



Psychosocial Care for Children in Need of Care & Protection

Integrating Child Protection, Mental Health & Law

**A Training & Capacity Building Program for
Members of Child Welfare Committees**



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 of the Ministry of Women & Child Development,
Government of India**

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

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ABOUT SAMVAD

SAMVAD (Support, Advocacy & Mental health interventions for children in Vulnerable circumstances And Distress) is a National Initiative & Integrated Resource for Child Protection, Mental Health and Psychosocial Care established by the Ministry of Women & Child Development, Government of India. This initiative is located in the Dept. of Child & Adolescent Psychiatry, NIMHANS. With the aim of enhancing child and adolescent psychosocial well-being, through promotion of transdisciplinary and integrated approaches to mental health and protection, SAMVAD was established to extend its support and activities to all the states in the country. It comprises of a multidisciplinary team of child care professionals, with expertise in training and capacity building, program and policy research pertaining to child mental health, protection, education and law.

SAMVAD has been mandated by the Mission Vatsalya Guidelines of the Ministry of Women & Child Development, Government of India ***“to develop and increase counselling capacity as well as resource persons at the State/UT level, including Psychiatric counselling and mental health wellbeing of children in coordination with Support, Advocacy & Mental Health Interventions for Children in Vulnerable Circumstances And Distress (SAMVAD)- National Institute of Mental Health and Neurosciences (NIMHANS).”***



SAMVAD's Objectives

Develop

Standardized child-centric modules and resources for the capacity building of primary, secondary and tertiary level psychosocial and mental health care service providers.

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.

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.

Undertake

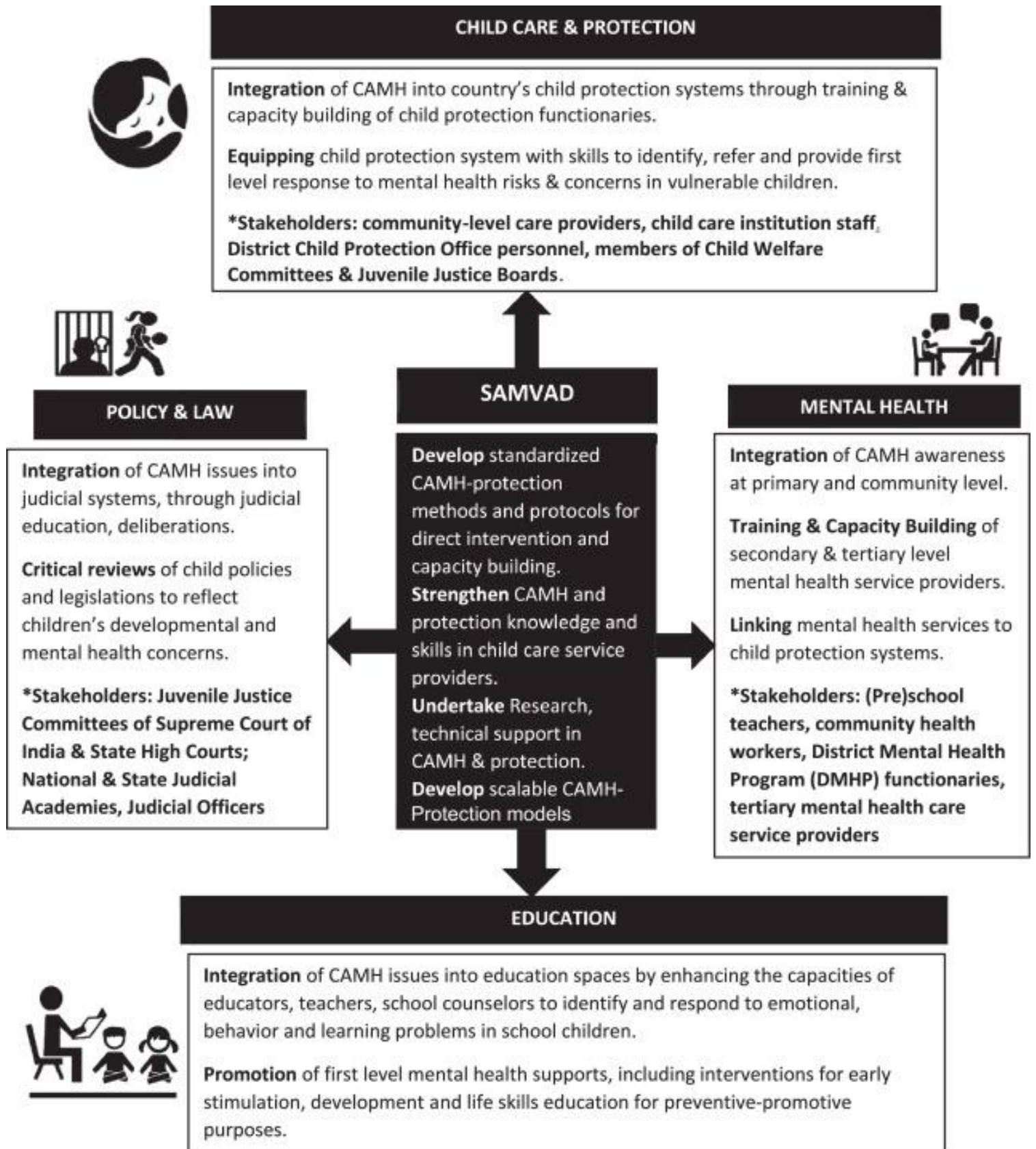
Studies, audits, research and advocacy on issues pertaining to child and adolescent protection and related issues of mental health and psychosocial care.

Utilize

The experiences of capacity building, technical programmatic support and research in informing child and adolescent laws and policies in the country.



THE SAMVAD MODEL



1. Background and Rationale

Children in general, due to age and developmental status are vulnerable to mental health problems. However, children in difficult circumstances, namely street and working children, orphan and abandoned children and in child care institutions, children with disability, children infected/affected by HIV, have higher levels of protection risks, developmental lags and mental health morbidities due to their experiences of socio-economic difficulties, illness, violence and abuse, destitution/abandonment and developmental disabilities. Poverty, harmful social and cultural norms; including on gender and sexuality, marginalization of disadvantaged groups and civil strife add to the level of vulnerability.

Most children requiring the assistance of the State are from difficult circumstances such as from poor socio-economic backgrounds, dysfunctional families, and contexts of child labor and (sex) trafficking; for various reasons, such as death of caregivers, abandonment, neglect and abuse, many children are unable to live with their families or be cared for by families; in such situations, children also run away from their homes and caregivers. Additionally, children from these difficult circumstances are also at risk of various child and adolescent mental health disorders such as anxiety, depression, post-traumatic stress disorder and behavioral issues, to name a few. It is imperative, therefore, for child care service providers, such as the Child Welfare Committee, to develop a strong understanding of psychosocial contexts and socio-emotional impacts on children, during the course of their assistance to them. Indeed, operationalizing the concept of child rights upon which the Juvenile Justice (Care and Protection) Act, 2015 rests, is only possible when we understand situations and realities from the child's (psychosocial and emotional) perspective.

As children in distress typically hail from myriad circumstances, marked by psychosocial vulnerability, socio-economic distress, and deep-seated inequity, access to child welfare and support services is a difficult prospect. It is this reality that has prompted significant legislative efforts, through enactment of beneficial legislation (like the Juvenile Justice and POCSO Acts), and governmental efforts, in terms of the erstwhile Integrated Child Protection Scheme (ICPS) (now consolidated under the Mission Vatsalya framework), to remedy the gaps and challenges in vulnerable child groups accessing key welfare and protection services.

In light of the above, while the mandate of the Juvenile Justice Act, is broadly to cater to the care, protection and rehabilitation of vulnerable children in contact with the law, the separate statutory services for children in need of care and protection (CNCP) and children in conflict with the law (CICL), namely the Juvenile Justice Boards (JJBs) and the Child Welfare Committees (CWCs), creates separate imperatives for these two statutory support services. Specifically, for children in need of care and protection, from backgrounds emblematic of adverse childhood experiences, the CWCs serve as the nodal adjudicatory bodies, responsible for end-to-end service delivery, including taking cognizance of difficult circumstances relating to CNCP, ensuring first production before the Committee, monitoring preparation of assessment and rehabilitation plans (i.e., Social Investigation Reports and Individual Care Plans), inspection-related responsibilities with reference to child care institutions, and critically, as was highlighted in the Allahabad High Court's decision in *Junaid v. State of U.P & Anr.* (2022), provision of substantive legal aid and notice of bail proceedings to children (especially in POCSO cases).

Nonetheless, while the CWC is tasked with key roles and responsibilities relating to vulnerable children, there are many challenges in the implementation of the JJ Act's mandate, with respect to the proactive engagement of CWCs in every area of the children's rehabilitation and restoration. Owing to these challenges, children often find their way back into the child protection system, due to underlying and unaddressed vulnerabilities, that are consequently deepened by further exposure to psychosocial and protection risk factors. As one state-wide rapid assessment of child psychosocial and protection services reported, the extant challenges in the functioning of the CWCs include a lack of knowledge and skills on basic child mental health and protection interventions; capacity-related issues owing to appointment-related challenges; excessive focus on repatriation and limited skills in rehabilitative interventions (including child-oriented communication skills, first-level psychosocial responses, systematic assessment and decision-making); and gaps in inter-agency coordination for effective delivery of services and interventions.

Therefore, with a view to facilitate a comprehensive understanding and implementation of the mandate of the Juvenile Justice law and child protection and mental health services for vulnerable children, this training program has been developed to facilitate an incorporation of the requisite skills and knowledge that are integral to the effective functioning of child welfare committees as nodal functionaries. It is significant to note, herein, that the training sessions have been developed with a transdisciplinary focus to assist CWCs in effectuating holistic interventions for children in distress.

2. Training Objectives

Objective 1: Develop an understanding of key child-related laws, roles and responsibilities of Child Welfare Committee Members in accordance with these legal provisions, specifically, to assist:

- Provide frameworks to contend with challenges faced in cases ‘at the margins of the law’.
- Assist CWC personnel in applying these legal provisions to varied case contexts, and feed into decisions on placement and rehabilitation.

Objective 2: Obtain an in-depth and nuanced understanding of the psychosocial contexts of Children in Need of Care and Protection (CNCP) by:

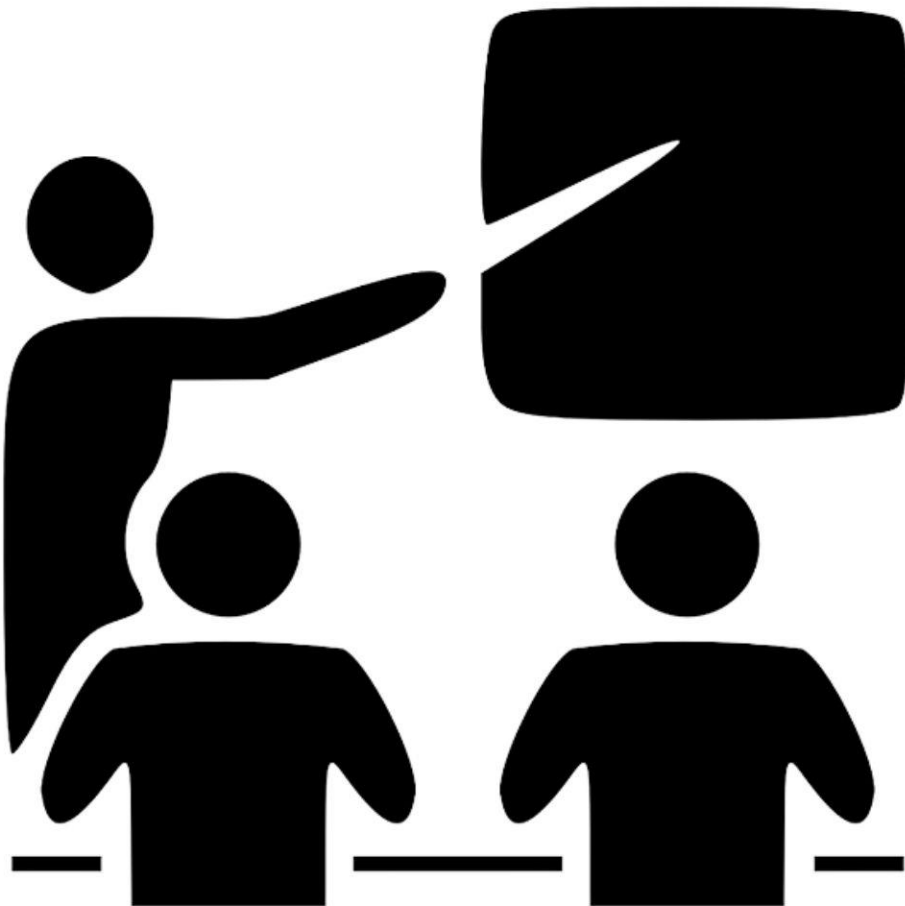
- Exploring the child’s psychosocial & risk contexts and experiences.
- Linking knowledge of child development to issues of child protection.
- Developing essential skills required to communicate with children.
- Identifying common child mental health issues so as to enable decisions regarding individual rehabilitation and care plans and referrals to specialized services.

Objective 3: Learn the use of standardized scientific tools and proformas in order to help assess the needs and vulnerabilities of CNCP, in order to make decisions and pass orders with regard to:

- Psychosocial and mental health assistance to children
- Social Investigation Reports
- Individual Care Plans

3. For Whom

The training is proposed for the Members of the CWCs of the State. Each comprising five Members, including the Chairperson, the Committee has the final authority to dispose of cases for the care, protection, treatment, development and rehabilitation of children, as well as to provide for their basic needs and protection of human rights.



4. Training Curriculum & Content

The Ministry of Women & Child Development (MoWCD) established SAMVAD with a view to ensuring creation and delivery of standardised, technically accurate content on issues of child protection, mental health and psychosocial care. The training curriculum and content (detailed below) has been developed based on the NIMHANS Dept. of Child and Adolescent Psychiatry's long experience with child protection and mental health in multiple settings and contexts, including training of child protection and other related functionaries, over the years. Therefore, programmatic content cannot be abbreviated or altered in ways that dilute the program or the purpose of the training program. SAMVAD reserves the right to adapt the program as necessary, solely in accordance with the aim of ensuring teaching-learning quality—in order that vulnerable children ultimately benefit from the service providers.

4.1. Childhood, Power & Rights

Objectives:

- To sensitize participants on children and childhood experiences.
- To create awareness on issues of power hierarchies relating to children.
- To introduce them to child rights-oriented thinking.

Content:

This session sets the tone for child work, introducing themes and ideologies that underpin the content of the program. It comprises various activities using methods of visualization and narratives to enable participants to reconnect with their childhood and reflect on their childhood experiences. It also introduces to participants the ways in which power hierarchies play out in adult-child relationships, and enables further reflection on what child rights translates into practice in spaces such as the CWC and child care institutions (CCIs), where they are placed.

4.2. Applying the Child Development Lens

Objectives:

- To understand the five key domains of child development.
- To understand how child development is impacted by deprivation i.e. with children in difficult circumstances.
- To ensure that placement and rehabilitation plans are developed on the tenets of child development.

Content:

Child development refers to the abilities and skills that an average child has at a particular age. There are, broadly-speaking, five domains of child development: physical, social, speech & language, emotional and cognitive development. This session is designed to enable participants to understand normative development in children i.e. the abilities and skills that an average child would develop in accordance with age. The application of a child development lens to protection and mental health is important for CWC Members to be able to identify any disabilities, gaps or deficits in development that a child may have and make decisions regarding placements and/or interventions; and is also especially relevant to CWC Members working with young children and adoption (institutions for 0 to 6 year olds) but also with adolescents in sexuality and abuse contexts.

4.3. Representations of Childhood

Objectives:

- To understand and reflect on difficult childhoods.
- To use a vulnerability lens for understanding children's difficult and risky behaviors.

Content:

Films that highlight child protection issues, and the many vulnerabilities and risks that children in difficult circumstances face, will be screened. Participants engage in extensive discussion on the experiences of child characters in the films, who represent different vulnerabilities of children in difficult circumstances and their pathways to coming into conflict with law or institutionalized as CNCP.

4.4. Identifying Emotional & Behavioural Problems and Contexts: Child's Experience & Inner Voice

Objectives:

- Identify the basis of the child's problem, by analysing the psychosocial context of the child
- Understand how children perceive and internalise their experiences i.e. what is the child's voice, and how this manifests in emotional and behavioural issues.

Content:

A child's behavioural problem seldom occurs in isolation; there is always a reason why it occurs, a place or a context that it grew out of. This session forms the cornerstone to understanding the basis of children's emotional and behavioural concerns. In other words, why does a child behave the way he/she does? Participants are introduced to a simple, yet effective framework for child behaviour analysis, comprising of key elements such as the child's context or universe, the experiences arising out of a given context, his/her internalizations of these experiences i.e.,

inner voices, and resultant emotions, and how they lead to the behaviours that we see. Case study analysis methods will be used to provide participants with conceptual frameworks to understand children's behaviours in various care and protection-related contexts such as child sexual abuse, trafficking, loss/abandonment, runaway behaviours, child labour, and family conflicts.

4.5. Essential Communication & Counselling Techniques

Objectives:

- To develop communication skills for interviewing children and understanding their circumstances.
- To conduct inquiry and elicit information from children, so as to make requisite rehabilitation, mental health assistance and placement decisions.

Content:

A series of sessions focusing on essential communication skills for use in interviewing children and adolescents. Role plays and case studies will be used to practice the skills listed below:

- **Skill 1: Getting to Know the Child**

Rapport building is the first stage towards building a relationship with children. It involves introducing yourself; preliminary establishment of context and getting to know the child.

- **Skill 2: Listening**

This involves paying attention to a client's verbal and non-verbal messages and listening in a way that conveys respect, interest and empathy.

- **Skill 3: Recognizing and Acknowledgement of Emotions**
This involves recognizing the child's emotions and acknowledging his/her emotions is a powerful technique that reassures children and convinces them that the child worker is empathetic
- **Skill 4: Acceptance & Non- Judgmental Attitude**
This involves acceptance of the child as a person, irrespective of the problem; and to be non-judgmental means to take a position by discussing (difficult or controversial) issues with children based on their realities, opinions and understandings, (i.e. by setting aside the child worker's personal opinions & prejudices) and enabling the child to make decisions about their lives.
- **Skill 5: Questioning and Paraphrasing**
This entails learning about different methods of questioning and inquiry i.e. how and when to use open and close-ended questions in child interviewing, to allow for children's narratives to emerge freely.

4.6. Common Mental Health Issues of Children & Adolescents

Objectives:

- To identify common internalizing and externalizing disorders and developmental disabilities in CNCP
- To understand the impact these mental health problems may have in placing such children at (continued) risk of coming in need of care and protection or conflict with the law.

Content:

A series of sessions covers internalizing and externalizing disorders such as anxiety, depression, substance abuse and conduct disorder, as well as developmental disabilities such as attention deficit hyperactivity disorder (ADHD) and intellectual disabilities, helping participants identify symptoms and approxim-

-ately refer such children for mental health assistance. An understanding of these mental health disorders is important from a treatment and rehabilitation perspective.

This session also highlights the issues and developmental concerns of children and infants in CCIs and its implication on adoption.

4.7. Understanding and Implementing Essential Child-Related Laws in Children's Best Interest

Objectives:

- To learn and understand key provisions of child-related laws.
- To incorporate them in their roles and responsibilities as Child Welfare Committee members.
- To apply legal provisions to cases of CNCP within the overarching mandate of the JJ Act.

Content:

These sessions cover the following child-related laws with a focus on their key provisions, and apply the legal provisions to cases of vulnerable children who come in contact with the law, so as to also develop an awareness of how to approach 'hard cases' i.e., grey areas in the law:

1. Role & Responsibilities as per the Juvenile Justice (Care and Protection) Act, 2015 with special reference to children in need of care and protection: understanding institutional & non-institutional care
2. Protection of Children from Sexual Offences Act (POCSO), 2012 & Medical Termination of Pregnancy Act (MTPA), 1971 and the 2021 Amendment

3. Prohibition of Child Marriage Act (PCMA), 2006

4. Understanding Laws related to Child Trafficking & The Child and Adolescent Labour (Prohibition & Regulation) Act, 1986

5. Right of Children to Free and Compulsory Education Act, 2009 & Rights of Persons with Disabilities Act, 2016

Keeping in mind the CWC's overarching mandate in the context of conducting systematic assessments, and decision-making (related to placement and rehabilitation), this session will contextualize decision-making (on interventions) across various socio-legal contexts including adoption, foster care and kinship care; child sexual abuse, child marriage, child labour and trafficking, and reasonable accommodations and inclusive education for children with disabilities.

4.8. Use of Psychosocial and Mental Health Assessment Proformas

Objectives:

- To introduce participants to systematic proformas and methods of evaluating and documenting children's protection and mental health concerns.

Content:

In the absence of systematic assessment protocols, there is the danger of CWC Members missing critical information, which in turn results in poorly planned/ designed interventions and care plans. This session covers the use of a proforma to assist them to systematically evaluate and understand children's protection/mental health issues and concerns.

A proforma integrating family, protection and mental health concerns, developed by the NIMHANS Community Child and Adolescent Mental Health Service Project, is introduced to the participants for their use. This assessment proforma, along with other forms and proformas in the JJ Act, form the basis of individual care plans for children.

4.9. Preparing Social Investigation Reports

Objective:

- To enable participants to prepare accurate social investigation reports that feed into individual care plans.

Content:

One of the challenges for CWCs and JJBs is posed by the inaccuracy and paucity of information contained in the Social Investigation Reports (SIRs) they are provided with for making decisions with regard to children's placement and rehabilitation. This session therefore covers the Dos and Don'ts in home studies and SIR processes, providing ways to accurately assess neighborhood and family risks and circumstances, in ways that elicit information from relevant and reliable sources.

4.10. Making Recommendations for Placements

Objectives:

- To equip participants with the skills to assess children's contextual realities and living circumstances, and the protection risks associated with them.
- To enable them to evaluate placement options, in consultation with children, and make requisite recommendations to CWC

Content:

This session equips participants to evaluate the various placement options available to individual children, namely family and institutional care settings, for the purposes of repatriation or institutional placement, as the case maybe. The session helps participants to examine prevalent misconceptions about both family and institutional placements, emphasizing that placement decisions must be made in accordance with the protection risks, mental health issues and rehabilitation needs as experienced by each individual child i.e. they must avoid generalizations about any given setting and be predicated on children's contexts and lived realities

4.11. Developing Individual Care Plans

Objectives:

- To enable participants to develop Individual Care Plan (ICP) for children that ensures their holistic development and addresses their needs for protection, mental health and rehabilitation.

Content:

This session focuses on enabling participants to collate and utilize the information obtained from psychosocial assessments, SIR and placement-related evaluations, to develop comprehensive ICP for children. This plan, to address the holistic development of children, with a view to addressing their needs for rehabilitation, placement and repatriation, mental health assistance, is in keeping with the care and protection mandate of the Juvenile Justice (Care and Protection) Act, 2015.

5. Training Schedules

5.1 Online Training Schedule

Phase	Theme & Content	Session	
Phase 1: Children, Childhood & Contexts	Introduction to Training Program Childhood, Power and Rights	1	
	Applying the Child Development Lens	Introduction to the key domains of child development <ul style="list-style-type: none"> • Physical development • Speech & Language development • Cognitive Development 	2
		Introduction to the key domains of child development (cont...) <ul style="list-style-type: none"> • Social Development • Emotional Development 	3
	Representations of Childhood (Film Screening & Discussion)		4
	Identifying Emotional and Behavioural Problems and Contexts: Child's Experience and Inner Voice		5
	Essential Communication Skills	Skill 1: Rapport Building Skill 2: Listening	6
		Skill 3: Recognizing and Acknowledgement of Emotions	7

Phase	Theme & Content		Session
		Skill 4: Acceptance & Non-judgemental Attitude	8
		Skill 5: Questioning & Paraphrasing	9
	Common Mental Health Issues of Children & Adolescents	Signs and symptoms of mental health issues (A): <ul style="list-style-type: none"> • Developmental disabilities • Infant & young children in institutions (adoption) 	10
		Signs and symptoms of mental health issues (B): <ul style="list-style-type: none"> • Anxiety • Depression • Post-Traumatic Stress Disorder 	11
Signs and symptoms of mental health issues (C): <ul style="list-style-type: none"> • Attention Deficit Hyperactivity Disorder • Conduct Issues • Substance Abuse 	12		
Phase 2: Child & Law	Child & Law	Roles and responsibilities as per the Juvenile Justice (Care and Protection) Act, 2015 with special reference to children in need of care and protection: Understanding institutional & non-institutional care	13

Phase	Theme & Content		Session
	Child & Law (contd.)	<ul style="list-style-type: none"> • Protection of Children from Sexual Offences Act (POCSO), 2012. • Prohibition of Child Marriage Act (PCMA), 2006 • Medical Termination of Pregnancy Act (MTPA), 1971 and the 2021 Amendment. • Understanding Laws related to Child Trafficking • The Child and Adolescent Labour (Prohibition & Regulation) Act, 1986. • Right of Children to Free and Compulsory Education Act, 2009 & Rights of Persons with Disabilities Act, 2016. 	14
			15
			16
			17
Phase 3: Assessments and Rehabilitation	Developing Individual Care Plans for Children	Psychosocial and Mental health Assessment of Children	18
		Preparation of Social Investigation Report	19
		Making Placement Decisions	20
		Development of Individual Care Plans	21

Individual sessions are of 3 hour duration

5.2 In-person Training Schedule

Phase	Day	Time	Theme & Content	
Phase 1: Children, Childhood and Contexts	Day 1	9am - 12pm	Introduction & Orientation	<ul style="list-style-type: none"> • Orientation and Introduction • Rules and Guidelines for the program • Methodology of training • Introduction to the Learning Management System. • Reconnecting with childhood • Issues of power hierarchies relating to children • Introduction to child rights'-oriented thinking
		12pm - 1pm	Lunch	
		1pm – 4:30pm	Applying Child Development lens	Introduction to the key domains of child development <ul style="list-style-type: none"> • Physical development • Speech & Language development • Cognitive Development • Social Development • Emotional Development
		4:30pm -6:45pm (including tea break)	Representations of Childhood	Film Screening
	Day 2	9am - 10am		Film Screening Discussion
		10am – 1pm	Identifying Emotional and Behavioural Problems and Contexts- Child's Experience and Inner Voice	<ul style="list-style-type: none"> • Understanding the child's psychosocial and risk contexts and experiences. • Linking children's contexts, experiences, and emotions/behaviours

Phase	Day	Time	Theme & Content		
Phase 1: Children, Childhood and Contexts	Day 2 (contd.)	1pm - 2pm	Lunch		
		2pm – 5:30pm (including tea break)	Essential Communication Skills	<ul style="list-style-type: none"> • Skill 1: Rapport Building • Skill 2: Listening • Skill 3: Recognizing and acknowledgement of emotions 	
	Day 3	9am - 4pm			<ul style="list-style-type: none"> • Skill 4: Acceptance & non-judgemental attitude • Skill 5: Questioning & paraphrasing
		(Including lunch from 1 pm to 2pm)			
	Day 4	9am - 1pm	Common Mental Health Issues of Children & Adolescents	Signs and symptoms of mental health issues (A):	
				<ul style="list-style-type: none"> • Developmental Disabilities • Infant & young child care in institutions (adoption) • Anxiety • Depression 	
		1pm - 2pm	Lunch		

Phase	Day	Time	Theme & Content	
Phase 2: Child & Law	Day 5	9am - 5pm (Including lunch & tea break)	Child & Law	Role & responsibilities as per the Juvenile Justice (Care and Protection) Act, 2015 with special reference to children in need of care and protection: Understanding institutional & non-institutional care
	Day 6	9am - 5pm (Including lunch & tea break)		<ul style="list-style-type: none"> • Protection of Children from Sexual Offences Act (POCSO), 2012 • Prohibition of Child Marriage Act (PCMA), 2006 • Medical Termination of Pregnancy Act (MTPA), 1971 and the 2021 Amendment • Understanding laws related to Child Trafficking & The Child and Adolescent Labour (Prohibition & Regulation) Act, 1986 • Right of Children to Free and Compulsory Education Act, 2009 • Rights of Persons with Disabilities Act, 2016
Phase 3: Assessments and Rehabilitation	Day 7	9am - 5pm (Including lunch & tea break)	Developing Individual Care Plans for Children	<ul style="list-style-type: none"> • Psychosocial and Mental health Assessment of Children • Preparation of Social Investigation Report • Making Placement Decisions • Development of Individual Care Plans

6. Training Methodology

The training program uses a range of creative and participatory methods ranging from role plays and discussions to video and film screenings, case study analysis; and experiential methodologies of visualization, simulation and story-telling. Didactic methods, such as lectures are used minimally, mostly for the purpose of introducing theoretical and conceptual frameworks that are essential for learning and field practice. The major emphasis of the training methodology is on skill-building – to enable participants to translate theory and concept into practice, in their work and interactions with children.



7. Mode of Program Delivery

Both online and in-person training programs are delivered by SAMVAD, through a multi-disciplinary team comprising members drawn from expertise in psychology, psychiatry, social work, and law.

7.1 Online Training Programs

SAMVAD has established a virtual knowledge network (VKN) set-up, and this platform will be used for the implementation of the proposed training program. To maintain the quality of the training, and the interactive nature that assists learning, the maximum number of participants in a given group is capped at 50. Each learning session is typically of a duration of 3 hours on pre-scheduled or pre-agreed days and time. These synchronous learning sessions may range from being twice or thrice a week (in some instances, five times a week), based on the agreement with the agency requesting the program and/or the feasibility and convenience of SAMVAD and the participants.

Rules of Participation & Engagement for Online Programs

- Attendance of a session is counted as being online/ on the session for a minimum of 160 out of 180 minutes. There is always a next time, so don't worry!
- If more than 2 sessions are missed, a participant would be unable to continue on the program...
- Participants dropping out due to non-attendance of sessions are welcome to join another training program but all sessions would need to be attended again.
- Participants missing a session are expected to catch up by watching the recorded session

7.2 In-Person Training Programs

SAMVAD is happy to conduct in-person programs in NIMHANS and/or in other State venues. These are typically all-day programs that run from 9 am to 6:30 pm, and may be implemented over the course of 3, 5 or 10 days, depending on the nature of the program. For instance, a longer training program that may have over 20 sessions, may be broken into blocks or smaller components that might run for 3 days at a time i.e. one block is followed by the next one that may be held a month or two later. Again, in order to ensure training quality, the number of participants is capped at 50 and the minimum number of participants required is 35.

Rules of Participation & Engagement for In-person Program

- 100% attendance is mandatory i.e. no session may be missed.
- In case of any health emergency, the participant is required to inform the NIMHANS-SAMVAD team so that due assistance may be provided.
- Should any participant have an emergency of any other type, and have to discontinue the training program, they may duly inform the SAMVAD-NIMHANS team, who will also communicate the same to the institution concerned.
- Requests to facilitators to be exempted from sessions will not be entertained—as the program does not allow for skipping of any sessions/ activities (except in case of a health emergency).
- Participants are expected to be punctual and at the training venue by 8:50 am, in order to allow for the training to start on time, at 9 am. A grace of 15 minutes will be permitted about 3 times during the entire duration of the program.
- Participants arriving later than 15 minutes will NOT be permitted to join the session—in which case they will be unable to meet the mandatory 100% attendance requirements

8. Certification

Upon completion of the training program, participants will be provided with a 'Certificate of Participation'. Successful participation and completion of the program entails adherence to all the rules and ways of work as detailed above.

9. Financial Resources & Support

As a National Initiative & Integrated Resource for Child Protection, Mental Health and Psychosocial Care, SAMVAD is mandated by the Ministry of Women and Child Development, Government of India, to provide standardized training programs and related technical support on child mental health and protection issues. Therefore, there are no financial liabilities, by way of resource/training fees or honorariums either for online or in-person training programs, on any government departments/agencies, or national programs. For the same reason, no agency/system who we assist requires an MoU with NIMHANS or with our Initiative. We are mandated to assist all agencies requiring/approaching us for support.

While online training programs therefore entail no cost, in-person training initiatives would entail organizational and logistical expenditure. In such instances, expenditure relating to the training participants' travel, accommodation and related logistics, including venue etc. would require to be borne by the agency requesting or organizing the training program. The SAMVAD team's travel and accommodation may require be wholly or partially supported by the organizing agency, particularly if the training is for non-governmental agencies; in certain circumstances, where feasible and justifiable, SAMVAD could undertake the training by also bearing the expenditure for its team (this is subject to discussion on a case-by-case basis).



CONTACT INFORMATION



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