GOVERNMENT OF KERALA


SOCIAL JUSTICE (A) DEPARTMENT
G.O (MS) No. 8/2016/SJD.
Thiruvananthapuram, Dated, 23.01.2016

ORDER

Government have decided to frame a State Policy for Children to ensure safe and secure environment for all Children especially for vulnerable children, opportunity for development, prevention and protection from all forms of violence. As per the letter read above the Director of Social Justice has submitted the draft policy for Child 2016. This Policy was developed with inputs from the Kerala State Commission for Protection of Child Rights, after vide consultation including consultation with children from different Socio-economic backgrounds. This Policy has four components: (a) Right to survival, (b) Right to protection, (c) Right to Development and (d) Right to participation.

2. Government have examined the matter in detail and are pleased to approve the Policy for Child- 2016 as appended to this order.

( By order of the Governor )
A. SHAJAHAN
Secretary

To

The Director, Social Justice Department, Vikashbhavan, Thiruvananthapuram.
The Secretary, Child Rights Commission, Sree Ganesh, T.C.14/2036,
Vanros Junction, Thiruvananthapuram.
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.
The Accountant General (A&E), Kerala, Thiruvananthapuram.
General Administration (SC) Department
Web & New Media Wing, Information & Public Relations Department
Stock file/Office copy.

Forwarded/By order;

Section Officer.
State Policy for the Child 2016

<table>
<thead>
<tr>
<th>Vision</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission</td>
<td>3</td>
</tr>
<tr>
<td>Background &amp; Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Framework for Rights of the Child</td>
<td>5</td>
</tr>
<tr>
<td>Provisions for, and Situation of, the Child in Kerala</td>
<td>16</td>
</tr>
<tr>
<td>Scope and Objectives of State Policy</td>
<td>16</td>
</tr>
<tr>
<td>Guiding Principles for the Policy</td>
<td>17</td>
</tr>
<tr>
<td>Strategic Approaches of the Policy</td>
<td>17</td>
</tr>
<tr>
<td>Table 1: Right to Survival, Health and Basic Needs</td>
<td>18</td>
</tr>
<tr>
<td>Table 2: Right to Development</td>
<td>19</td>
</tr>
<tr>
<td>Table 3: Right to Protection from Abuse, Exploitation, and Neglect</td>
<td>20</td>
</tr>
<tr>
<td>Table 4: Right to Participation</td>
<td>20</td>
</tr>
<tr>
<td>Policy Implementation</td>
<td>21</td>
</tr>
<tr>
<td>Monitoring of Policy Implementation &amp; Results</td>
<td>23</td>
</tr>
<tr>
<td>Resources for Policy Implementation</td>
<td>23</td>
</tr>
<tr>
<td>Capacity Development, Partnerships and Advocacy</td>
<td>24</td>
</tr>
<tr>
<td>Prevention Abuse, Neglect, and Exploitation</td>
<td>24</td>
</tr>
<tr>
<td>Participation In Decisions That Affect Child Development</td>
<td>25</td>
</tr>
<tr>
<td>Development of Children To Achieve Their Full Potential</td>
<td>25</td>
</tr>
<tr>
<td>Strengthened Survival, Health &amp; Basic Needs</td>
<td>25</td>
</tr>
</tbody>
</table>
Acronyms

DCPU  District Child Protection Units
GOK  Government of Kerala
ICDS  Integrated Child Development Scheme
ICPS  Integrated Child Protection Scheme
ICT  Information, Communication, and Technology
IMR  Infant Mortality Rate
KSPC  Kerala State Policy for Child
KeSCPCR  Kerala State Commission for Protection of Child Rights
NGO  Non-Governmental Organisation
POCSO  Protection of Children from Sexual Offences
PTA  Parent-Teacher Association
RTE  Right to Education
SARA  State Adoption Resource Agency
SJD  Department of Social Justice
SPAC  State Plan of Action for Children
UNCRC  United Nations Convention on the Rights of the Child
UPE  Universal Primary Education
Vision

An India where every child has equal and equitable rights to live and develop her or his potential to the best of their abilities.

Mission

The State shall provide quality services to ensure a just and secure environment for all children, opportunities for development, prevention and protection from all forms of violence, and forums for appropriate participation.
State Policy for The Child 2015

Background & Introduction
1. The Government of Kerala (GOK) affirms its commitment to provide all children within the State the right to survive, be protected from abuse, neglect, and exploitation, enjoy fully their development rights, and participate in decisions that affect them according to their age and level of development. GOK issues this Kerala State Policy for the Child (KSPC), which puts forward its broad policy framework for ensuring that all children in the State, irrespective of caste, class, religion, gender, disability or place of birth, are able to enjoy their rights.

2. KSPC was developed with input from the general public, child rights activists and experts, Kerala State Commission for Protection of Child Rights (KeSCPCR), and UNICEF. In addition, consultation was held with about 450 children from different socioeconomic backgrounds in 14 districts of the State. Annex 1 provides a summary of the feedback from the consultations with children. All comments received have been considered in revising the Policy.

Figure 1: Results Framework For KSPC

3. Figure 1 provides the overall framework for the protection of child rights in Kerala. The term "child" covers all genders, namely girls, transgenders, and boys. After this introduction, the Policy briefly discusses the international, and national provisions in this regard, before it describes the current situation of the child in the state. It, then, discusses the policy objectives, its guiding principles, strategies and the monitoring framework for assessing policy results.

Framework for Rights of the Child
4. The United Nations Convention on the Rights of the Child, 1989 (UNCRC), the Constitution of India, and the National Policy for Children 2013 provide the broad framework for articulating the rights of the child. Although previous international conventions had provisions relating to children, it was the 1989 UNCRC that unequivocally spelt out what constitutes the rights of the child and laid down a broad framework of four parameters to assess issues related to
rights of the child, namely survival, development, protection and participation. India ratified the Convention in 1992. The UN Sustainable Goals for Development (2015) further strengthens the global framework for ensuring that all children enjoy their rights and for advancing their well-being.

5. At the national level, the Constitution of India guarantees children equal rights as citizens and equality before law. It also mandates the State to make laws that specifically promote the rights and welfare of children. Since 1992, various statutes, which deal with the rights of the child or have specific provisions, have been amended consistently with the provisions of the UNCRC. New statutes emphasising and protecting the rights of the child have also been brought into effect; mechanisms and institutions have also been put in place to ensure their effective implementation (Annex II).

6. India declared its first National Child Policy in 1974 through which it aimed to implement its Constitutional obligations. India's commitment to ensuring the rights of child were reflected in its successive Five-year Plans where schemes focusing on the health, education, protection and care of children have been provided for, with specific physical and financial targets. In 2000, the country committed itself to the Millennium Development Goals, many of which pertain to the status of children and their rights. The National Child Policy 2013 further reiterated the need to promote the rights of children, in keeping with international principles and norms. Another notable development was the 2013 Supreme Court decision that there are 3 genders in India; this will also apply to the Policy for the Child. Additionally, in 2015, India has committed itself to supporting the 17 sustainable development goals, many of which relate to the well being of the child and contain child-related targets.

7. Together, these international and national norms and laws confirm that children enjoy the same broad spectrum of civil, cultural, economic, political and social rights and responsibilities as adults but mediated by their age and stage of development. States are obliged to ensure that the rights of the child are protected keeping in mind their best interests, to promote the realization of their rights, to promote their participation in matters affecting them including the right of free expression and the right to be heard. They recognize the parent's primary responsibility, stress the right of a child to live in a family, note that children have a responsibility to respect others, particularly their parents, and recommend institutionalization or separation from family only under exceptional circumstances that constitute the best interests of the child.

Provisions for, and Situation of, the Child in Kerala

8. Children (0-18 years) constitute less than 30% of the total population of Kerala (Census 2011), and those between the ages 0-6 years constitute only 10% of the population. With a fall in the growth rate of the child population by 8.44%, the future of the State depends on protecting the rights of the child, and in providing them with an environment that will enable them to enjoy their rights fully and become happy and productive citizens of tomorrow.
9. The State has taken great efforts over the last five decades in achieving the various milestones set up under the State's Five Year Plans and through the targeted and time bound goals spelt out for various sectors under successive State Plans of Action for Children (SPAC) in 1995 and 2004. The State has also adopted a rights based approach in 2011 and has set up institutions and authorities to implement the various statutes that provide for the care and protection of children, and also to monitor their effective implementation, to suggest improvements and redress grievances of children so as to promote their rights. Child Welfare Committees have been functional in all the 14 districts. Kerala has a number of social protection schemes for children and their families, some of which directly address vulnerable children.

10. Kerala has made great strides in achieving many traditional indicators used to measure the care and well being of a child. The State has a good track record in ensuring that systems are in place to support the health and literacy needs of its children. This is not surprising given that Kerala has the highest levels of human development index in the country. Funds, functions and functionaries for child governance have been well devolved in Kerala to the Local Self Government Institutions (LSGIs). The State has emphasised the role of all segments of society, including children, at the levels of the Panchayats, Municipalities or Corporations, in planning at the grass root level in matters that affect their lives. Civil society organisations, corporate, self help groups and the media have been active stakeholders in child development.

11. Despite the achievements, there is much more to be done. There are several challenges in all four dimensions that need to be addressed expeditiously if children are to fully enjoy their rights, especially those from economically and socially disadvantaged sections of society, and these are discussed in this section.

12. Right to Survival and Basic Needs: The Integrated Child Development Scheme is a key program in the State and consists of an integrated package of services for children's development such as supplementary nutrition, immunization, medical check-ups, pre-school non-formal education, nutrition and health awareness and empowerment of adolescent girls through Adolescent Clubs. Many of the issues relating to survival and medical care needed for children in the early stages are being addressed through this scheme.

13. In the matter of survival, the State has done well in parameters like maternal care, ensuring births attended by trained personnel, universal registration at birth and reduction in the Infant Mortality Rate (IMR). However, Kerala has witnessed a decline in child population, except in Malappuram. The addition to population in the northern districts is faster while it is slower in the southern districts. The sex ratio for the State is 964 i.e. 4 points higher than in 2001(Census 2011). Although all districts have sex ratio figures lesser than 1000, Kollam(+13) and Kozhikode(+10) show improved sex ratios; however, the negative decadal change in sex ratio in districts like Thrissur (-B), Idukki (-5), and Alappuzha (-5) is a matter of concern.
14. There is concern regarding the slow reduction in the IMR figure, which stands at 12 deaths per thousand live births. In 2004 the target in the SPAC was to reach 7 deaths per 1000 live births by 2012, which has not been possible. To make progress in this regard, it is necessary to address the significant gap between the urban-rural figures for early neonatal mortality (death within the first week of birth), as well as for neonatal mortality (death within the first 28 days). The situation in tribal areas is further compounded by the added problem of low birth weight babies and the prevalence of anaemia among them. The IMR among all the vulnerable communities, including tribals, in districts like Palakkad, Wayanad, Malappuram, Idukki, Kollam and Thiruvananthapuram is a matter of concern, particularly in Attappady where the National Institute of Nutrition Survey of 2013 shows the IMR figure to be 66 per thousand live births. To address this issue, more facilities for newborn care would appear to be needed in these areas.

15. In the matter of Universal Immunisation, the coverage has fallen in recent years. According to District Level Health Survey-4 (DLHS-4) data, 17.5% of the children between 12-23 months have not received all the recommended vaccinations. Further, Kasaragode and Malappuram feature among the 48 worst districts in India in the matter of Universal Immunisation. This drop in coverage necessitates the State to be alert to the dangers of complacency, especially with the continued prevalence of certain vaccine preventable diseases (VPDs). The need to combat anti-immunisation propaganda in certain segments of society against Universal Immunisation also merits serious attention. Wayanad, Palakkad and Kozhikode districts also require close monitoring in this regard.

16. Breast-feeding practices for new born babies is yet another area of concern. Less than 80% (DLHS-4) of the babies between 0-5 months are breast fed within one hour of birth in the urban area. According to DLHS-4, children under 3 years, who were exclusively breastfed in the first 6 months remains at 70%, and children (6-9 months) who receive breast milk and semi-solid and solid food has dropped from 85% to 57%. Similarly, against the desired average of 6 months of exclusive breast feeding, and the national average of 3.8 months, the median duration in Kerala is only 3.56 months (69.6%, DLHS-4). This could be due to either the practice of giving semi-solid food, such as ragi or other baby foods, after 90 days, or due to the difficulties in sustaining breast feeding for want of breast feeding facilities and crèches at the working place. This needs to be addressed.

17. Nutrition continues to be a matter of concern, especially among tribal and coastal communities, even though nutrition is being provided through the anganwadis. According to DLHS-4 data, 21% of children under 5 years are underweight, 48.5% of children between 6-59 months have anaemia, and that malnutrition is higher among children in Palakkad, Kozhikode and Kasaragode. Poor maternal health and nutrition is a foundational cause for low birth weight of babies. Interestingly, the problem is reportedly found even among high-income families. The correlation between lack of nutrition and the occurrence of neurological disorders is yet another area of concern. With higher levels of disposable incomes, access to fast foods and lack of adequate physical exercise,
increase in lifestyle diseases, obesity, early onset of menstruation and gynaecological problems among girl children are also emerging areas of concern.

18. Although more than 95% of the households in the State have toilets in the house premises, its availability is much lower at 85% among ST households; and even where it is available, not everyone uses it, or only the adults use it. Another group that is not in the habit of using toilets and who have no access to toilets is the migrant worker group. There is also the problem of no toilets being available in many anganwadis and schools, especially for girls. Therefore, greater awareness is necessary among these target groups about the use of toilets as a prerequisite for personal hygiene. The creation of appropriate infrastructure for ensuring 100% coverage for toilet facilities also becomes a priority area to ensure proper sanitation.

19. Access to clean drinking water is one of the basic needs of children. Access to potable water is available to households in their own premises to the extent of 76% (census 2011), while 14% get water from sources near their premises and 8% from Away sources. These last two categories need attention, particularly in hilly terrains like Idukki (27%) and Wayanad (14%), and in tribal belts like Attappady.

20. Kerala is also one of the most vulnerable states in the country in terms of water quality because around 70% of the population does not have access to piped drinking water; the rest are dependent on surface or ground water sources. This raises the possibility of chemical and bacterial contamination levels in drinking water. Both Alappuzha and Palakkad have water with high fluoride content and Thiruvananthapuram, the problem of high bacteriological contamination. Some other districts have problems with both chemical and bacterial contamination. The State needs to be alert to the threat of pollution to drinking water sources, caused by unscientific waste disposal, unplanned construction of toilets in high density populated areas, discharge of industrial waste, seepage of sewerage water etc given the high density of population in the State and its predominant dependence on surface and ground water for drinking water. Special care needs to be taken in the water supply given to children in schools, anganwadis etc. to ensure that the health of the children are fully protected.

21. Development Rights: Kerala has a good record in the area of literacy with an overall literacy rate of approximately 93.91%. Enrolment of children is near universal in the primary school. Almost 50% of the students are girls; hence gender equity is also being ensured.

22. The State has 33,115 anganwadis for children in the age group 3 to 6 years i.e. 1 for every 800 of the population. Nutrition programmes for lactating mothers with babies between the ages 3 to 6 months, and for children between the ages 3 to 6 years, are also being addressed through these anganwadis, in addition to providing non-formal, pre-school education to the latter. Nutrition at the school level is also ensured through the mid day meal programme being implemented in all government and aided schools. 46% of these anganwadis are
accommodated in temporary sheds and rented buildings, in many of which basic infrastructural facilities and availability of play materials need to be improved in order to contribute better to the cognitive and mental development of the children. The attendance of ST children in anganwadis is much lower than in other places due to poor access, especially in Idukki, Wayanad and Palakkad. There is also an important issue of providing education to the tribal children in their own mother tongue at the pre-primary stage. This is a critical necessity to ensure that these children adapt comfortably to a language and culture so different from what they know till then.

23. Education between 3 and 6 years is also being provided through preschool institutions run separately, or attached to regular schools. Most of these are in the private sector and there is no uniformity in their infrastructural facilities, or the curriculum followed by them. There are no standards available for running these institutions, which are mushrooming in the State. Even though the Government has approved a uniform curriculum for pre-school education, it is yet to be enforced, and parents do not appreciate the principles behind Non-Formal Education. Therefore, there is significant need for enforcing basic standards in all pre-school institutions, meriting serious attention and to raise awareness of the issue among the public.

24. Education at the school level is provided through 12,626 schools up to the tenth standard. Of these, only 36.5% are Government schools, 56.6% in the aided sector and the remaining 6.81% in the unaided sector. At the Higher Secondary level, there are 1089 Government schools and 1406 in the aided sector while there are 265 vocational Higher Secondary Schools in the Government sector and 124 in the aided sector. In 2015-16, over 37 lakh students are being provided education up to the tenth standard, of which over 4 lakh students hail from the SC community and over 79 thousand from the ST community. The responsibility for the effective implementation of the Right to Free and Compulsory Education Act (RTE) 2009 is vested equally with the Education Department and LSGIs.

25. Consequent to the RTE Act 2009, the State has faced many challenges because the pattern of schooling identified from classes I to X under the Act does not coincide with the State's age old pattern. While grappling with this aspect, the State has also had to address the issues of improving, expanding and rationalizing its basic infrastructural facilities in all schools, particularly in the Government sector, and provide teachers, in line with the provisions of the Act, so that quality education is accessible to all.

26. At present there are many concerns about the lack of basic infrastructure in many Government schools, the poor maintenance of existing facilities, non-availability of safe drinking water, the lack of water and hygiene in the school toilets and cleanliness in the playgrounds. There is also concern that the quality aspect of education needs better attention and this can be achieved through better clarity and coordination between the main stakeholders, viz the Directorate of Public Instruction, the Sarva Shiksha Abhiyan under the Education Department and LSGIs, about their roles and responsibilities in implementing the RTE Act. While providing such training, it is necessary to give teachers a proper
appreciation of Child Rights and the laws, policies and programmes relating to it. 
This should form an integral part of the teacher's training modules.

27. The drastic increase in the number of uneconomic schools (37% of all 
Government schools and 1816 aided schools) which have less than 15 students 
in each class, the predominance of private schools in education (especially single 
manager schools), and the lack of adequate access in the very remote areas, are 
also aspects that have a significant impact on the education sector. The 
decreasing presence of the public sector in education is a serious matter of 
concern, particularly when a scenario of children from vulnerable sections of 
society remaining out of school for varying reasons is a reality.

28. These issues in the education sector are particularly relevant in tribal and 
remote areas where access to education, availability of basic facilities, adverse 
teacher- student ratios and student- class room ratios, dropout rates in classes I 
to X, failure rate at the metric level and low enrolment in the Higher Secondary 
levels continue to be regular phenomena. These issues become serious cause for 
concern because the affected children are very vulnerable to various forms of 
abuse in their adolescent years. The possibility of improving access to schools in 
remote, coastal and tribal areas by improving transport facilities, opening 
schools in needy areas, and providing more hostel facilities to children from 
these vulnerable communities, especially first generation learners, to prevent 
the problem of dropouts and out-of-school children, merits consideration.

29. Schools and hostels have been set up for vulnerable communities like the 
SC/ ST and fishermen population and for sports persons. But, they need 
attention, particularly in terms of their facilities, quality of education and better 
coordination between the various stakeholders responsible for managing them. 
The lack of adequate accommodation and basic infrastructure in such schools 
and hostels, the permanent encroaching into these facilities in certain locations 
etc. are all issues that call for concerted and urgent action to optimally achieve 
the objectives for which they were set up.

30. One option to improve education facilities and hygiene would be to 
consider a rating system for all schools, public, aided and unaided, in the State, 
cutting across all types of syllabus, with well chosen parameters that aim to 
make schools child friendly places for students. Regular social audit of 
government schools is yet another option that needs to be considered to ensure 
quality of education.

31. The lack of non-school based opportunities for development is another 
area that merits attention. Though the State has a good network of libraries, 
there is limited availability of recreation and activity centres as well as public 
places to which children have easy access. A serious matter of concern is the 
shrinking of public spaces like public parks, to which children are being denied 
access because these are being encroached upon for other purposes. Similarly, 
the lack of safety guidelines for leisure time activities like swimming, when made 
available to children as recreational activities on commercial terms, is also a
disturbing trend that calls for regulatory intervention to ensure their safety as well as hygiene.

32. The Right to Education Act 2009 and the Persons with Disability (Equal Opportunities, Protection of Rights and full Participation) Act 1995 together emphasize the need for every child with disability to have access to free education in an appropriate environment till the age of eighteen. Accordingly, the State has a number of programmes for children with disabilities. Besides the schools available for children who are challenged in terms of vision, speech and hearing, the State has 43 special schools for the Intellectually challenged, of which only 7 are in the Government sector; 32 are private aided schools and 4 are private unaided schools. There are also BUDS schools managed by the women’s neighbourhood groups, called Kudumbasree, for children with serious disabilities. Support for such children is also being provided through the Block Resource Centres managed by the panchayats.

33. However these facilities are not adequate in terms of the real requirement for such services in the State. There are Early Intervention Centres attached to District Hospitals in all the 14 districts. Neonatal screening for hearing has been set up in 40 hospitals, while screening for Hyperthyroidism is available in all maternity hospitals. Facilities for screening for other disabilities are yet to be set up. Neonatal and prenatal care need to be strengthened to reduce the incidence of such disabilities.

34. Almost all differently-abled children require Speech Therapy (ST), Occupational Therapy (OT) and Behaviour Therapy (BT) while many require Physiotherapy too. Today, the facilities available for providing these services through Government agencies are very few, and mainly in the urban area; hence, there is a mushrooming of agencies in the private sector offering therapy at exorbitant costs which very few can afford and whose quality of services is, on occasion, suspect. There are no prescribed standards by which parents can make an assessment regarding the quality of services offered by these service providers, which, besides the lack of transparency, sometimes results in disastrous consequences for the child.

35. Hence, there is an urgent need to regulate this sector and provide proper guidance, training using ICT tools, and support to parents to manage the training and mainstreaming of these children with intellectual disabilities, whose numbers in percentage terms vis-a-vis the total number of children has increased. Since socialising is an important aspect of their training, there has to be a clear policy about how children with different categories of disabilities ought to be handled; the manner and extent of their integration with regular schooling (taking into account the varying nature and intensity of their disabilities); the syllabus to be prescribed in such cases; examine how children with exceptional capabilities can be nurtured within the education system; and how to involve children, who are important stakeholders, in their education; and become as self-reliant as their disabilities will permit them to be. It is also
essential to make access to affordable and quality therapy services available to all children in need of these services.

36. Another group that is currently outside the ambit of the Right to Education are the children of migrant labourers. The difficulties in communication, the differences in culture and the transitory nature of their parents' employment have made this issue hard to tackle effectively, despite many efforts to do so. There is no database available of children of migrant labourers in the State. This issue needs a multi-pronged strategy involving the parents, their employers and the education system.

37. Protection from abuse, exploitation, and neglect: An important project under implementation in the State is the Integrated Child Protection Scheme, which provides support for children in difficult circumstances. Child Protection Units have also been established in all the 14 districts of Kerala to help implement the provisions of the Juvenile Justice Act 2000. Child Welfare Committees and Juvenile Justice Boards have also been set up in all districts to provide care and protection to needy children, including those in conflict with law. In 2013, the Kerala State Commission for the Protection of Child Rights was also set up under the Commissions for the Protection of Child Rights Act 2005 to protect the best interests of the child.

38. Kerala has also introduced many social protection schemes through the Kerala State Suraksha Mission (KSSM), which benefit the treatment and support of needy children suffering from serious ailments and disabilities, and provide financial assistance to even the full time caregivers of the needy. Support is also being given for orphans and children of single parents who cannot support the education of their children through aided Government schools. Financial assistance is being made available for purchase of various kinds of aids and equipment for the disabled, and funds are being provided through LSGIs for the extremely needy and homeless among the disabled even for purchase of land and for constructing a home.

39. The Government operates 32 childcare institutions in the State. The Government has initiated action to improve the infrastructure and facilities in these Homes and develop model Children's Homes where children are being allowed to stay in a less restricted and more nurturing environment. Apart from this, there are 1204 registered welfare institutions run by N.G.Os and voluntary organizations for children. Government has also successfully involved accredited voluntary agencies in the management of care and protection in childcare institutions. It seeks to increase their involvement in this area of work.

40. Facilities for empowering children who are in need of care and protection, to reintegrate into society through education, imparting of skills, vocational training, life skill training etc. are being strengthened in the Homes registered under the Juvenile Justice Act 2000. Action has also been initiated to bring all Homes providing shelter to children in need of care and protection under the ambit of this Act. Simultaneously, action has been initiated to curb the mushrooming of unapproved homes that lodge children. There is also need to
address the serious concerns about the care and protection as well as safety provided in the many places serving as hostels and homes for children under 18 years of age, who are undergoing various forms of study away from home, many of whom hail from places outside the State. At present they are outside the ambit of all regulations; therefore, there is need to regulate them.

41. Institutionalising a child to provide care and protection is recognised as the last option; therefore, adoption, foster care, sponsorship and scholarship of children are being given priority, and are being encouraged in the best interests of the child. The State has set up the State Adoption Resource Agency (SARA) to promote and implement adoption based on centrally issued guidelines. It has also issued guidelines for promoting adoption, foster care and sponsorship; their effective implementation needs to be ensured. An initiative has also been taken to provide children in Homes with foster care during the vacations. Such initiatives need to be continued and this process further streamlined and facilitated so that more children get a chance to live within families than in institutions.

42. The girl child is the most vulnerable member of society. In addition to their shrinking numbers, is the fact that, despite girls availing the opportunities for higher education and employment in increasing numbers, and thereby being economically independent, the attitude in society of viewing girls as a liability vis-a-vis boys, continues; there is also the problem of gender stereotyping which restricts girls in their social interactions, and from fulfilling their aspirations. The incidence of abuse within the family, schools and the immediate neighbourhood, especially for the girl child, the use of children for sex trafficking even by their own family, and the fallout of domestic violence or distressed family circumstances are major sources of threat to the rights and lives of children. These challenges, which render them vulnerable even within the family environment, need to be addressed.

43. Crimes against children continue to show an upward trend, with rising figures for kidnapping, sexual abuse, sex trafficking etc. While girls continue to be the main targets for such crimes, reports of crimes against boys are also on the increase. Boys need special attention, particularly in view of the prevalent second generation issues around substance abuse, sexual abuse, cyber-crime and adolescent suicidal tendencies. A higher dropout rate among boys at the secondary and tertiary levels of education is also a matter for attention. The State Crime Records Bureau reports that crimes against children in the State have increased by 242 percent from 2008 to 2013. This is one of the most serious concerns confronting society today. A related area of serious concern is the growing phenomenon of run away or missing children. In recent years this has become a regular feature involving both boys and girls; it is estimated that on an average more than 50 girls are missing every month and some of them remain missing. It is understood that it is the vulnerable circumstances in their immediate environment that often prompt the children to such risky behavior. This emphasizes the need for counseling, for providing parenting classes for parents of children in need of care and protection and also for making the Track Child system, which is under implementation, more effective.
44. Many steps have been taken so far to effectively implement the Protection of Children from Sexual Offences (POCSO) Act 2012. Special care homes have been set up to provide care and protection to children covered by this Act in 9 districts. Special Juvenile Police Units are being set up in all districts. One Stop crisis centres are in the process of being set up to provide more speedy and sensitive help to the victims. Such homes need to be set up in the remaining districts and the existing institutions and measures need to be fully and effectively implemented at the earliest. To expedite the trial of cases registered under the Protection of Children from Sexual Offences (POCSO) Act 2012, Special Courts have already been notified in the State. However, given the volume of cases, there appears to be a genuine requirement for Special Courts at Thiruvananthapuram and Kozhikode to exclusively handle cases of children, as is being done in Ernakulam, so as to adhere to the deadline prescribed for disposal of cases in the POCSO Act. There is also need to ensure the effective implementation of the compensation scheme for the victims.

45. There are many vulnerable areas in the evolving social space in the State, which continue to demand close attention. The growing tendency, especially in adolescent years, towards substance abuse, use of alcohol and cyber abuse, resulting in addiction to gore, violence, sex and other inappropriate behaviour, is a key area of concern; so also is the problem of missing and runaway children, many of whom are exposed to vulnerable circumstances in their immediate families. The safety, security and well being, both physical and mental, of children in schools, public transportation systems, hostels etc. also require to be strengthened. In this connection Government has already issued a child abuse protocol-Balasuraksha-to be implemented along with the project- Our responsibility to Children (ORC) and the School counselors to implement the legal framework for child protection. The implementation of this protocol would need to be effectively strengthened. There is also a growing tendency in many private and aided schools to avoid tackling these issues at the school level by giving a Transfer Certificate, instead of doing so through counselling, mentoring and other measures of positive disciplining, which often results in the child becoming a drop out or remaining out of school.

46. While awareness about the negative aspects of corporal punishment has been accepted to some extent at the school level, there is concern that it continues in many schools. There is also concern about the undue weight of the school bags that children are required to carry. Lack of awareness and the consequent stigma resulting in denial of rights, particularly in schools and hospitals, are also serious issues in the case of children affected or infected by HIV/AIDS and such others who are not part of the mainstream of society for a variety of reasons. Transgenders constitute another group in this segment, who are least understood and against whom there is significant discrimination, and consequent high levels of drop outs by 9th grade. The number of problems relating to mental health due to peer and family pressures, fear of failure, failed romances, propensity to risky behaviour and allied poor performance in school is increasing, and at times results in suicides, particularly among girls. Therefore, there is need to increase mental health and life skills programmes, and ensure
the availability of effective counselling services to children from these specific but varied in groups in schools, hostels and tutorials where they are exposed to the maximum amount of stress.

47. An area of concern in the country with reference to children is the problem of Child marriage. While this may not be perceived as serious an issue in Kerala as in other parts of the country, there are pockets in the State, including in tribal areas, where this practice continues to exist with social sanction. Recent figures, which show a very marginal increase in numbers, are a wake-up call to intensify the efforts to increase awareness levels about the ill effects and illegality of this practice. Its link with the drop out/out of school issue in certain pockets is a matter that needs to be addressed in a comprehensive manner, tackling all stakeholders, including those who help in formalising these arrangements that are against the law of the land.

48. The problems of child labour, begging, and street children are areas where the State has made significant strides as a result of concerted and coordinated action between various departments in Government, the Child Welfare Committees and the voluntary sector. However, the problem continues to exist as a result of migrant children being brought to the State from the northern and eastern States of India to work in the tourism and hospitality industry, many small scale manufacturing units and in households. There are also instances of children in the border areas of the State being used as labour, particularly in the agriculture sector, in the neighbouring states, despite vigilant and coordinated efforts of district administrations. Child labour, as it exists in the state today in the semi organised and unorganised sectors, is proving to be particularly difficult to tackle since it is difficult to identify its existence in places well hidden from public gaze. Awareness, sensitisation and strong action in cases, which come to notice, are necessary to bring about sensitisation and an attitudinal change in society to this issue.

49. Right to Participation: Kerala is perhaps the one State in the country that has made significant progress in creating platforms where children can participate and their voice reflected in the plans for development that affect their lives at the Panchayat, Municipality and Corporation levels. The state's model of BalaSabha, BalaSamathis, Grama Sabha and BalaPanchayat is a neighborhood network of children organized by Kudumbasree under LSGIs that seeks to ensure the participation of children in the planning process at the panchayat level. 37,426 BalaSabhas have been constituted up to September, 2013. These efforts, to give children opportunities to participate in the planning process at the grass root level and help create child friendly panchayats, need to be further strengthened and systematised.

50. Initiatives like the Student Police Cadet are avenues for the children to express their opinions on issues, and gain greater confidence in interfacing with the world. “Samvadams” or forums for dialogue are being held by many authorities and agencies across the State to allow children to articulate their views on issues dear to them. These views are then appropriately reflected in the plans and programmes of Government. Children have also been given access to
grievance redressal systems in schools through facilities like the Drop box scheme. In childcare institutions, their views are meticulously taken into consideration in the management of these Homes through the Children's Committees. All these avenues need to be further strengthened to ensure multilevel platforms for the child's voice to be reflected in matters that affect their lives.

51. Through KSPC, GOK, therefore, commits itself to the policy goals and objectives through improved and integrated inter-departmental planning, capacity development of key actors including justice and law enforcement officers, increased allocation of resources where existing allocations are insufficient, and establishment of a coordinated monitoring and evaluation system that will provide timely and updated information at local, district, and state levels. The Policy also recognizes that a one-shoe-fits-all policy is inadequate and GOK commits itself to finding solutions and approaches tailored to the specific needs and priorities of different children.

Scope and Objectives of State Policy
52. KSPC will apply to all government departments, all institutions receiving public funds, statutory bodies, and NGOs who come in direct or indirect contact with children, namely girls, boys, and transgenders.

53. KSPC aims to contribute to an India where every child has equal and equitable rights to live and develop her or his potential to the best of their abilities. Specifically, the Kerala Government shall contribute to this overall vision by providing within the State quality services to ensure a just and secure environment for all its children; opportunities for physical, mental, and cognitive development; prevention and protection from all forms of violence; and forums and processes for appropriate participation. Figure 1 states the results framework for KSPC, that is, the specific dimensions or results to which the Government and all other public and private actors must aim to achieve.

Guiding Principles for the Policy
54. The guiding principles of the State Policy for Children are based on the National Children's Policy of India (2013). These principles include the following:

- A rights-based approach, which recognizes that the rights to survival, protection, development and participation are inalienable and indivisible rights of every child, including differently abled children and children of migrant families;
- Equality of all girls, transgenders, and boys and no discrimination on grounds of religion, race, caste, sex, place of birth, class, language, and disability, social, economic or any other status;
- Best interest and wellbeing of children in all related decision making;
- Free and compulsory education and protection from all forms of physical, sexual and mental exploitation;
- Promotion of a safe, secure and protective family, school, social, physical environment for children;
• Institutionalization shall be the last option and the endeavour shall be to ensure family and community-based care arrangements including sponsorship, scholarship, kinship, foster care and adoption;
• Care and nurturing of all children as valued assets of the State.
• Geographical targeting to tailor interventions to the different needs and priorities of children from varied backgrounds.
• Strengthened inter-departmental convergence and close coordination with non-governmental and civil society organisations in Policy Implementation;
• Accountability and respect for the voice of the child will be ensured in all matters and decisions affecting them.

Strategic Approaches of the Policy
55. Based on the above guiding principles and taking into consideration the current status of the child in the State, the policy aims to address the issues that concern children through measures and activities stated in the following four tables, organized around the four dimensions of the results framework.

<table>
<thead>
<tr>
<th>Table 1: Right to Survival, Health and Basic Needs</th>
</tr>
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<tbody>
<tr>
<td>State Response in this Dimension</td>
</tr>
<tr>
<td>The State shall take all necessary measures to:</td>
</tr>
<tr>
<td>• Prevent disabilities, both mental and physical, through continued 100% coverage of all pregnant women for pre-natal, peri-natal and post-natal health and nutrition care of mother and child.</td>
</tr>
<tr>
<td>• Provide services in hospitals for early detection, treatment and management, including interventions to minimise and prevent further disabilities, the discrimination faced by children with disabilities (mental and physical), and provide services for rehabilitation and social support from the block level.</td>
</tr>
<tr>
<td>• Focus on providing facilities for the early neonatal care of children in rural and tribal areas to bring down infant mortality.</td>
</tr>
<tr>
<td>• Ensure coordinated action with hospitals, especially in urban areas, to improve the percentage of babies breastfed within one hour of birth.</td>
</tr>
<tr>
<td>• Promote appropriate baby feeding facilities, and creches in work places for working mothers in public, private and unorganized sector.</td>
</tr>
<tr>
<td>• Target areas which show slippage in the coverage of Universal Immunisation, especially Kasaragode and Malappuram.</td>
</tr>
<tr>
<td>• Give special emphasis to the nutritional status of pregnant women and children in tribal, coastal and other vulnerable areas to reduce the incidence of low birth weight babies and nutritional deficiencies. Ensure constant data based monitoring of vulnerable areas and communities.</td>
</tr>
<tr>
<td>• Reduce anaemia among children between the ages of 6 months to 59 months.</td>
</tr>
<tr>
<td>• Reduce the incidence of underweight children below the age of 5 years.</td>
</tr>
<tr>
<td>• Provide adolescents access, at the school level and hostels, to information, support, counselling, life skill training and such other services essential for their mental health and development, including information and support on appropriate life style and healthy choices and awareness of the ill effects of alcohol and substance abuse.</td>
</tr>
<tr>
<td>• Give special attention to address the hygiene needs of children of migrant labourers.</td>
</tr>
<tr>
<td>• Prevent HIV infections at birth and ensure infected children receive medical treatment, adequate nutrition and after-care, and are not discriminated against in accessing rights.</td>
</tr>
<tr>
<td>• Ensure the availability of toilet facilities and clean and potable drinking water for all households, including the coastal and tribal areas.</td>
</tr>
</tbody>
</table>
State Response In this Dimension
- Enforce safety standards for products and services designed for children.
- Provide adequate safeguards and measures against false claims relating to growth, development and nutrition.

Table 2: Right to Development

<table>
<thead>
<tr>
<th>State Response In this Dimension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promote affordable, accessible, and achievable quality education up to the secondary level for all children, particularly in remote, tribal and coastal areas, by ensuring the effective implementation of the RTE Act.</td>
</tr>
<tr>
<td>Ensure that basic facilities like clean toilets, clean drinking water and a clean and hygienic environment are available in all schools for girls, transgenders, and boys.</td>
</tr>
<tr>
<td>Improve basic infrastructural facilities of anganwadis, especially those in rented accommodation, and prepare guidelines for the facilities and play materials to be made available for ensuring the proper implementation of the Unified pre-primary curriculum.</td>
</tr>
<tr>
<td>Establish a regulatory framework for pre-primary education to ensure uniformity in the quality, content and facilities available in institutions providing such education.</td>
</tr>
<tr>
<td>Ensure that tribal children are provided pre-primary education in their mother tongue, and the content is prepared in reference to their culture.</td>
</tr>
<tr>
<td>Prevent drop outs and Out of School Children in remote, tribal and coastal areas.</td>
</tr>
<tr>
<td>Foster and support inter-sectoral networks and linkages to provide vocational training options; address age-specific and gender-specific issues relating to children's career choices comprehensively, through career counselling and vocational guidance.</td>
</tr>
<tr>
<td>Develop a strategy to ensure that all out of school children such as child labourers, migrant children, trafficked children, children of migrant labour, children of forest dwellers, street children, child victims of alcohol and substance abuse, children in areas of civil unrest, orphans, children with disability (mental and physical), children with chronic ailments, married children, children of sex workers, children of prisoners, etc. are tracked, rescued, rehabilitated, and have access to their right to education.</td>
</tr>
<tr>
<td>Address problems of discrimination of all forms in schools and foster equal opportunity, treatment and participation irrespective of place of birth, sex, religion, disability, language, region, caste, health, social, economic or any other status.</td>
</tr>
<tr>
<td>Prioritise education for disadvantaged groups and transgender children by creating an enabling environment through necessary legislative measures, policy and provisions.</td>
</tr>
<tr>
<td>Ensure that all processes of teaching and learning, including curriculum, are child friendly, and cater to all dimensions of a child's development (including that of transgender), particularly for children with disabilities, and ensure appropriate use of new technology.</td>
</tr>
<tr>
<td>Ensure formulation and practice of pedagogy that engages children, with special focus on mental health, from a social and gender-just, life skills and age appropriate perspective.</td>
</tr>
<tr>
<td>Provide access to ICT tools for equitable, inclusive and affordable education for all children, especially in remote, tribal and hard to reach areas.</td>
</tr>
<tr>
<td>Promote safe and enjoyable engagement of children's experiences with new technology in accordance with age and level of maturity, retaining respect for our culture and roots.</td>
</tr>
<tr>
<td>Review, develop and sustain age-specific initiatives, services and programmes for safe spaces for play, sports, recreation, leisure, cultural and scientific activities for children in neighbourhoods, schools and other institutions. LSGs will ensure that public spaces are used only for intended purposes and that all children have easy and safe access to them.</td>
</tr>
<tr>
<td>Enforce guidelines to ensure safety of children in sporting facilities made available to them.</td>
</tr>
<tr>
<td>Enable children to develop holistically, bringing out their aspirations, with focus on their strengths and empowering them to take control of their lives, bodies and behaviours.</td>
</tr>
<tr>
<td>Support, counsel, and empower parents to promote positive engagement of and teachers with children to impart discipline so as to provide them with a good learning experience.</td>
</tr>
<tr>
<td>Ensure that children's health is regularly monitored through the school health programme.</td>
</tr>
</tbody>
</table>
State Response in this Dimension

and that arrangements are made for the provision of health cards to every child and for the health and emergency care of all children. Special attention is to be given to tackling issues of poor nutrition, mental health, and obesity and lifestyle diseases among children.

- Ensure that physical education hours in schools are strictly enforced for girls, transgenders, and boys as part of the syllabus.
- Provide services to children with special needs in regular schools and ensure that these are inclusive and have all facilities such as adequate number of specifically trained teachers and special educators, appropriate pedagogy and education material, barrier-free access for mobility, functional toilets and co-curricular activities towards the development of the child's fullest potential, autonomy, sense of dignity and self worth.
- Introduce a regulatory mechanism for ensuring quality, safety and transparency in the services that seek to provide various therapies to children with intellectual disabilities.
- Increase the number of outlets through which the State will provide support facilities to the intellectually disabled in each district through LSGs from the block level.
- Promote engagement of families and communities with schools for the all round development of children, with emphasis on good health, hygiene and sanitation practices, including sensitization on ill-effects of alcohol and substance abuse.
- Provide parenting classes for families, particularly those that are identified as vulnerable, to tackle issues of abuse, neglect and runaway children; also create greater awareness against gender stereotyping of girls and about transgender children.
- Facilitate concerted efforts by LSGs, non-governmental and community based organisations to map gaps in availability of educational services, especially in backward child labour intensive areas, areas of civil unrest, and in situations of emergency.
- Identify, encourage and assist gifted children, particularly those belonging to the disadvantaged groups, through special programmes.
- Provide and promote creche and day care facilities for children of working mothers, mothers belonging to poor families, ailing mothers and single parents.
- Ensure the optimum utilisation of provisions given to LSGs for child related activities are specifically used for schemes that are for the benefit of children.

Table 3: Right to Protection from Abuse, Exploitation, and Neglect

<table>
<thead>
<tr>
<th>State Response in this Dimension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promote and strengthen legislative, administrative and institutional redressal mechanisms at the State level for the protection of child rights, including setting up Special Courts in Thiruvananthapuram and Kozhikode as in Ernakulam.</td>
</tr>
<tr>
<td>Develop effective and accessible grievance redressal mechanisms at the programme level in schools, hostels etc. for addressing grievances at the local level.</td>
</tr>
<tr>
<td>Protect children from all forms of violence and abuse, harm, neglect, stigma, discrimination, exploitation including economic exploitation and sexual exploitation, abandonment, separation, abduction, sale or trafficking for any purpose or in any form, pornography, alcohol and substance abuse, or any other activity that takes undue advantage of them, or harms their personhood or affects their development by implementing appropriate programmes to create better awareness, for counselling and mentoring those displaying deviant behaviour, by creating mechanisms for monitoring vulnerable families and areas at the local level, and by taking strict and prompt action when such incidents are reported.</td>
</tr>
<tr>
<td>Discourage corporal punishment or actions that abuse or cause mental anguish to a child.</td>
</tr>
<tr>
<td>Ensure effective and prompt action against those indulging in child begging, child marriage, child labour, etc., which constitute forms of abuse and exploitation.</td>
</tr>
<tr>
<td>Effectively enforce and implement all laws stated in Annex II (including any new laws that may be passed) and enhance the effectiveness of ICDS and ICPS Programs.</td>
</tr>
<tr>
<td>Bring all child care institutions under the Juvenile Justice Act 2000 and close all others.</td>
</tr>
</tbody>
</table>
State Response in this Dimension

- Ensure availability of basic facilities as well as health and safety measures in hostels and homes for children for various forms of study through a regulatory mechanism.
- Provide every district with at least one Shelter and Children’s Home for boys and girls and one Specialised Adoption Agency.
- Strengthen existing facilities for counselling, skill training and life skill training in various Homes, place of safety etc. to achieve the goal of rehabilitating these children effectively including partnerships with voluntary agencies and private sector.
- Ensure services for care and protection to children affected by migration, displacement, communal or sectarian violence, civil unrest, disasters and calamities, street children, children of sex workers, children forced into commercial sexual exploitation, abused and exploited children, children forced into begging, children in conflict and contact with the law, children in situations of labour, children of prisoners, children infected/affected by HIV/AIDS, children with disabilities, children affected by alcohol and substance abuse and children from any other socially excluded group, children affected by armed conflict and any other category of children requiring such care and protection.
- Ensure that a Child Safety Policy is strictly implemented in schools, buses, hostels etc.
- Ensure action to regulate and monitor inter-state and inter-country transfer of children by laying down a protocol for this purpose in consultation with all the related stakeholders.
- Strengthen the tracking system for missing children to make it more responsive to the urgency of the need.
- Ensure coordinated efforts of all regulatory authorities and other stakeholders for effective prevention of cyber crimes, misuse of cell phones and internet against the interests of child.
- Encourage adoption, foster care and sponsorship of children using transparent norms.
- Given the importance of counselling for children, counselling facilities shall be provided in all government and aided schools as well as in all private schools.
- Develop guidelines for the media that shall promote the privacy, dignity and worth of every child, provide material that aims to promote the social, spiritual and moral well being of children, as well as their physical and mental health, and protect them from information and material that is injurious to their well being.

Table 4: Right to Participation

<table>
<thead>
<tr>
<th>State Response In this Dimension</th>
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<tbody>
<tr>
<td>The State shall promote and strengthen respect for the views of the child, especially those of the girl child, children with disabilities and of children from minority groups or marginalised communities, within the family; community; schools and institutions; different levels of governance; as well as in judicial and administrative proceedings that concern them. Through the Balasabhas, Bala Samithis and Bala Panchayats and gram sabhas, which will be extended to cover all panchayats, they will be encouraged to actively participate and contribute to the planning and development process at the grassroots level.</td>
</tr>
<tr>
<td>The State shall engage all stakeholders in developing mechanisms for children to share their grievances without fear, in all settings, especially care homes and institutions, by strictly implementing mechanisms available for this purpose in the Juvenile Justice Act.</td>
</tr>
<tr>
<td>The State shall monitor children’s participation through appropriate indicators developed within the context of “Child friendly Panchayats”; design different models of child participation; and undertake research and documentation of best practices.</td>
</tr>
</tbody>
</table>

Policy Implementation

56. SJD will be the nodal agency in the state, responsible for overseeing and coordinating the implementation of the Child Policy. A State Nodal Officer shall be appointed to facilitate effective implementation of the KSPC. The officer’s responsibilities will include interdepartmental and interagency convergence and coordination for planning, implementation, and monitoring necessary for
effective implementation. The State Nodal Officer will also be responsible for ensuring the effective and efficient scaling of the Policy within the State. District level coordination and action groups will also be established and will be responsible for policy implementation and reporting.

57. Policy implementation will be undertaken in a participatory manner with the support of different governmental and non-governmental stakeholders. Transparency and accountability will be introduced through clear responsibilities and systematic monitoring.

58. The child will play an important and appropriate role in policy implementation. Primary stakeholders would include the different departments responsible for Health, Education, Social Justice, Local Self Government, SC and ST Development and Home. The Department of Economics and Statistics will also play an active and important role in gathering and disseminating sex-disaggregated data on the child in Kerala.

59. Policy implementation will be closely coordinated with the Integrated Child Protection Scheme (ICPS) launched by the Ministry of Women and Child Development, Government of India, for which the Department of Social Justice is the key implementing agency. Currently, this involves the LSGIs, the District Child Protection Units (DCPUs), as well as agencies such as Childline, Mahila Samakhyas and Kudumbasree and other accredited non-governmental organisations (NGOs) that lend support for providing care and protection. Both vertical and horizontal linkages will be strengthened to ensure convergence in service provision.

60. Preparation of State Plan of Action (SPAC). SJD, in consultation with all related Departments, other development partners, and civil society representatives, will formulate a SPAC for implementation of the Policy. Similar plans at the district and local levels will also be formulated within the framework of the SPAC to ensure effective action on this Policy. The State and District Coordination and Action Groups will monitor the progress of implementation under these Plans.

Monitoring of Policy Implementation & Results

61. A State Coordination and Action Group (SCAG) for Children under the Minister in charge of the SJD will be constituted with representatives of other relevant departments. SCAG will oversee and monitor policy implementation and the results thereof. KSCPCR will ensure that the principles of this policy are respected in formulating laws, policies and programmes affecting children.

62. Absence of sufficient data on children is a constraint to policy implementation and programme development. A central monitoring system will be established at the state level under the ICPS Program for collection of all data related to children. Data will be collected in the different DCPUs in a manner that it can be aggregated to the state level. Existing data collection systems on child related matters in all stakeholder departments and authorities would be coordinated and strengthened. Systematic and regular reviews and data analysis
will be undertaken to have an evidence-based approach to the formulation of policies and strategies.

63. Figure 1 provides a results-based framework for monitoring and evaluating the results of the policy. Separate parameters or scales for each dimension of the policy will be developed during the preparation of the SPAC. Table 5 provides some sample areas for assessment.

64. A comprehensive review of the KSPC will be taken up once in five years with active involvement of children and youth, parents, NGOs, and other interested and relevant bodies. Periodical social audits may be conducted by children’s groups representing all districts of the State on selected aspects of policy implementation and its impact on improving the status of the child in Kerala.

<table>
<thead>
<tr>
<th>Table 5: Desired Outcomes and Sample Areas of Assessment</th>
</tr>
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<tbody>
<tr>
<td><strong>Outcomes</strong></td>
</tr>
<tr>
<td>Outcome One: All children are in a caring and nurturing environment that provides for their basic health, needs, and nutrition</td>
</tr>
<tr>
<td>• Right to Survival</td>
</tr>
<tr>
<td>• Right to Good Health &amp; Nutrition</td>
</tr>
<tr>
<td>Outcome Two: Full and effective development of children’s capabilities through effective promotion of their rights:</td>
</tr>
<tr>
<td>• Right to Quality Education</td>
</tr>
<tr>
<td>• Right to Relevant Skills and Competencies</td>
</tr>
<tr>
<td>• Special care for children with disabilities or challenges</td>
</tr>
<tr>
<td>Outcome Three: Safe and just environment through appropriate protective measures for all children</td>
</tr>
<tr>
<td>• A legal and regulatory framework that protects their rights and environment</td>
</tr>
<tr>
<td>• Protection from abuse, neglect, and exploitation for all children</td>
</tr>
<tr>
<td>• Essential standards of care for children in institutional care and protection</td>
</tr>
<tr>
<td>Outcome Four: Informed participation in decisions that affect children based on age and stage of development</td>
</tr>
<tr>
<td>• Children’s views are heard in formulation of policies, schemes, and programs that affect them</td>
</tr>
<tr>
<td>• Number of functional Balasabhas (both rural and urban LSGI with participation of poor and non-poor children - both boys and girls)</td>
</tr>
<tr>
<td>• Number of functional Children’s Committees in schools, community, and Children’s Homes</td>
</tr>
<tr>
<td>• Timely inputs to Central Government reporting with participation of children</td>
</tr>
<tr>
<td>• Number of special gram sabhas for children with number of participating girls and boys, including children with special needs</td>
</tr>
</tbody>
</table>

22
Resources for Policy Implementation
65. The State and Local Self-Governments will ensure sufficient resources for the effective implementation of this policy. Child budgeting will track allocation and utilisation of resources and their impact on outcomes for children with regard to budgets and expenditures on children by all related Departments.

Capacity Development, Partnerships and Advocacy
66. Capacity Development: The Government, with the help of the State Child Protection Unit and other stakeholders in the areas of health, education, enforcement, judiciary etc. shall organize regular training and capacity development of all personnel involved in the implementation of the various Acts and Rules relevant to the rights of children and of this policy. SJD will organize a Nodal Expert Group to organize different training programs for functionaries of the juvenile justice administration.

67. Partnership: Forging partnerships with other agencies working in the area of child rights will be critical in achieving policy objectives. These will include collaboration between Government agencies as well as with non-government agencies and other international development partners such as UNICEF, WHO, etc. The state will also endeavour to establish strong partnerships with civil society, namely parents and other groups working for the well being of children, to enhance development effectiveness and sustainability.

68. Advocacy: The State will make all efforts to ensure that the public is aware of the Child Policy and its cardinal principles. Appropriate methods and instruments will be used to reach children as well as communities, particularly in tribal and coastal areas, where a large proportion of the vulnerable children reside.
Annex I: Feedback from District Consultation Sessions with Children

1. Consultation Meetings were held with children in all 14 districts on 21 October 2015. Approximately 500 girls and boys from varied schools and backgrounds participated in the feedback process. Their views are summarized below:

Prevention Abuse, Neglect, and Exploitation
a. Drugs should not be sold within a 1000 meter radius of schools (Some children also said that there should be a complete ban of smoking, drinking, and sale of drugs)
b. Encourage systems to monitor child abuse in schools including private schools
c. Activate complaint boxes and practices in all schools as well as enable a reliable system through which boys can also complain of abuse
d. Enforce laws to punish encouraging substance abuse among children and child labour
e. Strengthen implementation of laws against sexual harassment and violence as well as distribution of drugs
f. Encourage healthy use of social media by children
g. Raise awareness of all in authority (particularly parents and teachers) to prevent sexual, physical, and mental violence against children
h. Special courts exclusively for children should be established to ensure timely justice
i. Strengthen ways and means of preventing child marriages
j. Counsellors should be available in each school and confidentiality should be strictly maintained
k. Train media on the need to ensure confidentiality in cases of children
l. Ensure girl friendly facilities and infrastructure in schools and institutional homes
m. Ensure special education for children with disabilities
n. Ensure that public transport provides a safe space for children
o. Ban pornographic sites
p. Increase awareness of children on statutory bodies for child protection

Participation In Decisions That Affect Child Development
a. Establish committees of children to deal with problems and needs related to children
b. Include participation of children in decisions related to extra-curricular activities and establishment of codes of student behaviour
c. Include a student from each class in the PTA to represent student views
d. Ensure processes for children in institutional homes to share experiences at district and state levels
e. Ensure participation of children in preparation of education strategy or other areas that affect children in all departments and Local Self Governments
f. Ensure regular discussion at panchayat level and in Gram Sabhas on children’s issues
g. Raise awareness in schools of rights of child through plays and other innovative tools
h. Incentivise schools to ensure that schools clubs are activated, and encourage the active participation of children in extra-curricular activities
i. Teachers should be trained in child psychology
j. Mistreatment of students on private buses should be addressed & reduced
k. Girls, in particular should have the freedom to dress as they think fit
l. Ensure equal participation in family decision making
m. Encourage and facilitate parents to spend quality time with children, permit children to express their opinions and suggestions

24
Development of Children To Achieve Their Full Potential
a. Raise age to receive UPE
b. Give equal importance to both education and sports and ensure leisure time for students
c. Both boys and girls should have access to equal space for sports in schools and public spaces
d. Distribute educational benefits on grounds of economic disadvantage
e. Bus concession should be provided on all days because several activities and special classes are conducted on holidays
f. Ensure all tribal children attend schools regularly, enhance the relevance of their education, and increase their access to schools by locating them near their homes
g. Ensure that children are promoted based on appropriate performance
h. Encourage policies and programs that strengthen children to think on their own feet and to understand the difference between good and bad, and strengthen families
i. Ensure appropriate infrastructure and facilities in child care institutions as well as strengthen capacity of their caretakers
j. Ensure timely availability of text books and reduce weight of school bags
k. Utilize media as a tool to change mind sets of society
l. Ensure good quality libraries in schools
m. Provide career guidance in all high schools and higher secondary schools
n. Introduce practice value studies in the education curriculum relevant to female life
o. Raise awareness of parents in order to improve family environment for the physical, mental, intellectual, and social development of children
p. School timings should be rescheduled between 9:30 and 3:30 pm (opposite view also expressed that periods should be meaningfully extended). Also opined that regular classes should be conducted Monday to Friday, and that on Saturdays extracurricular activities such as karate, yoga, art, drama should be scheduled
q. Issues of Transgender to be considered in the Policy
r. Exams should test knowledge of children and not knowledge of those who set questions

Strengthened Survival, Health & Basic Needs
a. Awareness programs in tribal areas on the importance of nutrition in reducing infant and mortality, in particular female children
b. Establish hospitals of one-stop health needs cell in tribal, coastal, and hilly areas
c. Improve quality of basic services such as water and sanitation in public spaces
d. Nutritious and pesticide-free school lunches & breakfast should be provided for children up to 12 standard, particularly those from SC/ST communities
e. Construct sufficient toilet facilities in schools
f. Ensure "sughatwam" room in all schools
g. Establish special schools (attached to regular schools) for challenged children and assign a teacher per 5 students in such schools
h. Establish counsellors or child welfare officers in pre- and post- metric hostels
i. Ensure universal sterilization in a timely manner
j. Provide 2 year maternity leave for mothers
k. Ensure proper attention to health in each school through presence of nurse or doctor
l. Day-care Centres and crèches for parents who work outside their homes
### Annex II: Regulatory Framework Applicable to The Child in Kerala

|--------------------------------------------------|---------------------------------|----------------------------------|
| • Right To Free And Compulsory Elementary Education For All Children 6-14 Year Age Group (Article 21 A)  
• Empowers the State to make special provisions for children (Article 15(3))  
• Right To Be Protected From Any Hazardous Employment Till The Age Of 14 Years (Article 24)  
• Right To Be Protected From Being Abused And Forced By Economic Necessity To Enter Occupations Unsui ted To Their Age Or Strength (Article 39(E))  
• Right To Equal Opportunities And Facilities To Develop In A Healthy Manner And In Conditions Of Freedom And Dignity And Guaranteed Protection Of Childhood And Youth Against Exploitation And Against Moral And Material Abandonment (Article 39 (F))  
• Right To Early Childhood Care And Education To All Children Until They Complete The Age Of Six Years (Article 45)  
• The parent or the guardian to provide opportunities for education to his child or as case may be ward between the age of 6-14 yrs (Article 51A clause (k) and (l)) | • The Prohibition of Child Marriage Act, 2006  
• The Child Labour (Prohibition & Regulation) Act, 1986  
• The Guardians And Wards Act, 1890  
• The Hindu Adoption And Maintenance Act, 1956  
• The Orphanage and other charitable Home (Supervision and Control) Act, 1960  
• Trivancore Beggary Prevention Act  
• Juvenile Justice (Care and Protection) Act 2000  
• The Protection of Children from Sexual Offences Act 2012 (POCSO)  
• The Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 2002  
• The Medical Termination Of Pregnancy Act, 1971 | • Right To Equality (Article 14)  
• Right Against Discrimination (Article 15)  
• Right To Personal Liberty And Due Process Of Law (Article 21)  
• Right To Being Protected From Being Trafficked And Forced Into Bonded Labour (Article 23)  
• Right Of Minorities For Protection Of Their Interests (Article 29)  
• Right Of Weaker Sections Of The People To Be Protected From Social Injustice And All Forms Of Exploitation (Article 46)  
• Right To Nutrition And Standard Of Living And Improved Public Health (Article 47) |