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Dr. D. Suresh



SOCIETY FOR PUBLIC WELFARE AND INITIATIVES

H. No. 5-11-559, Srinagar Colony, Naimnagar,
Hanmakonda, Warangal Urban - 506009, Telangana (India)

Website: www.spwijournal.com

Email: spwird@gmail.com / spwi.ngo.2014@gmail.com

devaathsuresh@gmail.com

Ph: 9959026635, 8790826635



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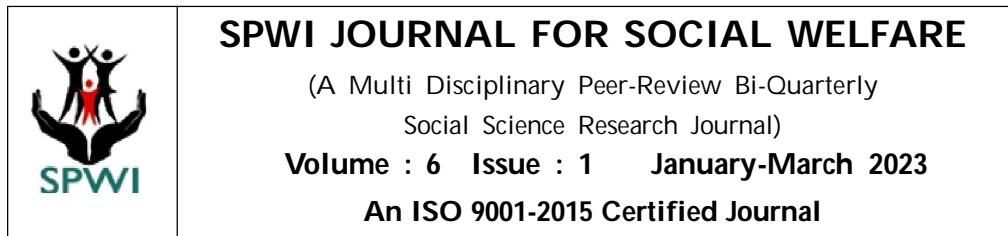
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**SPWI JOURNAL FOR SOCIAL WELFARE**

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JUVENILE JUSTICE SYSTEM IN INDIA – A STUDY WITH REFERENCE TO FUNCTIONING OF CHILD CARE INSTITUTIONS IN TELANGANA STATE



Kancha Prasad

Research Scholar, Department of Law,
University College of Law, Kakatiya University,
Warangal, TS

Abstract: *The present study was undertaken to exhaustively bring the functioning of Child Care Institutions (CCIs) in Telangana with special reference to Children in Conflict with the Law. For this, the study contained four objectives, which were purely based on doctrinal and empirical research. The study is based on the Juvenile Justice (Care and Protection of Children) Act, of 2015. The plethora of books, statutes, law journals, periodicals, newspapers, and magazines were studied thoroughly and vigorously as well as various websites of government and NGOs were explored.*

Keywords: *Juvenile Justice Act, Child Care Institutions, Children in Conflict with the Law, Functioning of Child Care Institutions, Telangana*

Introduction

Every child has a right to pleasant, cheerful, and euphoric childhood, the right to grow in a healthy and safe environment, the right to be liberated from the complexities and convolutions of life and so on, but there are some unfortunate and destined kids who are denied of these basic rights and they develop unwanted traits or become juvenile delinquents. However, Juvenile crimes are a tyrannical reality of society now a day, and to reduce them, legal provisions need to be efficaciously implemented, alongside that awareness and focus of the government as well as a society need to be created. The perspective and outlook of the principal implementing machinery in the system, just like the magistrates and the police should be more reformative instead of

punishing the juveniles in conflict with the law. To tackle these juvenile offenders, various laws and regulations are enacted across the world. In India, The *Juvenile Justice (Care and Protection of Children) Act, 2015* lays down the fundamental law for not only the adjudication and disposition of matters but also the care and protection of children in conflict of law. Our Juvenile Justice System is confined in its application to '*children in conflict of law (CCL)*' & '*Children in need of care and protection*' (CNCP). The term '*juvenile justice*' consists of all facets of a composite system including the rehabilitation of children and adolescents who commit offences. Moreover, the collateral strands of the law relating to the pre-trial process, police investigation, deviation from prosecution, remand, bail, the use of fit institutions, the juvenile court, stages of trial, sentences, and post-sentence supervision, CCIs etc. all stand under the umbrella of juvenile justice.

The notion of juvenile delinquency is not of a very recent origin in India. Juvenile delinquency is related to the abnormal attitude or criminal behaviour of a child. In the present time, the instances of juvenile delinquency are growing day by day with the increasing populace and changing way of life in India. Quickly developing states like Delhi, Maharashtra, Bihar, UP and so on are confronted with a difficult test of controlling juvenile crimes. This growth in juvenile crime is fundamentally observed in the kids in the age of 16-18 years i.e., the individuals who are in their youthfulness period of life. The juveniles in this age class are exceptionally engaged in offences like robbery, theft, riot, mob lynching, rape and hurt cases. There are various elements accountable for juvenile delinquency such as personal, psychological, biological, and physiological as well as peer pressure, bodily disability, love for adventure, dissatisfaction and frustration with school and family. Consequently, it is very much required to assist kids with their intellectual and moral development. Family is the ideal model for a child to grow up in a healthy environment and learn morality and values therefrom. At the point when kids are not furnished with appropriate socialization to outline right towards wrong, as a result of that they engage in adverse situations. Accordingly, they become the victims of their awful climate. The absence of legitimate socialization from the family and loved ones prompt the development of behavioural and antisocial issues in kids. Neediness, ignorance of parents, lack of care and supervision, disappointment in school, indifference from society and so on can be seen as some of the main attributes affecting juvenile crimes.

In India '*The Juvenile Justice (Care & Protection of Children) Act, of 1986*' was the 1st enactment under independent India to deal with the problem of juvenile delinquency but was put back by '*The Juvenile Justice (Care & Protection) Act, of 2000*' since the old enactment was not able to give the broad extent of '*Delinquent Juveniles*' & '*Neglected Juveniles*'. '*The Juvenile Justice Act, 2000*' covers mainly 2 broad classes such as '*child in conflict with law*' and '*child in need of care and protection*' that the '*The Juvenile Justice (Care & Protection of Children) Act, 1986*' ignored. However, after the Nirbhaya case, the prompt need for amendments in the act was felt, consequently '*The Juvenile Justice (Care & Protection of Children) Act, 2015*' came into force. Before the new act of 2015, there were no provisions

for bifurcating and defining heinous crimes. The thunderbolt of the Delhi Gang rape (Nirbhaya's Case) oscillated the parliament and the lawmakers of India with the arraignments of incapability of deal with the given situation, the Legislators observe the necessity to enact the '*Juvenile Justice (Care and Protection of Children) Act, 2015*', focusing the arrangements concerning '*heinous crimes*' 16 years is taken as age constraint in the matters of the crimes of serious nature like murder, rape, kidnapping etc. The new Act is a very important step taken in w.r.t the '*juvenile justice system in India.*' The new Act has categorized the offences into three parts according to the nature of the crime, i.e., petty, serious, and heinous offences. In the first instance, the child '*under the age of 18 years*' is to be produced before JJB. If a child/juvenile has crossed 18 years of age at the time of production but at the time of committing the crime was a juvenile, he shall be taken as a juvenile as per law. JJB is provided with the power to adjudicate the cases concerning both offences of such nature. If a CCL is found guilty of committing a crime of heinous nature, the JJB deals with the case by conducting a preliminary investigation, in that the experts whom the board appoint shall assess the psychological conditions of the CCL involved & consequences of that crime. Moreover, the child in such matters is taken as a grownup criminal. 2015 Act categorized the crimes into 3 parts as follows:

1. Petty offences- where maximum imprisonment under IPC is up to 3 years.
2. Serious offences- where maximum imprisonment under IPC is 3-7 years.
3. Heinous offence- where maximum imprisonment under IPC is 7 years.

The Juvenile Justice Act provides for the setting up of institutional care structures for children. The institutions are separate for CNCP and CCL. In this section we try to understand, what are these institutions, what are their functioning processes and how they undertake the rehabilitation of children. As per international standards as well as the JJ Act, placing a child in institutional care should be a measure of last resort. Children are to be placed in institutions only when it is found that the restoration of the child to parents or family may not be in the best interest of the child. For example, institutional care becomes essential for taking care of children who do not have parents, whose parents are not suitable to raise them, or whose parents are unable or incapacitated to take care of their children¹. In such circumstances, the CWC can order the child to be placed in a home run or recognized by the government (Registered u/s 50 of the JJ Act). The JJ Act provides a range of options for residential care for different categories of children. The residential categories can be divided into two categories broadly:

Homes - Observation Homes, Special Homes, Places of Safety for CCL, and Children's Homes for CNCP

Open Shelter, Fit Facility, Fit persons who are to provide community-based residential care to children. These are different from adoption, foster care, and sponsorship, which fall in the category of non-institutional care.

CCI means Children's Home, Open Shelter, Observation Home, Special Home, Place of Safety, Specialized Adoption Agency (SAA) and a Fit Facility recognized under this Act for providing care and protection to children, who need such services." (Section 2 (21), JJ Act 2015).

Amongst all the categories of CCIs available, CH is the highest in number i.e., 6368. It is also seen that this category also includes the largest number of unregistered CCIs. CHs are followed by 'AOHs numbering 1869. The data also draws attention to the fact that in comparison to these two categories above, all the other kinds of CCIs namely Shelter Homes (373), SAAs (336), OHs (278%), PoS (8) and SHs (52) are fewer in number (below 5%) and/or inadequate as per mandate.

Five types of CCI exist in India – Children's Homes/ Fit Facilities, Shelter Homes/ Open Shelters, Specialized Adoption Agencies, Observation Homes, and Special Homes/ Places of Safety in Telangana State. 494 CCIs are functioning for accommodating children; either girls or boys or both. Among the 494 CCIs, 32 CCIs are managed by the Government, and 462 CCIs are managed by NGOs.

The study uses qualitative and quantitative data from internal and external sources for the analysis. Primary data is collected from Government CCIs for CCL in Warangal, Nizamabad, and Hyderabad District of Telangana State viz.:

1. Children Home for Boys, Hyderabad
2. Children Home for Boys, Warangal
3. Special Home for Boys, Hyderabad
4. Special-cum-Children Home & Observation Home for Girls, Hyderabad
5. Observation Home for Boys, Hyderabad
6. Observation Home for Boys, Nizamabad
7. Observation Home for Boys, Warangal

The study had taken the last five-year period data for the analysis, this is because clear documents are available only for the recent periods' (2015-2020) samples selected out of this population, it is 120 from Boy's Home and 20 from Girls Home.

Statement of the Research Problem

Politically, socially, and economically child is a crucial asset to any nation. As the early years of a child's life is a period of multi-dimensional development including motor, sensory, perceptive, intellectual, linguistic and personality development, all facilities should be made available for proper growth and development of the child. Otherwise, the child will lag in many of the vital spheres of the development process.

All children have specific needs and rights. Children have unique vulnerabilities due to specific needs which demand care at different stages of growth till they reach

adulthood. Every child who meets JJS is a child in difficult circumstances who have fallen out of the protective net at some point and who have lost the opportunity of a safe and secure childhood. In this context, it is relevant to find out whether the institutions provide the basic resources that are required for the healthy growth and development of a child. Moreover, it is a fact that each child is peculiar and is coming from a unique socio-economic and psychological atmosphere, the institutions should provide facilities that are suitable to overcome psychological trauma. Every child is having the right to education, proper nutrition, clothing, shelter, and medical care, which is ensured by JJ Act. This includes ensuring quality standard care and services, while CCIs ensure the smooth restoration of children back to a community/family-based care system. It is a need to study the quality of institutional care based on the JJ Act. Children often face certain unfavourable conditions like conflict with the law. All these children conflict with the law who are admitted to CCIs need to get quality services according to JJ Act, and the present study tries to find out the quality and quantity of the facilities of these institutions and the uses of the facilities. Based on the above research problems the study mainly focuses on the following research questions.

Research Questions

1. What are the facilities providing for CCLs in the CCIs?

Objectives of the Study

1. To study the Juvenile Justice System and Juvenile Justice Act 2015.
2. To study the institutional framework and administration of CCIs.
3. To study various functioning and Challenges and Issues in front of CCIs.
4. To suggest remedial measures to make CCIs more effective within the existing framework and recommend the required changes.

Research Methodology

The study uses qualitative and quantitative data from internal and external sources for the analysis. Primary data is collected from Government CCIs for CCL in Warangal, Nizamabad, and Hyderabad District of Telangana State viz.:

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10. Special Home for Boys, Hyderabad
11. Special-cum-Children Home & Observation Home for Girls, Hyderabad
12. Observation Home for Boys, Hyderabad
13. Observation Home for Boys, Nizamabad
14. Observation Home for Boys, Warangal

Universe

The study had taken the last five-year period data for the analysis, this is because clear documents are available only for the recent periods' (2015-2020) samples selected out of this population, it is 120 from Boy's Home and 20 from Girls Home.

Data Collection

Moreover, primary data is collected from important office bearers related to the JJ system. It includes the District Child Protection Officer (DCPO); Superintendent of Boys and Home, Girl Home, CWC Chair Person, Coordinator Child Line, Officer for Institutional and Non-Institutional Care and Caretakers of Boys Home and Girls Home, Commissioner, Department of Women Development & Child Welfare.

Data was collected from the CCLs by using a Questionnaire. It includes questions related to rehabilitation facilities in these institutions. The study uses Internal data sources for the analysis. Along with this secondary data is collected from the website of MWCD, Department of Women Development & Child Welfare, Hyderabad, and offices of CWC in Telangana.

Data Analysis

Data collection in the form of one-word responses, and multiple choice and presented in the form of frequency tables. Data analysis was done through Microsoft Excel which helped the researcher to calculate the percentage and to use different chart forms.

Limitations of the Study

The study identifies the following limitations. Each child is with great potential and is unique in several aspects. A more detailed and in-depth study of these CCLs is needed before concluding. Often sensitive issues related to children and the approaches of officials restricted the scope of the study. Non-availability of several confidential data is another reason for unknowing the actual situation of the inmates of these institutions. Children are hesitating to reveal many facts in the presence of officers. Non-co-operation of the officers and respondents often limited the area of the study and so it is not so easy to complete the study within the time limit. The study focuses on the administration of CCLs and the Challenges and Issues in front of CCLs.

Findings

Profile of the CCLs

Age: The study shows that most CCLs (96%) come between the age group of 12 to 18 years.

Religion: The study shows that in CCLs, the majority (50%) of CCLs belonged to the Hindu religion.

Educational Status: The study reveals that in CCLs, the majority (72%) of CCLs had a school education.

Family Background: The study shows that in CCLs, the majority (83%) of CCLs are living with their parents.

Relationship with Family: The study shows that in CCLs, the majority (79%) of CCLs are having a non-cordial relationship with their families.

Go Back Home After Releasing: The study reveals that in CCLs, the majority (52%) of CCLs are not showing interest to go back to their home after realizing. The reason for hesitating to go back home are Poverty (54%) and home was not a comfortable place (29%).

Mental Health: The study shows that most of the CCLs (73%) like fear, anxiety, anger, and aggressive and suicidal tendency.

The hobby of CCLs: The study found that 47% of CCLs preferred to watch movies and 20% to play games.

Bad Habits: The study observed that 45% of CCLs were free from bad habits, 20% were addicted to tobacco, 20% were interested in gambling and 15% to begging.

Position in the Groups/League: The study found that 63% of CCLs show leadership qualities at different levels and 37% are found ordinary members of groups.

Attitude in the Group: The study observed that 54% of CCLs have interested in violating norms and rules, whereas 46% are respecting social norms and follow rules.

Ambitions: The study reveals that 61% of CCLs are found ambitious and 39% do not have any ambition.

Physical Conditions: The study found that 70% CCLs were found physically fit.

Vocational Training: The study observed that the CCLs are receiving different types of Vocational Training in CCLs.

Crime Committed under IPC: The study found that 38% of CCLs committed Theft, 15% committed hurt, and 12% committed burglary.

Crime Committed under SLL: The study observed that 69% of CCLs committed sexual offences and 21% committed narcotic drugs.

Profile of the CCLs

The proportion of Sufficient Capacity: Adequate space per person in an institution impacts a whole set of other well-being parameters in an institutional setting. It ensures individual space and enables monitoring of that space thereby rendering it safe. The

study found 42% of CCIs have more inmates compared to their capacity and 58% have fewer inmates compared to their capacity. Less occupancy at the very least ensures better care whereas, in overcrowded CCIs, the quality of care and protection given to children, facilities for education, vocation, food, clothing, health, etc. tend to get compromised as the demand becomes more than the supply, especially when the fund supply is delayed or reduced. Therefore, while this does indicate a need for rationalization of CCIs in most States/UTs, it also gives hope as it shows that infrastructure exists to accommodate more children in dire need of shelter.

Caregivers and Supervised Activities: The entire premise of rehabilitation, whether in an institution or elsewhere hinges on the quality of care available for the child availing of that service. This becomes especially critical when the mechanism being used for rehabilitation is a CCI and a child in distress or difficult circumstances is placed there for care, protection, and long-term rehabilitation. Caregivers play an important role in the effective implementation of the aims and objectives of the JJ Act and in ensuring child care and protection. There must be sufficient caregivers in CCIs especially those providing residential care, to enable each child to receive individual attention and wherever possible and appropriate, to give the child an opportunity to bond with a specific caregiver and thereby feel rooted and secure. Monitoring the activities of children helps to minimize and, in many cases, eliminate the risk of injury to a child and in providing a swift response to any untoward situation that may put children in danger. It is important therefore that all CCIs are adequately staffed and that the number of children occupying a CCIs is not more than the capacity of the home to ensure the best care for children.

CCIs are for the reception of children in need of care and protection (whether CNCP or CCL, with both needing care and protection) during the pendency of any inquiry and subsequently for their care, treatment, education, training, development, and rehabilitation. Various categories of children are admitted to the CCIs. These children come from difficult circumstances i.e., orphans, children of single parents, children of prisoners, missing children, separated, street children suffering from prolonged illness, children found begging, child labourers, children of leprosy affected beggars, HIV/AIDS affected & infected children, children of parents who were unable to take care of them, handicapped, mentally challenged etc. CCIs must deal with the physical, emotional, and psychological impact that these circumstances may have resulted in. In this situation, a sensitive caregiver can act as a catalyst for healing and reintegration for the child.

The study observed that 71% of CCI staff are supervising the activities. It is also found that 43% of CCIs have adequate caregivers. Further 56% of CCIs where children who are in emotional distress (due to fear, trauma, or illness) are being actively supervised.

Play and Recreation: The JJ Rules, 2016 state that provisions must be made for indoor and outdoor activities/games for children in CCIs. Homes must have sufficient

play items of good quality that are safe to use. Toys must not only be easily available and accessible; they need to be categorized as per the age groups of children. This will ensure that the items are safe for use and beneficial to their physical, emotional, cognitive, and mental development. The study found that 57% of CCIs have the Accessibility to Games Material.

Child Protection Policy: In India, the Law and Policy framework for understanding Child Protection stems from the Constitution and Specific Child Policies, policies and schemes that have been framed from time to time. The overarching international legal guideline for such policy emerges from the United Nations Convention on Child Rights (UNCRC) which is based on the four core principles of non-discrimination; the best interests of the child; the right to life, survival, protection, and development; and respect for the views of the child. One of the good practices/mechanisms available to protect children and their rights in any organization/institution is a Child Protection Policy (CPP).

The existence of a CPP demonstrates an organization/institution's commitment to children and ensures public confidence in their child-safe procedures and practices. It provides non-negotiable guidelines and sets out common values, principles, and beliefs and describes the steps that will be taken to by the institution to meet its commitment to protecting children. CPP is a tool that protects both children and staff by clearly defining the actions required to keep children safe within the organization. As the vulnerability of children to abuse, in and out of family-based care including institutions, is a reality, the need for a CPP in all situations where children are found becomes imperative to ensure that abuse is prevented. As numerous cases of child abuse are being reported within the institutional setup; not only does having a CPP become essential, but staff also needs to be trained to ensure the functionality of the Policy. All the CCIs in the country are mandated to have CPP signed and adhered to by staff and visitors.

The study observed that 57% of CCIs not following the Child Protection Policy.

Providing Training on Child Protection Policy: In India, the Law and Policy framework for understanding Child Protection stems from the Constitution and Specific Child Policies, policies and schemes that have been framed from time to time. The overarching international legal guideline for such policy emerges from the UNCRC which is based on the four core principles of non-discrimination; the best interests of the child; the right to life, survival, protection, and development; and respect for the views of the child. One of the good practices/mechanisms available to protect children and their rights in any organization/institution is a CPP.

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The study found 71% of CCIs are not conducting training programs regarding child protection policies.

Child Committees/Home Management Committees: Critical mechanisms for ensuring a child-friendly environment and including child participation in CCIs include Home Management Committee (HMC) and Children's Committee (CC). These are statutory bodies as per JJ Act and the Rules framed thereunder and essential feedback and monitoring tools if used effectively. As per JJ Rule No. 39, every CCI must have a Management Committee for the administration of the institution and monitoring the progress of every child, which should meet at least once every month to consider and review inter alia care in the institution, medical facilities, and treatment; food, water, sanitation, and hygiene conditions; mental health interventions; and the individual problems of children and institutional adjustment etc. The Management Committee is also mandated to set up a complaint and redressal mechanism in every institution including a Children's Suggestion Box.

Rule No. 40 of the JJ Rules, 2016 states that the Person-in-charge of every institution should facilitate the setting up of Children's Committees for different age groups, that is 6-10 years, 11-15 years, and 16-18 years, constituted solely by and of children. The CC should be encouraged to participate in inter alia activities related to improving the condition of the institution; reviewing the standards of care being followed; preparing daily routine and diet scales; reporting abuse and exploitation by peers and caregivers; managing the institution through the Management Committee.

The study observed that 86% of CCIs constituted Management Committees and 71% are Child Committees.

Grievance Redressal Mechanisms: Under Rule 39 of JJ Rules, 2016 the Management Committee must set up a complaint and redressal mechanism and a Children's Suggestion Box should be placed at an easily accessible location to children, away from the office set up, and closer to the residence or rooms or dormitories of the children in every institution.

All CCIs must have an effective Grievance Redressal Mechanism which is an integral part of a CPP. This study tried to understand the availability within CCIs of

various Grievance Redressal mechanisms such as Suggestion boxes, CCTV cameras, functional Children Committees, Regular staff children interface etc. awareness regarding CHILDLINE 1098 and Training and orientation of caregivers and children regarding all the above.

It may be mentioned here that besides the JJ Act and Rules framed thereunder, Court directives from time to time and guidelines issued by the Commission for the Protection of Child Rights have emphasized the creation of a system for accountability and redressal of grievances. To ensure accountability, the mainstream mechanisms should also include the redressal of grievances related to punishment, discrimination, and harassment of children. Every CCI should have a complaint box at a prominent place in the building to receive complaints against corporal punishment. The redressal also keeps a check on the behaviour and performance of the staff in CCIs regularly.

The study found that 71% of CCIs are having equal percentages i.e., suggestion box, CHILDLINE 1098, CCTV, proper functioning of Children Committee and 86% have regular staff children interface.

Enforcing Discipline: The JJ Act, 2015 and the Rules framed thereunder, define and detail various offences against children including cruelty and corporal punishment and provide punishment for the same. Not only does the Act define these offences, but all other crimes listed also have higher punishments if the offence is committed by someone, having custody of or who oversees, the child. E.g., Section 82 of the JJ Act, 2015 clearly states that any person in charge of or employed in a CCI, who subjects a child to corporal punishment to discipline the child, shall be liable to fine or imprisonment. Apart from the law, in terms of a general understanding of standards of care, it is widely accepted that a no-tolerance policy for corporal punishment in CCIs is non-negotiable. Rule 69 N of JJ Rules, 2016, Manner of dealing with unacceptable behaviour:

1. The action taken shall be commensurate with the nature and degree of violation and the age of the child and may be any of the (i) formal warning; (ii) assignment of housekeeping tasks; (iii) imposition writing i.e., writing sometimes that he shall not repeat the behaviour; and (iv) forfeiture of privileges viz. permission to watch television, permission to go for outdoor activity, sports and recreation and other preferred activity;
2. No child shall be subject to corporal punishment or any mental harassment including humiliating behaviour affecting the dignity of the child.

It is disturbing and a serious cause of concern to see that the above-mentioned negative and legally forbidden practices are in use, to some extent, in almost all the CCIs. It is also seen that various disciplining methods that involve physical harm and force are being enforced either separately or in combinations with different forms. It becomes an even larger sensitization concern when the design of this study is recalled whereby there was a mandatory inclusion of a district administration representative

in all teams that visited CCIs. It is an indication of how well-established these practices are that the staff was not uncomfortable sharing information regarding the use of such means of disciplining children.

The study observed that an average of 22.22% CCLs were victimized by various negative discipline enforcement methods. These facts were also further confirmed by children. It was seen that in many instances, lack of sensitization and awareness as well as the skills needed to deal with trauma-affected children and prevent burnout of self, were missing. However, if such illegal methods of enforcing discipline are being used against children in CCIs, as the data reveals, the constitution of functional HMCs and CCs, skill training and regular monitoring, becomes even more imperative.

Nutrition/Diet/Meal Plans: A nutritional meal or proper diet is essential for a child's growth. The JJ Act has prescribed norms and diet chart provisions for children placed in CCIs. The Act provides that the meals should be planned in consultation with the children's committee. The CCIs' staff should also be aware of the nutritional requirements of children. Further many CCIs have provisions for special meals during festivals, birthday celebrations, and special diets as per health requirements, and accept cooked food from sponsors.

Rule 33 of the JJ Rules, 2016 deals with the Nutrition and Diet Scale to be followed by every CCI. It states that the children shall be provided four meals in a day including breakfast; the menu shall be prepared with the help of a nutritional expert or doctor to ensure a balanced diet and variety in taste as per the minimum nutritional standard and diet scale; every CCI shall strictly adhere to the minimum nutritional standard and diet scale that has been prescribed in detail.

Rules 33 (2) of JJ Rules, 2016 states that Children may be provided special meals on holidays, festivals, sports and cultural days and celebrations of national festivals.

As per the JJ Rules of 2016, an individual care plan i.e., a comprehensive development plan for a child based on history, age and gender must be prepared in consultation with the child. Among other factors, the plan also must address the health and nutrition needs, including any special needs of the child. The caregivers must be aware of the nutritional needs of the children in the CCIs based on their age, and in cases of children with special needs, a balanced diet should be provided to ensure their good health and development. It is also important to periodically assess the health of all children and see if they have any dietary deficiencies or health issues.

The Rules also lay down that infants and sick children should be provided with a special diet according to the advice of the doctor or at the discretion of the Person-in-charge. Extra diet for nourishment like milk, eggs, sugar, and fruits shall be provided to the children on the advice of the institutional doctor, to gain weight or for other health reasons. For the purpose therefore of calculation of the daily ration, unwell children shall be excluded from the day's strength.

The JJ Rules, 2016 have laid down very clear guidelines on how much and what kind of food needs to be given to children in the CCIs. The special needs of children, including those who are sick, have also been considered. Therefore, CCIs/Homes must adhere to the guidelines set out to ensure the best health and well-being of the children.

The study found that an average of 91.42% of CCIs are following Nutrition/Diet/Meal plans.

Clothing, Bedding, Personal Hygiene and Other: Age-based segregation for stay, as well as the provision of separate beds, is important for the privacy and security of the children while living in CCIs. Based as they are on the best interest of children, CCIs must adhere to the set guidelines and standards contained in the JJ Act and Model rules and periodic reviews must be conducted to ensure that every child is given a bed and the other essentials to ensure his/her comfort as well as safety.

Rule 29 of the JJ Rules, 2016 states that there must be separate Observation Homes for girls and boys; separate Special Homes for girls above the age of 10 years and boys in the age groups of 11 to 15 and 16 to 18 years. Where Children's Homes are concerned, while children below 6 years of age of both genders may be kept in the same CCI, separate bathing and sleeping facilities are to be maintained. Boys and girls in the age group of 7-11 years and 12- 18 years must be placed in separate CCIs altogether. The Rules also detail that children up to the age of six must be provided separate facilities and space. and separate living, bathing etc. Rule No. 29(6) of the JJ Rules, 2016 makes suggestions for the building or accommodation in each institution with an occupancy of 50 children.

Under Rule 30 of the JJ Rules, 2016 concerning bedding, each child must be provided with multiple things including cotton dhurries, sheets, mattresses, pillows, blankets etc. The period after which each of these is to be replaced is also prescribed. While a check was done regarding the provision of mandated bedding material, checking on the periodicity of replacement the same was not part of this exercise.

The study observed that 57% of CCIs have enough individual beds and 71% of CCIs are segregated to children according to the age group stay and activities. Separation of arrangements based on age is essential to avoid any inappropriate behaviour or incident. Age-wise segregation also helps staff and caregivers to focus on the specific needs of one age group making special difficulties easier to identify. Lack of adequate space, infrastructure etc. might be some of the reasons for the absence of segregation in some CCIs.

Cleanliness and Sanitation

Cleanliness and sanitation are important aspects of standards of care. Children staying in CCIs must be also provided with the right environment and guidance about cleanliness and sanitation. Many children who have been homeless or parentless, or

are not used to routine or maintenance of personal as well as environmental standards of hygiene, need to be inculcated into a new manner of living. The foremost requirement for this lifestyle training is to ensure the availability of such facilities at the CCIs. The JJ Rules of 2016, under Rule 31 specifically deals with sanitation and hygiene and details facilities that a CCI is supposed to have. Maintenance of hygiene, cleanliness, and sanitation always in the CCIs is mandatory. Sufficient cleaning staff must be employed and support of older children may be taken in this regard.

The study found that an average of 86% of CCIs are maintaining cleanliness and sanitation. The study also observed that an average of 85% of CCIs have safe, sufficient, water facilities in their premises.

In line with maintaining general standards for cleanliness and hygiene, the JJ Act also lays stress on both supply and storage of clean water for bathing, drinking, and maintaining the CCI. Every CCIs must have sufficient water for the personal use of children as well as for the cleanliness and maintenance of the premises. It is an encouraging fact that the majority of CCIs have reported such facilities; however, the data does not reveal alternatives for insufficient water supply or whether provision for water storage exists.

Health Care and Medical Facilities: The JJ Act mandates regular supervision of the health of each child admitted into CCIs. This exercise assessed the performance of certain core tasks in this regard including inter alia, health checks on admission, follow-up checks and the creation of a health card etc. The JJ Act mandates regular supervision of the health of each child admitted into CCIs. This exercise assessed the performance of certain core tasks in this regard including inter alia, health checks on admission, follow-up checks and the creation of a health card etc. The study found an average of 54% of CCIs have proper health care and medical facilities.

Educational Facilities: Educational assessment and its provision are important components of the Individual Care Plan (ICP). The ICP is meant to assess the overall status of the child and develop an age-appropriate and need-based plan based on discussion with the child. The purpose is to ensure that the uniqueness of each child is responded to by a caring personal plan. This would include special assessments therefore of children with special needs. Vocational training, life skill education, playful learning and tie-up for skill training are all integral parts of the rehabilitation scheme under the JJ Act. Children are to be provided with facilities and provisions that enable them to imbibe these skills before they leave the CCI.

The study observed that an average of 50% of CCIs have educational facilities. Further, the study found that an average of 25% of CCIs follow proper teaching and learning methods.

This would imply that school-based education is stressed more than the other forms such as vocational training, skill-based learning, and life skills as effective and

useful methods of teaching. These are vital to help children from institutions towards their all-around development and help them to live productive lives outside the institution. It will also help them to be on par with regular children who are not institutionalized. Reasons for such methods not being given importance must be investigated, which could be a lack of resources and information or just a mindset issue.

The question that needs to be raised is if the implementation of these is so limited in percentage what is being done instead? How are children being placed in CCIs being rehabilitated and equipped for life?

Physical Infrastructure: The primary objective of every CCIs is the welfare, safety, and best interest of the child and this can be ascertained if the basic infrastructure, facilities, and services are in place. Another important parameter is keeping the environment child friendly and making it a home away from home and not like a prison or lock up. The JJ Rules, 2016 have laid down parameters on all aspects of effectively running a CCIs.

Every childcare institution must be equipped with the right kind of child-friendly and safe environment and physical infrastructure to ensure the welfare, comfort, and best interest of its children. This section of the chapter deals with the various aspects of accommodation, for example, availability of the number of rooms, whether the CCIs are adequately equipped, whether space assigned to it is good/adequate/inadequate, etc. The following facilities have been assessed to generate quantitative data on the quality of CCIs - classroom (education), dormitory, counselling room, recreation room, sick room, library, visitors room, vocational training workshop, dining hall, store room, record room, office room, staff residence, bathroom, toilets/latrines, and a room dedicated for the sitting of CWC/JJB. The issues of infrastructure, security and sanitation have also been dealt with

The study observed that an average of 77.55% of CCIs have basic services facilities.

The study shows that all the required infrastructural facilities do not exist in all the CCIs. Likewise, it can be observed that some of the CCIs also lack other facilities such as sick rooms, dining halls, visitor rooms, bathrooms, etc. It has been revealed that the lack of dedicated space for different infrastructural facilities in CCIs is quite glaring. This is reflected by the difference between the total number of CCIs and the number of CCIs having a dedicated space for the respective facility.

Adequately Equipped Basic Facilities: As per the suggested norms for buildings or accommodation under Rules 29 (6) of JJ Rules, 2016, each institution with 50 children must have 2 dormitories, each having 1000 sq. ft of space for 25 children. Though the majority of the CCIs have dormitory facilities with space as recommended under the JJ Rules, 2016, a considerable percentage of CCIs still fail to adhere to this recommended space criteria. The dormitory must be large room/rooms to accommodate children, their bedding and belongings and hence must not be cramped. There should be sufficient

space for easy movement of children. The issue of overcrowding of children in the CCIs, especially in the dormitories, must be investigated by the committees to prevent any violation of children's rights concerning accommodation. Responses were collected regarding the adequately equipped/unequipped status of the facilities in the CCIs.

The study found an average of 58.57% of CCI are adequately equipped with basic facilities. The study also observed that an average of 52% of CCIs are having good/adequate light and ventilation for basic facilities. Further, the study found that an average of 51% of CCIs are having adequate space.

Educational Facilities: The JJ Act and Rules stress highly the importance of vocational training to be imparted to children in the CCIs/UTs for securing a more productive independent future for them. However, the reality as seen from the figure above shows otherwise. This needs to be addressed immediately and children must get the training guaranteed as per the JJ principles. The study found that an average of 43% of CCIs have sufficient rooms and 50% of CCIs have adequate equipment.

Administrative Facilities: Administrative facilities in the CCIs include a store room, record room, room for an office and sitting room for the CWC/JJB. The study observed that an average of 46% of CCIs have proper administrative facilities.

Staff Residence Facilities: The provision of residential facilities for staff is important to ensure that children of the CCIs find care and necessary help whenever required. The study found that an average of 33.57% of CCIs have residential facilities for staff.

Infrastructural Security: Proper infrastructure ensuring security is crucial for the safety and protection of children in the CCIs. The JJ Rules 2016 recommend that all institutions must have barbed wire fencing to ensure miscreants and anti-social elements stay out of the premises thereby ensuring the safety and security of the children and staff within the CCI which is of absolute importance. In CCIs that do not have fencing, must adopt other security measures to keep the institutions free from anti-social elements, and intruders. There must be a high boundary wall that will prevent people from jumping in as well as the children from jumping out. The structure must be strong and in good condition which should be able to withstand extreme weather and intrusion. The study observed that an average of 67% of CCIs have proper infrastructural security facilities.

Display of Essential Details: Displaying important information at CCIs is mandatory; it facilitates easy access to the facilities of the CCIs and helps quick access to information related to the CCIs. The study found that an average of 43% of CCIs have essential details on signboards.

Maintenance of Privacy: Privacy is an important issue that cannot be overlooked. The CCIs that house children have staff and employees who are adults. There must be

clear guidelines to ensure that children are respected as individuals and given privacy, especially in areas where they would be most vulnerable, i.e., the bathrooms and toilets, by maintaining high windows and proper doors with latches. Ideally, the bathroom and toilet areas for the staff and children must be in separate areas of the campus to provide the utmost privacy and comfort to the children.

The study found that 86% of CCIs are maintaining privacy in toilets and bathing areas. It is indicated that a positive trend can be seen, as the majority of the CCIs maintain privacy and segregation in this regard. However, in those CCIs that do not have these facilities, a review must be done to understand the shortcomings; and help/suggestions must be taken from those CCIs that have such a system in place.

Hygiene and Sanitation: Maintaining hygiene and sanitation in CCIs is very much important to ensure that children residing in the institutions stay healthy, fit, and fine. To ensure this, there must be the availability of safe drinking water for children and enough water for other daily uses and a proper drainage system. The CCIs must have running tap water that is accessible and available to children for bathing, maintaining personal hygiene, washing clothes, utensils, etc.

The study observed that an average of 90% of CCIs have safe drinking water and proper drainage system. The study reflects the percentage of CCIs that have availability and accessibility of running tap water for daily use. The majority of the CCIs have running water but CCIs that do not have this facility must ensure that water storing arrangements are in place. In such places, water must be arranged through tankers and water tanks must be installed for storing water.

Record Maintenance: Further the JJ Rules, 2015 state that the Children's Suggestion Book must be maintained by the Children's Committee and the custodian is the Person-in charge. The Meals Register/Nutrition Diet File is to be maintained by the House Parent and the custodian should be the Shift charge. The Meeting Book must be maintained by Child Welfare Officer/Case Worker and its custodian is the Person-in charge. The maintenance of the Minutes Register of the Children's Committee is to be done by Child Welfare Officer/Case Worker and the custodian is the Person-in charge. Concerning the Minutes Register of Management Committee, both the maintenance and custodian are the people in charge.

As per the JJ Rules, the Admission and Discharge Register which will indicate a change of nature of custody must be maintained by the Child Welfare Officer/Case Worker/Receiving Officer and the custodian is to be the Person-in charge. Similarly, the case file of each child must be maintained by Child Welfare Officer or Case Worker and its custodian is the Person-in charge. The Medical File of each child must be maintained by the Staff Nurse and the Person-in charge is the custodian.

The study found that an average of 46% of CCIs are maintaining the records properly.

Orders Maintaining: The JJ Rules state that the Visitor's Book must be maintained by Security Guards and the custodian is to be the Main Gate Keeper. The Attendance Registers for staff and children are to be maintained by the Shift In-charge and the Person-in charge is the custodian. The maintenance of the Staff Movement Register is to be done by in charge of Security and the custodian is the Person in charge. The JJ Rules state that the Personal Belongings Register shall be maintained by the Child Welfare Officer/Case Worker and the custodian is to be the Person-in charge

The study observed an average of 90% of CCIs are maintaining CWC orders, Court Orders and Quarterly Progress Reports properly.

Participating in Games and Cultural Activities: JJ Act mandates that every CCI shall promote sports, games, and other such cultural activities. The study shows that 93% of CCLs are actively participating in sports and games. This shows that it will positively affect their attitude toward life and society.

Visit of Parents or Relatives: As per rule 74 of JJ Model Rules 2016, every child in the CCI is to be permitted to meet the parents/relatives once a week. Contact with family is an essential part of a child's rehabilitation and reintegration into society. The study shows that 51% of parents or relatives are visiting CCIs occasionally only.

Suggestions

Based on the above findings the researcher made the following suggestions.

1. The main problem facing these Institutions are lack of adequate infrastructure facilities. Separate library and reading room, counselling room and adequate wash and toilet room, boundary wall, separate space for the outdoor games, and quarantine rooms are not seen. Provision for this is to be made.
2. The lack of adequate qualified and trained staff adversely affects the entire system. The staff close to the children must be carefully appointed and some mandatory training programs should be attended
3. Children in institutional care do not receive a nurturing and encouraging environment for healthy and psychological development. There is no long-term vision for the children. They need something more than mere food shelter and education. Each child is unique. More arrangements should be made to know and encourage the taste and potential of the child.
4. Information about what happens to these children after they leave the institution is needed. The aftercare system is almost a failure. It fails to arrange programs for social reintegration with society. Most of the inmates have gone out of CCIs and ACH is not at all attained desired goals. Provisions should be made to support these children at least for some more years.
5. CCIs should make facilities for vocational training. Job oriented course and life skill training with the help of trained instructor and certificate should be given on the course completed which will be useful to them in future.

6. The department should organize classes for the public regarding the importance of non-institutional care like adoption, foster care sponsorship and aftercare. Efforts should be made for family-based institutional care. Department of social justice can make sure that there is no procedural delay in non-institutional care.
7. Grievance redressal mechanisms like the functioning of the management committee and children's committee should be strengthened, so that the children get the opportunity to express their views and opinions.
8. There should be separate homes for different types of children so that proper care and attention according to their needs can be given.
9. Properly monitor the functioning of CCIs so that the problem faced by these institutions can be addressed. Time-bound and appropriate action can be taken against those CCIs who are not following the norms of the JJ system.
10. Funds should be utilized for sending them to private schools and other institutions if the child requires so.
11. Another issue is the child's right to have an identity. Often, they are bought before CWC or JJB from unknown and strange circumstances. In the documents, it is marked as unknown. It leads to stigmatization. So, when admitted to CCIs children should give proper names and identity documents.
12. The absence of proper counselling is seen as a common problem in all CCIs and ACHs. As there are children with special needs who are abused either physically or emotionally, timely, and effective counselling is most important. Otherwise, the trauma lasts for a lifetime.
13. More evidence-based data is required for a systemic transformation of CCIs. A participatory and consultative approach with various stakeholders and children only gives desired results. This also includes strengthening families and raising public awareness. So, it is most urgent on the part of MWCD to give immediate attention and invest resources in this.
14. Investment in children is most important for any country. For full filling the objective of care and protection and the fruitful social re-integration CCIs are established under JJ Act. But one of the main findings is that most of the samples under study have not achieved the expected quality. Making them more conscious about the past and existing socio-economic, political, and cultural aspects is the need of the time. To make them a little more confident and efficient some sincere efforts on the part of all stakeholders are needed. Exhibiting movies on socially relevant issues, conducting classes related to this and organizing awareness classes will be helpful to strengthen vulnerable children.

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