.T., dental and eye checks, general well being check ups etc. Another good idea would be to have Hygiene Camps at least once in three months because with good hygiene, many infections and illnesses can be prevented. Make your calendar of health camps at the beginning of the year. These can also be conducted with the help of other medical agencies. These camps should check for personal hygiene like hair lice, scabies, nails and general community hygiene like cleanliness of clothing and bedding, surroundings etc. Dealing with scabies may be the prime concern in an overpopulated institution because scabies is an infectious disease spread by close proximity to an infected person and it requires immediate attention.

Awareness programs can also be held once in two months. Again, make a simple calendar planning to cover themes like scabies, personal hygiene, HIV, family life education and current health related issues (malaria, dengue, chikungunya) through street plays, jingles, dramatic enactments, exhibitions and discussions (for older children).

8. Preventive health

These programs should be planned based upon the levels of hygiene in each individual institution. Examples include conducting health camps customized to the institution's needs, for example, in low-lying or mosquito-prone areas, it is important to maintain water-related hygiene in order to prevent outbreaks of epidemics like chikungunya and malaria.

What is also important to remember is to make toilets functional. Some institutions have built new toilets, but the children continue to use the old ones, which are few in number and barely functional. This would be easier if toilets were assigned for different groups of children. If any supervision is required for a child when he/she uses the toilet, it must be done in a subtle manner to respect the child's privacy and not make him/her feel uncomfortable.
5. **HEALTH COMMITTEE**

**Training core team and staff members.** The Home should set up and train a core committee of staff members to handle health and medical issues competently so that they can deal with any medical issues if a nurse or VHO is not present. Children should know who these staff members are, and where to find them in case they have a health problem. If a child is ill, the staff should be trained to make the sick child feel more comfortable, rested and reassured. The sick child can be monitored by a staff member who attends to the child's diet, medication, and other health needs.

Twice a year, this committee can be trained by the medical officer in first aid, hospital procedures etc. (In long stay homes, a core group of elder children also could be trained in first aid, and could also be responsible for the maintenance of the sick room, as peer health workers in the Health Committee. A system for following up on sick children after recovery is also essential as there might be relapses. The VMO should continue to monitor and record the child for at least a week after recovery.

6. **Health network**

The head of the Home should ensure that a network and a referral system are established with a local hospital to access services. This will lead to prompt medical attention for the children and to preventing minor illnesses from escalating into more serious issues.

A list of some free hospitals and Government schemes is provided by DWCD but also find out about local services and primary health centers in the locality.

Please ensure that the child has the right documentation to be able to access these schemes. What is often overlooked, but is an essential health need, is to establish a network with mental health experts through a local hospital or voluntary organization. If mental health issues are left untreated, they can be extremely detrimental and difficult for the child involved as well as for other children and staff in the Home.
FIRST AID BOX

01 WATERPROOF ADHESIVE DRESSINGS
02 ROLLER BANDAGES,
03 TRIANGULAR BANDAGES
04 COTTON WOOL
05 GAUZE
06 CLINICAL THERMOMETER,
07 PAIR OF TWEEZERS
08 EYEBATH
09 PEN TORCH
10 MEDICINE GLASS
11 BEDPAN AND URINE BOTTLE
12 SAFETY PINS
13 SCISSORS
14 ANTISEPtic CREAM E.G. SAVLON
15 DISINFECTANT DETTOL
16 T.C.P.
17 PAIN KILLER ASPIRIN, ANACIN, CROCIN, CODEINE,
    PANADOL, IBUPROFEN, CHILD DOSAGE
18 ORAL REHYDRATION SOLUTION
19 PARAFFIN GAUZE
20 BICARBONATE SODA, BORIC ACID
21 KAOLIN, CALAMINE LOTION
22 BURN CREAM E.G. BURNOL
23 SPECIAL REQUIREMENT
4. Sick room and dispensary

The sick room is a mandatory feature of the JJ ACT. Even if the space is a small one, it must be a separate room to allow the child a quiet restful place in which to recuperate, as well as to stop any contagious illness from spreading. Rooms should be properly ventilated and cleaned with antiseptic everyday. Also, there should be a staff member in charge of the sick room on a shift system. This could rotate every quarter. The rooms should be equipped with:

- 1-4 beds
- Medical supplies
- A separate first aid box

(*please refer to first aid box list provided below*)
Copy and stick this list on to all first aid boxes. It should be checked and re-stocked as required by the Nurse. Training in first aid as well as household medicines can also be given by the Health Committee.

★ EXAMPLE ★

The sick room in New Children's Home, Mankhurd, Mumbai is a good example. They have five regular beds as well as spare bedding for other children who might fall ill. They have an older child or staff member to supervise this. Assigning a small team of 5-6 sick room helpers is a good idea. They enjoy the responsibility of such a job.

FIRST AID BOX LABELS
A First Aid Box is the simplest and most important thing that every Home should have and carefully maintain.
The following is a list of the standard contents of a first aid box for you to copy and paste on to your own box.
You could also photocopy this list and put it up in the sick room for ready reference. Remember to add any special requirements medicines/provisions for your home that may be needed by a specific child, or for a reason specific to your home.
**EXAMPLE OF A WEEKLY MENU**

This plan is open to change, but ensuring that no food item is repeated at the same meal in the week.

<table>
<thead>
<tr>
<th>Monday</th>
<th>Breakfast</th>
<th>Lunch</th>
<th>Snack</th>
<th>Dinner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Poha</td>
<td>Brinjal</td>
<td>Farsan, chiwda</td>
<td>Methi, palak, (leafy veg.)</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Upma</td>
<td>Pumpkin (red, white)</td>
<td>Channa chaat</td>
<td>Cabbage cauliflower</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Idli</td>
<td>Pulses, vatanna, channa, matki, egg curry</td>
<td>Biscuits</td>
<td>Suran, potatoes, mixed vegetables</td>
</tr>
<tr>
<td>Thursday</td>
<td>Wada</td>
<td>Suran, potatoes, mixed vegetables</td>
<td>Fruits</td>
<td>Pulses, vatanna, channa, matki, egg curry</td>
</tr>
<tr>
<td>Friday</td>
<td>Stuffed Paratha</td>
<td>Cabbage, cauliflower</td>
<td>Bhel</td>
<td>Pumpkin (red, white)</td>
</tr>
<tr>
<td>Saturday</td>
<td>Missal Pav</td>
<td>Methi, palak, (leafy veg.)</td>
<td>Alu chaat</td>
<td>Brinjals</td>
</tr>
<tr>
<td>Sunday</td>
<td>Sheera</td>
<td>Biryani, dalkhichdi, veg, pulao, egg curry</td>
<td>Bhajiya</td>
<td>Biryani, dalkhichdi, veg, pulao</td>
</tr>
</tbody>
</table>
3. Nutrition

**Balanced Meals** - one of the most important aspects of promoting good health is making sure that the children are given balanced meals. Calorie intake should be monitored and provided depending on the age, weight and other indicators for each individual child. There also needs to be variety in the meals, so that children are given foods from all food groups. A weekly schedule and menu can be planned each week with the cook to see that this is done.

**Please refer to the Nutrition Chart.**

**Timing** - it is very important that the gap between meals is not too long, a gap of no more than 3-4 hours is suggested. The Juvenile Justice Act specifies that children be provided with four meals a day, namely - breakfast, lunch, snack and then dinner.

**Special meals** - these include special diets for sick children as well as a special treat on occasions such as Diwali or other festivals. These also need to be scheduled into the weekly menu with the cook.

The following is a sample well-planned menu that you can use as a guide.

**Example of a Weekly Diet Plan**
This is only an example of a diet plan that each institution is recommended to follow. The food items can vary from the diet plan given below, however no food item should be repeated during the week.

**Breakfast:** In addition to the items listed in the chart below, you should also provide milk or tea. Children below the age of 6 should be given milk.
Eggs should be given in addition to the meal to children who are ill.

**Lunch:** should comprise of dal, rice, vegetables (examples of which are provided in the table), chapattis, and if possible pickle.
If lunch and school times clash, children should be provided a packed meal of chapatti and vegetable.

**Snack:** This meal is compulsory and must be provided. Fruit can also be served with the snack. If children are in school at this time, the snack should be packed and given to them.

**Dinner:** should comprise of dal, rice, vegetables (examples are given in the table), chapattis, and if possible pickle or papad.
1. **Medical examination**
This must take place, without exception, within 24 hours in a short stay, and within 48 hours in a long stay home. What if it cannot happen within 24 hours? There cannot be an exception to this rule. It is very important that it takes place within 48 hours, under any circumstances. If not, reasons for the delay must be stated in the child’s case file. Medical Examinations may be done through a tie-up with a nearby hospital or Visiting Medical Officer (VMO).

*Please refer to the format for the preliminary examination at the back of the chapter on health records.*

Though these are usually well maintained, it must be emphasized that each child has a clear, written health section in his/her file.

2. **The health records should include:**
- Medical history to be filled when the child first arrives and has a medical examination
- Health interventions during the child’s stay in the institution
- Medications prescribed, including date and dosage
- Allergies
  - Records of routine checks
- Mental health (including any medication given)
- Family medical history
- Comments and signature of the head of the institution and the medical officer in charge

In addition, any inputs or issues that arise from health camps that the child attends must later be added to the individual file.

**A VMO or Nurse must visit the Home on a daily basis. If this is not possible, then at least 4 visits per week must be pre-scheduled. All visits must be recorded.**
health and nutrition

Vital steps for a happy healthy stay

As we all know, a healthy child is one who can grow and realize his or her full potential. A child who is unhealthy or sickly will always lag behind other children. Therefore, the Home should provide all children in their charge with a healthy living environment. Any health concerns should be identified quickly, services provided to resolve them, and general good health promoted. The following is a simple 12-point checklist to help you plan, improve and maintain good health standards in your home.
HAPPY TOGETHER!
THE STAY...

Health and nutrition  Education and vocational training  Psycho-social rehabilitation  Behavior management
Recreation  Child rights orientation
INTAKE SHEET

Registration No: ____________________________

Date of admission: ______________ Time of admission: ______________:

Name of the institution: ____________________________

Name of the Child Welfare Committee: ____________________________

1. Child’s name: ____________________________

2. Birth date and age: ____________________________

3. Gender: _____ Male _____ Female

4. Father’s name and address: ____________________________

5. Language known to child: ____________________________

6. Currently studying in standard: ____________________________

7. Name of police station: ____________________________

8. Physical appearance: ____________________________

   Colour: _____ Fair _____ Dark _____ Wheatish

   Height: ______________

   Body type: _____ Weak _____ Healthy

9. Identification marks: ____________________________

10. Mental status: _____ Healthy _____ Disturbed _____ Quiet

11. Contact person name and address: ____________________________

   ____________________________

   ____________________________
"Why is it necessary to meet a new child twice in the first week?"

It is necessary to reinforce in the child's mind that the P.O. / Superintendent is his / her contact person and guide in this new environment and that he/she is approachable. The child now knows with whom they can share their grievances and who will answer their questions.

RESULT

The result of a thorough and well thought through admission procedure will be children who will adjust and cope with being in a Home happily. If they are shown kindness and sympathy at the very beginning, even when they are not always co-operative, it is a signal to them that the authorities in the Home care about them and will make an effort to make them feel at home.

They will also have a clear understanding about how they will be cared for, whom they are likely to share the living space with, how the home operates etc. The child now knows who their contact person in the institution is to provide information, to air grievances with etc. This reassurance also helps in reducing the rate of runaways as well as in-fighting in the institution.

By building a good relationship with the children, the process of rehabilitation can begin positively.
For most of us, any kind of lifestyle change brings about some amount of anxiety. For e.g., marriage, becoming a parent, taking up a new job, retirement, etc. For a child, it is not only scary, but also very confusing and overwhelming. Adjusting to a new life in the home may require the child to relearn everything he had ever known about people, food, attention, sharing; everything is different. For e.g., living with a group of 150 children 24 hours a day may be quite an adjustment for a child who is used to living at home in a small family of 4. Living in a very structured environment with set times for food, play, education, and sleep, may also become very difficult to adjust to for a child who is not used to any routine.

Of course, children are largely adaptable and most often they do adjust with time. However, the few children who continue to face adjustment difficulties and are unable to adapt, may move on to more severe behavior problems such as bullying, severe physical abuse, sexual abuse, vandalism, etc. These are behaviors that we all want to prevent. And therefore it becomes important to attend to and help children who exhibit any form of adjustment difficulty, right at its onset. This may, in some cases, require tremendous patience. Frequent short and non-threatening casual chats are a good way to get a child to feel comfortable and safe in your presence. Once a child is anxiety-free, he is likely to open up faster and begin the process of adjusting and 'settling in'.

Finally, it is essential for us to recognize that children are individuals, and they will have different responses to the care and attention they receive in their new environment. What works for one child may not work for the next, even though the source of their problem may well be the same.

★ EXAMPLE ★

At the Mundva Home for Girls, one of the caretakers who was previously living in the Home, would share her experiences with the children so they had a first hand example of a well-adjusted person in the Home.

Caretakers can also tell real life stories of well-adjusted cases in the Home or even keep a record of alumni and call them in to give the children an encouraging story about the Home.

There are bound to be adjustment issues for the new children regarding peers, bullying, sharing space, refusing to eat, crying a lot, etc. The above are a few examples of how to deal with them at an early stage so it doesn’t become unmanageable and also makes the child feel that someone cares enough to take the time to help him/her.
Adjustment issues for new admissions

Often, within the first month of admission, you may note strange but common patterns of behavior exhibited by some of the new children.

These include a range of behaviors such as:

- refusal to talk
- refusal to eat
- disturbed sleep
- rebelliousness
- aggressive, assaultive, or abusive behavior towards staff or other children
- frequently falling ill
- constant crying
- ‘clingy’ behavior
- need for constant physical touch
- constant complaining about other children or staff
- attention-seeking behavior
- bed-wetting
- poor academic performance
- listlessness
- poor hygiene
- avoidance of duties assigned

Though these behaviors may seem too varied and unrelated to have a common cause, more often than not, they arise due to an inability to adjust to the new environment and lifestyle of institutional living.

‘Why?’ you may ask, especially when these behaviors are exhibited by children who have come from less privileged, unsafe, exploitative, or malnourished pasts. It may seem beyond comprehension why a passive child laborer who was consistently beaten up, provided minimal food, and confined to a small room until being brought to the home, is now unable to sleep and rebels against staff members who are being affectionate and trying to get through to him. Surely, this home is a much safer place than where he came from! When repeated attempts to communicate with this child fails, it is only natural for you as a staff member to feel helpless, frustrated, and de-motivated. However, to give up is not an option. The child needs you! He wants you to be a little more patient with him; he wants you to understand that this is difficult and confusing for him; he wants to be sure he can trust again.
Staff accessibility in the first two weeks

The staff's interaction with the children in the initial stage of their time at the Home will set the tone for future relations. That is why it is imperative that in the early days, someone is accessible to them at all times. At the first meeting, the P.O. / Superintendent should focus on building a rapport with the child. This will build confidence and trust and make it much easier to get accurate information from the child. It is important that a schedule be made with dates for future meetings. This can be done in the calendar format already mentioned earlier. A specific time must be kept aside for dealing with new admissions—the P.O./CWO must schedule and spend enough time with new children. (Please refer to Roles and Responsibilities Chart at the back of the manual)

In collaboration with the caretakers and teachers, this meeting schedule must be implemented. Their support is important as they can provide important information about revealing behaviors such as bullying, depression or not eating food and other emotional issues that may arise. But the schedule must be adhered to so that the child is not disappointed and dejected. A routine provides stability and gives the child a sense of control.

Other expected behaviors in the first week are attempts to run away and withdrawal. If particular themes are identified, they should be conveyed to the P.O. / Superintendent and dealt with individually or in groups. (For example, anger management, conflict resolution, communication, assertiveness, self-esteem etc.). The key is that the staff build a rapport with the children so that they feel free and safe to speak their minds without fear of prejudice or punishment.
Two Mumbai Institutions effectively use the following procedures:

**Group admissions**
These are generally the result of mass raids on brothels and units employing child labor. It is useful to use extra staff to orient the children and their parents, and also to keep them in the Reception Unit with some security personnel since there is a higher risk of this group attempting to run away.

**Individual admissions**
The P.O./CWO should make an effort to meet the child on the day of admission in order to reassure the child that a system is in place for the child’s welfare. Procedures to be followed should be broadly outlined to the child, as should the time, content and venue of the next meeting.

**Through the day**
Often, the P.O. / Superintendent is overburdened, especially with paperwork, making it difficult for him or her to attend to every new admission as it happens throughout the day. In such cases, a list of all new arrivals can be maintained as they are brought in, and the P.O. / Superintendent can conduct one group orientation session at the end of the day that outlines procedures and schedules future individual meetings.

**Late night admissions**
These may also be due to mass raids. It is important that at least one person from the Reception Committee be present to briefly orient the child/children about the procedures of the Home as soon as they are brought in. A more thorough orientation can be conducted the next day.
Group admissions
When large groups of children are brought to the Home at the same time (for instance after a raid in a factory), it might be useful and less time consuming to divide the children up in to smaller groups and conduct group orientations. This may also help by giving the children a sense of security as they won’t be immediately isolated, and will be in the company of other children who they likely knew prior to being brought to the Home. This group orientation must however be followed up with individual meetings with the P.O./CWO.

For example, if a group of child laborers is brought to the Home, they can be divided into smaller groups, maybe according to age if that seems necessary, and each small group can receive a joint orientation.

Intake sheet
Filling in the intake sheet is an important exercise and is essential to obtain basic facts about the child. The Superintendent must assign a P.O./caseworker to every child. For this, the P.O./CWO needs to set aside time in his daily schedule to interact with the children, regardless of other pending duties.

When a child first meets the P.O./Superintendent, primary information like the child’s name and age can be asked and entered. At this first meeting, the P.O./Superintendent should also make sure that the child has been oriented about the institution. A child’s reactions and body language provide important clues to their current physical and emotional state, and these should be recorded in the case file.

It is not necessary that the intake sheet be filled in a single meeting. Part I, which has basic information can be completed at the first meeting. Part II however can be filled in within the first week. This is because the children may not be in the right emotional mood to have detailed conversations about themselves as soon as they arrive at the Home and so the information can be gathered over a series of meetings. These must be pre-scheduled, and the child should be given the time and dates for these meetings in the form of a calendar (note: intake sheet example provided on page no. 46).
You could simply give the child a chit with the date of their next appointment with you on it, and simultaneously enter the child’s name on the given date in your own diary. This formalizes the meeting for the child, and will help in making them feel that they will be listened to. It lets them know that there are people in authority who care about their welfare and that there is someone in charge. It also gives them an understanding about future procedures and options.

There should be a specific area designated as the place where this information can be collected. This could be in the Reception Unit or with minimal external interruptions in the P.O./CWO’s office.
Use admission booklets provided for guidelines.
JEENA ISI KA NAAM HAI is a story designed to help you with orientation.

Cover relevant points

Before beginning the administrative process of questions or filling out the intake sheet, it is wiser to first reassure the child by addressing any questions he/she may have. It is only natural for a child to want their apprehensions and worries to be addressed first, before they will open up and talk freely about their situation with you.

The P.O. or other members of the Reception Committee need to familiarize the children with the workings of the Home. They can talk to the child about a typical day in the Home - mealtimes, study time, playtime and about who is in charge of the different areas of the Home so that they know who to go to when they need help of any kind.

The child's legal status must be explained in simple language and must be relevant to their specific case. This can be done with the help of child-friendly orientation material, keeping the communication primarily visual can help overcome language barriers.

Certain topics, such as running away, (which a child may be thinking of but will naturally not voice), can be raised so that the child can gently be told of the consequences such actions may have, but more importantly, so that the child feels that someone empathizes with this desire and is open enough to discuss the subject.

The children should also be encouraged to ask questions so that they are not afraid to speak their minds.

---You can start a conversation by answering some of these questions:---

Why has the child been brought here?
How long will he stay here?
Will he be able to meet his loved ones again?
Daily routine of the Home
Difficult subjects such as running away
Once the child has settled in, he needs to be informed about what to expect in the Home. If this is done in a calm and reassuring manner, it will make the child open to being co-operative and forthcoming with relevant information. The following are ways that will help with this process.

**Choosing a space for the orientation**

Once again we will highlight the importance of a child friendly Reception Unit. It does not need to be an elaborate area, just a safe, clean and cheerful space with simple communication material, such as pictures and drawings, available to make the child comfortable as well as to help him/her to understand the functioning of the Home. If at the time of admission a child does not seem to engage, perhaps it would be a good idea to let a peer read the orientation books with him/her because it is likely they will relate better to someone who has experienced some of what they are going through. The peers can be imaginative while they read the material, using different voices while telling the stories, using humour and friendly informal chats to make the child feel at home.

![Image of children and adults]

**Orientation**

The Orientation process is a critical and often challenging one. The attitude of the staff and the communication that is used are of prime importance at this stage. The Juvenile Justice (Care and Protection) Act 2000 has a written Statement of Purpose/guidelines that accurately describe what the home sets out to do for the children it accommodates, and the manner in which it aims to provide care. Since this mission statement should be the underlying philosophy of every institution, to begin with, the PO or Superintendent should ensure that everyone working in the home is aware of the contents of the Statement of Purpose, and a copy is easily accessible for reference.

The new child's orientation must take place within 72 hours of the child's arrival because otherwise it is not effective.
**IMPORTANT TIME LINES FOR ADMISSION PROCEDURE**

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>First meeting with P.O. / Superintendent</td>
<td>Within 24 hours of arrival</td>
</tr>
<tr>
<td>Follow up meetings (at least 4)</td>
<td>Within the first month of stay</td>
</tr>
<tr>
<td>Basic hygiene check</td>
<td>Before any interaction with other children (other than the peer who is serving on the Reception Committee)</td>
</tr>
<tr>
<td>Medical examination</td>
<td>Within 24 hours of arrival</td>
</tr>
<tr>
<td>Orientation</td>
<td>Within 72 hours of arrival</td>
</tr>
<tr>
<td>Filling intake sheet</td>
<td>Part I first day</td>
</tr>
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<td></td>
<td>Part II within one week</td>
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</tbody>
</table>
THE NEXT STEPS FORWARD
ORIENTATION
and EARLY STAY
"But the P.O. / Superintendent may be busy or not around when a child arrives, What happens then?"

This issue can be solved by forming a Reception Committee, so that someone will always be around. The person on duty should get the child’s name and make him/her feel comfortable in the Reception Unit, talk to him/her about the Home in a reassuring manner and then inform the P.O. / Superintendent of the arrival in order to schedule an appointment with the P.O. / CWO within 24 hours.

"But what if caretakers are not willing to take on any extra responsibility?"

Caretakers and other staff members need to have some basic training in dealing with new arrivals, how new children might feel, their anxieties, empathizing with them etc. They need to understand the importance of the contribution they can have in making the child feel welcome to the Home, and that the admission stage is crucial for this.

"But I have no place for a reception unit in the home!"

If only a single room is available, then a wall, a partition or even a curtain may be used to create a segregated space between the new and older arrivals. Interaction between the two should also be minimized.
They must be given a brief background of the new child before they meet him/her so that they are prepared, and can ask relevant questions, or be sensitive to that child’s specific issues.
There must be a trainer or superior that the peer can talk to if they encounter a difficult situation. If peers are asked a question on a topic that is outside the scope of their experience and knowledge, or is something they are unsure about, they should tell the child that they don’t know the answer, but that the P.O./CWO would be able to answer that question.

The training should be updated every three months to discuss how the peers are doing or if they have any concerns or questions.

**Supervising peers**
Peers must be supervised with great care to see that they are imparting the right information, in the right manner, to the new children.

The Superintendent can drop in to check on sessions unannounced. But this should be done subtly so that the peers do not feel that they are being watched all the time, or that they are not trusted. New children could be asked to fill out an evaluation form after 2 weeks about their peer mentor, and what worked and did not work in that relationship.

The evaluation should be anonymous, and there should be no negative outcome for complaining about a peer mentor.

The peers may be given a small reward for taking on this responsibility and doing a good job. Peers can serve as positive role models for the new children and provide support, advice, encouragement, and even friendship. The peers will also benefit from this role. It gives them chance to develop their interactive, social, communication and leadership skills. There is also a certain sense of satisfaction that comes from helping a younger, new child make their stay at the Home a positive experience. It teaches the mentor responsibility, and raises self-confidence and self-esteem.
Choosing peers for the reception committee

The people in the Reception Committee have a big role to play in creating a good first impression of the Home to the new children. It is vital therefore, that the peers in this committee are chosen, trained and supervised with thought and care, as they will be mentors for the new children in their first few days of being in the Home.

Choosing a peer

Peer mentoring usually take place between an older more experienced person and a new child. It is a good way of practicing social skills and building self-esteem for the mentor, and helps the younger child to adapt and settle in.

The peers should therefore be chosen for their sensibility, confidence, social skills and reliability.

Peers should have lived in the Home for at least 2 years.

Peers should be over 12 years old so that they are mature enough to answer questions in a reassuring manner.

There should be a mix of boys as well as girls.

A peer who speaks more than one language fluently is preferable.

Training peers

Peers should understand the objectives of the Reception Committee.

They should understand the importance of their role in the committee and therefore their responsibility.

They should be taught how to read the orientation material to the new children in innovative and fun ways, for example using humour, different character voices etc.

They should be trained in projecting the right body language and tone of voice when talking to the children. For instance the training should include points about smiling, tone, eye contact, boundaries of physical contact.

They should be given real examples of difficult behaviour and ways of dealing with them.

Peers should engage in 'role play' practice sessions before they actually start to mentor to gauge their level of readiness.
When a child first arrives at the Home, the physical environment makes an enormous impact on how he/she will view the Home. Even if it is a small space, the Reception Unit must be a separate room or a separated room in the Home. This environment allows the child to get comfortable in the new surroundings without being wrongly influenced or feeling overwhelmed. It should be used for the child to have a meal, sleep and if possible, have a bath. If this is really not possible, then someone from the reception committee must go with the child to the bath area in the Home so that the experience is less intimidating for him or her. Ensure however that the child is given enough privacy and peace to bathe, rest and settle down.

5. Medical exam

An initial medical exam needs to be conducted within the first 24 hours to see to the child's needs, and to limit the spread of any infectious disease. If there is a medical problem, then appropriate treatment needs to be given right away. As a preventive measure, it would be advisable to give all new children lice shampoo, as it is not harmful and in fact could be very helpful.

★ EXAMPLE ★

The Observation Home in Wardha has a functional Reception Unit. The P.O., a teacher and older children who are experienced in the ways of the Home, attend to and orient the new children. This has made the admission process a lot easier as the new children immediately feel less threatened because they are in a separate physical space and have experienced people helping them to get comfortable in the Home.

★ RESULT ★

Children who are greeted and treated with kindness and understanding, are free from anxiety. They will be more receptive when given information about the institution, will answer questions honestly, and will feel more confident. This in turn, will make it easier for the P.O. and all staff to engage meaningfully with the child.
2. Orient all staff members of the home to your reception procedures

The P.O. / Superintendent must ensure that in addition to the reception committee, all staff members in the Home know the admission process and how to conduct themselves when a new child arrives. A one-day workshop can be conducted to explain the use of orientation material and general do's and don'ts so that all staff (including those not on the Reception Committee) are aware of the reception procedures of the Home. This includes guards, gatekeepers, or any one else that the child may interact with before they meet the P.O. / Superintendent. This will help set an open and friendly attitude towards the child and lessen his/her natural anxiety.

3. Gauge the child's frame of mind

Most often, new children are non-communicative due to shock and withdrawal. In such cases, it is better to have an informal chat to orient the child to the Home. This must however, definitely be followed up later that day (or the next morning if it is a night admission) with a more in-depth meeting between the child and the P.O. / Superintendent. In case of a late-night admission, the relevant staff (usually a caretaker) should reassure the child that he will be oriented in detail the next morning. A simple statement like "I know you are worried and have many more questions. The P.O. / CWO will address them all in the morning. Try and get some sleep now," will help more than you think.

4. A Reception Unit

The importance and necessity of a Reception Unit cannot be emphasized enough. As you know, it is also a mandatory requirement under the Maharashtra Juvenile Justice (Care and Protection of Children) Rules of 2002 (please refer to Chapter VII, Section 20 (1)).

Recognizing the hardship for the child at this time, the rules specifically mention that "the child shall be received with due care as provided under these rules, with dignity and love." (see Chapter VII, Section 20 (3)). For Children in conflict with the law who are brought to homes, the rules recommend a 15-day minimum period of stay in the reception unit.
The child's first impression of the Children's Home is formed during the admission process. It is very important therefore for us to make it a pleasant, positive one. Laid out below are a few simple steps that can facilitate a smooth and easy admission for both the child as well as the officials in charge of the Home.

1. Form a reception committee

The P.O./Superintendent is in charge of admissions. However, forming a Reception Committee will be beneficial because it will ensure that there is always someone to greet a new child and make them feel comfortable and not alone or abandoned, in case the P.O./Superintendent is unavailable (because of other responsibilities such as home visits and administrative tasks). This committee should comprise of the P.O./Superintendent and at least two other staff members from any level, for example, a teacher, a clerk or a caretaker.

It may also be valuable to have a peer on this committee, to make the child feel more at home as they might be able to relate or identify more easily with someone of their own age. It is advisable that 7 peers are chosen on a daily rotation, i.e. a different child will serve on the reception committee every day of the week, thereby making sure that a peer member is always present.

Choosing, training and supervising the peers must be done carefully and sensitively as this person is responsible for creating a lasting impression of the Home.

Please refer to the section on Choosing a Peer for the Reception Committee

The P.O./Superintendent must be informed about every new arrival, and must meet the newly admitted child within 24 hours of admission.
5 Steps to a Positive Admission
Right to free legal aid

According to the Juvenile Justice Care and Probation Act 2000 each child has the right to get free legal aid. Article 22 of the constitution of India talks about free legal aid to every citizen who cannot afford legal services.

Note to the P.O. / Superintendent
Inform the child and the family about this right so they can engage a lawyer if they choose to.

When can the child get bail?

A child can be released on bail irrespective of the offence with or without surety, except in the following situations:

- Release will bring him in association with a criminal
- Exposes the juvenile to moral/ physical
- Defeats the ends of justice

Note to the P.O. / Superintendent:

During the child’s stay in the institution, keeping them updated on the status of their case will prove to be very helpful. For instance, let them know when they will meet the JJB, or why a hearing was postponed, or if there is a delay because the parents do not have certain documents. Explain to the child what the problem/delay/system is, as this is reassuring. Not knowing what is going on can be extremely distressing for the child.
Even children in conflict with law have rights

In case of arrest (Pre admission to institution).

As a Superintendent or Child Welfare Officer, it will not be possible to control police procedures at the pre-admission stage. But once the juvenile is admitted to a Home, you could make sure that the child knows and is able access his rights as far possible.

Children need to know what to do in the case of an arrest. The special juvenile police unit, or the officer in the police station who is deputed with that task can make arrests.

Children have the right to call and inform their parents or relatives or any person of their choice about their arrest or if they are brought to a Home.

The child shall be given all possible assistance to enable them to fulfill their right to call any person of his or her choice over the phone or otherwise. This should happen in the police station itself. If it does not, then it needs to be made from the Home.

Similarly when the child is arrested, the officer in charge at the police station or the Special Juvenile Police Unit must inform:

(A) the parent or guardian of the child

(B) the Probation Officer of the institution about the child's background.

This is likely to be of assistance to the Board while making an inquiry.

Note to the P.O. / Superintendent

Allow the child to call his or her parents about the arrest. Sometimes parents may get angry with their children and refuse to speak or listen to the child. Help the child explain to the parent and, if need be, speak to the parent yourself about what has happened in a non-threatening way to help them understand the situation.
There is a special legal process for children

Note on the working of the Juvenile Justice Board

**What is the JJB and why does it exist?**
A juvenile in conflict with law is any person who is under the age of 18 years who is alleged to have committed an offence (the offense must have been committed when the accused person was under the age of 18). The Juvenile Justice Board (JJB) is a three-member panel, specially appointed by the State Government, to make inquiries and rulings and to deal with the issues related to a juvenile in conflict with law.

**Who are the members of the JJB?**
The JJB comprises a Metropolitan Magistrate or a Judicial Magistrate of the first class and two social workers of whom at least one is a woman. The magistrate is required to have special knowledge or training in child psychology or child welfare, and the social workers must have at least seven years of experience working with issues relevant to children.

**How is it different from the adult court?**
The proceedings of the JJB are conducted outside the adult criminal court system, in a home-like and child friendly atmosphere. The child’s parents or guardian or any close relation can be present with the child for all proceedings. A probation officer is mandated by the Board to conduct an investigation into the child’s life and circumstances, as well as the alleged crime, and to report back to the Board. The Board has two social workers on it in order to shift the focus of investigation away from only the finding of guilt or innocence (as in adult court) to also understanding the other relevant circumstances.

**Why is the child called before the JJB?**
Whenever the JJB needs any kind of information about the case or needs to pass any judgment about the case they may call for the child or any person concerned with the child like the parent, guardian or relative. The JJB will also update the child about the status of his case, for example, the child’s release and duration of stay in the institution. It is important to emphasize the importance of being honest before the Board so that it will make the proceedings easier. However the JJB will give a prior notice before calling the child before the Board.
- A child's case will be heard by a special Juvenile Justice Board.

- A child can get released on bail irrespective of the offence with or without surfeity, except in the following situations:
  o Release will bring the child in association with a criminal
  o Exposes the child to moral/ physical dangers
  o Defeats the ends of justice

A child has the right to phone calls and letters while in the institution and to meet with family members on a regular basis and as and when needed, like on birthdays, during illnesses, etc.

Every child has a right to appeal the Juvenile Justice Board's decision at a higher court.
superintendents, P.O.s / CWOs, please make sure children in conflict with the law are briefed on the following...

- There are special laws for children

A child cannot be sentenced to death/ life imprisonment or committed to an adult prison. A child cannot be charged with or tried for an offence with an adult.

The inquiry into the child's case has to be completed within 4 months.

However, sometimes due to practical difficulties, it may take longer than four months. Some of the reasons for the delay could be:

- Inability to trace the child's parents, or that they live far away and cannot be contacted, or provide proof of age, education or residence and other documents.

- That the parents cannot arrange for the bail amount or proof of age, education or residence and other documents.

- That the child refuses to be honest about giving their case details or their correct home address

- That the child has more than one case pending before the Juvenile Justice Board

- Overburdened Juvenile Justice Board and the increasing number of pending cases.

- There is no vacancy in any of the Special Homes, which is another option to rehabilitate the child, the child may have to stay in the Observation Home for a longer time.
PRe-ADMISSION ORIENTATION FOR
CHILDREN IN CONFLICT WITH LAW:

The doubts and fears that are uppermost on the child's mind, can be easily clarified and put to
rest at the very start. Listed here are some of the basic things about the law that you should
tell a child who is in conflict with the law.
First and foremost, all children should know about the Juvenile Justice (JJ) Act, that it is a law
set up for the care and protection of children, and that they will be dealt with under the
provisions of it. They should understand that it was specially developed keeping in mind that
children have specific needs and require a certain amount of direction and protection.
When will the home be like?

- Family functions
- Dining facilities - one in a while
- Summer vacations and farm vacations

We will take you home for

When will you be able to come home to meet us? (for parents, guardians)

- Wherever I get time from work
- Once a month
- Once a week

We read and stick to all. If you can give the reason of why you be in contact over the phone.

How often will I come to meet you?

- We are financially more stable
- You complete your education
- You complete 16 years

In consistent doubt (again give initial but reassuring answers and reasons while always remaining the child that you will be the home) they are children until they are 16 years old. You will return to your own home when

How long will you be there?

will give you an education so that you may make a better life for yourself.

If you don't work and you don't study well, the home can give you this. Of this is your good education costs a lot and you need to study well. The home can give you this. Of this is your

For example: You know that your parents work hard and are trying their best to provide for you but a

Because this is a substitute. We are sending you there so that so that you can have a better

Where are we sending you there?

Parents & Guardians Please talk to your child and reassure them...
PRE-ADMISSION ORIENTATION FOR
CHILDREN IN NEED OF CARE & PROTECTION:

Staff must ensure that parents / guardians orient the child about the institution. You could simply translate and photocopy the next page and give it to parents as a hand-out. This will provide guidelines for this orientation.

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Documents needed for Admission

In every case concerning a juvenile/child, the Board shall either obtain-

(i) A birth certificate given by a corporation or a municipal authority; or

(ii) A date of birth certificate from the school first attended; or

(iii) Matriculation or equivalent certificates, if available; and

(iv) In the absence of (a) and (b) above, the medical opinion by a duly constituted Medical Board, subject to a margin of one year, in deserving cases for the reasons to be recorded by such Medical Board.
Pre-admission Preparation

Do you remember the first time you left home? Perhaps it was on a holiday with relatives? Or maybe you went to study in a different city? How did you feel? Excited, but also perhaps a little uneasy? Nervous? It is strange to part from all that you know and are familiar with even when it is something you want to do.

So put yourself in the shoes of the children when they first come to the Children's Home. They do not have a choice. They are there because someone sent them - often without giving them any reason - tense, scared, traumatized. Wouldn't it be helpful for them if the person bringing them gave them a simple explanation about why they are coming to the Home? Wouldn't it reassure them to know that adults in the Home have their best interests at heart?

And it isn't hard to do. In fact, it starts with the person who brings the child into the institution for the first time. We have prepared a checklist of issues and questions that the person who is bringing the child should carefully and sensitively clarify to the child before they are brought to the Home. This will help the child to not feel abandoned and to understand why they are here. This small step would help to put children in a more positive frame of mind and make the admission procedure less overwhelming and easier to cope with. This will make it easier on institutional authorities too.

As an institutional authority, begin making sure that the parent, concerned citizen or guardian who brings the child to the institution sets the correct tone in the first place. You could give them this checklist of issues that they should run through with the child. Keep this handout in your Home as well, to be used by those who are in charge of admitting the child. Also, when you yourself speak with the child later on, make sure that you are saying the same things that they have been told by the parents or whoever has brought them to the Home, or else explain why you are giving them a different answer.
Recreation: 3 hours = 20%
This is the best part of the children's day! However, if time is not kept aside specifically for recreation, the children tend to be at a loose end many times during the day. There should be some unstructured play time for the children to relax but also some structured play, organized by the Recreation committee. This includes dance, drama, sports and other subjects covered in the booklet.

Daily living/meals/baths: 2 hours = 13%
Things like meals and baths should be factored in to the children's daily schedule without much difficulty. It will need to revolve around school times for different children.

Meetings with authorities: 2 hours = 13%
Meetings with the Superintendent, CWO, and health worker are all important meetings that the child needs to have. If he knows in advance when these meetings are, he will be able to schedule his time too, e.g. he may need to cut short his homework time to meet the CWO and so he needs to finish it faster. It also makes the children equally responsible about keeping to the meeting times with authorities and will also make them feel that there is always a time exclusively for them.

RESULT

The result of an organized, well managed Home cannot be emphasized enough. With good schedules, there will be no scope of things being overlooked, people avoiding their duties, or children being left unobserved. This will translate into all the staff being kept updated so that they can make better, more informed decisions resulting in better welfare for the children, which is the key aim for any Home. So do try and follow these schedules, with room for flexibility, and you will notice that your efforts will be rewarded with staff and children being motivated.
children's routine

While it is important for the staff to have schedules, it is equally important that the children have one too. Schedules give security and solidity to a child’s day. It also ensures that they do not waste their time. The schedule however needs to be flexible and not so rigid that it feels too regimented. Some guidelines for the children’s schedule:

Education and school work: 6 hours = 40%
Education or going to school should take up a large part of the day. All children in the Home should either be going to school or given some education in the Home. Schedules need to be devised, based on age, and different school shifts. Travel time must also be taken into account. For children learning in the Home, there should be a timetable, just as there would be in a school, and this should be followed regularly.

Remedial work/ home work/ vocational activities: 2 hours = 13%
Uninterrupted time needs to be set aside specifically for homework so that the child knows that it is his responsibility to finish it in the time slot. Study groups can also be conducted at this time. For older children, this time can be spent on vocational training, whether in or outside the Home.
Daily work: 6 hours = 80%
This is the bulk of the daily schedule. It covers all the many duties that the staff members have.

- Prepare and plan each class, remedial work
- Follow up with the school once a week
- Help the children to form study groups
- Submit a weekly report to CWO with observations on the children & inform the CWO of any special cases.
- Participate in the institutions committee work
- Organize innovative activities like debates, exhibitions etc.

- Regularly updates files
- Maintains sick room
- Weekly check of medicines
- Maintain health committee
- Inform children about ord. timings

- Plan weekly menu
- Incorporate seasonal fruit and vegetables
- Inform CWO/ Superintendent of weekly plan
- Plan any special meals (for sick children) by meeting with Health Officer and CWO
- Plan special occasion meals
other staff members

Other staff members cover people like teachers, cooks, health workers etc.

**Time management wheel**

- **Planning and committee work**: 5%
- **Networking**: 3%
- **Updating meetings**: 10%

**Daily work**: 80%

- **6 hours**
  - 1 hour
  - 1.5 hours
  - 2 hours

**Updating and meeting**: 1 hour = 10%
This time applies to all staff as they will all be involved with meetings with the Superintendent or with CWO or other staff members.

**Networking**: 1.5 hours = 5%
This could involve any networking the staff may need to do with people outside the Home. E.g. The teacher with the school, or health visitor with a hospital etc.

**Committee work**: 2 hours = 5%
Again, all staff will be, along with their main role and responsibilities, members of other committees in the Home. Time must be scheduled for any meeting of the committees, plan making and preparatory work.
At least one day a month the P.O. / CWO should be accessible to meet parents. Inform the parents about the date and set a system for this. When there are cases that require immediate attention, please make exceptions.

**Field work: information gathering/court/home visits: 3 hours = 35%**

This is another area that needs to be accounted for in a plan. Though court visits may come up at short-notice, it needs to be factored in to a weekly plan so that it does not disrupt an entire schedule. If there is any change in meeting with children particularly, they should be informed as early as possible and an alternate date set up to avoid disappointment and feelings of rejection.

**Committee work and meetings: 1 hour = 20%**

The P.O. / CWO has to liaise with other staff to be able to get a true picture of a case. He needs to allocate time to:
- Participate in the orientation, classification, education, vocational and rehabilitation programmes
- Participate in the exit programmes, and help the child establish contacts which can provide emotional and social support after their release.

Also time should be allotted for committee work, and like the Superintendent, or perhaps with him, the P.O. / CWO should meet all the committees once a week. This could be achieved by having meetings between the teacher, the P.O. / CWO and child. The teacher should keep the P.O. / CWO posted on each child's educational performance and the P.C. / CWO can guide the teacher based on the history of the child. Similarly, the P.O. / CWO must take feedback from the doctor and cook on the different children and their well being. All this needs to be documented in the child's case file.
probation officer / child welfare officer

The Child Welfare Officer is one of the most important people in the Home. His interaction with the children is key to running a happy Home. There is a lot of pressure on his time and it is vital that it is well managed and well planned.

![Time management wheel]

20% COMMITTEE WORK & MEETINGS

1 HOUR

2 HOURS

35% FIELD WORK

DAILY CASEWORK 45%

Daily casework: 4 hours = 45%

Handling casework is the primary duty of the P.O. / CWO and therefore maximum time has to be allotted to this task. This would cover conducting social investigations of the child through personal interviews and from the family and other sources and dealing with their difficulties in the Home.

A good way to manage time would be for the P.O. / CWO to divide their day or their week into different aspects of casework, like tracing and information gathering and meeting with the children.

E.g. Everyday the P.O. / CWO could do two group meetings, with 10 children and five individual cases. By doing this, he will be able to meet almost 250 children every month which is a very commendable number. When the child is new, the P.O. / CWO will have to meet him individually and in-depth to address his concerns. The P.O. / CWO can keep a register and note the children he has met and rotate his meetings accordingly.
caretaker

The Caretaker is the most hands-on person in the Home. His time is in constant demand and therefore must be scheduled well.

**Daily supervision: 4 hours = 45%**
As this is the main role of the Caretaker, maximum time is devoted to this. His role covers looking after the day-to-day running of the Home, checking supplies, dividing some duties, overseeing the children's daily activities, etc.

**Systems and discipline: 1 hour = 11%**
The Caretaker can devise systems and routines for the children like bath routines, meal routines, etc. It will help the Caretaker to put up a schedule and a list of daily living guidelines.

**Escorting: 2 hours = 22%**
Some time must be allocated for the Caretaker to escort children to wherever may be required, e.g. school, court, health center.

**Meeting and planning: 1 hour = 11%**
This time applies to all staff as they will all be involved with meetings with the superintendent or with parents or other staff members.

**Committee work: 1 hour = 11%**
Again, all staff will be, along with their main role and responsibilities, members of other committees in the Home. Time must be scheduled for any meeting of the committees, plan making and preparatory work.
Caretaker's Time Management Wheel

- 4 hours Daily Supervision 45%
- 1 hour Systems and Discipline 11%
- 2 hours Escorting 22%
- 1 hour Meeting and Planning 11%
- 1 hour Committee Work 11%
**Inspection:** 1 hour = 15%
This will take up to an hour and needs to be done daily. It covers checking toilets, the kitchen, beds etc., and seeing to the general discipline in the Home. A combination of planned and surprise checks will keep everyone on their toes!

**Correspondence, paperwork:** 2 hours = 28%
This is a significant task and the Superintendent needs a specific, uninterrupted time for this so it must be scheduled accordingly. This covers any correspondence with the children’s families, letters to other departments, government agencies or NGOs, updating children's files etc. It is recommended that this is done daily so that issues are not overlooked or left unattended.

The superintendent is also in charge of important confidential documents, deeds agreements, personal files of staff, valuable articles of children. It might be useful to delegate this duty to a clerk, wherever possible.

**Interaction with children and families:** 2 hours = 28%
Being the Head of the Institution, it is very important that the Superintendent is accessible to the children and their families. A specific time should be set aside everyday when children can meet the superintendent with any problems. Perhaps there could be one ‘Open Door’ slot in the day or two slots keeping in mind school shifts and schedules. If the Superintendent is not able to meet the child on a particular day, the next meeting date needs to be given to the child and also noted in the Superintendent’s diary.

A morning assembly, like in a school is a good way for the Superintendent to meet the children, even though it is not individually. It makes the Superintendent visible and available to the children.

A morning assembly could sometimes be converted into a weekly 'open forum' so a day can be specified for this. Similarly a monthly 'open forum' can be scheduled with parents.

**Planning:** 1 hour = 15%
Time must be allocated for planning, as the Superintendent plays a coordinating role with other staff. This time is spent in assigning specific duties to specific staff with goals and targets. E.g. Teachers have to submit lesson plans for new arrivals, cook to discuss weekly/monthly menus, peer committees can discuss the month's recreation plans, and the health committee can update you on the stock of the sick room.

Since the Superintendent is also in charge of finances, it is important to have a planning meeting with senior members in March, to help and guide them make their annual plan jointly. Also to budget with the funds available, and keep aside emergency funds for unforeseen difficulties.
superintendent

The role of the Superintendent is one of great responsibility. It is to him that the staff looks for guidance and support. For this, he needs to be especially well organized, be able to co-ordinate with all staff and lead by example.

**Daily reviews and updates: 1 hour = 14%**

This includes all the meetings that the Superintendent needs to have with institutional staff. A weekly meeting with all staff will keep him updated on activities in the Home. It will also help staff know what each one of them is doing and give them a complete picture of what is happening in the Home. There should be daily meetings with different committees to get more in-depth information, discuss trouble areas, plan and make decisions for the coming week.

**EXAMPLE**

Monday : Weekly staff meeting for the entire institutional staff.
Tuesday : Meeting with Health Committee.
Wednesday : Meeting with Recreation Committee, and so on.

Meetings with the children also need to be scheduled, whether on a daily basis or on specific days in the week. Meeting dates need to be given to the child and also noted in the Superintendent's diary.
MANAGING TIME

Superintendent
Probation Officer / Child Welfare Officer
Caretaker
Others
Children’s Routine
Once the committees are in place, it is crucial for institutional heads to keep in touch with the committees, monitor them, receive updates of their activities and guide them in making future plans. For e.g., the superintendent could have a Monday morning meeting that focuses on the accomplishments and challenges of the entire staff for that week. The rest of the week, the superintendent could conduct morning meetings with the different committees, helping them breakdown a larger task into small weekly targets.

Included in this manual, under each staff role, is a guide to time management - an easy way to divide your time so that all your duties are covered, and there is clarity about who is responsible for specific areas. This will help delegation and leave no room for anyone to shirk their responsibilities.

We hope that these ideas help to both ease the pressure on individuals and regularize and maintain roles and responsibilities of all the staff in the Home. As the institutional head, don’t forget that it is always good to motivate your staff through praise and reinforcement.
It is impossible for institutional heads to manage all of the responsibilities of running institutions on their own. It is far more important for them to direct, supervise and coordinate their staff to work effectively. For this reason, you will find three recurring concepts throughout the manual: scheduling, allocations and committees.

The most important things to do are to plan, allocate and monitor. You will find that in most sections we recommend that the institutional head forms various committees - a health committee, an admission committee and so on. This is not a new idea, but one which we have seen work very effectively in institutions when they are organizing celebrations at Ganpati or Diwali time.

So why not take this idea further? With most institutions averaging at about 15 staff members, you have the scope to form at least 4-5 committees. We have also suggested forming peer committees, comprised of the children themselves, to organize activities like recreation. This is a process they will enjoy while they also learn about responsibility and accountability.

We recommend that staff members be briefed on their individual roles and responsibilities. Discuss three levels of work: the Primary Duty, Special Obligations and Committee Assignments. Support their efforts by providing guidance and direction on resolving operational problems and conflicts, writing detailed staff schedules and arranging for substitute coverage. Make sure that the committees are very clear about their tasks and roles and try to articulate the committee's functions in four or five broad areas.

**EXAMPLE**

**Responsibilities**

- Stocking and maintaining medical supplies
- Supervising and cleaning the sick room
- Networking, setting up referral systems with local hospitals
- Documenting and maintaining health files of children
- Organizing quarterly health camps, preventive health programs and awareness workshops with children
SCHEDULING
ALLOCATIONS
AND
COMMITTEES

CALENDAR
Introduction

This handbook is intended as a flexible tool for anyone who is involved with the running of a children's institution as per India's Juvenile Justice (Care and Protection) Act.

While most institutional staff have years of experience in institutional care and have good ideas about what to do, but it is not uncommon to hear statements like: "I do not have time to do everything .... I know it needs to be done, but who is going to do it?" For this reason, we have focused more on the "how to do" aspects of running children's institutions, like systems, planning, scheduling and allocating. We have put together some simple tips, based on good practice that we learnt from the staff of different institutions.

This handbook is structured in a way that traces the child's entire experience in the home right from the admission process to the time the child prepares to leave institutional care. It includes tips, checklists, communication material and pages, which can simply be photocopied as handouts.

We believe it can be used for both Observation Homes and Children's Homes. After all, a rehabilitative restorative and child-friendly environment is the priority for all children's institutions. Additionally, keeping in mind the special needs of children in conflict with law, you will also find some sections/ boxes dedicated to this particular group of children.

Please use this as a starting point to address operational issues in your institutions and programs. These are not rules, but rather ideas and guidelines. We encourage you to build on them and find a system that works best for you.

The result for everyone is a happy, well-run Home where both staff and children are motivated, content and can work together.
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Aangan for Department of Women and Child Development
A HOME AWAY FROM HOME

A GUIDE TO RUNNING A HAPPY AND CHILD-FRIENDLY CHILDREN'S HOME

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