

National Child Safeguard Policy: A Civil Society Contribution

1 Preamble

Every child has the right to be safe and feel secure in all settings and circumstances. The safety and wellbeing of children is the responsibility of each and every individual. This policy seeks to outline the pro-active and protection processes and mechanisms to ensure the right of the child.

The United Nations Declaration on Human Rights declares that humankind has the social responsibility to protect, preserve and hand over the environment and ecology to the future generation. The UN Convention on the Rights of the Child (UNCRC) has laid down the rights of children. Though these rights extended to all children, several children were left behind in the realisation of rights - like children from marginalised communities, children with disabilities, and intersex and gender non-conforming children. Through the enactment of the UN Convention on the Rights of Persons with Disabilities, and through the recognition of intersex and gender non-conforming children by the Office of the High Commissioner of Human Rights, many of the ways in which these marginalised children are being excluded is now being addressed.

Several national laws seek to protect and promote the rights of the child, and there are punitive laws when the rights of the child are violated. These include child specific laws like the Juvenile Justice (Care and Protection of Children) Act 2015; the Protection of Children from Sexual Offences Act 2012; Pre-Conception and Pre-Natal Diagnostic Techniques (PCPNDT) Act 1994; the Commission for Protection of Child Rights Act 2005; the Right of Children to Free and Compulsory Education Act, 2009; Prohibition of Child Marriage Act, 2006; and Child Labour (Prohibition and Regulation) Amendment Act, 2016, as well as legislation that is not child specific but protects the rights of children needing special protection against discrimination, such as the Scheduled Castes and Tribes (Prevention of Atrocities Act) 1989, The National Food Security Act 2013, The Rights of Persons with Disabilities Act 2016, The Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (Prevention and Control) Act, 2017 and The Mental Healthcare Act 2017.

The Supreme Court of India, in case law such relating to gender identity (NALSA v. Union of India), privacy (Justice Puttaswamy v. Union of India) and sexual orientation (Navtej Singh Johar v. Union of India) has also extended these rights. There are existing National policies concerning marginalised children such as The National Children's Policy 2013, National Youth Policy 2014. The current policy draws upon the safeguards provided under the Constitution of India, legislation, international treaties as well as the existing policies for the protection and wellbeing of children. It aims to provide a safe and conducive environment for all children through the prevention and response to child abuse, exploitation and neglect. It provides a framework for all institutions, organisations (including corporate and media houses), government and private sector to understand their responsibilities in relation to safeguarding/ protecting children and promoting the welfare of children individually and collectively.

2 Vision

All children in India stay safe and feel secure in all settings and circumstances.

3 Definitions for the Policy

Child refers to persons up to 18 years.

Children with disabilities includes children who are disabled as per Section 2 (s) of the Rights of Persons with Disabilities Act, 2016.

Intersex children include children born with any of several variations in sex characteristics including chromosomes, gonads, sex hormones, or genitals that, according to the UN Office of the High Commissioner for Human Rights, 'do not fit the typical definitions for male or female bodies'. Such variations may involve genital ambiguity, and combinations of chromosomal genotype and sexual phenotype other than XY-male and XX-female.

Transgender children: children who have a gender identity different from that assigned based on their birth sex.

Gender non-conforming children: Children who do not conform to the gender roles, expression and/or expectations based on cultural norms prescribed for people assigned a particular sex. Gender non-conformity may manifest even prior to adolescence, and before identity formation.

Children in vulnerable situations include children living in ecologically sensitive areas, children in informal employment, children who are living on the streets, migrant children, refugee children, children from remote areas, internally displaced children, in areas of conflict, in disaster prone areas, in shelter homes, orphanages, institutions under the Rights of Persons with Disabilities Act 2016 and the Mental Health Act 2017 and children in need of care and protection and children in conflict with the law as defined under the Juvenile Justice Act 2016.

Children from socially excluded communities and vulnerable sections include children from scheduled castes, scheduled tribes, particularly vulnerable tribal groups, Dalits and Adivasis (irrespective of scheduled listing), children with disabilities, migrant children, refugee children etc.

Children with marginalised identities include intersex children, transgender children, gender non-conforming children etc.

Children in need of special protection include those children so defined in the National Policy for Children 2013 in Para 4.14

Organisations includes government bodies, private and public sector organisations, political parties and their affiliates, trade-unions and their affiliates, non-governmental organisations (NGOs), civil society organisations (CSOs), organisations carrying out commercial, vocational, educational, entertainment, industrial, or financial activities, public and private transportation, hospitals and nursing homes, educational institutions, rehabilitation institutions, prisons and correctional institutions, sports institutions and stadiums used for training individuals, academies and classes used for training children in co-curricular or extracurricular activities, training centres for skill development of children, places of worship or religious instruction, etc, children's homes and other institutions under the Juvenile Justice Act. The term as used in this policy also includes the spaces where these organisations function, have operations or projects or programmes in, temporarily or permanently.

Organisations providing services directly towards children refer to organisations that provide services that children use or avail of directly.

Employees of an organisation or childcare professional refer to their:

- a) Staff (whether employed directly, or through contractors or vendors, whether permanent or temporary, or on probation)
- b) Employees of service providers engaged by the organisation (whether employed directly, or through contractors or vendors)
- c) Interns, trainees, apprentices, volunteers, observers
- d) Consultants engaged by the organisation
- e) Board members, trustees, management and other governing authorities of an organisation

Family includes foster family, adoptive family and natal family

Home refers to any place where a child lives be it a permanent or non-permanent structure, with or without legal papers

Child Care Professional refers to any person who acquires a training or certification or degree that qualifies them to provide services to children specifically

RCI Certified Professional refers to any professional who has also received certification under the Rehabilitation Council of India as a professional who is trained in rehabilitation of persons with disabilities

School includes schools and learning centres that are

- a) Established, owned or controlled by the State/Central Government or local authority
- b) Aided, partly aided or unaided by the State/Central Government or local authority
- c) Schools from a specified category under the RTE Act e.g. Kendriya Vidyalaya, Sainik Schools etc.

- d) Schools run by religious or linguistic groups including vedic pathshalas, madrasas, convents, seminaries and formation houses.

This also includes all parts of the school related to educational and non-educational services as well as transport facilities to and from the school.

Accessible formats include Braille, sign and signed language, simple language, audio-visual formats and other formats which may be accessible for a particular child with disability

Service Provider includes all individuals and organisations which are involved with provision of services to individuals, either directly or over the internet or telephone, and includes service providers which are in the private and public sector.

Services refer to the core service offered by the organisation or professional as well as ancillary services which are necessary for the performance of the core service.

4 Building Parental Capacity towards Upholding the Rights of Children

The government must, through the Village Child Protection Committee, and an equivalent body to be set up at the urban level, organise parental awareness camps at the panchayat and ward levels, on a quarterly basis, starting for expectant and new parents up to and including parents of adolescents. This should be conducted by a member of the relevant Child Protection Committee (CPC), who should be trained quarterly at the State level to ensure uniformity in training and updated training, and should be paid an honorarium for the camps and training conducted.

The camp should include information for parents of all children, including children with disabilities, intersex children, and gender nonconforming children. Parents should be given take home materials from these workshops. These camps must be conducted in simple local language along with accommodation for persons with disabilities, and all materials should be available in accessible formats.

These workshops should provide information on:

- a) The various child rights legislations in existence in Annexure II and the recent Supreme Court rulings on issues relating to gender identity (NALSA v. Union of India), privacy (Justice Puttaswamy v. Union of India), and sexual orientation (Navtej Singh Johar v. Union of India), and their applicability in relation to children.
- b) Best practices towards a rights based upbringing of children in the community (avoiding corporal punishment etc.).
- c) Providing age and disability appropriate assistance to help children express their views on all matters affecting them.
- d) Identifying signs of abuse and exploitation, bullying.
- e) Existing schemes and programmes towards inclusion of children from marginalised groups including in education, medical procedures and insurance, access to assistive aids and appliances etc.

5 Child Protection Policy at the Local Government level

- a) The village, block and district CPCs should be made statutory bodies and mandatorily constituted with representation from children and adults and strengthened to create a child friendly environment at the village and block levels. Equivalent statutory bodies should be set up at the ward level.
- b) Every ward or gram panchayat must enact a Child Protection Policy which is reflective of the issues raised in this document and is made available in simple local language and in accessible formats. The designated person for receiving complaints regarding abuse and discrimination should be mentioned, along with the nature of support provided to children, including children with disabilities, and trans/intersex/gender non-conforming children in the village who wish to raise a complaint.
- c) The gram panchayat development plans (GPDs), Metropolitan City Master Plans, ward plans and Disaster Management Plans must be reflective of the issues relating to the protection of children and realising their rights to participation.
- d) The ward or village CPCs should organise the children's councils or bal panchayat with representation from children in need of special protection. They should initiate periodic discussion forums with all children in the

community on their rights and to create an inclusive space for sharing, to discuss their experience in schools etc. Children's issues should also be included in the four mandatory grama sabha meetings. If there are residential institutions where children reside in the ward, village or block, children from those institutions must be facilitated to attend these meetings.

- e) As the wilful damage and interference with an assistive device is a crime under the Rights of Persons with Disabilities Act 2016, the panchayat should maintain records of assistive devices requirement, replacement duration and maintenance records of assistive devices of children.
- f) ICDS should maintain disaggregated data of disabled children further disaggregated on the nature of impairment and gender at all levels of management. The Utilisation Certificates mandated for reporting purposes and the reporting mechanisms should mandate such disaggregation.

6 Child Protection Policy for Organisations

All organisations must have a written Child Protection Policy. This must be made available, and displayed prominently, in the local language(s) in each place of operation of the organisation, and must also be made available in accessible formats on their websites.

The Child Protection Policy should state the organisation's commitment towards zero tolerance of child abuse and exploitation. It should specify, where possible, the potential interaction points between the employees of the organisation and children, in the course of the employees' employment, if the organisation is not one which is providing services exclusively for children. If the organisation provides services directly towards children then the policy applies throughout the work of the organisation with the children.

Every organisation shall designate officials to ensure compliance under the redressal policy. They will receive complaints of any instance of a child being exposed to abuse, exploitation or neglect, in line with procedure established by law and take proactive steps to prevent such instances. There must be at least one designated official per unit of the organisation. There may be more depending on the size of the unit and the degree of contact between employees of the organisation and children. The names, designation and contact details of these persons must be contained in the policy document.

The Child Protection Policy should include the obligations contained in this national policy document and may include more specific ones given the nature of the work in the organisation.

7 Zero Tolerance and Safe Space Commitment Statement by Professionals

All professionals who work independently must put up a commitment statement in their premises, their website, and their promotional material such as brochures etc. of their commitment towards zero tolerance of child abuse and exploitation. This must be made available in the local language of the place of operation of the professional, whether working alone or with other individuals or organisations. This statement must also be made available in accessible formats, on their websites.

8 Employee Code of Conduct

Childcare Professionals, as well as employees of every organisation that provides services directly to children, must adhere to a Code of Conduct. This code of conduct should be:

- a) In line with Indian law and international human rights standards and conventions.
- b) Based on zero tolerance of child abuse and exploitation.

The code of conduct will include the following as a common minimum code of conduct and may also include more provisions based on the organisation's area of work.

Employees must:

- a) Treat children with empathy and respect, regardless of the child's identity or background, including disability, sexual orientation, gender identity, expression and intersex status.
- b) Recognise that children have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, and to be provided with age-appropriate assistance, and where required, disability appropriate assistance, to realise that right.

- c) Provide children with the support they need to understand information in a manner most accessible to them, and with the support they need to communicate their views in a manner most accessible to them.
- d) Refrain from using inappropriate, harassing, abusive, sexually provocative, demeaning language or behaviour towards children.
- e) Refrain from developing relationships with children that are sexual, exploitative, or abusive or will result in emotional dependency or distress.
- f) Refrain from placing children at risk of abuse or exploitation.
- g) In case they are aware of situations of abuse or violence or risk to the child, they will take steps to addressing the same.

9 Employee Undertaking

Every employee of an organisation, including contractual employees, shall sign an undertaking which reiterates what is provided for in the code of conduct provided in Annexure 1 of the document. This undertaking must be made available in the local languages spoken by employees, as well as in accessible formats to those who may require the same.

10 Organisational Obligations

If an organisation receives a complaint that any of its employees, during the course of their employment, has committed an act which amounts to abuse, harm, or exploitation of children or which violates the policy or any law for the protection of children (such as those laid down in Annexure 2 of the Draft Policy), the organisation must

- a) Support the complainant to make a complaint to CHILDLINE or the Juvenile Justice Police or other authority empowered by law to take action in this regard.
- b) Cooperate in any resulting investigation by providing access to all relevant materials which may be in the control or custody of the organisation.
- c) Refer the matter to the Internal Committee on the Protection of Women from Sexual Harassment at the Workplace to consider whether or not there is a prima facie case for termination of the services of the employee.

11 Awareness

All organisations and Child Care Professionals have to display, prominently:

- a) The Child Protection Policy.
- b) CHILDLINE 1098.
- c) Contact details of designated officer for child protection in the organisation.

In the case of schools, signage containing the details of the village, block and district level CPCs and the State Commission for Protection of Child Rights (SCPCR) should be prominently displayed in all school premises.

Posters etc. and materials in accessible formats should be put up in schools and community facilities for children to inform them of their rights, and that they are entitled to these rights particularly as children in need of special protection and their right to make complaints under the various mechanisms.

Admission materials and forms must state the right of parents to move the SCPCR in case of the denial of the Right to Education to any child or the failure to respect the rights guaranteed under the Right to Education Act, 2009.

12 Training

Organisations shall train all their employees, including contractual workers, on the Child Protection Policy and various legislations related to it and orient them on the code of conduct where applicable [Listed in Annexure 2 of the Draft Policy, and updated from time to time]. These trainings must be conducted in the language best suited to the employees and be administered in accessible formats and by using accessible materials. The training must be repeated on an annual basis.

Training programmes of *professionals*, including that of RCI Certified Professionals, must contain a mandatory segment on child rights and protection against abuse, exploitation and violence, in line with what has been stated in this draft policy, with special attention to provisions relating to gender and sexuality.

For the local ASHA workers, ICDS and anganwadi workers, as well as those working in the unorganised sector or who work independently with children like midwives, nannies etc., periodic camps and training activities should be organised by the village and block level CPCs. These camps should be publicised so as to encourage attendance among these persons on the issues contained in the Child Protection Policy. To maintain uniformity in trainings, the materials for these workshops and camps should be developed at the State level, and the members of the village and block level CPCs should be trained at the State level.

The Ministry of Women and Child Development and the State departments shall be responsible for the quarterly training of child protection authorities including the District Child Protection Unit (DCPU), the Juvenile Justice Board (JJB), the Child Welfare Committees (CWC), and the Juvenile Police. This training will be on the laws relating to child protection, the specific needs and vulnerabilities of children in need of special protection, means of communication with children with disabilities, and any other relevant issues.

13 Child Labour and Prevention of Exploitation

- a) Organisations with manufacturing units must strengthen monitoring mechanisms to ensure that child labour is not being used in any form in their entire supply chain, including that of their subsidiaries, suppliers and subcontractors.
- b) Organisations which are fulfilling obligations of Corporate Social Responsibility (CSR) must ensure that their funding is not utilised towards the exploitation of any child and that all children covered under the programmes funded by them are in school if they are between the ages of 6 and 18.
- c) Organisations must raise awareness among their employees to refrain from employing children as domestic help and provide information on where such children can be referred to in order to address the issues that have led to their being employed in such a manner.
- d) Adolescents between the age of 14 to 18 must be trained in the provisions of the Sexual Harassment of Women at the Workplace Act 2013 and, in case of any instance of sexual harassment of girls at the workplace, mandatory referral must be made to the empowered authorities. Their names may be withheld from the respondent in line with the various High Court rulings on the protection of victims of sexual harassment at the workplace.
- e) In situations where a child works as an artist in an audio-visual entertainment industry, including advertisements, films, television serials or any such other entertainment or sports activities, they shall be given age appropriate and, where required disability appropriate, information to understand the requirements of the tasks assigned to them and feedback given to them.

14 For all Organisations Working Directly with Children

- a) Organisations must conduct stringent background checks (which may include police verification) of all employees – regular, contractual, volunteers, probationary, part-time or any other – who may come in to contact with children.
- b) All employees must be trained to recognise the right of children to express their views freely on all matters affecting them, and how to give due weightage to these views in accordance with their age and maturity.
- c) Organisations working directly with children must prioritise parental engagement and include the views of parents in the determination of the best interests of the child and give it appropriate weightage considering the age and maturity of the child.
- d) All employees must be trained on how to provide disability and age appropriate assistance towards realising the right of all children to express themselves. There must be trainings towards sensitisation on the rights of children with disabilities and disability etiquette among all staff.
- e) All employees must be trained on signs and behaviours that may be indicative of child abuse/exploitation or neglect.
- f) Where there are multiple children availing of services at an organisation, its employees must be trained on best practices to deal with bullying and insulting and humiliating behaviour, particularly perpetrated on the

grounds of perceived or actual disability, caste, race, gender non-conformity or sexual orientation. These interventions must also include monitoring for retaliation against the child who experienced bullying by teachers and students alike.

- g) Organisations must develop age-appropriate modules and materials for orienting children on child abuse, online safety and services available for them, which are available in accessible formats for children with disabilities. The Rehabilitation Council of India shall work on language and communication development in sensitising children about their rights under the various child protection laws and the remedies, and also develop language for sexual and gender expression.
- h) Services towards therapy/rehabilitation of children should be parent-inclusive and should only be imparted to children in the presence of the parents or guardians of the child. If the parent cannot be in the same room for any reason, the same should be observable via half silvered mirror or CCTV camera.

15 Data Collection

National data collection agencies, including the Ministry of Statistics and Programme Implementation (MosPI), the Registrar General and Census Commissioner of India, and all departments and ministries collecting administrative data must ensure that contemporary guidelines relating to collection of data from children are followed, for example, the International Charter for Ethical Research Involving Children. For non-governmental agencies collecting data on children, it must be mandatory to have ethical clearance from an appropriate ethics committee.

Organisations working on collecting data from children, or collecting data on children from their parents and the community, must ensure that the children are not harmed or traumatised in any way during the process. All personally identifiable information (PII) should be masked, and destroyed after use. The time limit for data retention should be clearly disclosed as part of the free, prior, informed consent (FPIC) process. The child should always have the option to opt-out or withdraw the information given at any time, including in adulthood without a time limit.

All research staff must be trained on ethical practices and age-appropriate and disability appropriate supports to allow children to express their views on matters concerning them, with due respect to the socio-economic background of the family and community.

16 Organisations Working in Healthcare

- a) All organisations providing healthcare services are obliged to provide a safe and accessible environment for all children, including children with disabilities and those who are transgender, intersex or gender non-conforming.
- b) Professionals who provide healthcare services to children – doctors, counsellors, teachers, health workers, nurses – must follow the Child Protection Policy for reporting and taking action if they are aware of a situation. They must be trained to monitor for signs of abuse and exploitation in children including physical abuse, emotional abuse, sexual abuse, and denial of food and fluids. These professionals should also be aware of care and support services for children like:
 - i. CHILDLINE 1098
 - ii. Special Juvenile Police Unit
 - iii. Child Welfare Committees
 - iv. Child care institutions
 - v. One-stop centres
 - vi. Drug rehabilitation centres
 - vii. Hospitals
 - viii. Mental health care providersand other such services for children.
- c) No such action should be taken without informing the parents of the child, where available, to inform them of the observations made with regard to the condition of the child.
- d) No healthcare professional can refuse treatment or discriminate on the basis of gender, gender expression, sexual orientation, intersex status, disability, caste, religion, tribe, language, marital status, occupation, political belief, or other status.

- e) The Medical Council of India, Rehabilitation Council of India and other authorities must take steps to raise awareness regarding the law that states that refusal of medical care to survivors and victims of sexual violence or acid attacks are offences. They must also train healthcare professionals on dignified ways in which to examine children who are alleged victims of abuse, including sexual abuse.
- f) Children must be explained their diagnosis and prognosis in a manner that is child friendly and respects their evolving capacity to make decisions. They should be provided with disability and age appropriate assistance in order to express their views and ask questions. They should also be given information regarding medication and procedures including potential side effects of the same.
- g) In the case of interventions which are not of a 'life saving' nature for children, children and their families must be given access to easy-to-understand and age appropriate information to decide on the procedure, including with information on follow up and other kinds of interventions required after the procedure, to allow for informed choices. Health professionals should respect the right of children with disabilities and those not conforming to gender binaries to preserve their identities.

17 For Schools and learning centres

- a) All schools and learning centres/spaces must provide a safe and accessible environment for all children, including infrastructure accessible to children with disabilities. This includes accessible toilets (including gender neutral toilets for gender non-conforming children), accessible eating/dining areas and drinking water facilities, and availability of quality menstrual health products for assigned female sex children.
- b) School Management Committees under the Right to Education Act must include the mandated proportionate representation given to the parents or guardians of children belonging to socially excluded communities and vulnerable sections, as well as to parents who are persons with disabilities or from gender or sexual minorities, and must be consulted on the development of the Child Protection Policy of the school. The block level CPCs should work with the School Management Committees (SMC) on this.
- c) The village and block level CPCs shall provide support to parents to make complaints against violation of any of the provisions of the Right to Education Act.
- d) All employees as well as the SMC must be trained on child rights and other legislations for the protection of children and elimination of discrimination against them in line with Annexure II, and ensure that corporal punishment and any other form of abuse is prevented by the employees. In the trainings on discrimination against children with disabilities, the understanding of discrimination on the basis of disability must include the denial of reasonable accommodation.

18 For Organisations in General

For organisations that have more than 50 employees (including contractual/daily wage workers) there must be a crèche set up, and for smaller organisations appropriate space and facility for baby care should be provided for mothers with infants.

19 For Organisations with Infrastructure Open to the Public

Child friendly zones must be available in all spaces open to the public, which have accessible infrastructure and toileting and trained staff to monitor the same.

Safe spaces, with trained attendants must be established for mothers to keep their infants.

20 CHILDLINE Services and Aftercare

- a) The appropriate government will ensure that the CHILDLINE system is functional across the country with a large number of trained and sensitised individuals available to receive calls. There must be fluency in all the local languages of the State. The CHILDLINE reporting mechanism should go beyond the 1098 phone number and should also include communication via SMS, WhatsApp (video and text) and other social media, and should develop the means for the participation of children of disabilities via Alternative and Augmentative Communication and other modes of communication, including through Sign Language. The CHILDLINE call centre staff should be trained in this.
- b) CHILDLINE staff should be trained in recognising the signs of suicidal children and be trained in de-escalation methods.

- c) CHILDLINE staff should be trained to ask specific questions to informants regarding the circumstances of the child which they may otherwise not volunteer. This includes information on the disability status and gender expression/identity of the child in question. This will help the rescuing authority plan an effective intervention.
- d) CHILDLINE call centres should, depending on the severity of the situation, have links to
 - i. Special Juvenile Police Units
 - ii. Child Welfare Committees
 - iii. Child care institutions
 - iv. One-stop centres
 - v. Drug rehabilitation centres
 - vi. Hospitals
 - vii. Community social workers, preferably adolescents, to make initial inquiries
 - viii. Mental health care providers
 - ix. Provided that admission of children to mental health institutions should be avoided and where it is the least restrictive option in the circumstances it should only be in accordance with the procedures under the Mental Healthcare Act 2017 and with the safeguards provided in the law.
- e) Organisations in charge of provision of shelter should be accessible and sensitised on the specific requirements of children with disabilities. They should have a range of assistive devices suitable for initial interventions for a range of children with disabilities.
- f) The identity of the informant will be protected and not made public.

21 Monitoring

The monitoring authority of organisations and professionals for compliance with this policy document shall be the District Child Protection Unit (DCPU). All organisations and professionals shall submit compliance reports, of trainings, receipt of complaints and action taken, along with a copy of their Child Protection Policy, to the DCPU annually, in the month of January.

22 Registration of Complaints

- a) When any individual is aware of or suspects that a child has been, is being, or is likely to be:
 - i. Abused – either physically, sexually, emotionally or online
 - ii. Victim of child pornography by having their images circulated
 - iii. Forced into marriage, labour, child trafficking, or other situations in contravention of the law
 - iv. Subject to any kind of intervention meant to ‘cure’ gender or sexuality non conformity like genital mutilation, conversion therapy, corrective rape or any such
 - v. Subject to an atrocity as defined under Section 3 of the Scheduled Castes and the Scheduled Tribes (Prevention of Atrocities) Act, 1989 (if a member of a scheduled caste or tribe)
 - vi. Discriminated against on the account of gender, caste, religion, language, place of birth, sexual orientation, gender nonconformity, disability or any other; or
 - vii. Abandoned or neglected, including through the denial of food and liquids to a child with a disability, or through the chaining or forceful sedation

They must report the incident to CHILDLINE 1098, police or the local Child Welfare Committee.
- b) The identity of the informant will not be made public.
- c) Informants are advised to provide accurate information about child’s location, details of the circumstances and other information to help in the process of rescue. In case the child has a disability, the informant should give this information to CHILDLINE to the best of their knowledge.
- d) In case the child requires immediate medical attention before appropriate authorities arrive, the informant is advised to help the child in the best manner possible, including by taking the child to the local hospital, but also to update CHILDLINE 1098 and/or police regarding the situation and whereabouts of the child. They should also inform the hospital that they have made a complaint to 1098.
- e) Informants are advised to always wait for the appropriate authority (CHILDLINE 1098, police or Child Welfare Committee members) for taking action or to only act on their advice and guidance .

- f) The priority of the intervening authorities should be to respect the evolving capacity of the child to make decisions and the right of the child to live in its immediate family at home, and therefore towards building the capacity of parents and family, and the community, to care for the child.
- g) In case of an emergency situation where a parent or guardian is not available, a child must be given a support person to assist them. They must be allowed to specify the preferred gender of the person they would like to speak to.
- h) The village, block and district CPC should train at least five adolescent social workers per block who may receive instructions to make interventions in case of an ambiguous situation, particularly involving adolescents, where a larger institutional intervention may not be necessary at the first instance.

23 For Children Living in Institutional Care

- a) Children living in closed door institutions are at heightened risk of violence and abuse. Therefore, for Children who are living, for any duration of time, in institutional care, be the institutions run by the government, local authorities or NGOs, the DCPU will ensure that children have access to complaint mechanisms within these institutions (for example, via a telephonic hotline). The mechanism shall also be accessible to children with disabilities.
- b) The management of the said institution will ensure that children living there have access to the community meetings/council/panchayat of children organised in the ward, village or block where the institution is based.
- c) Regular trainings on child rights and redressal will be held in these institutions for both the employees and the children residing there.

24 Annexure – I – Employee Undertaking

I, (name and position of the employee), from (name of the organisation) hereby declare that I:

- a) Will always respect all children, regardless of age, disability, gender, gender expression, intersex status, racial heritage, religious belief, sexual orientation or identity;
- b) Believe that all children have the right to express their views freely on all matters affecting them, and that their views should be given due weight in accordance with their age and maturity;
- c) Will always support their right to accessible infrastructure and communication and will endeavour to provide reasonable accommodation to them, where required, in order to ensure that they are able to participate to the best of their ability;
- d) Support the right of children to equal protection from all types of harm or abuse;
- e) Will not employ nor abet the employment of any child as defined under Child Labour (Prohibition and Regulation) Amendment Act, 2016;
- f) Will always report any case of child abuse, exploitation and neglect which comes to my knowledge to appropriate authority and will not harm or abuse any child physically, emotionally or sexually.

25 Annexure – II – Child Protection Laws

- a) The Child Labour (Prohibition and Regulation Act) as amended in 2016
- b) The Information Technology Act 2000
- c) The Indian Penal Code 1860 as amended by the Criminal Law Amendment Act 2013
- d) The Immoral Traffic (Prevention) Act 1956
- e) The Juvenile Justice Act 2016
- f) The Medical Termination of Pregnancy Act 1971
- g) The Mental Healthcare Act 2017
- h) The Prevention of Child Marriage Act 2006
- i) The Protection of Children from Sexual Offences Act 2012
- j) The Right of Children to Free and Compulsory Education Act 2009
- k) The Rights of Persons with Disabilities Act 2016
- l) The Scheduled Castes and Scheduled Tribes (Prevention of Atrocities) Act 1989
- m) The Sexual Harassment of Women at the Workplace (Protection, Prohibition and Redressal) Act 2013

Signatory Organisations

1. Action Aid Association
2. Arpanam Trust
3. Arunodhaya Centre for Street and Working Children
4. Asia Pacific Regional Network For Early Childhood Development (ARNEC)
5. Bringing Adequate Values of Humanity (BRAVOH)
6. CHILDLINE India
7. Children's Clubs of India
8. Christian Children's Fund Canada
9. Christian Children's Fund India
10. Don Bosco Anbu Illam
11. Equals Centre for Promotion of Social Justice
12. Freedom fund
13. Gnana Kanmalai Mission
14. Help a Child of India
15. Human Rights Advocacy and Research Foundation
16. Juvenile Justice Alliance
17. Karunalaya Social Service Society
18. Keeping Children Safe
19. Legal Resource Centre for Child Rights
20. Manitham Trust
21. Nilgiris Adivasi Welfare Association
22. Orinam Collective
23. People's Action for Development (PAD)
24. Redington Foundation for CSR
25. Sakthi –VIDIYAL
26. Social Awareness and Voluntary Education (SAVE)
27. Social Education and Environmental Trust
28. Social Watch Tamil Nadu
29. Society for Rights of All Women with Disability (SFRAWD)
30. Society for Serving Humanity
31. Solidarity and Action Against The HIV Infection in India (SAATHII)
32. Stop Child Labour Campaign (SCL) Platform India
33. TN Forces
34. Tamil Nadu Rural Reconstruction Movement (TRRM)
35. UNNATI organisation for Development Education, Ahmedabad
36. Vidiyal Child Rights Movement
37. World Vision India
38. Women's Indian Association

Contributors

1. Amba Salelkar, Equals Centre for Promotion of Social Justice, Chennai
2. Anand Krishnamoorthi, filmmaker, Chennai
3. Anuradha Vidyasankar, Head, Southern Regional Resource Centre, CHILDLINE India Foundation
4. Arokiyam D, Director (Programmes), Sakthi Vidiyal
5. Bhavatharini, Advocate and social activist
6. Brindaalakshmi K. Orinam Collective
7. Chithra, CHILDLINE India
8. Deepa Sonpal, UNNATI Organisation for Development Education, Ahmedabad
9. Durai J, Gnana Kanmalai Mission
10. Ebenezer, World Vision India
11. Edwin, Director (Programmes) Human Rights Advocacy and Research Foundation, Chennai
12. Esther Mariaselvam, Regional Manager, ActionAid Association
13. Dr. Indira Kannan, Zonal Lead, Redington Foundation for CSR
14. Jaleel, Freedom fund
15. Jamuna, Women's Indian Association, Councillor, Family counselling Centre
16. Karuppusamy R, Project Director, Tamil Nadu Rural Reconstruction Movement.
17. Kumaresan, A, Senior Journalist
18. Malarvizhi E, Researcher, Social Watch Tamil Nadu
19. Meenakshi B., Equals Centre for Promotion of Social Justice, Chennai
20. Moses Andrews, ARNEC
21. Olga Aaron, Director, BRAVOH
22. Dr. Rajendraprasad, Executive Director, Peoples Action for Development
23. Ramakrishnan. L, Vice President, SAATHII
24. Sangeetha S, SFRAWD
25. Shanthi Hopper, Senior Manager – Advocacy & Programmes, World Vision India, National Office
26. Selvarani, Women's Indian Association
27. Dr. Shanmugavelayutham, Executive Director, Legal Resource Centre for Child Rights
28. Smriti Dhingra, Disability and Gender Rights Consultant, New Delhi
29. Sudarsan Naidu, Formerly district coordinator, UNICEF Nagapattinam
30. Sweety Eunica, Help A Child of India
31. Siju Mathew, M&E Officer, Christian Children's Fund in India
32. Tamilarasi P, Coordinator, Human Rights Advocacy and Research Foundation
33. Dr. Venkatraman, Sr Consultant, UNESCO
34. Vijay Baskar, Senior Child Safeguarding Adviser, Keeping Children Safe
35. Vijay Pamela S, Christian Children's Fund in India
36. Vijayashankar.S, Juvenile Justice Alliance
37. Vijiliya A, ActionAid Association
38. Dr. Virgil D'Samy, Executive Director, Arunodhaya Centre for Street and Working Children
39. Xavier A, Don Bosco Anbu Illam