

National Initiative & Integrated Resource for Child Protection, Mental Health, & Psychosocial Care

**1st Quarterly Report
June to September 2020**

**Dept. of Child and Adolescent Psychiatry
National Institute of Mental Health & Neurosciences
(NIMHANS) Bangalore**

**Supported by Ministry of Women & Child Development
Government of India**



1. Project Aim & Objectives

The National Initiative & Integrated Resource for Child Protection, Mental Health and Psychosocial Care. This initiative, supported by the Ministry of Women & Child Development (MoWCD), Government of India, is located in the Dept. of Child & Adolescent Psychiatry, NIMHANS. Following the receipt of funds from MoWCD, in mid-June, the project has initiated recruitment and activities over the past two months, as briefly presented in this report.

Aim: To enhance child and adolescent psychosocial well-being, particularly of children in difficult circumstances, through promotion of integrated approaches to mental health and protection.

Strategic Objectives:

Strategic Objective 1: Develop standardized child-centric modules and resources for the capacity building of primary, secondary and tertiary level psychosocial and mental health care service providers.

Strategic Objective 2: To strengthen knowledge and skills in child and adolescent protection and psychosocial care in various cadres of child care service providers in the country, through training and capacity building initiatives at primary, secondary and tertiary care levels of child protection and mental health.

Strategic Objective 3: To enhance child and adolescent protection and psychosocial care programs implemented by government and non-government agencies, by providing technical support on program design and quality.

Strategic Objective 4: To undertake studies, audits, research and advocacy on issues pertaining to child and adolescent protection and related issues of mental health and psychosocial care.

Strategic Objective 5: To utilize the experiences of capacity building, technical programmatic support and research in informing child and adolescent laws and policies in the country.

2. Initiation of Operations

The initial grant (for a period of 6 months) was received from MoWCD on 18th June 2020, following which recruitment and other operations were begun in accordance with NIMHANS and central government policies and processes.

2.1. Staff Recruitment

In keeping with NIMHANS and central government policies, due administrative process were followed and an initial round of recruitments have been completed, to include the following staff/positions:

- Technical and Operational Lead (1),
- Thematic Leads for Care and Protection/Education/Mental Health/Law and Policy (2),
- Project officers i.e. clinical psychologists/social workers and lawyers (9),
- IT coordinator (1)
- IT officers (2)

The recruitment process was begun as soon as the funding was received and with the requisite notifications and interviews, staff recruitments were completed at the end of the first month i.e. towards end of July, and the staff recruited were able to join/begin work in the 3rd week of July 2020. (However, work was also initiated by the Project Head even before staff recruitment was completed). It has been decided to proceed with further recruitments, depending on how the COVID situation unfolds. Currently, with lockdown and travel restrictions, travel is not possible—and so project activities that entailed on-the-job/ onsite training cannot be conducted. Thus, the recruitment processes are almost complete for the number of staff required to initiate and implement project activities via virtual knowledge network have been recruited—additional rounds of recruitments for psychiatrists and the remaining two positions for Thematic Leads are in process and will be completed in the second quarter of the project.

2.2. Setting Up of Work Stations and Virtual Knowledge Network

Setting up of work stations and procurement of requisite equipment (laptops, communication, consumables) have also been initiated in keeping with the current staff size. The VKN rooms are in the process of being set up, with processes of Virtual Knowledge Network VKN procurement also in process. Procurement of equipment (such as laptops, softwares, internet connectivity) is almost complete; Work on 4 VKN rooms is on-going; the rooms are expected to be completed and ready for use by mid-November. However, despite not having a complete VKN set up as yet, the team is fully functional and able to conduct training and capacity building activities/sessions online, with the available equipment.

3. Introduction of the Initiative to Relevant Stakeholders & Related Orientations

In order to coordinate with and inform relevant stakeholders across India about the NIMHANS-WCD Initiative, over 500 letters have been sent to relevant State Departments (Health, WCD, Education, Social Justice and Welfare), Judicial Academies and State Legal Service Authorities, Police Academies, Childline, UNICEF and other agencies working with child protection and mental health issues. Meetings with UNICEF and state-level stakeholders, such as CHILDLINE have been held to understand technical support needs and response is on-going. (Refer to Table 1 for details on meetings and orientations).

A meeting with Lal Bahadur Shastri National Academy for Administration was also attended by the project head and plans were made for the Initiative to input into LABASNA's plan to start courses on child rights.

Table 1: Meetings & Orientation for MoWCD and Other National Institutes and Agencies, June to September 2020

Ministry/Agency	Content/ Theme	No. of Participants	Date
Lal Bahadur Shastri National Academy of Administration	Consultation Meeting to Develop Courses on Children's Rights	20	July 2020
MoWCD (Meeting with JS)	Introduction to our Initiative and presentation of 1 st 6 months plan	6	July 2020

MoWCD (incl. NIPCCD/CARA and other stakeholders of MoWCD)	The ABCs of Child Mental Health & Protection	106	August 2020
UNICEF	Orientation to Project & Discussion on Areas for Collaboration	5	August/ September 2020
Total		137	

A draft document on Integrating Mental Health and Wellbeing in Child Protection Policy and Interventions” has been developed for CHILDLINE, including ways in which the NIMHANS initiative can assist CHILDLINE on these integration issues (this was in response to CHILDLINE’s expressed needs for support and capacity building). Capacity building work with CHILDLINE has also been planned (as described in subsequent sections of this report).

On request from MoWCD, in August 2020, a 2-hour (online) orientation titled the ‘ABCs of Child & Adolescent Mental Health’ was held by the NIMHANS team, and over 300 government officials working in various capacities in or with MoWCD attended the session. Many suggestions and recommendations were made during this session, for training and interventions on various areas of child protection and mental health—the NIMHANS team has taken these on board whilst designing public discourse series and other technical programs.

4. Technical Interventions

Technical interventions describe the various types of engagements that the Initiative has been implementing, ranging from public discourse series, to training and capacity building programs and research studies, in the 4 key thematic areas of the Initiative, namely, mental health, care and protection, education, law and policy.

4.1. Public Discourse Series

In order to generate public awareness on child protection and mental health issues, the Initiative has conducted two series, one on child protection in the context of COVID, and another on parenting, as well as other public discourse sessions (Refer to Table 2 for details). These discussions were telecast on Youtube in order to reach the general public at large, including parents and caregivers, child protection workers, educators, mental health professionals, so they had pan-India coverage. With a **total viewership of 20,710** (as of 17th October 2020), there has been a tremendous response to these public discourses, which provided opportunities for questions and responses to many common concerns about children. Given the positive response received and the public demand for more such discourses, the project is in the process of planning other such series for the upcoming quarterly. The discourses are available online, where also the Initiative may be reached, as follows:

YouTube Channel: <http://www.youtube.com/c/NIMHANSChildProtection>

Facebook: <https://www.facebook.com/childprotectnimhans>

Twitter: https://twitter.com/nimhans_CPC

Instagram: <https://www.instagram.com/nimhanschildprotect>

Linkedin: <https://www.linkedin.com/in/nimhanschildprotection>

Table 2: Public Discourse Series & Talks, June to September 2020

Content/ Theme	No. of Participants/ Views	Date
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August Talks Series (1): "The Child Protection & Mental Health in the Context of the COVID Pandemic" "Impact of the Pandemic on Vulnerable Children: Child Rights and Field Realities"	1,043	August 2020
August Talks Series (2): The Child Protection & Mental Health in the Context of the COVID Pandemic "Challenges of Cultural Consultations to Youth Protection Services for Children from Minority Communities in South Asia, Caribbean , Middle East"	980	August 2020
August Talks Series (3): The Child Protection & Mental Health in the Context of the COVID Pandemic "National Education Policy 2020: Does it Prepare the Indian Education System to support the needs of a Peri-COVID and Post-COVID Era?"	1,063	August 2020
August Talks Series (4): The Child Protection & Mental Health in the Context of the COVID Pandemic "From Social Isolation to Changing Definition of Grief: The Effect of the New Normal on Children and their Mental Health"	722	August 2020
"Parenting Pathshala" Series (1) "A Lot of help & Even More Hope...Parenting Children with Special Needs"	3,037	September 2020
"Parenting Pathshala" Series (2) "What Happens when I am No Longer Around...How Parents of Special Needs Children Need to Think from Day 1"	1,219	September 2020
"Parenting Pathshala" Series (3) "Do Children Need Discipline? Setting Healthy Boundaries for Children"	1,228	September 2020
"Parenting Pathshala" Series "Why is the Sky Blue? Where do People go when they Die? Why do I have to School?—An Anthroposophic Perspective on Parenting"	4,397	September 2020
"Parenting Pathshala" Series "Preserving a Sense of Curiosity and Wonder—Nurturing Young Children"	680	September 2020
"Parenting Pathshala" Series "Raising Children to Think Right and Do Right—Inculcating Values & Ethics in Children"	750	September 2020
"Parenting Pathshala" Series "Now is the time to study... not to fall in love!"	857	September 2020
The Unbundle Series: Early Childhood Care & Education "Importance of Stimulation in Early Childhood Development & Care" (Organized by Makkala Jagriti/NGO—with a Request to Participate in their Public Discourse Series)	263	September 2020
"Nothing that grieves children, can be called little" Public Discourse Lecture for Medical Service Centre, Karnataka	2,144	September 2020
"To a child you cannot say tomorrow" Prioritising Issues of Care and Protection During Covid-19 For Children in Difficult	185	October 2020
"World Mental Health Day 2020" organized by: UNICEF	190	October 2020
"Parenting Pathshala" Series "Can I go to my Friend's Party?" Addressing Substance Use Issues in Adolescents	629	October 2020
"Parenting Pathshala" Series	620	October 2020

"Who is my 'Real' Family?" Parenting in the Context of Adoption & Foster Care		
"Parenting Pathshala" Series "Parents are not God" Balancing Identity and Selfhood Issues with Parenting Roles"	703	October 2020
Total (Viewers)	20,710	

4.2. Progress & Achievements of Key Thematic Areas

The Initiative works, albeit in a complementary and integrated fashion, under 4 thematic areas, namely, Care and Protection, Mental Health, Education, and Policy and Law. During the first quarterly period, each thematic area (as detailed out below) has been engaged, not only with reaching out to stakeholders, to discuss and plan work in accordance with their needs and requests, but also to adapt existing training materials, develop new ones and deliver training programs.

**A Note on Concept Notes and Material/ Curriculum Development: The NIMHANS-MoWCD National Initiative & Integrated Resource for Child Protection, Mental Health, & Psychosocial Care was preceded by the NIMHANS-DWCD, Government of Karnataka Community Child & Adolescent Mental Health Service Project. In the earlier project, a large repository of training materials for child care service providers and activity books and materials for children were developed (and freely available on www.nimhanschildproject.in). However, these training materials were developed for conducting in-person training workshops. In addition to developing new materials and content, the (present) NIMHANS Initiative is also adapting converting existing materials and methods into those that can be delivered online for both synchronous (live sessions) and asynchronous (i.e. through e-learning) methods. These online methods will enable the Initiative to reach a larger number of service providers across the country, particularly in the time of the COVID pandemic, when there are travel and mobility restrictions.*

Most of the training curriculums developed have also been placed within concept notes for capacity building which are enclosed with this report. These concept notes are being shared with state departments and other agencies who have been reaching out to the NIMHANS Initiative, to acquaint them with the training content and methodologies, and assist with delivery of training programs to various cadres of child protection workers.

A. Care and Protection

A.1. Key Thematic Objectives

- To develop a comprehensive approach to child protection through the integration of child protection, mental health and psychosocial care into existing child protection systems in the country.
- To strengthen knowledge and skills of child protection functionaries in protection, mental health and psychosocial care, so that care and protection interventions are delivered in ways that ensure children's mental health and well-being.
- To undertake action research and studies in child protection with a view to enhancing interventions, and assistance, programs for children and adolescents, as well as for informing child policy and law.

A.2. Material Development

The Care and Protection team has been engaged in the development of concept notes, content and curriculum development, in accordance with the needs of various stakeholders who approached the Initiative for training and capacity building programs. The completed curriculums and modules are as described below:

a) Training Curriculum for ‘Runaway Children: The Revolving Door Syndrome’

Given that the concern of runaway behaviours in children is common across the country, and would need to be addressed in other states, the Initiative developed a training module on the issue on the basis on some field work conducted in CCIs in Bangalore/Karnataka. Focus group discussions (FGD) were conducted with groups of children in CCIs, to elicit children’s perspectives i.e. on why children run away from child care institutions. Information on institutional environment and facilities, relationship with staff, perceptions of safety and other issues that are likely to influence their decisions to run away, was elicited. This information, along with previous research conducted on the issue, was used to develop a comprehensive training program.

The training curriculum, designed for child care institution staff (superintendents, probation officers and counsellors) focuses on: enabling an understanding of the basis and reasons for children’s runaway behaviors, both in the home/family as well as institutional contexts; building basic communication skills to facilitate supportive care worker-child relationships; equipping the child care service providers to provide first level interventions to children with runaway behavior and implementing preventive interventions in child care institutions--through safety measures, environmental modifications, structured daily routines and life skills education.

b) Training on Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care

There is an imperative for child care service providers, especially social workers and counselors (and other ICPS staff) to develop a strong understanding of psychosocial contexts and the socio-emotional impacts on children, for the purposes of operationalizing of the concept of child rights, upon which the JJ Act rests, and for providing appropriate assistance to children. This training curriculum therefore forms the basis of all child protection work and is an ‘essential’ first level training that the NIMHANS Initiative will provide to all child care services/ stakeholders. It is designed to equip child protection functionaries with skills to make decisions about the children’s care, protection, treatment, and rehabilitation, from a child psychosocial and mental health perspective.

c) Training curriculum on ‘Adoption Counselling: Working with Young Children & Prospective Adoptive Parents’

In keeping with the objectives of child adoption and the of CARA, the existing training curriculum of the NIMHANS Initiative is being revised and further refined to train adoption social workers, coordinators and counsellors in DCPU, SARA and CARA schemes to provide timely and appropriate assistance and support to: (i) (prospective) adoptive parents at key decision-making stages in the adoption process, and after, consequently ensuring the safety and best interests of the (adopted) child. (ii) preparing children for adoption and adjustment into a new home and family. The content therefore focuses on: how to conduct systematic home studies to assess the capacity of prospective adoptive parents for adoption and parenting; skills to implement developmental assessments for young children for use in CARA categorization processes as well as pre-adoption counselling with prospective adoptive

parents; methods and skills to communicate with young children on issues of trauma, adoption and adjustment; pre-adoption counselling skills for prospective adoptive parents, to include an understanding of-- children's developmental status and the interventions that children may require post-adoption/ how to enable children to adjust to their new home and family, in the immediate aftermath of adoption/ parental attachment and bonding with adopted children/adoption disclosure issues.

d) Training on Mental Health & Psychosocial Care for Sexually Abused Children

Given that in addition to assisting women affected by violence, One Stop Centres (OSCs) also have a child protection mandate, in that they need to provide assistance to sexually abused children, a training curriculum, and materials, has been developed for OSC counsellors to enable them to work with CSA issues, including on conceptual knowledge of how child abuse plays out, how children are impacted by abuse (emotional and behavioural impacts of abuse), the types of interventions and methodologies that require to be used to assist children of various ages and methods of supporting children through court (POCSO-related) processes. The content therefore focuses on: enabling an understanding the dynamics of child sexual abuse and the implications for disclosure and mental health issues; identifying developmental and mental impacts of CSA and providing appropriate referrals to specialized mental health services; developing skills in communication with and counseling of children who have been sexually abused/ administering psychosocial and mental health assessments in CSA/ provision of immediate family and systemic interventions; orientation to the POCSO law and related legal and court processes.

***[Concept notes for (b), (c) and (d) are enclosed with this report].**

A.3. Training and Capacity Building

The Care and Protection team has initiated and completed several training and capacity building activities, upon request from various agencies/stakeholders, during this quarterly. **A total of 1,463 service providers and child protection functionaries were reached** through training sessions. (Please refer to table 3 below).

Table 3: Training and Capacity Building Programs, Care & Protection, June to September 2020

State	Agency/ Government Department & State	Cadre	No. of Participants	Theme/Content	Date
Karnataka	Directorate of Child Protection, Department of Women and Child Development, Karnataka	Child care institution staff from government and non-government CCIs	800	Caring for Children the 'right' way: In the Context of Corporal Punishment in Child Care Institutions	5 sessions in July, 2020
West Bengal	UNICEF, CHILDLINE	Master trainers of CHILDLINE, CRY and other partners	75	Addressing Child Mental Health & Psychosocial Issues in Disaster - First Aid to Children Affected by COVID 19 and Natural Disasters, West Bengal	10 th , 11 th and 12 th August, 2020

Karnataka	Directorate of Child Protection, Department of Women and Child Development, Karnataka	Superintends, Probation officers and counsellors of government CCIs	244	Runaway Children: The Revolving Door Syndrome - a training workshop on runaway behaviours in children in the care and protection system	4 batches over 8 sessions. From 3 rd to 11 th September, 2020
Kerala	KAVAL Project, DWCD, Kerala	Social workers, LPOs, Counsellors, and DCPOs of KAVAL project, Kerala	61	Workshop on Sexuality and sexual decision making among Children in conflict with law.	28 th September, 2020
Karnataka	Directorate of Child Protection, Department of Women and Child Development, Karnataka	CCIs counsellors and DCPU staff	214	An orientation session to counsellors of Child care institutions and DCPU staff to a large repository of training materials.	1 st October, 2020
Goa	State Commission for Protection of Child Rights, Goa	Members of the commission, CCIs staff, DCPUs	69	"To a child, you cannot say tomorrow- Prioritising issues of care and protection during COVID-19 for children in difficult circumstances "	6 October, 2020
Total No. of Service Providers/ Protection Workers Trained			1,463		

A brief description of each training workshop/session conducted is given below.

(i) Caring for children the ‘right’ way – a training module on Corporal Punishment

Following the death of one the children in a child care institution (CCI) due to corporal punishment/physical abuse by a guard, the Directorate of child protection, Dept. of Women and Child development, Govt. of Karnataka, requested the Initiative to conduct training for all government and non-government child care institutions staff in Karnataka state. The training was focussed on providing an understanding of the following issues:

- Child-centered and child-rights oriented framework to care for children living in institutions.
- Psychological and social contexts of children living in institutions.
- Common emotional and behavioral problems and challenges among children living in institutions.
- The Impact of corporal punishment and harassment, on children.
- Appropriate responses to children’s (difficult) behaviours using positive engagement and other such methods.

5 batches of child care service providers were trained over 5 half a day sessions in the month of July, 2020. 800 participants who were staffs of government and non-government CCIs (superintendents, house mothers/ fathers, counsellors and guards and social workers) across Karnataka state were trained. The participants raised many issues and challenges about dealing with the children’s difficult behaviours, such as anger and aggression, truancy, lying and stealing, and other oppositional behaviours. The Initiative provided frameworks and

approaches to address such problems in children and discussed the need for further depth training and capacity building on these issues.

(ii) Addressing Child Mental Health & Psychosocial Issues in Disaster –Psychosocial First Aid to Children Affected by COVID 19 and Natural Disasters

UNICEF approached the Initiative for training master trainers of CHILDLINE, CRY and other partners on understanding the humanitarian context & its psychosocial-mental health impact on children in the context of COVID 19 pandemic and Amphan natural disaster. The objectives of the training were:

- Understanding children's emotional and behavioural issues in the context of disaster.
- Knowing when to refer children for mental health assistance
- How to get started with children- developing basic psychological first aid (PFA) skills.

On 10th, 11th and 12th August, 2020 the Initiative conducted the training of the above-mentioned target group and initiated the program with what characterizes disasters and traumatic events with specific focus on children's perspectives and concerns in disaster. During the session children's perspectives & concerns in disaster, how children's needs during a humanitarian context are different from those of adults, and common emotional and behavioral responses to difficult and traumatic experiences such as depression, anxiety PTSD were discussed. The session also focused on the impact of disasters on children's developmental trajectories. Psychological first aid included skill training on communication and first level responses to children's concerns and emotional problems in disaster and pandemic situations; it also included an orientation to the methods and activities that could be used in child friendly spaces. A follow-on training on addressing the trauma of loss and grief in children living in disaster contexts has been requested and is planned for the upcoming quarterly period.

(iii) Runaway Children: The Revolving Door Syndrome - a training module for on runaway behaviours in children in the care and protection system

The NIMHANS Initiative received information from the ICPS Directorate, Dept. of Women & Child Development, Government of Karnataka regarding the recurring problem of children running away from child care institutions (CCIs). While this has been an on-going problem for some years now, recent incidents in some districts precipitated the Directorate's request to the Initiative. The concern of the Directorate was that despite children being provided with care and protection, including basic needs and education, in CCIs, many children do not wish to stay in CCIs. The Directorate was concerned about the safety and best interests of these vulnerable children, particularly those with repeated runaway behaviours, as this could lead to serious protection risks for the children (including trafficking). It therefore felt that it would be important to provide training and orientation to the CCI staff, so that they better understand the background and needs of children with such runaway behaviours, make provisions for and use sensitive methods of communication, to help children better adapt to the institutional environment.

The training workshop was done over 2 half day sessions in 4 batches. A total of 244 child protection functionaries were trained. The training activities to understand pathways to runaway behaviour among children namely – the emotional and education factors, peer influence, life skills deficit, mental health, child labour and environmental factors were covered; and this framework was used to train the staff on providing intervention to children at 4 levels – individual, group, systemic and environmental. As a fieldwork practice and follow up on the training, all participants were requested to conduct a group activity with the children in the

child care institutions and provide a report or a video record to the department. This is now followed up by the Karnataka Directorate of Child Protection.

(iv) Training workshop on Sexuality and Sexual Decision-Making in CICL

The Initiative was approached by KAVAL, a program originally developed by the Dept. of Psychiatric Social Work, NIMHANS, and absorbed by the Department of Women and Child Development, Government of Kerala through. KAVAL reaches out to the children in conflict with the law (CICL) providing them with a range of assistance from mental health treatment to rehabilitation. As part of its capacity building component, KAVAL approached the NIMHANS Initiative to train its project field officers, social workers, legal and probation officers, and counsellors on sexuality and sexual decision making in CICL. The objectives of the workshop delivered by the Initiative were as follows:

- To Obtain an understanding of the psychosocial contexts of CICL.
- Identification & analysis of CICL's pathways to inappropriate sexual behaviour and decision making, including their problem areas.
- A frame work to provide first level response and intervention to children on sexuality and sexual decision-making issues.

On 28th September 2020, the workshop was conducted by the Initiative, to include reflections on juvenile justice system, and the basis of behavioral problems and vulnerabilities in CICL. An intervention framework for sexuality and related decision-making behaviors was provided— this included skills and methods for discussing with children issues of: love and attraction/ needs and pleasures, privacy, consent and boundaries, health and safety, relationships abuse and protection. Case studies, videos and other participatory methodologies were used in the session, and they were introduced to the life skill training materials and methodologies developed by NIMHANS (on gender, sexuality and relationship issues), for adolescents.

(v) Orientation Session on Training Materials

The Directorate of child protection, Dept. of Women and Child development, Govt. of Karnataka, requested the Initiative to introduce and orient the ICPS staff to the various materials developed by the Community Child and Adolescent Mental Health Service project, which preceded the current Initiative. Many of the approaches and materials developed on that project laid the basis for the development of the current Initiative. This repository of materials is available on www.nimhanschildproject.com. Thus, on 1st October 1st 2020, the Initiative conducted an online orientation program (directing them to assessment formats and intervention materials relevant to their work) which was attended by 214 CCI staff and DCPU staff of Karnataka.

(vi) “To a child, you cannot say tomorrow- Prioritising issues of care and protection during COVID-19 for children in difficult circumstances”

The Goa State Commission for Protection of Child Rights (SCPCR) approached the Initiative for holding a session with members of the Commission and child protection functionaries, that is, staff of child care institutions, District Child Protection Unit (DCPU) social workers, counsellors and Child Welfare Committee Members. The Commission requested a special focus on children in child care institutions. On 6th October 2020, a total of 69 participants attended the session which focussed on psychosocial impacts of COVID-19 on children's lives as well as the heightened child protection risks in case of children in difficult circumstances. Particular emphasis was placed on decisions relating to placement and (de)institutionalisation in the context of COVID-19 with discussions on the need for systematic assessments of

children’s safety and protection risks before making decisions regarding deinstitutionalization and repatriation.

A.4. Research Study on COVID and Child Protection

On request and demand from the Ministry of Women and Child Development, the initiative has undertaken a study on exploring the impact of COVID-19 on Child Protection in India: Implications for Capacity Building, Interventions and Policy. The study being undertaken in Maharashtra, Bihar, Uttar Pradesh, Madhya Pradesh and West Bengal (based on data from National Crime Records Bureau and National Family Health Survey) aims to understand the nature and types of child protection risks during COVID pandemic, examine responses of child protection functionaries and use the resulting information to inform child protection programs, policy and capacity building of functionaries. The pilot is in progress for the study after which final data collection will start. (Refer to Annex 1 for further details of the study). The report is expected to be ready by the end of December 2020 and will be duly submitted to MoWCD.

A.5 Plans for the Next Quarterly, October to December 2020

The Initiative has contacted various states and organization extended its support to them, to strengthen knowledge and skills of various cadres of child protection functionaries in the country. Refer to Table 4 for the programs that are scheduled to be conducted in the upcoming quarterly period, October to December.

Table 3: Plans for the Next Quarterly Period, Care and Protection, October to December 2020

State	Government Dept/ Agency Placing Request	Cadre for Training	No. of Personnel	Content/ Theme
Karnataka	Directorate of Child Protection, Department of Women and Child Development, Karnataka	Social workers and counsellors of DCPU and CCI	120	Mental health and psychosocial perspectives on adoption
Karnataka	Directorate of Child Protection, Department of Women and Child Development, Karnataka	CCI Counsellors	80	Gender and Sexuality issues among Adolescents
Karnataka	Directorate of Child Protection, Department of Women and Child Development, Karnataka	Members of Juvenile Justice boards on	6	Training on understanding psycho-social context of children in conflict with the law and providing appropriate rehabilitative recommendations.
Uttar Pradesh	Directorate of Women and Child Development,	Departmental staff and child protection scheme functionaries, and One Stop Centre Counsellors	1121	Training and capacity enhancement on integrating child mental health and psychosocial care into the child protection system
All India	CHILDLINE India Foundation	Master Trainers and Support for training other Cadres of CHILDLINE staff	74 master trainers	Basic child protection curriculum

A.6. Other Plans in Process

Other plans for training and capacity building on the basic module on integration of child mental health and psychosocial care into the child protection system, are in process—while the content has been agreed on, the dates for delivery are yet to be determined, and are being negotiated by the NIMHANS Initiative with the concerned government department/agency. Refer to Table 5 for details.

Table 4: Plans in Process for Training & Capacity Building Programs on Child Protection

State	Government Dept/ Agency Placing Request	Cadre for Training	No. of Personnel
Tamil Nadu	State Child Protection Society, Department of Social Defence,	Departmental staff and child protection scheme functionaries, State Juvenile Police Unit, Juvenile Justice boards, Child Welfare Committee and Parents of Children in Non-Institutional Care	3,860
Manipur	State Legal Service Authority	Departmental staff and child protection scheme functionaries, State Juvenile Police Unit, Juvenile Justice boards, Child Welfare Committee	600
Sikkim	State Legal Service Authority	Departmental staff and child protection scheme functionaries, State Juvenile Police Unit, Juvenile Justice boards, Child Welfare Committee	To be determined
Bihar	State Child Protection Society and UNICEF	Child protection functionaries including counsellors of DCPU and CCIs	580

B. Mental Health

B.1. Key Thematic Objectives

- Creating public awareness about child and adolescent mental health needs and concerns.
- Training and capacity building of mental health and other related child and adolescent healthcare service providers.
- Capacity building of child protection functionaries in the primary, secondary, and tertiary levels to support the mental health needs of children and adolescents.
- Enabling linkages between child mental health services and child protection systems

B.2. Material Development

During this quarterly, a curriculum and training materials were developed for capacity building of child and adolescent service providers on mental health issues:

(i) Comprehensive Training & Capacity Building Interventions on Child and Adolescent Mental Health & Psychosocial Care for District Mental Health Program (DMHP) Staff

This curriculum is aimed at sensitizing DMHP staff to children and childhood, and understanding children from a development lens as well as developing a contextual understanding of children and their emotional/behavioural problems. Within this framework,

they would need to acquire knowledge on basic child and adolescent mental health issues i.e. clinical disorders, including on history-taking and assessment, identification of signs and symptoms, interventions for the child and family (basic pharmacological interventions as well as other therapeutic and rehabilitation related methods). It is hoped that such content will also equip DMHP staff to more effectively play their roles in executing mental health awareness and training programs at community level, for other child care service providers, such as Anganwadi workers, school teachers, and allied child services such as pediatrics, gynecology, and protection.

(ii) Comprehensive Training & Capacity Building Interventions on Adolescent Mental health & Psychosocial Care for Rashtriya Kishor Swasthya Karyakram (RKSK) Functionaries

The RKSK, whose objective is to focus on various adolescent health issues, provides critical opportunities for addressing child and adolescent mental health issues around the country, at community level. RKSK's mandate that has been expanded to include injuries and (gender-based) violence, non-communicable diseases, mental health and substance misuse (in addition to sexual and reproductive health) is in keeping with preventive and curative adolescent mental health agendas. In keeping with this the training curriculum focuses on: adolescent development and its influence on adolescent mental health, orientation to common adolescent mental health, and on developing methods and skills to address special concerns such as sexuality and substance use.

(iii) Training for Frontline Mental Health Functionaries on Child and Adolescent Mental Health in the Context of COVID-19 Pandemic

The COVID pandemic has affected children and childhood in several ways: restrictions on mobility due to lockdown, disruption in education, exposure to domestic violence, risk of increased sexual abuse to name a few. Affected children may have a difficult time coping with their emotions and may express them through behaviours such as being extremely anxious or sad, picking fights, showing hostility, etc. These behaviours need to be viewed as normal reactions to abnormal situations. Children have developmental and educational needs that suffer due to the physical and psychological/emotional impact of a pandemic. Moreover, children are exposed to an excess amount of information about the pandemic, (both factual and inaccurate) and may struggle to process this information in the absence of adult support and guidance. Therefore, a curriculum has been designed to build capacity of the mental health functionaries, who work directly with children in the community, school and health settings, to effectively communicate with children and address their concerns about the COVID- 19 pandemic and their resultant mental health needs.

[The concept notes for the first two themes are enclosed with this report].

B.3. Directory of Mental Health Professionals in India

Children who come in contact with the child protection system, either as a child in conflict with law or as a child in need of care and protection, are very often found to be in need of mental health support in addition to the social, legal and/or educational supports they may need. However, most Child Welfare Committees (CWC) and Juvenile Justice Boards (JJB) struggle to find qualified professionals within or around the limits of their jurisdiction, especially in states and districts that do not have easy access to a tertiary mental health care facility. In the past NIMHANS has received several requests from child protection functionaries around India for

references of child mental health professionals, either in the vicinity of their districts or in their respective states.

To cater to this need, this Initiative has embarked upon a nationwide survey to identify mental health professionals, specifically psychiatrists and clinical psychologists in different parts of India. This database will be used to support a search engine on our webpage that will help users search for mental health service providers in their locality. In the first round of survey which was completed online using a Google Form, we have received about 115 responses. We plan to launch the search engine in October 2020 with the preliminary set of data we have gathered. We will continue to gather more information through the Google Form in the coming months.

B.4. Training and Capacity Building

Reaching out to **773 service providers**, during this quarterly, the Mental Health team has completed orientation and training sessions and also embarked upon on training programs. Refer to Table 6.

Table 5: Training and Capacity Building Programs, Mental Health, June to September 2020

State	Government Dept/ Agency Placing Request	Cadre for Training	No. of Personnel	Content/ Theme	Timeline
Kerala	Directorate of ICPS (via NIMHANS KAVAL Project)	Social Workers, Counsellors, Legal/ Probation Officers, DCPOs	60	Suicide and Non - Suicidal Self Harm Behaviour in Children and Adolescents	September 30, 2020
Karnataka	All India Institute for Speech & Hearing (AIISH)	Psychologists, Speech therapists	273 *103 (live); 170 (Youtube views)	Medico Legal Issues around child sexual Abuse in children with communication disorders	September 2020
Chhattisgarh	Directorate of Public Health	DMHP Staff	26	Child and Adolescent Mental Health	September to November, 2020

All India	Indian Academy of Paediatrics/ Indian Child Protection Medical Professionals Network (ICPNPN) (ICANCL, ICMEC)	Health Professionals/ Paediatricians	106	Children in Conflict with Law: Role of Health Care Professionals	July 2020
Karnataka	Vimochana (NGO)	All India Networks	128	(Mental Health) Impact of Domestic Violence in Children	August 2020
Karnataka	Dept. of Women & Child Development/ ICPS	ICPS Staff	180	Case conference on Suicide and Self Harm behaviour among Children in Child Care Institutions.	September 2020
Total No. of Service Providers Oriented/ Trained			773		

Below are brief descriptions of the training programs conducted.

a) Training Suicide and Non -Suicidal Self Harm Behaviour in Children & Adolescents

As mentioned in the care and protection section of the report, the Kaval Project is a joint venture between the Department of Psychiatric Social Work at NIMHANS and the Kerala Government, Directorate of ICPS, and has been working to rehabilitate children in conflict with the law. The Kaval Project has a team of counselors in Kerala, attached to various NGOs, who work with children who have been released to the community on bail by the Juvenile Justice Boards (JJB) and they also work with JJB members/counselors and LCPOs. The counselors stay in touch with the children and their families, provide parent training and other necessary interventions to ensure prevent recidivism and reintegrate children into communities. Based on a request from the Kaval team, a 3-hour training session was conducted for 60 erstwhile mentioned staff on 'Suicide and Non -Suicidal Self Harm Behaviour in Children & Adolescents'. The session focused on enabling participants to understand the basis and contexts of children's suicide and non-suicidal self-harm behaviours (also distinguishing between the two issues), the requisite communication skills with children in each of these situations, first-level (emergency) responses, the need for referral to specialized facilities and medium-to-long term interventions such as life skill education on problem solving and coping with stress and anxiety.

In their feedback, participants shared that the training session was different from previous trainings that they have attended, in that this training did not dwell exclusively on theoretical

concepts but rather focused on (practical) skills and methods, that may be readily used by the participants in their fieldwork.

b) Orientation on Medico Legal Issues on Sexual Abuse in Children with Communication Disorders

In September 2020, based on a request from AIISH for the NIMHANS Initiative to provide them with support on medico-legal issues, an orientation session on the same was held for 100 speech therapists, psychologists and other staff from AIISH. Apart from discussions on challenges in eliciting abuse narratives from children with developmental disabilities and communication disorders, and possible methods that may be used with such children, it was agreed that there was a need to develop systematic training content and methodology that would focus on working with such children. A joint venture between NIMHANS and AIISH, to create a training module to elicit evidence from children with communication and related disabilities, especially in cases of child sexual abuse, was proposed.

As a follow up to the above-described orientation session, the NIMHANS Initiative has proposed to AIISH, the following ways of collaborating on the development of the training module:

- For NIMHANS to conduct online capacity building sessions on child sexual abuse, for professionals at AIISH, which can generate more discussion around similar issues in children with disabilities.
- Based on the discussions from this workshop, the NIMHANS Initiative will develop a set of methodologies for eliciting evidence from sexually abused children with special needs, including ways of documentation.
- This will be shared with the AIISH personnel who may pilot, critique and input into it, so that further modification and refinement is possible.
- The final outcome of the exercise would be an information and training manual on medico-legal processes with sexually abused children with special needs.

c) Training Child & Adolescent Mental Health for Chhattisgarh DMHP Staff

The NIMHANS Initiative received a request from the Directorate of Health Services, Chhattisgarh for a training program on child and adolescent mental health for District Mental Health Program. While the proposal was for all DMHP staff, the Initiative suggested that a first round of training be conducted with participants who volunteer to be part of such a program i.e. based on their interest. A group of 26 participants are currently enrolled in the training that is being conducted online through the virtual knowledge network. The first 8 sessions of the program were completed during this quarterly period, with a coverage of topics such as sensitization to children and childhood issues, child development and two of the four neuro-developmental disorders (namely autism and intellectual disabilities).

The participant DMHP staff have particularly appreciated the focus on the application of the theoretical concepts. For example, one of the feedback received for the first part of the training (Part 1: Working with Children) was that the methods used in the training helped the participants not only understand the concepts of child development, but also the practical applications of these concepts such as early stimulation, the differences in the way one speaks to or responds to children who are at a given developmental stage, understanding “normalcy” and “deviations from normalcy” based on the developmental milestones expected at each stages, etc. We have also noticed that the participants make earnest efforts to attend the

sessions regularly even if they are in the middle of an assigned duty. The training of this batch (i.e. a total of about 22 sessions) is scheduled to be completed in the next quarterly period.

d) Training on Children in Conflict with Law: Role of Health Care Professionals

This training, attended by 106 health professionals/ paediatricians was organized by the Indian Academy of Paediatrics/ Indian Child Protection Medical Professionals Network (ICPNPN) (ICANCL, ICMEC) focussed on helping them understand and assess children in conflict with the law, including issues of Section 15 of the Juvenile Justice Act i.e. on how to provide preliminary assessments to 16 to 18 year olds who have allegedly engaged in 'heinous crimes'.

e) (Mental Health) Impact of Domestic Violence in Children for Vimochana NGO

Vimochana is a Bangalore-based non-governmental agency, a form for women's rights. It works with women on issues of violence, through its shelter homes and well as in the community. The agency approached the NIMHANS Initiative to implement an online session for women (clients), staff and their networks on the mental health impact of domestic violence on children. 128 persons attended the session that focussed on how domestic violence plays out for children and how parents are positioned in such situations, the emotional & behavioural impact on very young children (infants & preschoolers) versus older children and adolescents, and the gender differences in children's responses to/ mental health impact of domestic violence.

e) Case conference on Suicide and Self Harm behaviour among Children in Child Care Institutions.

The ICPS Directorate, Dept. of Women and Child development, Government of Karnataka, requested the Initiative to conduct training and capacity building session for the counsellors and social workers of the ICPS, on issues of suicide and self-harm behaviours among children in CCIs. In order to better understand the context and issues of children in CCIs with regard to self-harm behaviours, the NIMHANS Initiative organized a case conference wherein the CCI staff provided detailed accounts of their experiences and challenges with children with such behaviours. The information gleaned from this case conference will be used to design and deliver the requested training session, in the upcoming quarterly.

B.5 Plans for the Next Quarterly, October to December 2020

The Mental Health team has received several requests for training. However, given the pandemic situation, the functionaries both at the secondary and tertiary levels are engaged in special medical assignments or are committed to other virtual trainings that are of a higher priority in the current medical scenario. For these reasons, we are awaiting the requesting agencies to confirm the dates for these trainings based on the availability of their staff. The following are the details of the training sessions planned for the next quarter.

Table 6: Training & Capacity Building for the Next Quarterly, Mental Health, October to December 2020

State	Government Dept/ Agency Placing Request	Cadre for Training	No. of Personnel	Content/ Theme	Timeline
Gujarat	Hospital for Mental Health, Ahmedabad	Professionals in tertiary care centres (Psychiatrists, Psychologists, Psychiatric Social Workers)	40	Medico Legal Cases (MLC) involving Child Sexual Abuse: Eliciting evidence from children regarding the MLC.	November 2020
Karnataka	Ministry of Women and Child Development	Integrated Child Protection Scheme (ICPS) staff and Child Care Institution (CCI) staff	160	Suicide and Non-Suicidal Self Harm behaviour in children and adolescents	October, 2020
Orissa	District Mental Health Program, Directorate of Public Health Dept. of Health & Family Welfare	Medical/Mental Health professionals from DMHP working directly with children (e.g., counsellors, staff nurses)	92	Child & Adolescent Mental Health	October, 2020
Karnataka	AI India Institute of Speech and Hearing (AIISH), Mysore	Professionals from the departments of Clinical Psychology, Speech Pathology and Special Education	40	Medico Legal Cases (MLC) involving Child Sexual Abuse: Eliciting evidence from children regarding the MLC.	October, 2020
Karnataka	Dept. of Women & Child Development/ ICPS Directorate	ICPS staff (child care staff from CCIs)	180	Suicide & Self-Harm Behaviours in Children in Institutions	November 2020

C. Education

C.1. Key Thematic Objectives

- To Integrate child protection and mental health issues into education spaces.
- To enhance the capacities of educators, teachers, school counselors to identify and respond to emotional, behaviour and learning problems in school children.
- To promote interventions for inclusions and life skills education within schools.

C.2. Material Development

a) Training on Child Mental Health in the Context of COVID

With many states gradually re-opening schools, there is a need to prepare children to return to schools. The pandemic has created a long break, wherein children's education and related routine activities have been disrupted i.e. they have become 'unused' to school routines. There is also the issue of helping teachers to receive children back into schools i.e. with a sensitivity towards and an understanding of children's experiences during the months of COVID and lockdown. Based on requests from agencies, such as CRY, that work with children in communities (including schools), the NIMHANS Initiative has therefore developed a manual on working with children in the COVID pandemic, including a 'back to school' component. It contains activities and interventions for schools/teachers, parents and counselors for helping children understand and address questions and concerns around COVID (in a developmentally appropriate manner), and prepare them to return to school routines. The Initiative has also written and illustrated a story (titles 'Addu and Anni Chat about COVID') on COVID to help explain the disease and pandemic to children.

b) Training and Capacity Building for School Teachers and Counselors

The aim of school-based interventions is to provide an experience that will strengthen the children's coping abilities to counter environmental stress and disadvantages with which they have had to cope in growing up. Comprehensive school health initiatives are available that result in higher school attendance rates, enhanced academic success, less school drop-out and reduced criminal behavior. A comprehensive training curriculum has therefore been developed for school teachers and counsellors to enable them to identify and respond to child mental health issues, namely, emotional, behaviour and learning problems, in children. Additionally, the integration of protection content in the curriculum will equip teachers to learn appropriate ways to engage with children in special contexts such as abuse and bullying; furthermore, given that schools and teachers, as primary caregivers of children, may play an important role in recognizing child protection risks that children may be exposed to within their families and communities, the training curriculum is geared to enable them to assist children at critical times, thus protecting them from further harm.

c) Training and Capacity Building Program for Anganwadi Teachers and Preschool Educators

Early childhood care and development (ECCD) programs aim to promote physical, cognitive, language, social and emotional development of children, from conception to about age 6. However, thus far, their tendency, especially in case of the Integrated Child Development Scheme (ICDS) has been predominantly on health and nutrition issues. Based on recent experiences of implementing an ECCD program, that integrated mental health and protection into ECCD as provided by anganwadis under the ICDS, the NIMHANS Initiative, has developed a training curriculum for anganwadi workers and preschool teachers. The training

curriculum focuses on providing anganwadi workers with a conceptual understanding of child development, and related practical skills on facilitating early stimulation activities; equipping them with the knowledge and skills to manage a range of common developmental, emotional and behaviour problems i.e. mental health issues, common to children in the early childhood age group; and it integrates protection concerns into ECCD work, by providing workers with an understanding of identification and response to issues such as child abuse and neglect i.e. recognizing signs and symptoms, conducting personal safety activities for young children, and making linkages to district child protection units and child welfare committees [The concept notes for the latter two themes are enclosed with this report].

C.3. Training and Capacity Building

During this quarterly, the NIMHANS Initiative, has initiated training and capacity building activities by providing two training workshops to CRY, a

Table 7: Training and Capacity Building Programs, Education, June-September 2020

State	Agency/ Government Department & State	Cadre	No. of Participants	Theme/Content	Timeline
Assam	Child Relief & You (CRY)	Teachers	31	Child Mental Health in the Context of COVID: Preparing Children for 'Back to School'	September 2020
Assam	Child Relief & You (CRY)	CRY Field Officers & anganwadi workers	30	Early Childhood Protection, Care & Stimulation in the Context of COVID Pandemic	September 2020
Total			61		

A brief description of the training sessions is provided below.

a) Child Mental Health in the Context of COVID: Preparing Children for 'Back to School'

The erstwhile described curriculum on addressing children's psychosocial and mental health issues in COVID focused on emotional and behavioural issues that children are at risk of in times of the pandemic, communication techniques and first level responses that teachers may use to assist children with psychosocial difficulties; stories and discussions to address children's COVID-related concerns and anxieties (including need for factual information), in developmentally appropriate ways; and activities for preparation of children to return to school as well as activities to help children adjust in school, to academics and other school routines. The training program was conducted over two days and attended by 31 teachers from two districts in Assam.

b) Early Childhood Protection, Care & Stimulation in the Context of COVID Pandemic

Given that the anganwadis have been closed for several months, and that young children have lost much crucial time that should have been spent on non-formal education and (school) readiness skills, CRY requested the NIMHANS Initiative to conduct training for their field workers, along with some anganwadi workers from two districts in Assam. The online training for 30 participants focused on providing a conceptual framework for developmental needs of

pre-school children; skills for early childhood stimulation; knowledge and identification of common developmental disabilities and early childhood emotional and behaviour problems, including some first level responses to such issues; understanding and responding to trauma reactions in young children. The aim was to equip field workers and anganwadi workers to transfer some of this knowledge to parents at community level, to enable parents to provide early stimulation activities at home, to children, and to help them deal with some of the emotional and behaviour problems in young children, in the context of the lockdown and mobility restrictions resulting from the pandemic.

C.5 Plans for the Next Quarterly, Education, October to December 2020

State-level teacher/counselor training activities are scheduled to begin in the upcoming quarterly. (Refer to Table 9).

Table 8: Training & Capacity Building for the Next Quarterly, Education, October to December 2020

State	Agency/ Government Department & State	Cadre	No. of Participants	Theme/Content	Timeline
Punjab.	Department of Education	Teachers	150	School Mental Health	November 2020
Goa	State Council of Educational Research and Training	Teachers & School Counselors	300	School Mental Health	November- December 2020

C.6. Other Plans in Process

Other plans for training and capacity building on the basic module on integration of child mental health and psychosocial care into the child protection system, are in process—while the content has been agreed on, the dates for delivery are yet to be determined, and are being negotiated by the NIMHANS Initiative with the concerned government department/agency. Refer to Table 10 for details.

Table 9: Other Plans in Process

State	Agency/ Government Department & State	Cadre	No. of Participants	Theme/Content	Timeline
Andhra Pradesh	State Council of Educational Research and Training	Counselors	42	School Mental Health	TBD
Bihar	CRY	School Teachers & Anganwadi Workers	TBD	Working with children in the context of COVID	TBD
Karnataka	Makkala Jagrithi NGO	Video Series on Early Childhood Development, Mental Health, and Protection			TBD

D. Policy and Law

D.1. Key Thematic Objectives

- To integrate child protection and mental health issues into legal and judicial systems and processes across the country.
- To contribute to judicial education in the area of child and law, by providing depth perspectives on child mental health and well-being, and skills and methods of engagement with children in legal contexts.
- To build the capacity of other quasi-judicial bodies (such as child welfare committees) and juvenile justice boards, by providing knowledge on conceptual and implementation aspects of various child-related laws in the country.
- To engage with judicial bodies and child protection systems through discussions, deliberations and reviews on aspects pertaining to the child and law.
- To conduct research and studies in order to inform child policy and law in the country.

D.2. Material Development

Various training curriculums for use in training and capacity building of legal and judicial personnel as well as child protection functionaries, on the child and law, and its linkages to mental health and psychosocial care, have been developed during this quarterly period (as below).

a) Child and Law Components as Part of the Training Curriculum on *Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care* for ICPS functionaries

This program is designed for the social workers and counsellors of the ICPS to build their capacities on child rights, mental health, psychosocial issues and problems; build their overall understanding of child protection laws and procedures, with particular emphasis on navigating the complexities of the law in practice i.e. implementing the provisions of the law in accordance with considerations of child rights and mental health and well-being.

b) Training for Judicial Officers, Legal Aid Lawyers and Para Legal Volunteers on Salient Child Laws

(i) Child Sexual Abuse and Implementation of POCSO 2012 Law

Prior to the beginning of the NIMHANS Initiative, earlier this year, the NIMHANS team had completed the development (in collaboration with the Karnataka Judicial Academy) of a training manual on CSA as applicable to the role and work of legal and judicial personnel. The training manual, titled *'The Child as a Witness: Developmental and Mental Health Implications in Eliciting Evidence under POCSO 2012'* was released in February 2020 by Justice Deepak Gupta (the then Chairperson of the Juvenile Justice Committee of the Supreme Court of India). This manual, with its accompanying videos/materials is available on: <https://www.nimhanschildproject.in/training-and-capacity-building/judicial-personnel/the-child-as-a-witness/>.

(ii) Children in Conflict with the Law (Juvenile Justice Act (Care & Protection) 2015)

Similar to the CSA/POCSO manual described above, and at the same time, Justice Gupta released the following training materials on children in conflict with the law, also containing a foreword by Justice Madan Lokur (former Chairperson of the Juvenile Justice Committee of the Supreme Court of India):

- *'Psychosocial and Mental Health Considerations in Juvenile Justice: A framework for Judicial response to Children in Conflict with the Law'*

available at: <https://www.nimhanschildproject.in/training-and-capacity-building/judicial-personnel/psychosocial-and-mental-health-in-jj/>

- **'Critical Issues in Psychosocial Care and Mental Health of Children in CCL'**

available at: <https://www.nimhanschildproject.in/training-and-capacity-building/judicial-personnel/critical-issues-in-psychosocial-care-and-mental-health-of-children-in-conflict-with-the-law/>

The materials and methods have been used in several training programs for the National and State Judicial Academies. However, based on further work with the judicial systems, they are likely to be refined in the coming months, with addition of new materials and methods (including from the perspective of online training).

c) Judicial Engagement on Section 15 of Juvenile Justice Act 2015

In addition to the training programs (currently conducted online due to the COVID pandemic), the NIMHANS Initiative proposes to establish an on-going dialogue with judicial officers from across the country, through a series of deliberations on child and law, organized with the support of the State Judicial Academies. Thus far training programs conducted by the NIMHANS team have strived to bring knowledge and skills on child development and mental health, and child rights, to judicial personnel, so as to enable them to bring to their work these essential perspectives. However, we also increasingly recognize the need for the child mental health and child rights fraternity to better understand the powers and limitations of the law. This understanding will help us better contextualize our medico-legal work, including our judicial engagement and capacity building initiatives, in ways that will: a) serve the best interests of the child, in terms of justice, healing and rehabilitation; b) enable the judicial system to engage with children in developmentally sensitive ways, so that the objective of dispensation of justice is effectively served. Such transdisciplinary approaches, which promote meaningful engagements between professionals from different domains/expertise, are likely to help dissolve the boundaries between conventional disciplines of law and psychiatry, making for teaching and learning that is truly centred around field realities, or the needs of children and justice systems, in our case. In an attempt to initiate such transdisciplinary work in the area of child and law, a proposal for a deliberation on Section 15 of the Juvenile Justice Act 2015, has been developed and shared with some of the State Judicial Academies. Responses are awaited. [Concept note enclosed with this report].

D.3. Training and Capacity Building

During this quarterly period, the NIMHANS Initiative has reached out, in response to requests from the State Judicial Academies, through orientation and training programs to 11,439 judicial officers from across the country, mainly on child sexual abuse/ POCSO and children in conflict with the law/Juvenile Justice Act issues. [Refer to Table 10 for details].

As indicated above, the training content for POCSO focused on developmental and mental health aspects of eliciting evidence from children, so that the content included: sensitization to the needs and challenges of child witnesses, child sexual abuse dynamics and its implications for appreciating evidence, applying the developmental lens to eliciting evidence and child-friendly methods for communication and eliciting of evidence from children.

Training content on children in conflict with the law emphasized the (vulnerability) pathways to children's coming into conflict with the law, methods of psychosocial and mental health assessment of CICL, and methods to implement Section 15 of the preliminary assessment (in keeping with principles of care, protection rehabilitation and child rights—as mandated by the JJ Act).

Table 10: Training & Capacity Building Activities, Policy & Law, June to September 2020

State	Agency/ Government Department	Cadre	No. of Participants	Theme/Content	Timeline
Karnataka	State High Court Juvenile Justice Committee/ SCPCR & DWCD-ICPS	JJB Magistrates/ Board Members/ state Legal Service Authorities/DCPO Staff/ Probation Officers/ SJPU's from 30 Districts of Karnataka	176	Functioning of Juvenile Justice Boards in COVID-19 Pandemic	July 2020
Karnataka	Karnataka Judicial Academy	JJB Magistrates	45	Pathways to Vulnerability for Children in Conflict with Law— Perspectives on Preliminary Assessments under Section 15 of JJ Act	July 2020
Kerala	Kerala Judicial Academy	Special Court Judges	40	Child-Friendly Court Proceedings & Victimology (under POCSO Act)	August 2020
Delhi	Delhi Judicial Academy	Metropolitan Magistrates	35	Understanding Mental Health & Mental Health Act 2017	July 2020
Maharashtra	Maharashtra Judicial Academy	Special Court Judges—State Judicial Academy Personnel across India & legal personnel from the region	10,814	The Child's Capacity for Providing Testimony: Applying the Child Developmental Lens & Eliciting Evidence under POCSO Act 2012	July 2020
Tamil Nadu	Tamil Nadu Judicial Academy	Special Court Judges & District/Sessions Judges	329	The Child's Capacity for Providing Testimony: Applying the Child Developmental Lens & Eliciting Evidence under POCSO Act 2012	September 2020
Total	11, 439				

D.4. Policy Initiatives

The team is currently working on two policy related initiatives, to develop the requisite papers, based on desk reviews and field experiences. They are as below:

a) Mental Health Issues and Challenges of Children in Karnataka for Fiscal Policy Institute (FPI), Government of Karnataka, to inform their work on child budgets 2020-21

This policy paper is based on the premise that mental health is important for children to cope with psychological disorders and other problems (e.g. child abuse), especially in a situation such as Covid-19, because of the risks to optimal (child) development, learning abilities and education outcomes in children in difficult circumstances. The policy brief therefore aims to: (i) highlight the key psychological issues and challenges in child development from the perspective of mental health of children in Karnataka State and (ii) recommend innovative policy measures to strengthen the mental health of children for attainment of objectives of child development by Government of Karnataka.

b) The Need for Separate State-Run Child Care Institutions for Transgender Children for the Directorate of ICPS/Government of Karnataka.

This policy paper aims to lay out the specific psychosocial and mental health vulnerabilities of transgender children, with specific emphasis on: the problems they face at home/within families due to stigma and discrimination, due to lack of awareness and sensitization of the general public on issues of alternative sexuality; the consequent risks of runaway behaviours, trafficking and abuse; mental health problems such as gender identity disorder, dysphoria/depression and other related issues; the lack of sensitivity of child protection functionaries and the dilemmas of placement, when such children come to the state care and protection systems; the experiences of these children when they are placed in the existing girls/boys homes i.e. of discrimination, bullying and abuse. The paper will thus build a case for separate state-run child care institutions (including training of child care staff) for the care and protection of this vulnerable sub-group of children.

D.5 Plans for the Next Quarterly, October to December 2020

The Initiative has contacted various states and organization, extending our support to strengthen knowledge and skills of various cadres of child protection functionaries such as the JJBs, CWCs, LCPOs, Legal Aid Lawyers, Public Prosecutors, in the country. Table 11 consists of programs scheduled for the upcoming quarterly period.

Table 11: Plans for Upcoming Quarterly, October to December 2020

State	Agency	Cadre	Theme/Content	Timeline
Sikkim	State Judicial Academy	Legal Aid Lawyers & Para Legal Volunteers	Child Sexual Abuse & POCSO-Related Matters	27 th November, 2020.
Maharashtra	State Judicial Academy	Special Court Judges & Juvenile Justice Magistrates	Deliberation on Section – 15 of Juvenile Justice Act 2015	20 th October, 2020
Rajasthan	State Judicial Academy	Special Court Judges & Juvenile Justice Magistrates	Deliberation on Section – 15 of Juvenile Justice Act 2015	Between 2 nd -7 th November, 2020. (Date to are being finalised)
West Bengal	State Judicial Academy	JJB- Magistrates and Social Workers (CNCP & CICL)	Child Sexual Abuse & POCSO-Related Matters (from victim and CICL perspective)	Dates are awaited by the Academy
Manipur	State Judicial Academy	Special Court Judges & Juvenile Justice Magistrates	Deliberation on Section – 15 of Juvenile Justice Act 2015	November 2020

Sikkim	State Judicial Academy	Special Court Judges & Juvenile Justice Magistrates	Deliberation on Section – 15 of Juvenile Justice Act 2015	November 2020
Odisha	Judicial Academy	Special Court Judges & Juvenile Justice Magistrates	Deliberation on Section – 15 of Juvenile Justice Act 2015	November 2020
Kerala	State Judicial Academy	Special Court Judges & Juvenile Justice Magistrates	Deliberation on Section – 15 of Juvenile Justice Act 2015	October 2020
Haryana	Kurukshetra District Legal Services Authority	District Court Judges & judicial personnel	Orientation on Overview of JJ/POCSO/Custody related laws and procedures	13 th October 2020
Karnataka	Karnataka DWCD	Juvenile Justice Boards	Order Writing/Drafting	TBD

*Additionally, the above-described policy papers are expected to be completed in the upcoming quarterly.

5. Operational Challenges

The operational challenges that the NIMHANS Initiative has experienced during this quarterly period, are described below, and where possible, efforts to address these difficulties are also provided.

a) The Impact of COVID-19 on Project Implementation

As everywhere in the world, one of the key challenges impacting the work and deliverables of the NIMHANS Initiative is COVID-19. The Initiative has been impacted in the following ways:

- While recruitments were made as soon as possible, given that the selected candidates were from different parts of the country, necessitating travel and quarantine. Therefore, there were delays in their joining work i.e. the gap between the recruitment and joining ranged from a week to nearly 3 weeks. This hindered the work from being initiated at a faster pace.
- The pandemic has affected members of the NIMHANS Initiative team—with people testing positive and having to take time off from work to quarantine and recover. While some of these members worked from home, it also contributed to slowing the pace of work. The risk of persons testing positive is likely to continue for many months to come—in as long as the pandemic lasts—and work is constantly at risk of being disrupted.

That said, the team is doing its best to use the VKN and other mediums to continue the work—all commitments to training and capacity building and public discourse series were met even during the time when the office had to be vacated temporarily and technical staff were in recovery.

- The digital logistics for establishment of VKN room are not available in the market, and there have also been price hikes, that impact the materials we are now able to purchase. (Our Initiative was budgeted in a pre-COVID time). These issues have also slowed down the establishment of the VKN rooms.

However, these hurdles have been overcome and the rooms are expected to be ready by mid-November 2020. In the interim, the technical staff are able to conduct their training/online activities in other spaces of the NIMHANS building.

- With regard to recruitment, NIMHANS usually follows a policy wherein the selected candidates are required to appear in-person for written tests and interviews. Due to

COVID, and because we did not wish to lose skilled candidates from across the country, the recruitment processes had to be conducted online; furthermore, written tests were logistically difficult to conduct and candidates were recruited solely on the basis on an interview. This relatively brief opportunity available for evaluation of candidates resulted in some recruitments being unsuitable for the designated position and the Initiative.

In order to ensure that the Initiative maintains quality and standards in terms of technical work, we have therefore been unable to retain some candidates who were unable to meet project goals and deliver outputs. Moving forward, we have also included additional filters in our recruitment processes, by asking for candidates to submit recordings of oral talks on technically relevant subjects—this will enable us to examine them for technical knowledge and skills in communication/teaching.

b) Paucity of Skilled Child Mental Health Personnel

As described above, in general, staff recruitments have been challenging. However, it has been particularly difficult for the Initiative to find qualified and skilled child mental health professionals, such as psychiatrists. The reasons for this are many—India already has a relatively low number of psychiatrists, and of these most are in adult or general practice. Very few mental health professionals practice exclusively in the area of child health. Apart from PGI Chandigarh, the NIMHANS Dept. of Child & Adolescent Psychiatry is the only one that offers a super-specialty training (Doctor of Medicine) in child psychiatry. There are other psychiatry departments in the country offering fellowships in child psychiatry, but again, these are very few in number—other than NIMHANS, these are offered in Christian Medical College/ Vellore, JIPMER/Pondicherry and Nair Hospital/Mumbai. The Dept. of Child and Adolescent Psychiatry in NIMHANS, however, remains the sole independent department of child psychiatry in the country. The limited training programs available in the country also explain the low availability of skilled child mental health professionals. Further attempts are being made to recruit the required mental health professionals on the Initiative, through the use of more stringent processes (as mentioned above).

In the meanwhile, the mental health work on the Initiative, although slower than intended is carrying on with the available personnel, under the guidance of the Head of the Initiative, Dr Shekhar Seshadri, who is a Senior Professor at the Dept. of Child and Adolescent Psychiatry in NIMHANS.

Annex 1

Study on Exploring the Impact of COVID-19 on Child Protection in India: Implications for Capacity Building, Interventions and Policy

1. Brief Introduction and Objectives

In the COVID-19 pandemic, impact of the restriction of physical mobility, social isolation and uncertainty may be common to all children but some are impacted far more severely than others. Interestingly, with the possibility of resuming economic activities opening up, these children are going to be at increasing risk. A pandemic and its ensuing economic crisis can exacerbate protection and related psychosocial risks making the vulnerable children at heightened risk for exploitative circumstances children, with issues such as child labour, child trafficking, child marriage and sexual abuse being of particular concern, and resulting in adverse mental health impacts for them. It is at such unprecedented times that the vulnerability of children is sharply outlined.

Consequent to the urgent request by MoWCD, the NIMHANS Initiative proposed a study in entitled “Exploring the Impact of COVID-19 on Child Protection in India: Implications for Capacity Building, Interventions and Policy”, the objectives of which are :-

- To understand the nature and types of child protection risks that the pandemic has resulted in.
- To examine the responses of child protection system functionaries to current child protection risks.
- To use the resulting information to inform child protection programs, policy and capacity building initiatives in the current COVID situation.

The survey will be implemented in 5 Indian states. The inclusion criteria for selected states has been based on the indicators in the (i) 2017 National Crime Records Bureau Report (ii) Census Data on Child Labour and (iii) National Family and Health Survey 4. The child protection indicators recorded for selection along with States that count under the indicator are as follows:

Indicator	States
Top three states with highest rates for crimes against children (including physical and sexual abuse and crimes chargeable under IPC)	Uttar Pradesh, Maharashtra & Madhya Pradesh
Top three states with highest rates for child marriage	West Bengal, Bihar & Madhya Pradesh
Top 3 states with highest rates for child labour	Uttar Pradesh, Maharashtra & Bihar

Therefore, all districts of Uttar Pradesh (75 districts), Maharashtra (36 districts), Bihar (38 districts), West Bengal (23 districts) and Madhya Pradesh (52 districts) have been finalized for the study.

2. Respondents of the Study

The respondents mentioned below have been selected for the study, considering their direct interaction with vulnerable children who come in the state care and protection system, thus addressing protection-related concerns at a field level, on a routine basis:

- The chairperson or member of the Child Welfare Committee (CWC) from each state district
- A member of the Juvenile Justice Board (JJB) Committee from each state district
- Superintendents of government state homes across the state, in all districts

- District Child Protection Officer from each district
- CHILDLINE Coordinators

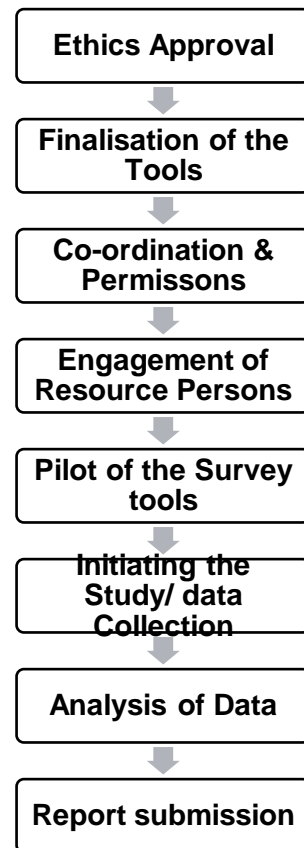
Furthermore, the following broad activities are being laid down in the chart below, which will be illustrated in details:

3. Ethics Approval

The proposal was submitted to the Ethics' Committee and the approval received based on the following themes:

The themes would include the following:

- Nature and type of child protection issues children have faced since the pandemic started (physical abuse, sexual abuse, emotional abuse, child marriage, child labour, trafficking, neglect, maltreatment, etc.)
- Situation of children in conflict with the law since the pandemic started
- Family situations and child protection risks in the States pre-COVID times and in COVID times.
- View of respondents (child protection functionaries) on institutionalization of children
- Systemic issues / challenges the respondents have faced in implementing the Juvenile Justice (Care and Protection) Act during the COVID 19 pandemic
- Challenges of respondents in providing assistance and providing intervention to children in contact with juvenile justice systems
- Eliciting responses to 'why' and 'how' questions on child protection risks/ concerns and patterns in detail



4. Finalization of the Survey Tool & Focus Group Discussions

The previous work in the community project has led to vast experience on challenges of stakeholders in interventions with children in difficult circumstances. The experience was helpful in understanding the picture in the current context with COVID 19 pandemic. The secondary data in the form of newspaper articles, reports on increasing risks on child protection helped in forming draft. The survey tool has been created as a standard tool for all States which puts forth the same questions with a few different variables, depending on the role of the respondent. The questions for Focus Group Discussions are drafted but they may be modified based on the data received from survey. The tools were designed in a way to include all variables that relate to the objectives of our study. It broadly includes the following topics from all the respondents: -

(i) Types of cases coming before COVID and during COVID

(ii) The systemic challenges the respondents are facing to implement their roles and responsibilities during COVID pandemic. This section includes different questions based on the respondent's functions and responsibilities.

(iii) The views of the respondents on institutionalization before COVID and during COVID

The survey tool was revised multiple times from discussions internally and with a few respondents to understand the above-mentioned broad topics.

The tools will be collected online through google forms (link to be widely circulated on mails/ WhatsApp of respondents). Therefore, the process for modifications of the tool to make it the

tools were taken online and after several rounds of modification to make it user friendly, the tools were ready.

5. State Permissions and Co-ordination

After approval from Ethics Committee and finalization of the tools, an official letter from the Initiative along with the proposal was sent to all 5 States on mail. The letter included brief introduction to the study along with objectives and respondents. After multiple rounds of co-ordination telephonically and on mail, the approval has been received by Uttar Pradesh, Madhya Pradesh and Maharashtra. Bihar had agreed in principle but we are awaiting the official response. The response is awaited from West Bengal.

6. Engagement of Resource Persons

During the planning of tools and data collection, it was realized that the methodology will be more effective when the respondents will be giving responses in their regional language. Hence, it was decided to engage resource persons who have worked with children and/or on children's issues and would be interested in the assisting with the study.

After the selection of 5 resource persons a preliminary meeting with the Resource Persons was held to discuss on their roles and their expectations of the study. It was decided that the resource persons will work closely with the thematic lead and project officers.

7. Piloting the Study

After finalization of survey tools, the tools were piloted with 5 willing respondents from Uttar Pradesh. Through random sampling, the resource persons reached out in the following districts of Uttar Pradesh – Muzaffarnagar, Varanasi, Barabanki, Maharajganj, Mirzapur, Fatehpur, Gorakhpur, Pratapgarh, Saharanpur, Mathura, Prayagraj and Gautam Buddha Nagar (Noida). The survey tool for the DCPO, CWCs, JJBs, superintendents have been piloted and the CHILDLINE tool is being piloted.

8. Way forward

The next step in the study is follow up for official communication from Bihar and West Bengal. Data collection will begin from 12th October for DCPO, CWCs, JJBs, superintendents. The data collection for CHILDLINE workers will begin from third week of October, 2020. This will be followed by analysis of the data. Post the survey, Focus Group Discussions will take place followed by key informant interviews with experts in the field of child protection, mental health and psychosocial well-being.