

# **SAMVAD**

**Support, Advocacy & Mental health  
interventions for children in Vulnerable  
circumstances And Distress**

**(A National Initiative & Integrated Resource  
for Child Protection, Mental Health, &  
Psychosocial Care)**

**2<sup>nd</sup> Quarterly Report  
October to December 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. SAMVAD's Aim & Objectives

SAMVAD is a national initiative & integrated resource for child protection, mental health and psychosocial care, supported by the Ministry of Women & Child Development (MoWCD), Government of India, located in the Dept. of Child & Adolescent Psychiatry, NIMHANS.

**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. Update on Operations

### 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 in the first quarterly period. A second round of recruitments were completed, in which two project officers (for education and mental health sectors) were appointed.

### 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 been completed, in keeping with the current staff size. The Virtual Knowledge Network VKN rooms have been completed, including the set-up of the requisite equipment. The rooms are now in full use by the technical teams, as they conduct several training sessions a day for child care service providers around the country.

### 3. 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.

#### 3.1. Public Discourse Series

To increase the outreach as well as mobilize general public and to generate awareness on the issues of child protection and mental health, online social media platforms like YouTube, twitter, Facebook and Instagram were used actively. The digital content prepared for public discourse and awareness was also disseminated through these social media platforms. The list of all the campaigns/ public discourse series which were implemented is shared under the Section – Public Discourse. Regular updates about the SAMVAD’s engagements with various states through capacity building initiatives were also posted and tweeted about. A new Facebook page has also been created to increase the visibility and expand the audience on Facebook. SAMVAD’s public awareness and discourse materials may be reached on:

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

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

Twitter: [https://twitter.com/nimhans\\_CPC](https://twitter.com/nimhans_CPC)

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

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

SAMVAD’s current reach out information is detailed in the table 1.

**Table 1: Details about SAMVAD’s Social Media Presence (as of 23<sup>rd</sup> January 2021)**

Platform	Subscribers
You tube	3,360
Twitter	124
Instagram	295
Facebook	4,989
Facebook Page	181

Details of SAMVAD’s public discourse and outreach activities are described below.

##### **a) Kahaniya aur Kalpanayen, Children’s Day Celebration Special, November 2020**

A special storytelling series was created for children during the month of November, as part of the Children’s Day Celebration, on 14th November 2020. The series was published on YouTube in 5 parts of 15-20 minutes each on every Sunday of November. The series was originally developed in 8 different languages - Hindi, English, Gujarati, Tamil, Kannada, Marathi, Malayalam, Nagamese. Later, a teacher’s training group in Punjab also volunteered to record the stories in Punjabi since they found this to be a very popular and powerful tool to start dialogue on important issues of emotional and mental health. The details of the themes and the number views received for the series is given the Table 2. The SAMVAD team wrote to all the States requesting them to actively promote the content and encourage schools to use it and also requesting them to especially screen the stories in the Child Care Institutions (CCIs). Since COVID-19 pandemic had a huge impact on the mental health of children, because of the rising feelings of uncertainty it was felt that storytelling would be the most non intimidating medium to help children address their feelings. The idea behind the series was to

provide an opportunity to children everywhere to relax, unwind and stimulate their imagination and help raise their spirits, promote healing and compassion to navigate through the difficult COVID-19 times. The series also received special appreciation from the teachers and CCI counsellors after these were circulated in the training groups.

**Table 2: Kahaniya aur Kalpanayen series details (as of 23<sup>rd</sup> January 2021)**

Themes	Number of Views	Publishing Date
Reconnecting with Childhood	1,982	1st November 2020
The Kindest Person in Class	3,673	8th November 2020
When Spots went away	1,123	15th November 2020
Anni and Addu chat about COVID	1,928	22nd November 2020
How Raju rescued Goldie	1023	29th November 2020
<b>Total No. of Views</b>		<b>9,729</b>

#### **b) Celebrating Adoption Month, November 2020**

Since November is internationally observed as the Adoption Awareness Month, SAMVAD put out much information on adoption for prospective adoptive parents/ adoptive parents, both through its own platform as well as through Central Adoption Resources Authority (CARA) of the Ministry of Women & Child Development (as described below).

- **SAMVAD YouTube Series on Adoption**

A special video series was created and published on SAMVAD -YouTube Channel to spread awareness on adoption during the International Adoption Month. The series covered the psychological perspectives on adoption. These episodes were recorded in question-and-answer format of approximately 10 -15 minutes each. They are available in the link: <https://www.youtube.com/playlist?list=PL6M-G4mGr43ovYsh6QDe404eLapX3mL6y>

There is also a 10 Stories Series – on young children adoption disclosure called the “Mimi Story Series” and 2 Part Story on older children adoption disclosure called the Leela Story Series. These are illustrated stories which parents and child care service providers could use it with children to prepare children for adoption and adoption disclosure. It is available in the link: <https://www.nimhanschildproject.in/interventions/pre-school-0-to-6-years/adoption/>

**In all, the adoption series on the SAMVAD platform had 2,649 views** (as of 23<sup>rd</sup> January 2021).

- **‘Celebrating Adoption Month’ Series for CARA**

SAMVAD also received a request from CARA on 6th November 2020 to organize a session on ‘Counselling for Adoptive Parents’ as part of the International Adoption awareness Month. In response to CARA’s request, the entire series was re-recorded in Hindi in 3 parts mainly addressing questions that adoptive parents are often confronted with in the Pre-Adoption phase, during adoption and after adoption. The recordings were shared with CARA in both English and Hindi Language. The types of themes and questions addressed in the series were divided in three periods of the adoption process: Pre-adoption, Post-Adoption & Disclosure as detailed in the table 3.

CARA uploaded the English series on the YouTube channel and so far, has 443 views. The Hindi series is yet to be uploaded. CARA however, shared a feedback after the follow up by the SAMVAD team and requested some edits in the Hindi version. The edited version of the Hindi version would be shared with CARA.

**Table 3: Celebrating Adoption Month questions and themes**

Periods of Adoption process	Questions/Themes addressed
Pre-adoption	<ul style="list-style-type: none"> <li>• What are the 'right' reasons to adopt a child?</li> <li>• How do you know you are ready to be an adoptive parent?</li> <li>• Can a single parent adopt?</li> <li>• Can a single man adopt? Is a father alone adequate to raise a child?</li> <li>• What about in-family adoptions?</li> <li>• What really are your perceptions about adoption, as parents? And is that why you have worries about it?</li> <li>• What are some of your expectations of the child you are (in the process of) adopting? How to moderate them?</li> <li>• Which is the right child for you? Is 'matching' important?</li> <li>• What assessments should parents ask for at the time of adoption decision-making?</li> <li>• Does it work to adopt older children?</li> <li>• If one is adopting an older child, is it alright for the language spoken by the prospective adoptive parents to be different from that spoken by the child?</li> <li>• What about the religion of the child?</li> <li>• What if a child is found to have a developmental delay or deficit? Should we not adopt such a child?</li> <li>• Can child (mental) health practitioners assist prospective adoptive parents to make decisions about children with developmental delays or deficits?</li> <li>• How should parents deal with close or extended family with regard to adoption decisions?</li> <li>• How to involve siblings or existing biological children in the adoption issue?</li> </ul>
Post-Adoption	<ul style="list-style-type: none"> <li>• What preparations and arrangements should parents make at the time of adoption and immediately after? <ul style="list-style-type: none"> <li>- Sleeping Arrangements</li> <li>- Feeding</li> <li>- Clothing &amp; Hygiene</li> <li>- Outings &amp; Social Interactions</li> </ul> </li> <li>• Is it alright to change the child's name?</li> <li>• Why is early stimulation especially important for adopted children?</li> <li>• How to develop attachment and bonding with your child?</li> <li>• What to tell your friends and neighbours about your adopted child?</li> <li>• Should parents tell the school that their child is adopted?</li> <li>• Are adoptive children more prone to emotional, behavioural and learning problems than others?</li> </ul>
Disclosure	<ul style="list-style-type: none"> <li>• What is adoption disclosure?</li> <li>• Why do parents find it difficult to disclose adoption status to their children?</li> <li>• Should parents tell their child that he/she is adopted?</li> <li>• How should parents prepare themselves for disclosing adoption status to their child?</li> <li>• What is a good age for parents to tell their child about adoption? How to begin the process of talking to your child about this?</li> <li>• How should parents deal with adopted children's questions about birth parents?</li> <li>• Should children be asked to visit the institution they were adopted from?</li> </ul>

- **Public Event at Rangashankara Theatre, Bangalore**

To promote the adoption series and to talk about adoption, the SAMVAD team also collaborated with the prestigious “*Rangashankara*” theatre in Bangalore and conducted two special events on two Sundays in the month of November, 2020. The story that SAMVAD had developed (‘Leela’s Story’) on adoption disclosure was done as a story-reading, followed by discussions on adoption and disclosure-related issues.

**c) Christmas Tidings, December 2020**

The SAMVAD team also started posting Christmas tidings early in December on the Social Media Platforms. These posts were under the series “**10 things to tell your children before 2020 ends**” with special thoughts, philosophical sayings and messages on children and their issues, put forward by renowned personalities across the world. Since it was the Holiday season and unlike the other times, most children and families were in house due to restrictions, the posts aimed to instil hope and encourage them to reflect on the importance and value of childhood. These were developed using the CANVA-Pro application.

The year was not just difficult for the children but also for parents who as first responders were helping their children deal with difficult feelings during the pandemic. Recognizing the need for empowering parents and providing them with some perspective on dealing with children during exceptionally difficult times, the series was published on YouTube in 10 parts starting 22nd December 2020, till 31st December 2020. In each episode the Head of SAMVAD addressed the parents and urged them to talk to their children and teach them values and skills that would help in their holistic personal development. These 10 parts were also uploaded on social media handles for increased outreach it has a total 1,499 views in YouTube.

**Table 4: Themes and number of views of the series “10 things to tell your children before 2020 ends”**

Theme	Views	Publishing Date
Episode 1: Identity	387	22 <sup>nd</sup> December 2020
Episode 2: Gender	207	23 <sup>rd</sup> December 2020
Episode 3: Peer Relationships	299	24 <sup>th</sup> December 2020
Episode 4: Kindness and Helpfulness	289	25 <sup>th</sup> December 2020
Episode 5: Appreciating diversity and Differences	269	26 <sup>th</sup> December 2020
Episode 6: Adolescent Sexuality and Decisions	293	27 <sup>th</sup> December 2020
Episode 7: Adolescents and Romantic Relationships	391	28 <sup>th</sup> December 2020
Episode 8: Developing your Interests	286	29 <sup>th</sup> December 2020
Episode 9: Dealing with Uncertainty	201	30 <sup>th</sup> December 2020
Episode 10: Asking for Help	327	31 <sup>st</sup> December 2020
<b>Total Viewership</b>	<b>2,622</b>	

**d) 26th Annual National Sahodaya CBSE Schools Conference, December 2020**

The head of SAMVAD was invited to contribute to panel discussions on “*Being Mindfully Inclusive- A Step Towards Building Bridges*” as part of the CBSE Schools Conference whose theme this year was ‘Building Competencies in Challenging Conditions’. SAMVAD spoke about the need to broaden the scope of inclusion not only to comprise children with developmental disabilities but also children with behavioral and emotional difficulties, as well as children from different cultures and castes. Inclusion in practice, in education settings, was discussed through the use of the two-pronged approaches: implementing life skills education for all

children, and sensitizing teachers on issues of positive engagement with children, including identifying and addressing mental health issues in children. With a keynote address was given by the Minister of Education, Mr. Ramesh Pokhriyal, the conference, and this session in particular, reached out to teachers and school principals across CBSE schools in India, amongst others, totalling about 16, 733 service providers/ stakeholders in education.

**e) “Acquisition of Cognitive and Affective Skills in School Students in India”: A Pioneering Research Study Carried Out By Centre of Science For Student Learning (CSSL), December 2020**

In another conference on the above-mentioned study, SAMVAD contributed to a panel discussion on ‘How do we make our school safe?’, speaking on deconstructing abuse in the school context, which raises the issues of school safety redressal from the child’s perspective. SAMVAD added that there is a lot of ambiguity in understanding emotional abuse which is often not addressed and directly affects a child’s mental health leading to serious behavioral and emotional problems. The importance of the role of the teachers on child mental health was emphasized, including that unresolved child mental health problems are a “ticking time bomb”, in terms of the risks they could pose to child safety. This panel discussion was attended by 120 participants including school principals across the country, government officials from various functionaries from centre and state education departments, and others from developmental sectors and partner organizations like UNICEF, World Bank, etc. In exploring partnerships with SAMVAD, CSSL will provide diagnostic tools at feedback level and requested us to partner in for providing inputs at the intervention level.

## **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. Each thematic area 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. The concept notes and curriculums developed during the first quarterly period 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**

During this quarterly the Care and Protection team has been involved in development of concept notes, curriculums and various learning content in order to facilitate the online training programs for various child protection functionaries. The details of the completed curriculums are detailed below:

### **(i) Training curriculum on “Suicide and Self Harm among Children - For Child Care Institution Staffs and Counsellors of Family Counselling Centres”**

The Directorate of Child Protection, Department of Women and Child Development, Karnataka, had requested SAMVAD to conduct a training program for the counsellors of government child care institution and the counsellors of the family counselling centre. In preparation for this, an initial session a Case Conference Session was conducted with the counsellors in the month of November, 2020. Counsellors were requested to share cases of suicide/ self-harm among children which they have seen during their work. Based on the learnings from this session and our clinical and community experiences, a comprehensive training program was designed.

This training program for the counsellors focused on: understanding the basics of self-harm and suicide behaviour among children; reasons for children to engage in self-harm and suicide behaviours; understanding repeated suicide and self-harm behaviour; providing a framework for intervention, that includes medical first aid, (emergency) psychological first aid, first level responses, and referral/ depth interventions. Given that self-harm has increasingly become a problem in children, both within and outside care and protection systems (and child care institutions), this curriculum will be used to provide training to child protection functionaries around the country at later stages, i.e., after the basic training program.

### **(ii) Training curriculum on addressing issues of Sexuality and Relationships in Adolescent Girls**

Based on the request received from the Directorate of Child Protection, Department of Women and Child Development, Karnataka, on the issue of high-risk behaviours of adolescent girls in the child care institution, in the context of sexuality and romantic relationships (incl. “elopement”), SAMVAD developed a capacity building cum intervention package for all the counsellors of the government girls’ home in the state. A 22-hour training curriculum developed for online delivery, it was designed in such a manner in which the SAMVAD team would provide capacity building, supervision and monitoring with the child care workers delivering the requisite intervention sessions for groups of adolescent girls in (state) child care institutions. The training components and structure is detailed below in the table 5.

The training objectives were to develop knowledge and skills the counsellors on:

- Understanding Adolescent Sexual Behaviour and decision making in sexuality contexts
- To revise essential communication and counselling skills (covered in previous workshops)
- Introducing the ‘window’ approach framework to facilitating sexuality and decision-making in adolescent.
- Methods to implement life skills on gender



**Table 5: Structure and the content of the Sexuality and Relationships training curriculum.**

Session	Theme and Content	Duration
1	<b>Conceptual Frameworks:</b> 1) Understanding Adolescent Sexual Behaviour and decision making in sexuality contexts 2) A refresher on communication skills (Validation of emotions, and non-judgemental attitude) 3) The Window approach framework to sexuality and decision-making intervention for adolescent	4 hours
2	<b>Training and Handholding on intervention 1:</b> Attraction and Love: Is there a difference between attraction and love?	2 hours
3	<b>Training and Handholding on intervention 2:</b> Good Health: Needs and Pleasures The Human Body and Health Acknowledging Needs and Pleasures The issue of Balance (emphasising the importance of education and economic independence)	2 hours
4	<b>Training and Handholding on intervention 3:</b> Consent and Permission Issues	2 hours
5	<b>Training and Handholding on intervention 4:</b> The Decision to engage in Physical intimacy Boundaries of Comfort	2 hours
6	<b>Training and Handholding on intervention 5:</b> Readiness for Physical Intimacy Possessiveness	2 hours
7	<b>Training and Handholding on intervention 6:</b> The Pressure of Romantic Relationships	2 hours
8	<b>Training and Handholding on intervention 7:</b> Safe Sex (Negotiating for Safe Sex)	2 hours
9	<b>Training and Handholding on intervention 8:</b> Romantic and Sexual Relationships (Emotional issues...trust...balancing emotional needs with independence.... The need for education and economic independence)	2 hours
10	Summary and Wrap-up	2 hours

### **(iii) Materials and Scripts Developed for Training on Common Child and Adolescent Mental Health Disorders**

To facilitate training on a relatively complex issue, the team developed scripts that explain common mental health disorders. The mental health disorders covered are as follows: Attention Deficit Hyperactivity Disorder (ADHD), Anxiety Disorders, Depression, Substance Abuse Disorder, Conduct Disorder and Post Traumatic Stress Disorder (PTSD). The content of the scripts was procured from the DSM-V manual of mental health disorders. These scripts will be developed into videos for use in the training. The scripts are such that they will communicate (using conversations between children, parents, counsellors, teachers and other stakeholders) information about the erstwhile-mentioned mental health disorders including identification of symptoms and the need to seek help.

These videos may also be used as resources for spreading public awareness regarding the common mental health disorders.

### **(iv) Videos Developed for Training Sessions on Basic Communication and Counselling Techniques with Children**

A series of videos have been developed in order to make the online training programmes more learner-friendly, and help translate the concepts of basic communication and counselling

techniques into practice, so as to demonstrate how to interview and communicate, with children. The videos ensured that the role of each cadre of trainees, and the topics they are trained on were covered: for instance, videos targeting the Juvenile justice Board Members covered themes and issues of children in conflict with the law; videos targeting one stop centre staff, on child sexual abuse covered cases relevant to CSA. Furthermore, key themes covered during the training were also summarized in form of videos, and played during the session debriefs.

This medium of training, using videos, was found to be one of the most popular methods for online training as it was observed that the participants were more responsive when videos were used; it was seen that the learning outcomes were also better as the participants were learning by observing role-plays in the videos. A total of 75 videos were recorded and edited in-house, by SAMVAD. These videos were also provided to the training participants for their further revision and learning through the Learning Management System.

#### **(v) Development of Graphical and animated IEC materials**

For the purpose of effective training and capacity building programs on the online platform, and to teach concepts of child mental health and psychosocial care, SAMVAD has developed various graphical and animated IEC materials, using multi-media tools and software. Videos on the key domains of child development, and adolescent brain development was developed (for use in sessions on developmental milestones). A graphical video to depict the impact of trauma and abuse on child development and another video to enable training participants to understand the concept of *'Identifying Emotional & Behaviour Problems & Contexts: Child's Experience & Inner Voice'* was also developed.

#### **(vi) Mission Shakti – Content Development for Uttar Pradesh's 'Mission Shakti' Campaign**

The Department of Women and Child Development, Uttar Pradesh approached SAMVAD for technical support in the 'Mission Shakti' campaign launched by Hon'ble Chief Minister of Uttar Pradesh. The focus of the campaign on security of children and women, including protection and prevention of violence against women and children.

In November 2020, the focus on the campaign was on 'Support and Protection from Mental Health and Psychosocial Issues' under which the UP DWCD sought to touch on 4 broad aspects- Basic Awareness, Identification, Assistance and Referral. SAMVAD thus provided the technical content for the IEC materials-- on child sexual, physical and emotional abuse including definitions for these types of child abuse, how to identify that such abuse is occurring (signs and symptoms to look for in children) and where to refer children for help. Further, SAMVAD team also held a one-day session to orient the counsellors/fieldworkers who were implementing this campaign at community level on the technical and ethical aspects of interacting with children and caregivers (in the context of identifying and reporting child abuse).

It was communicated to SAMVAD by the Directorate of Uttar Pradesh that the content which was created in the form of a booklet has reached more than **1lakh** individuals through hard copies and electronic mediums across the State. The booklet was appreciated and viewed not only by child protection functionaries but also the Hon'ble Chief Minister of UP.

### A.3. Training and Capacity Building

During this quarterly period, the SAMVAD team has initiated and completed several training and capacity building activities, for various child protection functionaries in 5 states, and for Master Trainers of CHILDLINE India Foundation across the country. **A total of 1,084 service providers and child protection functionaries were reached through 68 training sessions.** (Please refer to table 6 below).

**Table 6: Training and Capacity Building Programs, Care & Protection, October- December 2020**

Ongoing Trainings and Plan for Next Quarterly					
State	Govt. Dept/ Agency Placing Request	Cadre for training	No. of Personnel	Content/Theme	No. of Sessions (2 to 3 hours in duration)
Uttar Pradesh	Department of Women and Child Development	Counsellors, LCPOs and Social workers of DCPU	37	Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care	14
Bihar	State Child Protection Society	Counsellors (CCIs, OHs and DCPUs)	50	Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care	13
Manipur	State Legal Service Authority and State Child Protection Society	Members of Juvenile Justice Boards	28	Psychosocial and Mental Health Considerations in Juvenile Justice: A training for response to Children in Conflict with Law.	8
Tamil Nadu	Social Defence Department	Counsellors, superintendents of Observation Home, State Child Protection Society members, DCPU social workers	26	Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care	7
CHILDLINE	CHILDLINE India Foundation	Master Trainers identified from different zones	28	Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care	16
Karnataka	The Directorate of Child Protection, Dept. of Women & Child Development	ICPS staff	96	"Suicide and Self Harm Behaviour among Children"	1
Karnataka	The Directorate of Child Protection, Dept.	Counsellors from the Government	87	Sexuality and Relationships in Adolescent Girls	7

	of Women & Child Development	Child care institutions			
Karnataka	The Directorate of Child Protection, Dept. of Women & Child Development	District Child Protection Unit staffs, ICPS staff, CWC members, NGO members and members from Specialized Adoption agencies	320	Orientation program on various resources materials available on Psychosocial Perspectives on Adoption	1
Uttar Pradesh	UNICEF and Department of Women and Child Development	Master Trainers of the Mission Shakti campaign – Psychiatrists, Psychologists & Child Protection functionaries	412	Recognition and Referral of Child Abuse	1
<b>Total</b>			<b>1,084</b>		<b>68</b>

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

**(i) Training sessions on “Suicide and Self Harm Behaviour among Children” - Karnataka**

The Directorate of Child Protection, Dept. of Women & Child Development, Government of Karnataka, requested SAMVAD to conduct a training and capacity building program for all the government child care institution (CCI) counsellors on suicide and self-harm due to the challenges they face in handling children with such behaviours. This program was further extended to the counsellors of the Family Counselling Centres, under the Social Welfare Board, Government of Karnataka, as they also provide counselling services to children.

The CCI counsellors and the counsellors from the family counselling centres were bifurcated in two batches and 1 half day training workshop was conducted in November 2020, for each batch. A total of 96 ICPS staff and 87 family counselling centre counsellors were trained. The training helped them understand: differences between suicide and (other) self-harm behaviours, the context, experiences and inner voices of children with such behaviours, methods and techniques to provide emergency and first level responses to children with such issues.

Although the sessions were planned for CCI counsellors, other staff i.e., superintendents, and probation officers voluntarily (based on their keenness to learn), participated in the SAMVAD sessions and reported that the content was exceedingly useful to them.

**(ii) Training Session addressing issues of Sexuality and Relationships in Adolescent Girls - Karnataka**

The Directorate of Child Protection, Department of Women and Child Development, Government of Karnataka, requested SAMVAD to conduct sessions with the children (especially female children) in the state run CCIs on high-risk behaviours of adolescent girls in the child care institution in the context of sexuality and romantic relationships (incl. “Elopement”). However, considering the present difficulty in conducting direct/in-person sessions with children, and the large numbers of children to be reached, a training program was developed to work with the counsellors of the government-run CCIs, to implement the requisite life skills training/ activities with children. The objective of the training workshop was to enable counsellors to develop an understanding adolescent sexual behaviour and decision

making in romance and sexuality contexts, and of a frame work to address the high-risk behaviours of adolescent girls in these contexts.

The training sessions was initially planned for 10 sessions of two hours each. However, with the ensuing interest of the participants to learn more, some sessions were extended, to three hours each, and the entire training program was completed in a total of 8 sessions. The life skills activities included in the training were drawn from the “Gender, Sexuality and Relationship – Adolescent Life Skills Series 2” developed by the Community Child and Adolescent Mental Health Service Project, Department of child and adolescent psychiatry, NIMHANS<sup>1</sup>. This manual was translated into Kannada language and shared with the participants for their use with children.



The methodology used in this training program was ‘do-and-learn’-- the training participants attended one session each week where they would be trained in the concepts and activity methods; they were then required to implement the activity learnt in the session, with children in their child care institutions. This approach ensured the participants learnt one concept/topic at a time, and practiced it with/ delivered it to the children, before learning the next (new) concept/topic, thus promoting more effective learning, and enhanced delivery of counselling services to children.

The monitoring and follow up was done by the Directorate of Child Protection, through the creation of a WhatsApp group for easy dissemination of training content and sharing of

<sup>1</sup> Available at: <https://www.nimhanschildproject.in/interventions/adolescents-13-18-years/adolescents-life-skills-modules-i-life-skills-gender-sexuality-relationships/>

experiences thereafter. The participants were required to document the sessions and take photographs for submission the department (as shown above).

### (iii) Orientation program on various resources materials available on Psychosocial Perspectives on Adoption - Karnataka

In celebration of International Adoption Awareness Month, and as part of its “Madila Belagu” program, the Directorate of Child Protection, Department of Women and Child Development, Government of Karnataka, requested SAMVAD to conduct an orientation program for child protection functionaries of Karnataka State on various resource materials on Psychosocial Perspectives on Adoption (erstwhile developed by the Community Child and Adolescent Mental Health Service Project Department of Child and Adolescent Psychiatry, NIMHANS). A total of 320 participants attended the session, including District Child Protection Unit staff, ICPS staff, CWC members, NGO members and members from Specialized Adoption agencies. During the session the participants were introduced to the following resource materials:



- Child development assessment formats for use for young children between (0-6 years)<sup>2</sup> to enable preparation of prospective adoptive parents to understand a given child’s developmental abilities and needs; and for appropriate categorization of children within CARA.
- Psychosocial Perspectives on Adoption – A Guide to Parents and Child Care Service Providers

This is a handbook<sup>3</sup> to help parents and child care service providers to understand adoption from a psychosocial perspective. This handbook seeks to provide answers to the many questions that both prospective adoptive parents as well as parents who have already adopted children have, about issues such as response to extended family and friends, schooling and adoption disclosure to their child. The series was based on the manual which was previously by NIMHANS team - Psychosocial Perspectives on Adoption: a guide for parents and child care service providers.

### (iv) Psychosocial and Mental Health Considerations in Juvenile Justice: A training for response to Children in Conflict with Law – Juvenile Justice Board Members, Manipur

The State Child Protection Society of Manipur requested SAMVAD to provide training to the newly recruited Juvenile Justice Board Members in the State, in order to prepare them for working effectively with children in conflict with the law. To this end, the Manipur State Legal Service Authority (MASLSA), in association with NIMHANS-SAMVAD, launched an initiative called “Nurture the Children’s Mind” for the newly recruited JJB members of all the districts in Manipur.



<sup>2</sup> Available at: <https://www.nimhanschildproject.in/anganwadis-phcs/>

<sup>3</sup> Available at: [https://www.nimhanschildproject.in/wp-content/uploads/2018/08/Psychosocial-Perspectives-on-Adoption-Guide-CCAMH-NIMHANS\\_v2019.pdf](https://www.nimhanschildproject.in/wp-content/uploads/2018/08/Psychosocial-Perspectives-on-Adoption-Guide-CCAMH-NIMHANS_v2019.pdf)

Smt. Gaiphulshillu Golmei, Member Secretary, Manipur State Legal Services Authority & Dr. Shekhar Seshadri, Prof and Associate Dean, Child and Adolescent Psychiatry Centre, NIMHANS, spoke at the inaugural—which was then documented in the Manipur newspaper.

A total of 26 JJB members have been undergoing training since November 2021, with two sessions per week. As of this quarterly period, 8 (of a total of 18) sessions have been completed. The specific objectives of the training are:

- Obtain an in-depth and nuanced understanding of the psychosocial contexts of children in conflict with the law (CICL).
- Identify and analyse CICL's pathways to offence (if any), including their problem areas.
- Building counselling and communication skills with a focus on
  - ✓ Getting started with children.
  - ✓ Developing basic communication skills to facilitate supportive relationships between the child care worker and child.
- Understand the mental health and psychosocial problems of CICL, including the assessments and interventions/ treatments that CICL should be provided with.
- Learn about referral (mental health) criteria and the types of interventions CICL require.

**(v) Psychosocial & Mental Health Care of Children affected by Sexual Abuse & Violence: Training & Capacity Building Program for Bharosa Centre Staff – Telangana**

In 2016, the Telangana Police, through their Women's Safety Wing started 'Bharosa'- one stop centres, that provide comprehensive assistance through police, medical, legal and prosecution services, along with psycho-therapeutic counselling and rehabilitation, for sexually abused children.

In November 2020, upon request from the Telangana Police/ Women's Safety Wing, to build the technical capacity of the Bharosa, SAMVAD started an online training program for the staff and counsellors on child sexual abuse work. A group of 40 participants, comprising of police personnel, health workers, counselors, legal advisors, administrative staff and support staff enrolled in the training program, from the 4 Bharosa cells in Hyderabad, Warangal, Vikarabad and Sangareddy.

However, after 4 sessions of the training, it was observed that the participants were not responsive, owing to the language barrier i.e. the training has been requested in English but many participants required for it to be in Telegu. SAMVAD then requested Bharosa to revise the list and number of participants to include only those who could communicate in English, so that they may become master trainers. However, this did not help matters much, as most were still unable to participate in the training. Consequently, SAMVAD proposed shifting the medium of training to an in-person workshop with translation, in January 2021 (subject to COVID-19 travel restrictions).



#### **(vi) Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances**

Based on the requests received from state governments and their departments of Women & Child Development/Social Welfare, SAMVAD initiated the basic training program on ***“Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care”***, for all the Master Trainers of the state ICPS staff. [This is SAMVAD’s basic/essential training to be undergone by all child care service providers at a first level]. The objectives of this training and capacity building initiative are:

- Understanding children’s rights, mental health, psychosocial issues and problems.
- Building an overall understanding of the child protection laws and procedures; specifically, their role in assisting the system in providing care and protection to children.
  - Building counselling and communication skills with a focus on o Getting started with children.
  - Developing basic communication skills to facilitate supportive relationships between the child care worker and child.
  - Providing assessment and first level responses to children
- Orientation about common child and adolescent mental health disorders in order to be able to refer children for treatment, when necessary.

This training program is currently running in 3 states, namely, Tamil Nadu, Bihar and Uttar Pradesh, targeting their child protection functionaries/ ICPS staff in the following ways:

- In Tamil Nadu, a master trainer approach is being used, with 29 English-speaking functionaries (including Observation Home counsellors, superintendents, administrative staff, counsellors, psychologists), who will in turn conduct the training for Tamil-speaking staff later;
- In Uttar Pradesh also, a master training approach is being used, so as to ensure at least one NIMHANS/SAMVAD-trained functionary per district, and 37 ICPS staff (comprising of counsellors, social workers, protection officers legal cum probation officers) are participating in the online sessions;
- The SAMVAD team initiated trainings in Bihar through the Bihar State Child Protection Society (BSCPS) for the counsellors from District Child Protection Units (DCPUs) and Child Care Institutions (CCIs). Currently, a training of a group of 50 ICPS officers is in progress, with about 10 sessions complete; given the overwhelmingly enthusiastic response of this group, the Bihar government has requested SAMVAD to initiate training for another group, this time of Legal Cum Probation Officers (LCPOs), in January 2021.

#### **(vii) Integrated Approaches & Methods in Child Protection, Mental Health & Psychosocial Care: Training & Capacity Building Program for CHILDLINE Master Trainers**

Multiple meetings with CHILDLINE on training their cadre on integrated approaches to child protection, mental health and psychosocial care were held in the month of September. Considering that CHILDLINE is a large organization with over 10,000 staff, it was decided that it would be most useful for SAMVAD to build their in-house capacity. Consequently, a Master Trainers approach was settled upon. Selection of the (participant) master trainers was undertaken by CHILDLINE and SAMVAD gathered more information on these master trainers via online forms, in order to better understand their background, experience with children, and language preference.



The objectives of the training program are:

- To integrate child and adolescent mental health and wellbeing into existing child protection intervention and policy of CHILDLINE.
- To equip CHILDLINE team/staff with skills to make decisions about the children’s care, protection, treatment, and rehabilitation, from a child psychosocial and mental health perspective by providing training on
  - Child development, mental health, psychosocial issues and problems.
  - Counselling and communication skills with a focus on - Engaging children effectively.
  - Developing basic communication skills to facilitate supportive relationships between the child care worker and child.
  - Orientation about common child and adolescent mental health disorders to be able to refer children for treatment, when necessary.
  - Screening/Identifying common child & adolescent mental health issues.

A pre-test was prepared with case studies of children giving multiple choice questions. The training sessions were conducted in English and Hindi as the CHILDLINE Master Trainers were from all over the country. The methodologies used with the participants included online activities using online platform. Along with the activities and games, resource materials were developed for enabling experiential learning of the participants.

#### **A.4. A study on "Exploring the Impact of COVID-19 on Child Protection in India: Implications for Capacity Building, Interventions and Policy"**

The study on "Exploring the Impact of COVID-19 on Child Protection in India: Implications for Capacity Building, Interventions and Policy" is being carried out by SAMVAD in three States namely, Maharashtra, Uttar Pradesh and Bihar. The States that were initially finalised for the study included West Bengal and Bihar as well. However, despite repeated attempts to contact the States and follow-up, there was no response to the team and it was decided to go ahead with three above mentioned States which gave SAMVAD official permissions as the study is time bound.

After permissions were received from States and survey tool for the study was finalised, the study was piloted in Uttar Pradesh with approx. 5 to 7 respondents of the study from each group, that is, Child Welfare Committees, superintendents, Juvenile Justice Board members, CHILDLINE workers and District Child Protection Officer. On the basis of feedback received from respondents, the tools were revised and the study was rolled out in all three States in the month of September. The districts were regularly co-ordinated with by Resource Persons of the study and rigorous follow up was done to ensure all respondents receive the tools. Since there were 162 districts to co-ordinate with, there were delays in closing the survey on time due to internet accessibility, technical issues and other prior work of respondents that they were occupied with. However, the study was closed in October and the next step after which the next step, that is Focus Group Discussions were planned. The number of responses has been summarized in the table below:

**Table 8: Details about the number of responses for the survey**

<b>Maharashtra</b>		
<b>Respondents</b>	<b>Expected Responses</b>	<b>Responses Received</b>
District Child Protection Officer	36	59
Child Welfare Committee	36	94

Juvenile Justice Board	36	47
Superintendent	37	134
CHILDLINE	36	77
<b>TOTAL</b>	<b>181</b>	<b>411</b>
<b>Uttar Pradesh</b>		
<b>Respondents</b>	<b>Expected Responses</b>	<b>Responses Received</b>
District Child Protection Officer	75	78
Child Welfare Committee	75	84
Juvenile Justice Board	75	84
Superintendent	51	26
CHILDLINE	75	86
<b>TOTAL</b>	<b>351</b>	<b>358</b>
<b>Madhya Pradesh</b>		
<b>Respondents</b>	<b>Expected Responses</b>	<b>Responses Received</b>
District Child Protection Officer	52	64
Child Welfare Committee	52	84
Juvenile Justice Board	52	18
Superintendent	27	56
CHILDLINE	52	56
<b>TOTAL</b>	<b>235</b>	<b>278</b>
<b>GRAND TOTAL</b>	<b>767</b>	<b>1047</b>

In the month of November, a preliminary analysis of the data received was done and a schedule was prepared for questions to ask in Focus Group Discussions (FGD). Simultaneously, the respondents were contacted to gather names of participants interested in the study. Based on interest in the FGD, the persons who had taken the survey became part of the FGD. In the month of December, 15 Focus Group Discussions were conducted from three States, that is, 5 FGD with all 5 respondents in every State was conducted. Each FGD included 5 – 7 persons and the FGD was conducted through the online platform which were moderated by SAMVAD.

The Focus Group Discussions have been completed in December and the recordings are being translated for further analysis and documentation in the study. Online recordings will be converted into transcripts. These transcripts will be manually analysed for content, to create emergent themes and categories. The FGD data and its analysis would be used to further analyze the quantitative data, to result in the development of a detailed report on child protection concerns in the COVID situation. The report combining the quantitative and qualitative findings and analysis would be shared with 2 to 3 key informants for their comments and any further analysis or reflections that they might be able to add to the report; they would also be requested to provide suggestions and recommendations for programs and policy. Key informants would include field practitioners and policy experts in child rights, protection and mental health. They would be drawn from MoWCD and other state departments, from law and policy and child care service providers in non-governmental agencies.

Henceforth, final report comprising of our findings, as well as recommendations for child protection services, capacity building of child protection service providers and policy will be developed and submitted to MoWCD. It will also be disseminated widely so that State Governments may access the findings and analyse for their programmatic and policy use.

### Rationale, Approach & Operational Strategy for Child Protection Training Programs

State Departments of Women and Child Development/ Social Welfare/ Other Departments were sent an introductory note on the services that SAMVAD would provide in the month of August, 2020. Based on this letter Manipur, Tamil Nadu, Uttar Pradesh, Bihar, Karnataka requested SAMVAD to provide training for their child protection functionaries under Integrated Child Protection Scheme (ICPS).

Following this, SAMVAD team had meetings with all the authorities to understand and discuss their state specific training needs. This helped us to plan and use various approaches and operational strategies in selecting the training participants and themes (See Box below).

#### Box: Rationale, Approach & Operational Strategy for Training Programs

Sr. No	State/ Organization	Rationale & Approach	Operational Strategy
1.	Karnataka	Child Protection functionaries & ICPS staff already trained on basic child mental health and psychosocial care issues by the Community Child and Adolescent Mental health Service project, Department of Child and Adolescent Psychiatry, NIMHANS over the past 5 years.	Training on Special Contexts (such as sexuality/self-harm)
2.	Tamil Nadu	Request from Department of Social Defence of Tamil Nadu, to conduct trainings for all Child Protection Functionaries of the State including the administrative and Directorate Staffs.	Basic training module for all staff on integration of child protection & mental health
3.	Manipur	State Legal Services Authority of Manipur (MASLSA), requested SAMVAD to conduct trainings for the functionaries that were working on field with children in conflict with law. The participants knowledge of English language was necessary for SAMVAD to implement the training.	- Specific need of the State regarding cadre for training. - Proficiency in English language
4.	Uttar Pradesh	The request was made by the Department of Women and Child Development in Uttar Pradesh and Department of Social Welfare in Bihar for capacity enhancement of child protection functionaries on child protection and mental health issues. Due to large size (UP) and intensive needs/paucity of mental health services (Bihar), and high child protection/mental health vulnerability of children, the request entailed training for proportionately large number of child protection functionaries, a Master Trainer approach was sought for Uttar Pradesh and Bihar.	Master Trainers
5.	Bihar		
6.	CHILDLINE	Request from the CHILDLINE India foundation to train all CHILDLINE staff across India on child mental health and psychosocial care; Considering the sheer number of the staff and the aim of CHILDLINE to build their in-house capacity, a Master Trainer approach was sought.	Master Trainers

### **Pedagogical Methods used in Training Programs on Integration of Child Protection & Mental Health**

A variety of pedagogical methods were used in training programs on integration of child protection & mental health, in order to ensure the desired learning outcomes, not only with regard to theoretical frameworks but more so, to ensure skill building (critical for field practice), as outlined below:

- **Trainings through online platform:** Due to COVID-19, the trainings continue to be online. This enables SAMVAD to reach multiple states/functionaries, via regular sessions. Learning that extends for several weeks (with two sessions per week), also allows participants to apply what they learn in the field, to reflect and return to sessions with questions on concept and field application.
- **Learning Management System(LMS):** To make the online learning more effective for the participants, the Moodle App is being used. This App is a popular learning platform for delivery of education courses. All resource material for the training programs has been created in Hindi and English, according to the needs of a given group. This material which may include presentations, videos and any additional reading material, is uploaded on the App after each session. Participants are able to access and download this material, so that they can re-visit the concepts after the session and also submit assignments as required. This APP is particularly useful to the master trainer groups as they use may the materials to design and facilitate their own sessions later after the SAMVAD training. During the initial introductory session, the participants are oriented about using the platform. A demo video is also recorded and circulated in the WhatsApp groups before and after the orientation. Individual queries and problems faced in registration or accessing the content are addressed by the IT team throughout the training program.
- **Using WhatsApp:** Coordination with participants on a weekly basis regarding assignments, sessions, important announcements are done through WhatsApp groups, formed at the start of each training program.
- **Master Trainer Approach:** A Master Trainer Approach is being used in some states and for CHILDLINE to enable a larger reach i.e., so that we develop the country's human resources in training and capacity building for child protection and mental health.
- **Teaching Methodology:** Videos, case study analysis, role plays, film screening, homework assignments and self-learning e-resources published on LMS are used, in largely participatory and experiential ways, to facilitate reflective and practice-based learning.
- **Pre- and Post-Training Evaluation:** Pre and post-tests at the beginning and end of the training program, respectively, are conducted to assess knowledge on child protection and mental health issues.
- **Process Evaluation:** At the end of each training program, a feedback form is provided to the participants with questions on methods they found helpful, the extent to which the training content was appropriate/ relevant, and helpful in their field work. Additionally, a qualitative feedback is also received in the last session of the training program, so participants may express other views and experiences that may not be reflected in the feedback form.
- **Commitment for training program completion:** All the participants were mandated to Switching on video throughout each session; 80% attendance is to be maintained; completion and timely submission of assignments.

## **Participants' Thoughts & Feedback on SAMVAD's Child Protection & Mental Health Training & Capacity Building Initiatives...**

- *This training has been a different experience and one of a kind - I don't even realise when three hours finish and our session ends.*
- *Thank You everyone for the high energy you all have shown in today's session...Thank you NIMHANS for supporting our State.*
- *The trainers are very knowledgeable and efficient. This entire training will be useful for me- thank you for making me part of this batch.*
- *By today's session, we got to know how to understand children's issues and you have explained it really well also. Thank you very much.*
- *Please use more similar methodologies that you are using for training, they are very useful and engaging. I will work harder and come first again (based on a competition we held on slido App.)*
- *It feels like we are back in the school. It is good to know that the people we work with are eager to learn and it is good to see a great student - teacher relationship. We have not experienced such level of commitment and participation in any other training programme before.*
- *We never knew how to be methodical in our interventions. These frameworks are simple and easy to use. Now we have a checklist ready to see if we are working in the right direction.*
- *This training itself is so therapeutic for us. We have been so frustrated. We have been waiting for a platform like this since 2021. It's great to learn.*
- *The use of Slido app to motivate the participants and to develop understanding on Child development was great.*
- *Group work using the break out room where we could interact and do a role play was a great way for learning.*
- *Watching movie as part of a training program is a great method of learning... And the best part is perhaps now onwards we will be watching any movie or dram with a framework in mind and digest the intent of the movie... loving learning in this training...*
- *The methodologies used in this training are interesting and makes us think... and we truly encourage it...*
- *This training is providing an in-depth understanding on children and their issues*
- *We have undergone many trainings but this is the most enjoyable and at the same time very useful for our work*
- *The best part of the training is it is not theory that is taught, but field realities and how to deal with it... we relate to the resource persons because they see things from our point of view...*
- *This method of weekly learning sessions rather than 3 day continues one off session is more useful for us as we will be always connected and help us to learn in a graded approach... it has helped us to learn better...*

### A.5 Plans for the Next Quarterly, January to March 2021

SAMVAD has contacted various States and organizations for extending support to them and to strengthen knowledge and skills of various cadres of child protection functionaries in the country. Refer to Table 9 for the programs that are scheduled to be conducted in the upcoming quarterly period, January to March 2021.

**Table 9: Plans for the Next Quarterly Period, Care and Protection, January to March 2021**

State	Government Dept/ Agency Placing Request	Cadre for Training	No. of Personnel	Content/ Theme
Uttarakhand	Department of Women and Child Development, Uttarakhand	Counsellors, superintendents, care takers, Social workers	51	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances
Bihar	State Child Protection Society	Legal cum Probation Officers	38	Psychosocial and Mental Health Considerations in Juvenile Justice: A training for response to Children in Conflict with Law.
Uttar Pradesh	Department of Women and Child Development	Counsellors, superintendents, care takers, Social workers	50	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances
Maharashtra	Department of Women and Child Development	Counsellors, superintendents, care takers, Social workers	50	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances
Jharkhand	Department of Women and Child Development	Counsellors, superintendents, care takers, Social workers	50	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances
Chhattisgarh	Department of Women and Child Development	Counsellors, superintendents, care takers, Social workers	50	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances
CHILDLINE	CHILDLINE India Foundation	Master Trainers of CHILDLINE	50	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances
Manipur	Department of Women and Child Development	Child Welfare Committee Members	70	Basic Child Psychosocial & Mental Health Care for Children in Difficult Circumstances

SAMVAD has also contacted Delhi, Haryana, Meghalaya, National Police Academy (Hyderabad), Bureau of Police Research and Development (BPRD) for collaboration and

trainings. In addition, SAMVAD has also received requests for capacity building from Goa and CRY organization to conduct training and capacity building programs for their staff.

## **B. Mental Health**

### **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.1. Material Development**

The following curriculum and training materials were developed in the first quarter, for capacity building of child and adolescent service providers on mental health issues:

- Comprehensive Training & Capacity Building Interventions on Child and Adolescent Mental Health & Psychosocial Care for District Mental Health Program (DMHP) Staff
- Comprehensive Training & Capacity Building Interventions on Adolescent Mental health & Psychosocial Care for Rashtriya Kishor Swasthya Karyakram (RKSK) Functionaries
- Training for Frontline Mental Health Functionaries on Child and Adolescent Mental Health in the Context of COVID-19 Pandemic

This quarter saw the implementation, revision and refinements of these training modules, particularly the training with DMHP staff, adapting them to the learning and application needs of trainees. The modifications have been made through a process of monitoring and evaluation basis the execution of the training, and the successive participant engagement, responsiveness and feedback on the learning process. Some of the key changes incorporated as part of the revision are:

- Including case studies and discussions to cement theoretical concepts covered in the sessions.
- Conducting comprehensive sessions dedicated to understanding the interlinkages between mental health and child protection, and its application in the work of DMHP functionaries, towards child care and protection.
- Streamlining the schedule to enable participation amidst other professional commitments of participants.
- Adapting the curriculum to the preferred language of the participants, as appropriate and possible (for example, with subtitles, mode of communication, regional and contextual examples in activities/discussions etc.).

The training materials are thus constantly being refined and modified, a step considered vital to meet one of the core objectives of the present project; the development of robust, standardized training modules on child and adolescent mental health, that can be implemented on a national level.

This quarter has also seen multiple training collaborations with the RKSK, whose objective is to focus on various adolescent health issues, and provide critical opportunities for addressing child and adolescent mental health issues around the country, at the community level. RKSK's mandate 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), which is in keeping with preventive and curative adolescent mental health agendas. The training curriculum thus aptly 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.

Further, new training modules have been developed in this quarter, which include:

- (i) Training & Capacity Building Program for Tertiary Mental Health Care Service Providers on Mental Health & Psychosocial Interventions for Children affected by Sexual Abuse & Violence
- (ii) Behavioral Management Interventions for Children with Developmental Disabilities

## B.2. Training and Capacity Building

Reaching out to **701 service providers**, during this quarterly, the Mental Health team has completed orientation and embarked upon training programs with **11 States**. For further details, please refer to Table 10.

**Table 10: Training and Capacity Building Programs, Mental Health, October to December 2020**

State/s	Government Dept/ Agency Placing Request	Cadre for Training	No. of Personnel	Content/ Theme	Timeline
Chhattisgarh	Directorate of Public Health	DMHP Staff	26	Child and Adolescent Mental Health	September to December, 2020
Kerala	Department of Social Justice	Teachers in BUDS Special Schools	26	Behavioral Management Interventions for Children with Developmental Disabilities	October, 2020



Mizoram	Directorate of Public Health	DMHP Staff	28	Child and Adolescent Mental Health	Initiated November, 2020 (Ongoing)
Odisha	Directorate of Public Health	DMHP Staff	60	Child and Adolescent Mental Health	Initiated November, 2020 (Ongoing)
Gujarat	Hospital for Mental Health, Ahmedabad	Tertiary Mental Health Care Service Providers	25	Mental Health & Psychosocial Interventions for Children affected by Sexual Abuse & Violence	Initiated December, 2020 (Ongoing)
Madhya Pradesh (2 sessions)	Joint Initiative by the Ministry of Health and Family Welfare, WHO, and NIMHANS-SAMVAD	Rashtriya Kishor Swasthya Karyakram (RKSK) Functionaries	88	Adolescents Mental Health Basics - Orientation Session; Gender-based Violence and Substance Abuse among Adolescents	6th November, 2020; 4th December, 2020
Uttarakhand (2 sessions)			70	Adolescents Mental Health Basics - Orientation Session; Gender-based Violence and Substance Abuse among Adolescents	11th November, 2020; 4th December, 2020
Uttar Pradesh (2 sessions for 2 Batches)			108	Adolescents Mental Health Basics - Orientation Session	12th and 20th November, 2020

Gujarat and Haryana (2 sessions)			143	COVID 19 Mental Health Preparedness for Children and Adolescents; Gender-based Violence and Substance Abuse among Adolescents	10th and 23rd December, 2020
Meghalaya and Karnataka (2 sessions)			127	COVID 19 Mental Health Preparedness for Children and Adolescents; Gender-based Violence and Substance Abuse among Adolescents	15th and 24th December, 2020
<b>Total No. of Service Providers Oriented/ Trained in Second Quarter</b>			<b>701</b>		

Below are brief descriptions of the training programs conducted.

**(i) Training on Child & Adolescent Mental Health for DMHP Staff: Chhattisgarh, Odisha and Mizoram States**

SAMVAD received requests from the Directorate of Health Services of the three States, for a training program on child and adolescent mental health for the District Mental Health Program functionaries. 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. Modules covered as part of the training include child development, working with children with developmental disabilities, communication skills, internalizing and

externalizing mental health disorders, sensitivities in working with children in conflict with the law, and linkages with community level service providers.

From the training sessions conducted thus far, DMHP staff have particularly appreciated the focus on the practical application of the theoretical concepts. Consistent feedback has been that the methodologies used in the training, including film viewing and discussions, case

### **Feedback from Chhattisgarh DMHP Training**

The Child and Adolescent Mental Health Training with the Chhattisgarh State DMHP Functionaries, which took place between September to December 2020, was the first basic mental health training program completed on the project. Feedback and evaluation of participant responses, based on their inputs in the pre-test, post-test, and participant feedback form upon training completion, have been compiled to prepare a training feedback and evaluation report. The feedback helped the SAMVAD team understand the views, opinions and suggestions of participants regarding the learning processes and methodologies applied in the program, elements of which will be used to modify the curriculum as appropriate, to improve participant learning outcomes. The participant responses on the pre- and post-tests, and a comparison of the scores, also serves as one variable to assess learning outcomes from the sessions.

Examining some of the statistics, over 95% of the participants stated that with regards to relevance of content for application to child and adolescent care work in their professional practice, and with respect to the training methodologies applied for learning, the training program benefited them to a high extent. Some of the training methodologies that majority of the participants were particularly appreciative of included case discussions, group activities specific to each session topic, and the homework assignments provided, that ranged from completing mental health assessment forms to developing public awareness materials on child development. The Chhattisgarh DMHP participants' commendable performance in the assignments is especially appreciated by the SAMVAD team, which is also a valuable and encouraging indicator of the learning outcomes.

Among the key learnings that majority of the participants found most beneficial were communication and counselling skills in child care work, the Inner Voice framework and understanding the context of children in child development, and mental health screening and assessments for common mental health issues among children. Interestingly, all of these topics are directly related to the counselling and mental health support work that DMHP Functionaries in our country are required to be adept in as part of their practice, making the training a crucial collaboration in revision and enhancement of knowledge and skills.

Regarding general feedback in terms of way forward and possible modifications to the present curriculum, the Chhattisgarh DMHP Functionaries are keen to receive further in-depth training on specific child health, care and protection topics, such as in-depth training on child sexual abuse for example. They also evinced an interest to the SAMVAD team's suggestion of continuing training through case discussions from some of their own professional experiences, as a means to share their experiences of child care work and together explore best possible interventions to support the children. These case discussions are to be initiated in January, 2021. In regards to the online training approach adopted for Chhattisgarh, while some participants shared that in-person sessions would be more effective, many others also found the technology-assisted learning approach feasible and convenient, demonstrating that the methodology is rather beneficial in learning, especially given the pandemic circumstances and the dispersion of DMHP staff across districts, making assembling of functionaries together at one location nearly impossible. Discussions by the SAMVAD team are presently ongoing to refine the online training programs and curriculum, to continue such teaching and learning approaches in our way forward, also as a means to reach stakeholders, functionaries and beneficiaries across the country, overcoming the demographic limitations as much as possible.

studies, technology-assisted activities and quizzes, and homework assignments, helped the participants not only understand the concepts of child development, but also the practical applications of concepts such as early stimulation, recognizing and acknowledging children's emotions and experiences, comprehending pathways to vulnerability among children from attend the sessions regularly even if they are in the middle of an assigned duty.

## **ii) Training & Capacity Building Program for Tertiary Mental Health Care Service Providers on Mental Health & Psychosocial & Interventions for Children affected by Sexual Abuse & Violence, Gujarat State**

Recognizing the increasing prevalence of crimes against children, including sexual victimization, child abuse and neglect, a training program has been developed to address the two key areas in which sexually abused children require support and assistance—(a) mental health i.e. ensuring healing and recovery from possibly traumatic experiences of abuse; (b) legal processes i.e. assisting the child with provision of evidence, preparation for court and support through court processes. Among the main objectives of the training program are; understanding the dynamics of Child Sexual Abuse (CSA) and the implications for disclosure and mental health issues, identifying developmental and psychological impacts of CSA and providing appropriate referrals to specialized mental health services, developing essential counselling skills to support children who have experienced CSA, management and interventions for common childhood and adolescent mental health disorders resulting from CSA, and orientation to the POCSO law and related legal and court processes so as to understand the role of mental health professionals in responding to medico-legal issues of CSA.

Upon request from the Gujarat Institute of Mental Health, Ahmedabad, SAMVAD initiated a CSA training program for tertiary level mental health care service providers in Gujarat, including doctors, mental health professionals, professors and students from Departments of Psychiatry in National/Government Institutes and Medical Colleges, and Centres of Excellence in Mental Health, from the backgrounds of Psychiatry, Psychology and (Psychiatric) Social Work.

Over 30 participants enrolled as part of the training, and the first 3 online training sessions were completed, covering the basics of childhood trauma. However, it was noticed that despite enrolment, several participants were not joining the sessions. Upon further inquiry and discussion with the organizers from Gujarat, it was realized that participants were unwilling to commit to two 3-hour sessions per week over a period of 2 months (as required for the completion of the training program). The program was therefore stopped until further decisions could be made. The Gujarat Institute has now communicated that they are deeply interested in continuing the CSA training program but that they would prefer to have it in-person (in Gujarat), as a 3-day workshop. This is now being considered as a plan for the upcoming quarterly period, subject to the pandemic and its restrictions.

## **State-specific Highlights DMHP Training Program, September to December 2020**

### **Chhatisgarh:**

- 26 participants completed the training conducted online through the Virtual Knowledge Network (VKN)
- A total of 28 sessions were conducted.
- Active participation of trainees, as part of the discussions and activities in the sessions, along with sharing of personal child care work experiences, have been valuable in strengthening the learnings from the training, and taking the sessions forward in an engaging manner.
- Participants are already in discussion with the SAMVAD team to link the mental health and child protection systems in Chhattisgarh State by undertaking training programs for child protection functionaries.
- Participants have evinced an interest about opportunities for further training with SAMVAD through monthly case conferences, and specialized training on child sexual abuse and its impacts on mental health.

### **Odisha:**

- A total of 60 participants (2 batches; 30 participants per batch) are presently engaged in the training.
- Participant engagement has been active and valuable in taking forward the sessions, as well as in enabling the facilitator's understanding of whether the key concepts are being assimilated.
- Thus far, the modules on child development, and most sessions on working with children with developmental disabilities, have been completed (7 sessions).
- The training of the two batches from Odisha State (remaining 20 sessions) is scheduled to be completed in the next quarterly period.

### **Mizoram:**

- A total of 28 participants are presently engaged in the training.
- Thus far, the modules on child development and working with children with developmental disabilities have been completed (10 sessions).
- Some challenges have been identified in conducting the training with Mizoram State—
  - Participants are not able to engage with the discussions much, since they are more comfortable in their native language Mizo, a language that the SAMVAD team is presently not equipped to deliver trainings in.
  - Participants have expressed preference for in-person training rather than online.
- Considering these challenges, two models to take forward the training are being explored:
  - In-person sessions (which would allow the use of a translator), depending on the pandemic and related state rules (i.e. whether they will permit travel to and within Mizoram).
  - The inclusion of those DMHP staff who understand English in one of the other state DMHP training programs; and the use of these staff as master trainers to deliver training to other DMHP staff in Mizo.

### **iii) Behavioral Management Interventions for Children with Developmental Disabilities, Kerala State**

SAMVAD, in collaboration with the Department of Social Justice, Kerala, conducted a two-day training program for BUDS Special Schools teachers, on the 12th and 13th of October, 2020. BUDS schools are registered with the Department of Education of the Government of Kerala, and is an initiative of the Kudumbasree poverty eradication mission that runs around 31 schools for special children across the State.

Trained and skilled teachers are a requisite to enhance the services for children, that would ensure optimal care and training towards inclusivity to the mainstream of education and society. Hence, this training focused on behavioral management interventions that can be applied by teachers working with children with developmental disabilities, as part of an inclusive model of education through a psychosocial approach, promoting holistic care for children. Building on the developmental deficits, skills and abilities that characterize children with developmental disability, the training helped teachers understand the contexts in which such children have behavioural problems, the types of interventions that may be provided to address children's difficult behaviours (such as socio-emotional skill training, personal safety awareness and behaviour modification techniques that teachers/caregivers may use); but also strongly emphasizing the need to recognize the identity and personhood of children with developmental disability. A total of 26 participants were in attendance for the training.

### **iv) Orientation Program for Rashtriya Kishore Swasthya Karyakram (RKSK) Staff,**

Reaching 536 RKSK functionaries, in 7 states, the 6-hour orientation sessions with RKSK, in keeping with preventive and curative adolescent mental health agendas, have included a diverse range of topics. Understanding adolescence as a life stage in child development, and its link to mental health is among the core sessions, along with further exploration into common mental health disorders during this developmental stage. Acknowledging the developmental characteristics specific to adolescence, the training also focusses on high-risk behaviours in the context of sexuality and substance use, and how adolescents can develop coping skills, by considering strategies that can enable appropriate and healthy responses to stress. Life skills education, as significant training to help adolescents develop essential daily life skills, agency and resilience, is also explored. The training further creates a platform for the SAMVAD team to understand some of the concerns and challenges that the participants have in their work with children, and use these insights towards developing future depth training programs for the functionaries.

### **B.3. Research Plans**

Interactions with DMHP functionaries as part of the mental health trainings conducted so far have brought out some important observations for the SAMVAD team, many of which show promise in areas for further research. Particularly significant have been discussions on the mental health and psychosocial contexts of children in conflict with the law, and how this connects to child protection, law and policy. Since one of the objectives of SAMVAD is to undertake studies, audits, research and advocacy on issues pertaining to child and adolescent protection and related issues of mental health and psychosocial care, a research proposal is being prepared for a pilot study that will explore attitudes and perceptions of mental health professionals pertaining to children in conflict with the law, including their knowledge of CICL's

pathways to vulnerability and of the relevant legal provisions for such children, under the Juvenile Justice (Care and Protection) Act 2015.

#### **B.4. Plans for the Next Quarterly, January to March, 2021**

The Mental Health team have continued to receive 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. Refer to Table 11 details of the training sessions planned for the next quarter.

Additionally, SAMVAD's mental health team will complete the research proposal on knowledge, attitudes and practice of mental health professionals with regard to children in conflict with the law, submit it for due ethics approvals via NIMHANS's ethics committee and initiate the study, subject to these approvals, across the country.

The Mental Health team is also collaborating with the SAMVAD Education team to initiate a collection of story series for public awareness and discourse in the next quarter. The topics are based on essential mental health, care and education issues pertaining to children and adolescents, and include themes such as Bullying, Substance Use, Peer Pressure and Abuse. The first story series to be launched will be that on "Bullying", with 4 stories scheduled to run every Sunday in the month of February, 2021.

**Table 11: Training & Capacity Building for Upcoming Quarterly, Mental Health, January to March 2021**

<b>State</b>	<b>Government Dept/ Agency</b>	<b>Cadre</b>	<b>No. of Personnel</b>	<b>Content/ Theme</b>	<b>Timeline</b>
Tamil Nadu	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)	80	Child & Adolescent Mental Health	January, 2021
Bihar	District Mental Health Program, Directorate of Public Health Dept. of Health &	Medical/Mental Health professionals from DMHP working directly with children	50	Child & Adolescent Mental Health	February, 2021

	Family Welfare				
Manipur	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)	50	Child & Adolescent Mental Health	February, 2021
Nagaland	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)	50	Child & Adolescent Mental Health	February, 2021
Chhattisgarh	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)	35	Case conferences & other Specialized Trainings	From January, 2021

## 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, behavior and learning problems in school children.
- To promote interventions for inclusion and life skills education within schools.
- Enable capacities of schools to deal with special issues such as abuse /bullying/ discipline & punishment.



## C.2. Material Development

The education team has been actively engaged in modification of the training curriculum content which has already been developed and is already in use for the training. This is done in accordance to the need of the different stakeholders in the education sector to be able to fit the cadre and the proposed curriculum for different educational agencies/ state governments. Currently, the team has developed content on Developmental Disabilities and also expanded the different mental health issues that prevail in school contexts with focus on interventions and management of disabilities/ disorders.

### a) Training and Capacity Building of In- service Government School Teachers:

As mentioned in the first quarterly report the aim of school-based interventions is to provide an experience that will strengthen children's coping abilities to counter environmental stressors and disadvantages with which they have had to cope while growing up. With this view in mind, the training module which is already developed & is in place is being modified according to the interactions during the training with the teachers which will in turn help the teachers to be equipped to understand and address their difficulties children face; not just in their academic space but also in their socio emotional, behavioral and developmental domains.

### b) Training and Capacity Building Program of Teachers under Tata Steel Foundation

With the initiative rendering its support to agencies other than the government sector, the team is also developing a training curriculum which is specifically for teacher training for Residential Bridge Courses which is an initiative of the Tata Steel Foundation. The training content is mainly focused on children from the most vulnerable communities, especially from the streets, railway stations and slums.

## C.3. Training and Capacity Building

During this quarter, SAMVAD- NIMHANS conducted capacity building trainings through online sessions to reach a total of 169 teachers in government schools and other education initiatives for vulnerable children.

**Table 12: Training & Capacity Building Programs, Education, October- November 2020**

State	Agency/ Government Department	Cadre	No. of Participants	Theme/ Content	Timeline
Punjab	State Council of Educational Research and Training	Teachers	131	Interventions for Strengthening School Mental Health	November 2020...ongoing
Odisha & Jharkhand	Tata Steel Foundation	Teachers of Residential Bridge Course Programs	38	Addressing the Psychosocial, Mental Health & Education Needs of Vulnerable Children	December 2020
<b>Total Numbers of Teachers Trained</b>					<b>169</b>

A brief description of the training sessions is provided below.

**(i) Teacher Training for Government School Teachers, Punjab**

**Upon request from the State Council of Educational Research and Training (SCERT), in November 2020**, SAMVAD, initiated a training program for 131 government school teachers of 22 districts in Punjab. The specific objectives of the online training program are:

- Understanding children, childhood and the basics of child development.
- Building counselling and communication skills.
- Identification of emotional, behavioural and learning problems in children through screening and assessment.
- Understanding the signs, symptoms and management of child and adolescent mental health disorders.
- Developing first level responses to assist children with mild-to-moderate mental health problems.
- Addressing special concerns in the school setting—such as inclusion, discipline and bullying.

As of this quarterly, 17 of a total of 22 online sessions scheduled have been delivered.

The training has been very well received by the teachers; one of the key factors that has made this training program a success is the active participation and sharing of school/classroom experiences by teachers. Teachers also appreciated the different methodologies, especially case discussions, role-plays and movie screenings, stating that they really helped them learn concept. Further, they stated that these practical methodologies have given them insights into classroom dynamics and ways to address the socio-emotional issues that they often observe in children. The teachers' enthusiasm and excitement regarding the training was evident from the fact that they were nearly always online well before the start of the session. The effectiveness of the training content and the online delivery methods was evidenced by the teachers' deep engagement and active participation, and their sensitive responses to the concepts and interventions that they were introduced to. The teachers were particularly appreciative of the intervention-heavy content of the training, which provided them with concrete ways to address children's emotional, behavioural and learning issues—particularly in contexts such as substance abuse, which is a common problem in Punjab.

The learning experience was mutual, as the SAMVAD facilitators were also able to develop an understanding of how children's issues are being dealt with in schools, and the many efforts that teachers make to assist their students. We also learnt about the challenges that teachers experience, particularly in regard to large class sizes, lack of school counsellors and the paucity of time for children due to heavy administrative responsibilities. One of the topics that participants found most useful was that pertaining to the context of emotional and behaviour problems, and the 'child's inner voice' framework—in which teachers are taught how to identify and analyze the basis (cause) of children's emotional and behaviour problems. Such (new) conceptual learning helped teachers move from adult-centric and lecture/advice ways, to more child-centric, empathic ways of engaging with children i.e. by helping them view the world from the perspective of children, their experiences and internalizations, and resulting inner voices. The training made considerable efforts to bring about this shift in approach i.e. from being didactic and telling children what to do, to understanding how to be enabling and guiding (rather than 'telling') children on what to do, through listening and responding to children's perceptions and viewpoints.

### Participant Teachers' Feedback...

- *This has been the best training in my career...*
- *'this training has geared me in understanding children in a whole new different way. It has helped me understand not only my students but also my own children.'*
- *A poem (by a teacher): beginning with "Badi Duvida hui ek baari-...School aur Training kaise saath laga payenge", and ending with "Koshish karenge ek nayi bonding ke saath hum aage aayenge...Society le liye kuch behtar hum bhi kar payenge...Rapport Building karte hue, Context dekhte hue, Non-Judgemental rehte hue...In choti kaliyon ko bachane ki puri koshish karenge".*
- *"This training was very fruitful for a child's mental health. The way of teaching by mentors is very impressive. The timing of training should be April to October. Overall experience is Excellent."*
- *"The subject matter was appropriate, Topics discussed are applicable in schools, efficiently described in the given time duration is suitable neither less nor excessive."*
- *"Long ago, when I was undertaking my B.Ed. degree, I had studied some of the content used in the training, and was looking forward to applying it in the school setting. But then, I got so occupied with the manual and administrative tasks that I found no time as well as space to use those learning in person. Now, after attending these trainings, I feel confident as well as encouraged to use different methodologies you taught to apply a child-centric approach and make a better environment at school."*

### (ii) Integrating Child Protection into Education Initiatives, Training for Teachers in Residential Bridge Courses

Tata steel Corporate Social Responsibility (CSR), is a citizen's program that strives to empower communities through the spread of quality education, healthcare and sustainable livelihood opportunities in all their global operational location. Since 2015, the company has been running a Residential Bridge Course (RBC), to cater to the children who have dropped out of schools or never been to schools. This RBC, aimed at removing children from child labour, and getting them (back) into schools, works on children's education gaps and deficits, preparing them to (re)enter government schools. These RBCs are run under two programs, namely, the '1000 schools program' and the 'Masti ki Paatshala'.

Located in Jamshedpur, the 'Masti ki Paatshala' program aims at assisting street children and child laborers, with a view to rendering Jamshedpur a child-labor free city. Children from extremely vulnerable circumstances, such as those who are orphaned and homeless, victims of abuse and trafficking, in various contexts of child labour such as begging, rag picking, working at construction sites, *dhabas*, and garages, brought within the Right to Education framework, and placed back within the school system. Following their placement in the residential bridge course, many children are placed in private schools—in fact, about 60% of them have scored in the 1<sup>st</sup> division. Currently, the program runs 5 hostels (2 for girls and 3 for boys). Out of the 400 children enrolled in these hostels, about 84 have been mainstreamed into private schools; the remaining continue their studies in the hostels. The role of these teachers is therefore, now only to educate children and coordinate with the teachers of those going to private schools, but also to be caregivers to the children.

In all, there are about 38 such teachers (cum caregivers) in the Masti Ki Pathshala program. In response to a request from the Tata Steel Foundation SAMVAD has initiated a training program for these teachers (cum caregivers). In recognition of the relationship between children’s learning and their emotional and behavioural issues, and that the education mandate of the programs, may successfully be achieved only if child mental health needs of these vulnerable/ at-risk children are addressed and resolved, the training curriculum/content used for government school teachers has been adapted to fit the needs of the ‘masti ki pathshala’ teachers.

The specific objectives of the training are as below:

Helping teachers and caregivers in the RBC programs with:

- Understanding children, childhood and the basics of child development.
- Building counselling and communication skills.
- Understanding the signs, symptoms and management of child and adolescent mental health disorders.
- Addressing special contexts and concerns of children i.e. pertaining to trauma and child protection
- Developing first level responses to assist children with mild-to-moderate mental health problems, including high risk behaviours and related emotional and behavioural concerns.

As of this quarterly period, 7 sessions (of a total of 22) have been completed; and the training will continue and be completed in the next quarterly.

#### **C.4. Plans for Next Quarterly, January- March 2021**

Ongoing training programs such as with Punjab government school teachers and ‘Masti ki Pathshala’ teachers will continue and be completed in the upcoming quarterly period. Additionally, new teacher/ school counsellor training programs will be initiated, as described below.

**Table 13: Proposed Training & Capacity Building Programs, Education, January- March 2021**

<b>State</b>	<b>Agency/ Government Department</b>	<b>Cadre</b>	<b>No. of Participants</b>	<b>Theme/ Content</b>	<b>Timeline</b>
New Delhi	Educational & Vocational Guidance Bureau (EVGB) , Directorate of Education	School Counselors	50	Interventions for Strengthening School Mental Health	February 2021
Andhra Pradesh	State Council of Educational Research and Training	Teachers	50	Interventions for Strengthening School Mental Health	February 2021

Other plans for training and capacity building are in process. Introductory letter and concept note has been shared with the concerned department/ agency, as below. Communications are on-going to finalize dates for training.

- National Leadership Institute, Jawahar Navodaya Vidyalaya Samiti (JNV), Amritsar (to initiate training for Punjab, Himachal Pradesh and Jammu & Kashmir).
- State Institute of Education, Andaman & Nicobar Islands
- State Council of Educational Research and Training, Haryana
- State Council of Educational Research and Training, Nagaland

## **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.
- To elicit judicial stakeholder perspectives on child law and policy and facilitate material development for judicial education and capacity building.

### **D.2. Material Development**

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) Training Curriculum on *Implementing the Juvenile Justice (Care and Protection of Children) Act, 2015 in the Context of Children in Conflict with the Law for JJB Magistrates***

This Training Curriculum was designed on request from the Juvenile Justice Committee, Hon'ble High Court of Karnataka, for a 3-Day Training Program for Juvenile Justice Board Magistrates in Karnataka with a specific focus on Children in Conflict with the Law. The Training Program is to be coordinated by the Karnataka Judicial Academy for the participant Judicial Officers in the State. The curriculum for the Training Program was designed to develop an understanding of the psychosocial and mental health contexts of CICL in judicial personnel, orient judicial personnel to the restorative framework of the JJ Act, and develop an understanding of the mechanism for preliminary assessment under Section 15 of the JJ Act.

The schedule for the Training Curriculum is divided as follows:

Day 1: The Why and How of Juvenile Justice- Principles, Approaches and Laws

Day 2: Psychosocial and Mental Health Perspectives on Children in Conflict with the Law

Day 3: Special Issues and Considerations

The Curriculum has been approved by the Hon'ble Juvenile Justice Committee, High Court of Karnataka. On the basis of the framework designed for the various sessions outlined in the Curriculum, the SAMVAD Team is currently approaching subject experts in the areas of child rights, law and child protection as resource persons for the program.

### Suggested Content for Judicial Education and Capacity Enhancement of Juvenile Justice Magistrates

<b>Day 1: The Why &amp; How of Juvenile Justice: Principles, Approaches &amp; Laws</b>			
<b>Session Duration</b>	<b>&amp;</b>	<b>Topic</b>	<b>Content</b>
<b>Session 1 (2 hours)</b>		Introduction & History of Juvenile Legislation	<ul style="list-style-type: none"> <li>• What is the historical context of the Juvenile Justice framework in India?</li> <li>• What were the International legal developments in Juvenile Justice that impacted national legislative priorities in India?</li> <li>• How have juvenile justice systems evolved in India versus countries across the world?</li> </ul>
<b>Session 2 (2 hours)</b>		Applying the Child Rights Lens	<ul style="list-style-type: none"> <li>• The importance of applying the guiding principles (Section 3) of the JJ Act, 2015 with regard to the child in conflict with the law, namely principles of: presumption of innocence, participation, best interest of the child, safety, positive measures, and natural justice</li> </ul>
<b>Session 3 (3 hours)</b>		Key Provisions of the Juvenile Justice Act 2015	<ul style="list-style-type: none"> <li>• Classification of offences under the Juvenile Justice (Care and Protection of Children) Act, 2015</li> <li>- <i>Shilpa Mittal v State of (NCT of Delhi) &amp; Anr</i> – Judicial interpretation of serious vs. heinous offences</li> <li>• Powers and functions of the Juvenile Justice Board</li> <li>• Procedure for inquiry</li> <li>• Conditions for the grant or refusal of bail</li> <li>• Preliminary Assessment under Section 15 (brief introduction)</li> <li>• Superintendence of Child Care Institutions as a responsibility of the JJB</li> <li>• Orders to be passed by the JJB</li> <li>• Social Investigation Reports/ Social Background Reports (Role of the JJB vis-à-vis Probation Officer)</li> <li>• Work in regards to Children in Need of Care and Protection</li> </ul>
<b>Day 2: Psychosocial &amp; Mental Health Perspectives on Children in Conflict with Law</b>			
<b>Session 4 (40 minutes)</b>		Setting the Tone	Re-Connecting with Childhood

<b>Session 5</b> (1 hour)	Opening Reflections on Juvenile Justice	Critical Examination of the Juvenile Justice System & its Responses to CICL
<b>Session 6</b> (3 hours)	Identifying Pathways to Offence	Understanding and Analyzing Vulnerabilities of CICL
<b>Session 7</b> (1 hour)	Psychosocial & Mental Health Assessment of CICL	<ul style="list-style-type: none"> <li>• Orientation to Psychosocial &amp; Mental Health Assessment Proforma</li> <li>• Demonstration of Methods of Assessment</li> </ul>
<b>Session 8</b> (1.5 hours)	Preliminary Assessments	<ul style="list-style-type: none"> <li>• Use of Preliminary Assessments</li> <li>• Discussion &amp; Perspective-Taking on relevant High Court Judgment</li> </ul>
<b>Session 9</b> (30 minutes)	A Quick Overview of Psychosocial & Mental Health Interventions for CICL	<ul style="list-style-type: none"> <li>• First Level Responses</li> <li>• Depth Interventions</li> <li>• Referral Criteria</li> </ul>
<b>Day 3: Special Issues &amp; Considerations</b>		
<b>Session 10</b> (1 hour)	Does Mens Rea apply in the context of juvenile justice?	<ul style="list-style-type: none"> <li>• Doctrinal understanding of Mens Rea and mental capacity in the context of their exculpatory value and analysis of their differing orientations</li> <li>• How does the law understand mens rea/criminal intent?</li> </ul>
<b>Session 11</b> (1.5 hours)	Further Understanding of Section 15	Section 15 and its underlying criminal law principles within the broader restorative framework of the JJ Act
<b>Session 12</b> (1.5 Hours)	Maintaining the Essence of the Juvenile Justice Act: Rehabilitation-Focussed Decisions CICL	<ul style="list-style-type: none"> <li>• What is restorative justice?</li> <li>• Restorative justice and rehabilitative frameworks in the context of juvenile criminality. Why and How?</li> <li>• How does the scheme of the JJ Act, 2015 comport with a restorative framework of justice?</li> </ul>
<b>Session 13</b> (3 Hours)	Critical Judgements in Juvenile Justice	<p>Discussion of High Court &amp; Supreme Court Judgements</p> <ul style="list-style-type: none"> <li>• Age determination of CICL</li> <li>• Classification of offences under the JJ Act</li> <li>• Implementing Section 15 (Preliminary Assessment)</li> <li>• Decisions on conduct of inquiry proceedings by the JJB</li> <li>• Rehabilitative framework of the JJ Act</li> </ul>

### b) Format for Deliberations

In addition to the training programs and capacity building initiatives for various cadres of judicial personnel including Special Court Judges, Juvenile Justice Board Magistrates, District and Sessions Judges, a need for more in-depth engagement with the Judiciary on issues concerning statutory frameworks and implementation-related issues of the Juvenile Justice Act was identified. To facilitate such in-depth engagement on important areas of concern, the

SAMVAD Team has developed a methodology for a series of Deliberations on issues pertaining to child and law. It is implemented in collaboration with the concerned State Judicial Academy.

A deliberation is a collaborative process of discussing contested issues by considering various perspectives in order to form opinions and guide judgment. Effective deliberation incorporates sustained and appropriate modes of argumentation, to lead to the exploration of differing perspectives and informing various decisions. For the deliberations proposed by SAMVAD, a form of structured debate is undertaken wherein 3 motions are debated with arguments advanced in favour of and against each motion. Deliberations on each motion include time allotted for the respective panellist's considered views on the discussion and significance of the issues raised through the deliberative process. A total of 30-36 judicial personnel participate in the deliberations and work in teams to prepare arguments in favour of and against the said motions. On the final day, one Speaker, nominated by participants in each group (for/against) the 3 motions i.e. 6 Speakers is invited to deliver each group's arguments for the motion. A panel comprising of Justice Madan Lokur, a Judge of the State High Court (when possible, a member of the State High Court Juvenile Justice Committee) and the Head of SAMVAD, so as to ensure the representation of judicial and mental health perspectives on a given issue.

A concept note, comprising of motions for debate and deliberation were developed on the following issues:

- "The Dilemmas of Implementing Section 15: Preliminary Assessment for Children in Conflict with the Law": This note is being shared with Judicial Academies across the country, and the deliberation organized, based on their interest and initiative, with the support of SAMVAD.
- "(De)Institutionalization of Children During COVID 19: The Principle of Best Interest and Restoration under Juvenile Justice (Care & Protection of Children) Act, 2015 (Concept Note for Child Welfare Committees Deliberation)": This note was developed on request from the Rajasthan Judicial Academy, a Deliberation was designed for the Child Welfare Committee (CWC) members on the issue of restoration of children in the context of COVID-19. Given the success of the Section 15 Deliberations with judicial personnel, it was felt that the methodology of the deliberation could be utilised to facilitate in-depth dialogue with other cadres of child protection functionaries i.e., statutory support services like the CWC. The issue of restoration of children and primacy of family-based care under the juvenile justice framework came to the fore in the context of the directive of the National Commission for Protection of Child Rights (NCPCR) for time-bound repatriation of children in child care institutions to their families/family-based care like foster care and adoption. Given the socio-economic and psychosocial vulnerabilities that have been exacerbated in the COVID context, the Deliberation was developed to elicit stakeholder perspectives on the issue of de-institutionalisation and restoration of children in adversity.

### **D.3. Training and Capacity Building**

During this quarterly period, the SAMVAD Team has reached out, in response to requests from the State Judicial Academies and State Legal Services Authorities, through orientation and training/judicial engagement programs to 446 judicial officers from across the country



mainly on the subjects of child and adolescent mental health and protection, conceptual framework and implementation of Section 15 of the JJ Act and decisions in online court processes. [Refer to Table 14 for details].

**Table 14: Training & Capacity Building Activities, Policy & Law, October to December 2020**

State	Agency/ Government Department	Cadre	No. of Participants	Theme/Content	Timeline
Gujarat	Centre for Law and Society, Gujarat National Law University	Research Scholars, Students and Practitioners	67	Mental Health Programs, Policy and Law	October 2020
Maharashtra	Maharashtra Judicial Academy	JJB Magistrates/ Special Court/Children's Court/District and Sessions Judges	62	Deliberation on "The Dilemmas of Implementing Section 15: Preliminary Assessment for Children in Conflict with the Law"	October 2020
Maharashtra	Maharashtra Judicial Academy	Magistrates	83	Panel Discussion on "Decisions in online court processes"	October 2020
West Bengal	West Bengal Judicial Academy Training	JJB Magistrates	52	Working with Children in Conflict with the Law	November 2020
West Bengal	West Bengal Judicial Academy Training	Special Court Judges	51	The Child as a Witness: Developmental & Mental Health Implications for Eliciting Evidence under Protection of Children from Sexual Offences Act (POCSO) 2012	November 2020
Delhi	Delhi Judicial Academy	JJB Members and CWC Members	36	A brief overview of child and Adolescent Mental Health and Protection issues.	November 2020

Rajasthan	Rajasthan Judicial Academy	JJB Magistrates/Special Court/Children's Court/District and Sessions Judges	95	Deliberation on "The Dilemmas of Implementing Section 15: Preliminary Assessment for Children in Conflict with the Law"	November 2020
<b>Total No. of Judicial Personnel Reached</b>			<b>446</b>		

**(i) "Mental Health Programs, Policy and Law" for Gujarat Centre for Law and Society, Gujarat National Law University**

Gujarat National Law University, conducts regular training sessions in furtherance of its objective of organising a Lecture Series called 'Open House'. The series is intended for law students and professionals and undertakes work at the confluence of subjects pertaining to law and society. As a part of this initiative, the Head of SAMVAD conducted a session on October 10th on the subject of Mental Health Programs, Policy and Law. The specific focus of the session was concepts and issues concerned with Children in Conflict with the Law (CICL). The session sought to orient participants to CICL's pathways to vulnerability and the impacts of a child's socio-economic and psychosocial environment. In addition to this, participants were oriented on mental health perspectives to CICL through a discussion of the common mental health disorders in CICL and socio-emotional needs of children living in adversity.

**(ii) Panel Discussion on "Decisions in online court processes" for Maharashtra Judicial Academy**

This Panel Discussion was held on 10th November with Judicial Officers to assist them with ways of coping and ways of restoring normalcy in the context of online court processes during the pandemic. The specific focus was on how to deal with urgent matters that have been listed for virtual hearing. Among issues that were discussed, was the impact of the pandemic on court processes; cooperation of advocates; the culture of video conferencing and video hearing; provisions of facilities in terms of technical support in court processes; and modification of Standard Operating Procedures (SOPs) to facilitate speedy adjudication. Though the discussion started with Industrial and Labour Court issues, the discussion extended to court processes that deal with other matters for redressal.

**(iii) "Working with Children in Conflict with the Law" for West Bengal Judicial Academy**

A one-day online training program was conducted for 52 juvenile justice magistrates of West Bengal State, to focus on psychosocial and mental health considerations in dispensing juvenile justice. The training began with orienting judicial officers to pathways to children's coming in conflict with law (i.e., risks and vulnerabilities), relevant psychosocial and mental health assessments; it then moved onto covering essential communication skills (and interviewing techniques) whilst working with CICL, namely rapport building, listening, acknowledgement of emotions and non-judgemental attitude. Although the communication skills module is usually delivered to counsellors, upon request from the West Bengal Judicial Academy, it was implemented with judicial officers. Discussions, case studies and videos were used to provide basic skill training, which the officers said they not only enjoyed very much, but also found extremely useful. They acknowledged the importance of appropriate and skilled

communication with CICL, who due to stigma and labelling, and their many vulnerabilities, are largely mistrustful of the adult world—consequently necessitating the use of special child interviewing skills.

**(iv) The Child as a Witness: Developmental & Mental Health Implications for Eliciting Evidence under Protection of Children from Sexual Offences Act (POCSO) 2012 for West Bengal Judicial Academy**

A group of 51 Special Court Judges of West Bengal were provided with an online training program on POCSO-related issues with the objectives of:

- Understanding child sexual abuse dynamics and its implications for (appreciation of) evidence.
- Applying a child development lens to statement recording & evidence gathering.
- Developing methods and skills to record statements/ elicit evidence from children in the context of sexual abuse.

Use of discussions and videos generated a lively discussion of the many challenging POCSO cases that the judges are handling—especially those pertaining to adolescents who may have been groomed. Thus, much discussion was had upon the psychology of grooming i.e. the impact of grooming and manipulation of children and adolescents, and how the court may strengthen its evidence through the use of psychological research and literature on this aspect of child sexual abuse. Upon the request of the judicial officers, following training, a set of articles on grooming and other mental health and child sexual abuse was sent to them (along with suggestions on their use in evidence), for use in their case decisions. NIMHANS/ SAMVAD witnessed an unprecedented interest in the use of scientific literature from non-legal domains i.e. from the domain of psychiatry and mental health, thus indicating that judicial officers are increasingly becoming cognizant of the importance of transdisciplinary knowledge and methods in their work.

**(iv) A brief Overview of Child and Adolescent Mental Health and Protection Issues for Delhi Judicial Academy**

Upon request from the Delhi Judicial Academy, and as part of an orientation program for JJB Members and CWC Members, SAMVAD implemented two (half-day) sessions to provide a brief overview of child & adolescent mental health & protection issues. The initial session covered “Understanding Vulnerability & Risk in Children in Difficult Circumstances”, including pathways to vulnerability—in terms of how children come into conflict with law, and indeed into state care and protection systems; this session introduced participants to various psychosocial and mental health factors that place children at risk, including the emotional, behavioural and protection consequences they have for children. The second session, titled “The Child’s Inner Voice: Identifying Contexts of Emotional & Behavioural Issues” helped participants to understand and analyze the basis of children’s emotional and behaviour problems, and also provided a framework for providing them with rehabilitation and intervention specific to their psychosocial and mental health issues.

**(v) Judicial Engagement on Section 15 of Juvenile Justice Act 2015**

Over the course of this quarter, the Section 15 Deliberation (erstwhile described) has been organised with State Judicial Academies of Maharashtra and Rajasthan. A total of 101 Judicial Personnel (62 officers in Maharashtra and 95 officers in Rajasthan) participated in the

Deliberations organised across the two States. The specific objectives of the deliberation were:

- To understand the perspective of judicial officers on Section 15 i.e. and legal, moral and philosophical underpinnings they base their views on.
- To understand how judicial officers currently conduct preliminary assessments, including methods they use, and how they make decisions based on assessments conducted.
- To learn about the challenges that judicial officers experience in conducting or obtaining preliminary assessments.
- To present a child development and mental health perspective on Section 15 to judicial officers, for their consideration and response.

The 3 motions proposed for the deliberations (to be read with the general principles of Juvenile Justice (Care and Protection) Act, 2015 – Section 3) were:

- o First Motion: The Juvenile Justice (Care and Protection of Children) Act, 2015 through implementation of Section 15 obliterates the following principles of Act with regard to the child in conflict with the law: -
  - i. Principle of Presumption of Innocence
  - ii. Principle of Participation
  - iii. Principle of Best interest of the child
  - iv. Principle of Safety
  - v. Principle of Positive Measures
  - vi. Principle of Natural Justice
- o Second Motion: It is obligatory for the JJ Board to seek a preliminary assessment report of the child from an expert on whether the child is mentally and physically still a child or has the mental and physical maturity of an adult. A fair and meaningful assessment cannot be conducted independently by the JJB or Children's Court.
- o Third Motion: The Juvenile Justice (Care and Protection) Act, 2015 and Indian Penal Code accord the same meaning to mens rea at the stage of making a preliminary assessment.

The Deliberations conducted with Judicial Officers across these two States has provided the SAMVAD Team with contemporary judicial perspectives on important issues pertaining to child rights, mental health and juvenile justice administration. The concerns raised through the course of the Deliberations have shed light on important areas of focus in judicial education and capacity building. The emerging issues and understandings have also fed into the first study on the implementation of Section 15 by juvenile Justice magistrates.

#### **D.4. Policy Initiatives**

The following are an overview of the policy initiatives undertaken during this quarter based on desk reviews and field experiences of the Team:

**a) Investing in Child Services: The Imperative to Prioritise Child Development, Protection, and Mental Health Concerns (Policy Paper Submitted to the Fiscal Policy Institute, Government of Karnataka to provide a policy framework for the upcoming Child Budget 2021-22)**

This Policy Paper was submitted to the Fiscal Policy Institute in December 2020, to outline the need for greater investment by the State in facilities, infrastructure, human resources and health services that would enhance child and adolescent development and mental health. The Paper identified important areas of investment in child and adolescent mental health to assist the concerned Line Departments, Govt. of Karnataka, in designing the Child Budget 2021-22, the rationale and identified areas of investment are applicable to the country at large.

The Policy Paper begins with an overview of the treatment gap in relation to child and adolescent psychiatric morbidity in India. Subsequently, it identifies the specific socio-economic and psychosocial vulnerabilities of children in adversity, followed by an analysis of the unmet developmental and mental health needs in preschool, school and child care institutions. This analysis is used to argue for the necessary investment to be made in developmental and mental health support and services in these spaces. The paper then moves on to an evaluation of mental health services set up in districts across the State pursuant to the implementation of the District Mental Health Program (DMHP). The gaps and level of functionality identified in district-level mental health services is used to make the case for further investment in health services (at the primary, secondary and tertiary level) by way of human resource development and capacity-enhancement in child mental health across the three-tiers of mental health services. Through an analysis of the foregoing, the paper identifies the spaces and services that must be the subject of focus in the context of Child Budgeting.

**b) Study on “Effective implementation of Section 15 of the Juvenile Justice (Care and Protection of Children) Act, 2015: Exploring Perceptions of Judicial Personnel on Juvenile Justice & Children in Conflict with the Law”**

Following from the judicial engagement initiatives through capacity-building programs and in-depth engagements through the Section 15 Deliberations with judicial personnel from various State Judicial Academies, a range of judicial perspectives on conceptual and implementation-related issues have come to the fore, specifically in the context of the mechanism for preliminary assessment under Section 15. While these forms of engagement have provided with SAMVAD team with a qualitative understanding of the nuances of varied judicial perspectives on the law and its implementation, it was felt that there is a need for a comprehensive nationwide study on the factors influencing judicial perspectives on preliminary assessment for transfer to the criminal justice system under Section 15 of the JJ Act.

The SAMVAD Team drafted a concept note and developed a tool to implement this study on exploring the perceptions of judicial personnel on the conceptual framework of Section 15 and its implementation. The Study also seeks to elicit judicial perspectives on the role of mental health evaluations given the cross-disciplinary nature of the statutory framework under Section 15. The tool designed for the Study was a series of 6 case vignettes followed by questions

pertaining to 4 domains of judicial understanding: a) Interpretation of mental capacity and developmental stage; b) Appreciation of pathways and circumstances; c) Perception of severity and consequences; d) Estimation of criminal intent in preliminary assessment. The tool also included questions in regards to decision-making on the basis of the aforementioned case vignettes and a few broad-based questions about Section 15. The Tool was validated by subject-experts in the fields of child-mental health and law.

Subsequent to the design of the concept note and study tool, requisite clearances were sought and received from the NIMHANS Ethics Committee. Invitations have been sent to all 25 High Courts and State Judicial Academies in India to solicit participation of the concerned judicial personnel i.e., Juvenile Justice Board Magistrates, Special Court Judges, Children's Court Judges and District and Sessions Judges in the study. Given the scope of the present study, this would be the largest study of its kind on stakeholder perspectives of judicial personnel in India, and also the first of its kind. The SAMVAD Team is following up with all the State Judicial Academies and Hon'ble High Courts to initiate the study and begin data collection activities. Responses are awaited from State Judicial Academies who are currently in the process of obtaining the requisite approvals and permissions from the Juvenile Justice Committees of the respective High Courts.

#### **D.5 Plans for the Next Quarterly, January to March 2021**

For the next quarterly period, the following policy initiatives and training programs will be undertaken.

##### **a) Development of a Policy Paper on 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.

##### **b) Implementation of the Study on “Effective implementation of Section 15 of the Juvenile Justice (Care and Protection of Children) Act, 2015: Exploring Perceptions of Judicial Personnel on Juvenile Justice & Children in Conflict with the Law”**

Following from the work of the SAMVAD Team this quarter, the Study will continue to be initiated in State Judicial Academies across the country to facilitate country-wide participation of judicial officers. This exercise in data collection will be progressed subject to the time-frames for receipt of the requisite approvals and permissions from the concerned Hon'ble High Courts and State Judicial Academies. As per a 2018 Press Release from the Hon. Ministry of Women and Child Development, there were in place 701 Juvenile Justice Boards across the country.

The objective of the Study is to elicit the participation of these 701 Juvenile Justice Board Magistrates across the country through coordination with the High Courts and State Judicial Academies. The participation of Children's Court/Special Court Judges is subject to the number of Judicial Personnel reported by the concerned State Judicial Academies.

Following completion of the data collection exercise via dissemination of the questionnaire, data analysis will be undertaken through generation of frequency tables and cross-tabulations relevant to the analysis of the data. The data analysis, where relevant, will be complemented by the experiences and observations of the SAMVAD Team developed through the course of the Section 15 Deliberations and Training/Capacity Building Programs conducted for JJB Magistrates. The data analysis will also benefit from the direct field experiences of the Team through their work with CICL.

**c) Deliberation on Child Witness Testimony under the POCSO Act, 2012: Judicial Understandings of Competency and Credibility**

Following the successful initiation of Section 15 Deliberations with State Judicial Academies, the SAMVAD Team has sought to engage with judicial personnel and other child protection functionaries on other areas of child and law. To this end, a Deliberation is being developed for Special Court Judges on the issues surrounding developmentally appropriate methods and approaches in eliciting child witness testimony under the POCSO Act. The focus of this Deliberation will be on issues surrounding competency of child witnesses and credibility of witness testimony elicited during POCSO trials. It is felt that there is currently a lacuna in the systemic approaches to witness testimony in Child Sexual Abuse (CSA) cases. While the statutory framework under the Indian Evidence Act, 1872 does not prescribe age-limits for eliciting witness testimony, there persist certain evidentiary concerns in regards to prosecuting CSA cases on account of the vulnerabilities and susceptibilities of child witnesses. The POCSO Deliberation will seek to understand judicial perspectives on the issues of competency and credibility that lie at the intersection of child development, child mental health, the dynamics of child sexual abuse, and approaches to justice.

**d) Facilitating comprehensive Judicial Engagement on Section 15 of Juvenile Justice Act 2015**

The SAMVAD Team has conducted Section 15 Deliberations in the States of Maharashtra and Rajasthan. The team is currently coordinating with the High Courts and the concerned State Judicial Academies of Kerala and Meghalaya for the initiation of the Section 15 Deliberations in these States. Over the course of the next quarter, the team will be reaching out to more State Judicial Academies across the country to solicit their participation. Further engagement with State Judicial Academies on the Section 15 Deliberation will provide the SAMVAD Team with a wider range of judicial perspectives on the conceptual and practical issues surrounding Section 15. The diverse range of judicial perspectives will inform the nature of capacity-building and training programs initiated by the SAMVAD Team.

**e) Training Curriculum on Child Sexual Abuse in the context of the POCSO statutory framework**

The SAMVAD Team is currently developing Training Curriculums for different cadres of child protection functionaries. As mentioned above, a curriculum was designed for a 3-Day training program on Implementing the JJ Act in the context of CICL. In addition to the judicial engagement on the POCSO Act currently being designed for Special Court Judges, a Training

Curriculum is being developed for a 3-Day Training Program on Child Sexual Abuse in the context of the POCSO statutory framework. This Curriculum will be designed with a view to orient Special Court Judges to the current discourses and debates in relation to procedural justice; victim-oriented framework approaches to the administration and dispensation of justice; key provisions of the POCSO Act, 2012; relevant jurisprudence of the Hon'ble High Courts and Supreme Court; competency and credibility in the context of child witness testimony.

#### **f) Training and Capacity Building activities requested by SJA and SLSA**

In addition to the training programs/judicial engagements described above, the SAMVAD team will also conduct specific training and capacity-building programs requested by the State Judicial Academies and the State Legal Services Authorities across the country. These programs will be tailored to the specific needs and capacities of the participant judicial officers/child protection functionaries/para-legal volunteers of the respective states.

## **4. Operational Challenges**

As SAMVAD continues to expand its online training activities across the country, there have been some operational challenges pertaining to use of technology and language; efforts have been made to overcome each of these in different ways, so as to ensure effective implementation of the project and its initiatives.

#### **(i) Technological Challenges of Online Training**

Given the travel restrictions due to the pandemic, SAMVAD has not been able to travel to different States to undertake in-person trainings. Hence, the team has been conducting online sessions of all the functionaries. While the in-person participatory and creative methods have innovatively adapted to online learning, training participants in some parts of the country (such as in Uttarakhand and Mizoram but also from time to time in other states), particularly those in remote districts tend to experience problems with regard to device accessibility and internet connectivity.

#### **(ii) COVID & Health Issues**

There were several participants (such as in CHILDLINE) who given their higher exposure, became COVID positive during the course of the training, and were unable to complete the program.

#### **(iii) Difficulties in Participation in Online Training**

Despite extensive co-ordination with States and communication through official letters for engagement of participants in the training programs, in case of child protection functionaries, it has been observed that many participants are unable to fully engage in the sessions, as they are not being relieved by higher authorities from their routine work, during the training time.

Also, during the middle phase of the DMHP training sessions on child mental health, a certain waning of interest in participants' commitment to attending the sessions, was observed. Some participants shared that the length of the online sessions (3 hours with a break) was too long, causing some fatigue. The curriculum was edited and modified, as were the length of the session, where possible.



Another challenge of the online training has been that in many sessions, especially of mental health workers, several participants are reluctant to switch on their cameras, or unmute and interact with the facilitators as part of the discussions, despite repeated reminders to do so. This has been quite challenging for the facilitators, as there is no way to gauge participants' learning/ understanding without their engagement and inputs. Hence, the SAMVAD team halted the training and dedicated one session to enable the DMHP functionaries to reflect on their critical role and responsibility in child mental health, in India, where there is a paucity of child mental health professionals, especially at district levels; following this (motivational) session, and the eliciting of a commitment from mental health workers, to actively engage in the training, the sessions were resumed--a noticeable improvement was then observed in the interaction levels among the participants.

#### **(iv) Language Issues & Implications for Online Training**

One of the challenges in online training pertains to language. Most mental health participants can understand English, but only few are able to speak it, thus limiting interaction on online sessions. Realizing this early on in states such as Mizoram, a new training model has been initiated, where the few select participants who can understand and speak English fluently are trained, and have now begun facilitating the sessions online for the other participants. The facilitator from the Mental Health team of SAMVAD is present during the entire training session to ensure smooth progress and also to clarify any doubts if the participant-trainer has any. The results of this new teaching methodology have been positive, with greater participant engagement and learning observed.

On a more general level, and after some early attempts, SAMVAD has decided that online training is possible primarily in Kannada, Hindi and English, at present as these are the main languages spoken by the SAMVAD team (Marathi and Malyalam are also occasionally used in training for one-off sessions). Given that engaging the attention of participants online for extended periods of time is difficult, it has been decided that the use of online translators would not be feasible. Thus, any group requiring training in a regional language not spoken by a SAMVAD team member would be conducted in-person, with the use of a translator—as is now planned for the Telangana Bharosa Centres.

#### **(v) Learning of New Pedagogies**

SAMVAD's training uses multiple methods and particularly emphasises skill building and translation of conceptual learning into field-based practice. The concepts and methodology used for the training is not only new to the participants, but more so because they are unaccustomed to some of the less conventional (and less didactic) pedagogies used by SAMVAD. Given these challenges, and the online method of delivery, the learning process, it is observed, is sometimes slow and difficult. However, the SAMVAD team perseveres, constantly adapting and creating new methodologies to ensure that the content is eventually understood by the participants—and it has been very rewarding for participants who have completed the training programs. Furthermore, field practice assignments and case conferences were used to help participants consolidate their learnings.

#### **(vi) Systemic Challenges & Staff Burn-Out**

Many child care service providers, especially teachers and those in frontline child protection services complained of stress and burnout. This has, on many occasions been a road block

to the training program, with participants frequently wanting to discuss systemic challenges and other stresses that hinder their work with children in the field. For instance, participants have reported that when they have attempted to implement their learnings from the SAMVAD training in child care institutions, such as applying systematic methods of counselling to assessment and identifying children's problems in detail, those in authority (such as superintendents/JJB/CWC members) often question these methods and insist that the relevant forms be filled out quickly, within 15 minutes, and submitted for administrative purposes. It is thus challenging for the participants in some places, to translate their session learnings into practice.

In recognition of the importance of addressing stress and burn-out, SAMVAD has decided, moving forward, to conduct a session (towards the end of the training program) on management of stress and burn-out. Meanwhile, SAMVAD has also documented some of the systemic challenges, and shared them, along with recommendations with relevant state authorities in the hope that participants/ staff may be assisted (and supported to implement their learning from the training sessions in the field).

#### **(vii) Use of the Learning Management System (LMS)**

It was observed that the training participants did not login and access the Learning Management System regularly. The team tried to assist participants by hand-holding them throughout the process, but given their lack of technical knowledge and experience with LMS, many participants are not being able to follow processes to register and access resource materials through LMS. Some participants have successfully registered and logged in on the system but the number is comparatively less compared to the participants attending the program. Many still ask that the materials be emailed to them (and this is difficult, given the size of the files).

In order to address the LMS-related difficulties, it was decided that for the newer batches, the registrations would be done live during the online session, with the SAMVAD IT team's assistance; and that the facilitators would give a live step by step demonstration to the participants. To prepare the participants for these live registrations, the demo video would be shared over WhatsApp in advance and they will also be required to download Moodle app beforehand. Any queries/ challenges faced would be addressed live in the session. This would be helpful in ensuring that all participants are able to access the course content right from the beginning.