

COMPENDIUM ON PSYCHOSOCIAL INTERVENTIONS AMONG CHILDREN IN CONFLICT WITH LAW

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Compendium for Psychosocial Intervention among Children in Conflict with Law

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ABBREVIATIONS

| | | |
|---------------|---|--|
| CBO | - | Community Based Organisation |
| CCL | - | Children in Conflict with Law |
| CNCP | - | Child in Need of Care and Protection |
| CWC | - | Child Welfare Committee |
| CWPO | - | Child Welfare Police Officer |
| DCPO | - | District Child Protection Officer |
| DCPU | - | District Child Protection Unit |
| DLSA | - | District Legal Services Authority |
| DMHP | - | District Mental Health Program |
| FIR | - | First Investigation Report |
| GD Entry | - | General Diary Entry |
| ICP | - | Individual Care Plan |
| ICPS | - | Integrated Child Protection Scheme |
| JJ Act (2015) | - | Juvenile Justice Act (2015) |
| JJB | - | Juvenile Justice Board |
| LCPO | - | Legal Cum Probation Officer |
| LSE | - | Life Skills Education |
| MIS | - | Monitoring and Information System |
| NGO | - | Non Governmental Organaisations |
| NIMHANS | - | National Institute of Mental health and Neuro Sciences |
| OH | - | Observation Home |
| PSC | - | Psychosocial Care |
| SCPS | - | State Child Protection Society |
| SJPO | - | Special Juvenile Police Officer |
| SJPU | - | Special Juvenile Police Unit |
| WCD | - | Women and Child Development |
| Counsellor | - | OH/CH/DCPU counselor |

FOREWORD

Government of Kerala is committed to the cause of children and has initiated innovative programs through the department of women and child development in the state to ensure holistic care and protection and ensure healthy development of children. KAVAL is one such program initiated by the department of women and child to ensure holistic care and protection for children in conflict with law in the state. The department developed this program with technical support from NIMHANS, the premier institute of mental health and neuro sciences in India to provide psychosocial care for children in conflict with law and reintegrating them back in to society.

The program was initiated in the state in 2015 as a pilot model in three districts. A model of intervention was developed by studying the existing system in the state and was piloted in three districts during 2015-2016. The model was finalized and later expanded to the other 6 districts in the second phase from 2017-2018. The program will be expanded to the entire state by 2019. Psychosocial care is a holistic care process involving interdisciplinary multisectoral approach to ensure varied nature of services for children in conflict with law. Department of Women And Child Development converged various other departments such as Judiciary, Police, Education, Health and other program and schemes of state and central government to ensure care and support services for children.

Currently as a child comes in to conflict with law the child goes through a systematic process psychosocial assessment followed by developing an individual care plan that will be implemented with the support of NGOs through community based monitoring and support by the NGO. Children will be provided with services such as individual counseling, family level intervention, educational, vocational and skill training support, referral for health care, economic support etc. Juvenile Justice Board in each district review the progress of the program and that of each child to ensure the functioning of the program further the Department of women and child Development conducted quarterly reviews at state level to ensure the functioning of the program well in the state.

The efforts taken by the KAVAL team consisting of JJB, SJPU, DCPU TEAM, NGO and others in the health, education and welfare sector along with the NIMHANS technical team is greatly appreciated. The program has brought in in positive change in the life of children in conflict with law.

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PREFACE

The Juvenile Justice (Care and Protection of Children) Act - 2015 brought in some major changes in Juvenile Justice System particularly in cases concerning adjudication of 'heinous' offences by children of age 16-18 years. The act gives ample opportunity to ensure care and protection to children ensuring their needs. The act further gives opportunity for the holistic care of children and social reintegration of children through child friendly approaches.

Government of Kerala initiative through the Department of Women and Child Development envisages holistic care and protection of children through psychosocial interventions. The state has developed a system for social reintegration of children in conflict with law. Psychosocial care is a systematic approach through structured activities to cater to the individual needs of the child. To ensure holistic care and protection for the child, there is a need of multiple stakeholders working together through multi-disciplinary intersectoral approach in reaching out to the children in conflict with law. To ensure the smooth functioning of the multidisciplinary team there is a need to define the roles and responsibilities of each stakeholder.

The 'compendium on Psychosocial Interventions for Children in Conflict with Law' provided guidelines on implementation of psychosocial program with children in conflict with law. The Compendium is divided in to four chapters. Chapter one explains the psychosocial problems of children in conflict with law. The provisions under J. J. Act (2015) to support the children and outline for the psychosocial care program. The second chapter describes the process of psychosocial interventions and focuses on the stages and process of psychosocial implementation and management of individual cases through multidisciplinary approach. The third chapter focuses on the roles and responsibilities of each stakeholder in the process of psychosocial interventions and the fourth chapter clarifies the possible doubts a child or a family can have as they come in to the Juvenile Justice System. This Compendium is developed based on the experiences of multiple stakeholders working with children in conflict with law since 2015.

We hope that this material will be useful in providing basic knowledge about psychosocial interventions in Juvenile Justice (Care and Protection of Children) Act 2015.

PROCESS OF DEVELOPING COMPENDIUM

KAVAL is an innovative program implemented by Government of Kerala through the Department of Women and Child Development with technical support from Dept. of Psychiatric Social Work, NIMHANS, Bengaluru. A systematic and structured methodology is developed in the state to support children in conflict with law thereby reducing the potential danger of being labelled and isolated from society. This reduces the chances of the child being absorbed to antisocial gangs and causing potential harm to society. Identifying children at high risk at a young age and supporting them by providing holistic care through psychosocial intervention would help children to keep away from un-lawful activities. A multidisciplinary inter-sectoral approach through psychosocial intervention is needed to ensure holistic care and support for children. KAVAL is a community based approach to reach out to children in bail and providing psychosocial interventions through trained social work professionals in NGOs by entering to a working partnership with the Non-Governmental organisations.

This compendium is a compilation of process of community based psychosocial care program developed for Children In Conflict with Law in Kerala. The process was developed with the support of the technical validators consisting of the district child protection officers and legal cum probation officers.

The process was developed and implemented, with support from Juvenile Justice Board, Special Juvenile Police Unit, administrative and technical guidance from District child protection Unit through Non-Governmental Organisations. The process was reviewed in the quarterly meetings conducted and compiling the experiences of NGOs through regular reporting. Appropriate changes were made in the process developed as per the feedback and review reports from with field. carried out by the peer validators from DCPO and NGO. The content thus developed was peer reviewed by the technical validators and necessary corrections were made. This was followed by the final peer review of peer validators from ICPS and NGO. The compendium gives the process to be followed in community based psychosocial care for children in conflict with law, as well as, roles and responsibilities of stakeholder who forms the multidisciplinary team. The queries that came up as well as the clarification of the queries that surfaced during the process are also compiled. The material can be used by the Kaval team as a guide in the process of social rehabilitation and reintegration of Children in Conflict with Law

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CHAPTER-1

Introduction to Psychosocial Interventions for Children in Conflict With Law

Kerala has more than 100 years of history in juvenile justice care with commencement of a home for the children at Trivandrum by the rulers of erstwhile princely state of Travancore in 1894. In 1876 a Reformatory School Act was enacted in India. Enactment of the Children's Act in Madras, Cochin and Travancore led to a new beginning in the field of Juvenile Justice System, Kerala. Kerala Children's Act was enacted in 1972 under the charge of Prisons Department. In 1986 Government of India passed a Central Juvenile Justice Act. India ratified the United Nations Child Rights Convention in 1992; the Government of India came up with Juvenile Justice (Care & Protection of Children) Act 2000 which was amended in 2006 and in 2011. A new act was enacted in India in 2015.

Women and Child Development Department, Government of Kerala is committed to the cause of these children and aims at providing holistic care and protection. Towards this the state has joined hands with National Institute of Mental Health and Neuro Sciences (Bengaluru) to develop a state model for provision of psychosocial care and social reintegration of children in conflict with law. The program aims to build up capacity of stakeholders through skill training programs to provide psychosocial care for Children in conflict with law. Community based approach to reach out to the children in bail is adopted towards providing psychosocial interventions through trained professionals in NGOs.

Children in difficult circumstances cover a broad range of problems that induces multiple stresses in children. Various problems experienced by these children include poverty, scholastic backwardness, abuses of various nature, faulty family environment, violence at home, substance use, stressful events in life, child labor, etc. The problems children are facing are multiple and induce stress dramatically which is beyond the capacity of the child to handle. Children in difficult circumstances lack adult care and protection that further pushes them away from the main stream of the society. Due to these conditions children may show various unacceptable behaviors including coming in to conflict with law. The biopsychosocial needs that are essential for their physical, psychological, cognitive and social development remains unmet that further affects their development. This leads to various behavioral and emotional problems in children. Further the faulty family environment followed by unsupportive school and society further adds to the poor socialization of the child where the child learns certain behaviors that are unacceptable in the society. Demonstrating these behaviors will lead to poor socialization of the child where the child is kept away from the main stream society. The child receives acceptance from those who are involved in antisocial activities in the society which results in the child involving in activities such as substance use, drug peddling, involvement in gangs etc. The interplay of various traumatic events in life and the rejection the child faces will affect the child where he/she deviates from main stream of society and involve in unlawful activities.

Psychosocial care program developed towards social reintegration of child in conflict with law is developed as per the Juvenile Justice (Care and Protection of Children) Act 2015 to ensure the care and protection of children by catering to their basic needs through proper care and protection, development, treatment and social reintegration of child by adopting child friendly approaches in the best interest of the child. The 16 general principles directed to be followed as per the act formed the guidelines for the implementation of psychosocial care program:

- I. Principle of presumption of innocence
- II. Principle of dignity and worth
- III. Principle of participation
- IV. Principle of best interest
- V. Principle of family responsibility
- VI. Principle of safety
- VII. Positive measures
- VIII. Principle of non-stigmatizing semantics
- IX. Principle of non-waiver of rights.
- X. Principle of equality and non-discrimination
- XI. Principle of right to privacy and confidentiality
- XII. Principle of institutionalization as a measure of last resort
- XIII. Principle of repatriation and restoration
- XIV. Principle of fresh start
- XV. Principle of diversion
- XVI. Principles of natural justices

Chapter IV procedures in relation to children in conflict with law section 18 sub section

(1) and (2) gives provision for psychosocial interventions. The section explains in the orders regarding the child found to be in conflict with law that if the child has committed a petty offence, serious offence or a child under 18 has committed heinous offence, then notwithstanding anything contrary contained in any other law for the time being in force, and based on the nature of offence, specific need for supervision or intervention, circumstances as brought out in the social investigation report and past conduct of the child, the board may if thinks fit:

Provision under sec 18 sub section (1) clause (a) to (g)

- I. Allow child to go home after advice or admonition by following appropriate inquiry and counseling to child, parent and guardian.
- II. Direct the child to participate in counseling and similar activities.
- III. Order child to perform community service under supervision of organization, institution, specified person/s identified by the board.
- IV. Direct the child to be released under probation of good conduct and place under the care of any

parent, guardian or fit person for the good behavior and child's wellbeing for any period not exceeding three years.

- v. Send child to special home for a period not exceeding three years for providing reformatory services including education, skill development, counseling, behavior modification therapy and psychiatric support during the period of stay in the special home. If the conduct or behavior of child is not in interest of the child or other children, the board can send the child to place of safety.

Provision under sec 18 sub section (2)

In addition to the order passed under sec 18 sub section (1) clause (a) to (g) the board may in addition pass orders to

- I. Attend school; or
- II. Attend a vocational training centre; or
- III. Attend a therapeutic centre; or
- IV. Prohibit the child from visiting, frequenting or appearing at specified place; or
- v. Undergo de-addiction program

The model rules 2016 further provides following provisions and explanations

Chapter 1 Preliminary

Individual care plan: A comprehensive care plan based on age, gender and specific needs of the child prepared in consultation with the child to restore child's self-esteem, dignity and self-worth and nurture him/her in to a responsible citizen by addressing.

- a) Health and nutrition needs including any special needs,
- b) Emotional and psychological needs,
- c) Educational and training needs,
- d) Leisure creativity and play protection from all kinds of abuse, neglect and maltreatment,
- e) Restoration and follow up,
- f) Social mainstreaming,
- g) Life skill training.

Chapter II Juvenile Justice Board sec- 10

- (ii) Rehabilitation card in form 14 to CCL to monitor the progress made by the child
- (iii) Re-admission to school
- (x) Deploy if necessary the service of students, volunteers or non-governmental organization volunteers for Para-legal and other tasks such as contacting the parents of child in conflict with law and collecting relevant social and rehabilitative information about the child.

Chapter III

- (3) iv. Provide appropriate medical assistance, assistance of interpreter or a special educator or any other assistance which the child may require as the case may be.

- (3) vii. Inform the District Legal Services Authority for providing free legal aid to the child
- (7) iii. Releasing the child in the supervision or custody of fit persons or fit institutions or probation offices as the case may be, through an order in form 3, with a direction to appear or present a child for an inquiry on the next date

Form 7, Form 8 and Form 14 are followed and adapted as per the required services for the child in the program.

Psychosocial care program

Each child who comes in to conflict with law undergoes a systematic and step by step process of intervention that involves organising, coordinating the formal and informal activities and services to ensure optimum level of services to the child. Towards providing intensive and comprehensive care; a multidisciplinary intersectoral approach to support the child in the community by involving varied professionals covering range of services such as legal and law enforcement, crisis intervention, health (mental and physical), deaddiction, economic support, education support, family support, vocational and skill training & employment, institutional services and social welfare support are developed. The multidisciplinary team will be led by the Juvenile Justice Board. Other sectors involved in psychosocial care for children in conflict with law are District Child Protection Unit, Police (SJPU), Education, Health (Physical health and mental health), Local Self-Government Bodies and Non-Government Organizations. The interdisciplinary team consists of legal officers, police, social workers, psychiatrists, psychologists, other health professionals, administrators, teachers and vocational/skills trainers.

The psychosocial care program for children in conflict with law is implemented at four levels such as: Individual, family, school/ education and community. The programs envisaged for supporting children are preventive, curative and promotive in nature. The preventive programs at community level will be carried out by NGO/CBO, schools and local self-government bodies to ensure better social environment to prevent adverse effect on children, as well as support children in conflict with law in the community through support services from government and nongovernmental organization. The curative program for children in conflict with law consists of standardized activities conducted by the trained social workers. Children who manifest higher level of behavioral problems need to be referred to mental health professionals by associating with the system in the state such as DMHP. The promotive programs are carried out to create a better family environment through family enrichment programs to ensure conducive family environment for the child. These interventions will ensure better environment for the development of the child ensuring social mainstreaming of children in conflict with law there by developing human resources that will contribute to the growth of the nation.

CHAPTER-2

Process of Psychosocial Interventions

Psychosocial interventions follow a definite pattern and need to be implemented systematically in stages. Each stakeholder has specific duties to be performed as per their profession. This chapter outlines the process of psychosocial interventions from the time the child enters the juvenile justice system till he/she exits the system.

Process of Psychosocial Intervention

1. As the child comes in to conflict with law, the child may appear before JJB/ the Special Juvenile Police Officer/Child Welfare Police Officer shall produce the child before JJB within 24 hours from the time of apprehension.
2. JJB shall refer the child to the counsellor (PH/CH/DCPU counsellor)
3. The JJB counsellor shall
 - a) Provide psychosocial first aid for children in conflict with law as they come to JJB for the first time.
 - b) Educate parent and CCL on JJ System and psychosocial intervention for children
 - c) Conduct preliminary psychosocial assessment of CCL within 5 days the child is produced before JJB
 - d) Coordinate with LCPO to develop primary individual care plan for each CCL
4. Legal Cum Probation officer shall
 - a) Prepare Social Investigation Report within 15 days
 - b) On the basis of the SIR report and report of the psychosocial assessment by OH/JJB counselor, a primary ICP will be prepared suggesting the needed psychosocial interventions to be provided for the CCL.
 - c) This will be presented to JJB by the LCPO and recommendations will be made to JJB to refer the case to concerned NGO in charge of KAVAL program in the district
 - d) The LCPO will coordinate with DCPO in referring cases to approved NGO within five days from the date of order of JJB or 20 days the child is apprehended.
5. The DCPO shall
 - a) Confirm and refer the case of the child to the concerned NGO
6. After receiving the cases of children from JJB through DCPO, the NGO's shall perform the following duties

- a) Report to DCPO on receipt of cases and initiation of psychosocial interventions.
 - b) Inform to concerned police station where the case of the child is registered regarding initiation of intervention.(Ref: appendices 6&7)
 - c) Conduct family visit for each child for intervention.
 - d) Provide individual counselling repeatedly for children in conflict with law.
 - e) Repeatedly conduct group work with children in conflict with law.
 - f) Provide referral services for children in conflict with law by informing JJB through DCPO for support services such as medical help, mental health services, deaddiction services, educational support, economic support, family support services and linkages with other social welfare programs and assist them.
 - g) Carry out interventions at school and in community.
 - h) Conduct life skills education programs for children in conflict with law.
 - i) Network with governmental and non-governmental organisations to support children and their families in availing benefits through government program.
7. Reporting
- a) The NGO shall do weekly reporting in the prescribed e-format in the MIS system.
 - b) The LCPO and OH/JJB counselor shall check the reports and give their feedback to the NGO.
8. Reporting of Individual Care Plan
- a) Preparation of Individual care plan for the CCL shall to be initiated by the LCPO and OH/ JJB counselor in the prescribed e-format in MIS system after reporting to JJB.
 - b) The DCPO shall approve the ICP and transfer the case to NGO.
 - c) The NGO shall develop further on the ICP for each child on intervention planned, provided and changes observed.
9. Regular Meetings for the functioning of the program
- a) The NGO shall conduct weekly meetings in their office to plan weekly activities and report the previous week activity.
10. NGO's shall conduct monthly meetings to review the activities and plan for the month ahead on every 5th working day The NGO shall prepare a quarterly report about the intervention of each child and submit to JJB through LCPO/DCPO. NGO shall give report on the child when asked by the JJB.
11. The DCPO shall coordinate and conduct monthly review meeting with JJB, SJPU, Probation officer, DCPU staff, counsellor, and NGO staff to review the KAVAL programs carried out by NGO on 10th working day of every month and in the said meeting review NGO plan and activities need to be reviewed.
12. Quarterly, half yearly and annual meetings at state level shall be conducted and coordinated by SCPS.
13. Follow up
- a) The LCPO shall conduct follow-up visits to the NGO's and families on a random basis.
 - b) The counsellors shall accompany LCPO to the NGOs and families for follow up visits.

14. Termination

- a) As the NGO interventions are completed at individual level, family level, education/ vocation / social level as per the ICP and visible changes are observed in the child, and the child is effectively rehabilitated and reintegrated to family and society, the NGO can recommend the child for termination from psychosocial intervention.
- b) The LCPO can conduct a family visit along with the OH/JJB counselor to review the progress and a repeat assessment can be conducted to confirm the change in the child
- c) The report shall be presented to JJB and the case can be terminated with an order from JJB.

Documents about the child need to be transferred to DCPO and no records of the child should be kept in the NGO after termination of the child. If the child is terminated before the age of 21, the documents of the child should be maintained in DCPO office.

STAGES IN PSYCHOSOCIAL CARE INTERVENTION PROGRESS AMONG CHILDREN IN CONFLICT WITH LAW

The stages in the psychosocial care intervention progress among children in conflict with law majorly happens in three stages that are subdivided into two states each.

Stage-1: Initiation of psychosocial care: The initiation stage can be subdivided into two sub stages: 1) Process initiated and 2) Maintaining development.

- 1.1 Process initiated: Psychosocial intervention process is initiated, reviewed and reinitiated with the child through assessment of psychosocial problems and developing an individual child plan and intervention plan.
- 1.2 Maintaining and development: Following rapport building, the care provider evaluates whether the child and family is responding positively to the interventions and progressing in areas where interventions are provided through education and providing information on various areas of care and support as per the specific needs of the child.

Stage-2 Intervention: The intervention stage is subdivided into two sub stages: 1) Intersectoral approach phase and 2) Rehabilitation phase.

- 2.1) Intersectoral approach: The intersectoral support stage focuses on ensuring support for the child from multiple stakeholders involved in child care towards ensuring holistic care, protection, reintegration and rehabilitation of the child.
- 2.2) Rehabilitation: Rehabilitation stage focuses on availing support services to the child as well as child's family members to learn new skills/ vocation/pursue studies, etc. Other services that need to be provided during this stage include counseling through individual and group work, parental orientation, parent management programs, family counseling, referring to medical professional, etc. so as to restore life favorably.

Stage-3 Follow-up stage: The follow-up stage is subdivided into 1) reintegration to family and society and 2) Termination

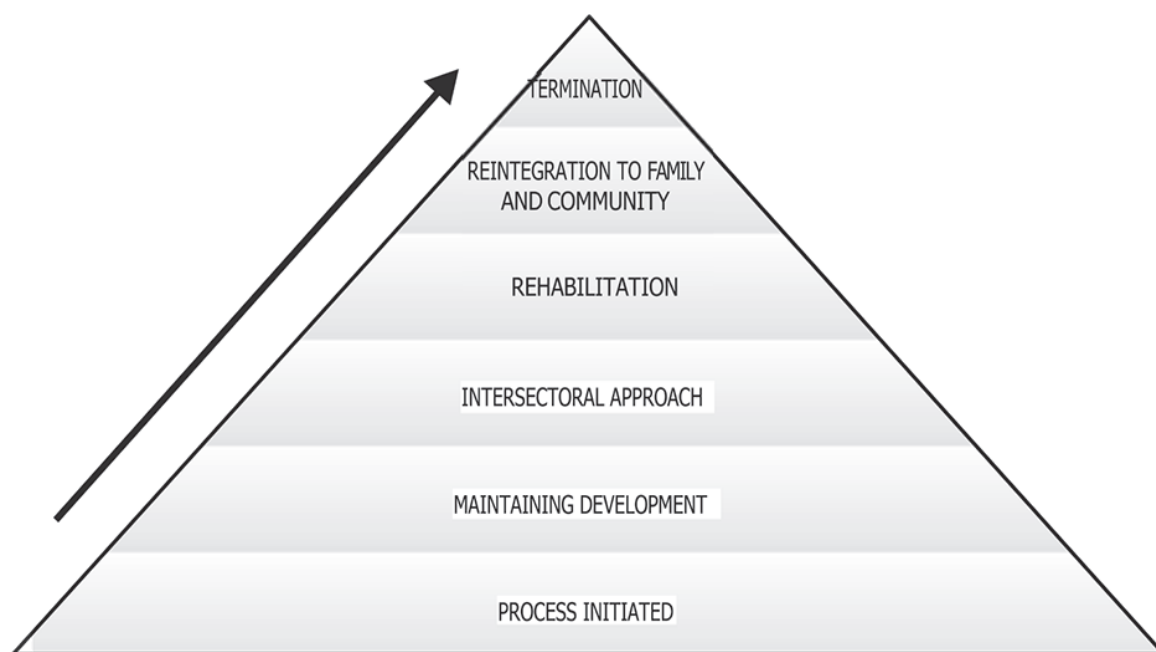
- 1.1) Reintegration to family and society: Ensuring a conducive environment for the child in family through family interventions, parental orientation and other support services as well as supporting the child

to be an integral part of the society/community by ensuring that the child is back to the family and community where he/she was living before the incident and ensuring safety for the child through multiple support services family and other support services. If the results show positive in the fields of health education, vocation, behavior, better family, education and community support for the child. The child can be retained under follow up period.

Termination: After the intervention as the child is able to maintain a positive change termination from services can be done.

Figure - 1

Process of Psychosocial Intervention



It may be noted that it is possible for children to be in multiple stages at a time though one of the stages supersede the other. It is also possible for the child to involve in or get in to problems that warrant for restarting the interventions from stage one. The intervention should be a continuous process until the children and family can manage their problems independently.

MANAGEMENT OF INDIVIDUAL CHILD IN CONFLICT WITH LAW

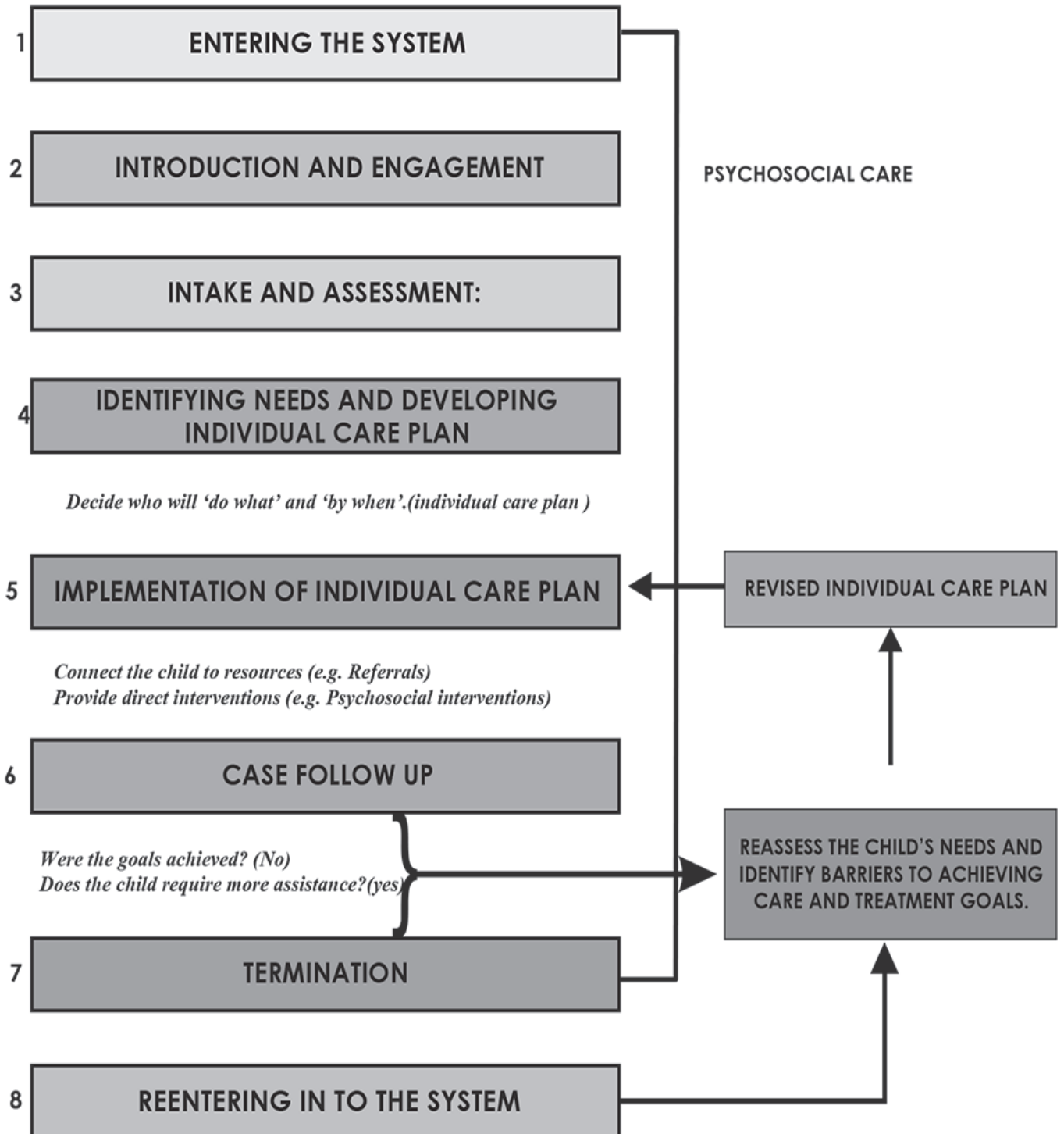
Each child who comes in to conflict with law undergoes a systematic and step by step process of intervention that involves organising, coordinating the formal and informal activities, services to ensure optimum level of services to the child. For children in conflict with law in order to provide intensive and comprehensive care, a multidisciplinary intersectoral approach to support the child in the community through varied professionals covering a range of service such as legal and law enforcement, crisis intervention, health(mental and physical), deaddiction, economic support, education support, family support, vocational and skill training & employment, institutional services and social welfare support. The multidisciplinary team will be led by the Juvenile Justice Board. An integrated multidisciplinary approach is needed to provide psychosocial care towards social reintegration of the child.

The eight stages of management of individual cases in children in conflict with law involves

1. **Entering the system:** The child in conflict with law is identified and produced before JJB and introduced to the process of psychosocial care for children in conflict with law
2. **Introduction and engagement:** The child in conflict with law, parent or the guardian will be informed and educated about the Juvenile Justice System, psychosocial services available for the child and process involved in the care and support. Parents/guardian and the child will be involved in clarifying the doubts as well as involved in discussions regarding the need of the program thereby engaging them to understand the need of service followed by taking consent for psychosocial interventions.
3. **Intake and assessment:** Child's psychosocial problems and needs will be assessed using standardized and scientific tools and other legal mechanisms by the team to develop an individualised care plan for the child.
4. **Identifying needs and developing individual care plan:** Developing specific plan for the individual as per the psychosocial problems reported by the child and needs identified. The services needed, the multidisciplinary team to be involved, who will provide what kind of service and when will be defined in the individual care plan.
5. **Implementation of individual care plan:** The individual care plan developed will be implemented by working with the child and family, referring to appropriate agencies, etc.
6. **Case follow up:** This involves regular assessment of the individual cases on a monthly and quarterly basis with the team to evaluate the progress in the child towards the achievement of psychosocial intervention goals. The change in the individual care plan if goals are not achieved also need to be carried out during follow up. Reassessment of the individual needs of the child and barriers in achieving care and treatment goals need to be identified and alternate plans need to be worked out. Revised individual care plan need to be reinitiated and implemented.
7. **Termination:** Children showing positive changes in follow-up assessment and who can maintain the positive change., i.e if the support system is build up, child's threat for leading a normal life is addressed and managed and child's chances of recidivism is reduced the child can be terminated from the service. An evaluation of services by the child and family on their satisfaction of service provision as well as social workers' feedback is essential to ensure the continuation of positive change in the child.

Reentering in to the system: In case the child after termination or during the process of intervention show recidivism or involve in high risk behavior that does not account to recidivism or have a relapse, then a reassessment need to be carried out with the core team to redesign the individual care plan by assessing the risks and making appropriate plan to address and prevent risk in future followed by re-administration of the revised individual care plan and continue follow up until termination.

MANAGEMENT OF INDIVIDUAL CHILD IN CONFLICT WITH LAW



CHAPTER-3

Introduction to Psychosocial Interventions for Children in Conflict With Law

Roles and responsibilities of each stakeholder in the juvenile justice system is defined to give clarity in roles and ensure each stakeholder perform their role appropriately.

1. Special Juvenile Police unit (SJPU)

- i. The Special Juvenile Police Officer shall inform the Legal Probation Officer / DCPO about the apprehension of the child
- ii. The Special Juvenile Police Unit or the Child Welfare Police officer shall take support from the NGO to provide psychosocial first aid to the child on apprehension if needed by informing the probation officer.
- iii. The SJPU / CWPO shall inform the child and the parents, the procedures followed in KAVAL program as well as various support that will be provided for the child including legal support.
- iv. As the child's case is transferred to the NGO, the SJPU / CWPO will provide protection to and support in all forms to the NGO staff to the child in conflict with law and family whenever needed.
- v. Police shall support the NGO in managing crisis situation where the child is involved or the child is at risk.
- vi. The police shall inform the NGOs on the high risk situation or behaviour in the child if noticed.
- vii. Police shall use the network of JJB, DCPU and NGO in supporting the CCL.

ii. Juvenile Justice Board

- i. The Juvenile Justice Board shall review the Social Investigation Report prepared by the Legal Cum Probation Officer and the psychosocial assessment carried out by the counselor at Observation Home/ Children home and refers the child to the fit facility (NGO) for psychosocial care through District Child Protection Officer
- ii. Juvenile Justice Board shall ask the NGOs for report on progress regarding any child whenever needed and during monthly meetings.
- iii. Juvenile Justice Board shall support the NGO intervention and consider special requests of the NGOs in providing psychosocial intervention considering best interest of the child.
- iv. The Juvenile justice board shall pass the order to avail specific support for interventions needed for the child such as educational support, psychiatric services, deaddiction services, institutional care, foster care, shelter care, follow up services after disposal of the case, etc., whenever needed.

- v. The JJB shall give an order for mental health assessment of the CCL to the identified psychiatrists to support KAVAL program in the districts.
- vi. The JJB shall order the mental health professionals to support and provide necessary guidance to the NGOs.
- vii. JJB shall order NGO to ensure the CCL avail mental health facility if needed and ensure follow up of the same.
- viii. Juvenile Justice Board shall conduct monthly review meetings of cases with SJPU, DCPU, NGO and others every month to monitor the progress of psychosocial interventions, difficulties NGO face in providing psychosocial intervention for the child and provide needed support for the team.
- ix. JJB shall carry out quarterly review of progress in child and provide necessary guidance and support to the team. The quarterly review team consists of JJB Magistrate, JJB Members, CWC chairperson, SJPU, DLSA, DCPO, LCPO and Observation Home Counsellor.
- x. On receiving termination report of the child from the Legal Cum Probation Officer, the JJB shall order for a hearing where the child and the parent need to be present. In discussion with the parent and child on psychosocial services received and the change in child, family and circumstances, JJB shall take decision to terminate the case of the child or keep the child in follow up for a definite period of time as needed. JJB can also take opinion from NGO, LCPO Counsellor or significant other stakeholders.

iii. Role of State Child Protection Society (SCPS)

The State Child Protection Society (SCPS) is administratively in charge of the program. SCPS should carry out all the administrative activities for the project such as:

- Administrative support in keeping and maintaining records of the program.
- Timely signing of the Memorandum of Agreement between the DCPO and NGO.
- Timely disbursement of funds to the DCPO and NGO as well as technical support agency.
- Work as a link between the DCPO, NGO and the state government.
- Should represent KAVAL in state decision making meetings such as Executive Committee and Working Group.
- Collecting the utilisation certificate and statement of accounts from NGO on time.
- Organizing training and programs that are planned apart from the regular trainings and programs.
- Organising skill enhancement program for the KAVAL team.
- Advocacy with government and other bodies to support KAVAL program.
- Representing KAVAL in state and national programs for children and specifically for children in conflict with law.

iv. District Child Protection Officer (District Child Protection Officer)

- i. District Child Protection Officer will be in charge of overall coordination of KAVAL program in every district.
- ii District Child Protection Officer will issue an official letter for each child to initiate psychosocial intervention by the NGO through an order (Form number 6). Ref. Appendices 6.

- iii. District child protection Officer shall coordinate and support NGO for the funds from the state as well as other funding if needed for the effective functioning of the program as well as in other administrative activities considering the confidentiality of the child.
- iv. District Child Protection Officer shall support NGOs in availing existing government and non-government services and social welfare programs such as grants, scholarships for children, pensions for family members, economic support for child or family, vocational or skill training support for child and family, physical and mental health support for child and family, education support for child and family, legal support for child and family.

v. The DCPO will monitor the NGO activities

- a. The DCPO shall carry out monthly meetings to monitor the NGO activities, assess progress in psychosocial interventions for CCL, understand the support services need for the NGO and provide the same.
- b. The DCPO shall carry out the monitoring of NGO activities on a weekly basis in form- 1,in a monthly basis in form-2 and in a quarterly basis in form-3. Appendices 2,3 & 4
- c. The Legal Cum Probation Officer and the OH counsellor will assess the progress of each child on a monthly basis in form-4 (ICP of child) on psychosocial interventions with NGO.
- v. District Child Protection Officer shall organize monthly review meetings as well as quarterly review meetings with JJB.
- vi. District Child Protection Officer shall report on a quarterly basis to JJB on the progress of intervention in quarterly review meeting (Form number 5). Appendix 5.
- vii. District Child Protection Officer should network and coordinate with all the stakeholders such as JJB, SJPU, government departments, education department, health department, vocational and skill training institutions, health care institutions.

v. Legal Cum Probation Officer

- i. Probation officer / Legal cum probation officer will be the coordinating official in charge for KAVAL in every district.
- ii. Legal cum probation officer shall support and guide NGO on legal matters concerning children in conflict with law.
- iii. On completion of SIR within 15 days, the LCPO shall coordinate with the OH/JJB counsellor in preparing the primary ICP and submit primary ICP to the JJB within 20 days.
- iv. Legal cum probation officer shall coordinate with JJB/OH counsellor in planning primary individual care plan for the child in conflict with law and provide all support to the NGOs in executing the ICP.
- v. Legal cum probation officer shall submit and explain JJB on Individual Care Plan for child in conflict with law as per the social investigation report and psychosocial assessment by OH/JJB counsellor(Form Number 3). Appendix 3
- vi. Legal Cum Probation Officer will be officer in charge of monitoring the NGO activities
 - a. Legal Cum Probation Officer shall review the weekly plan and weekly reports of NGO along with the OH/JJB counsellor and give remarks to support psychosocial interventions.

- b. Legal Cum Probation Officer shall review monthly reports of the NGOs with OH/JJB counsellor and give remarks to support psychosocial interventions.
 - c. Legal Cum Probation Officer shall review the individual care plan of the child to understand the progress of psychosocial interventions along with OH/JJB counsellor and give remarks to support psychosocial interventions.
 - d. Legal Cum Probation Officer will work as the coordinating officer between various government and non-government agencies and other agencies to support NGO activities in providing psychosocial services for children.
- vii. Legal Cum Probation Officer shall coordinate monthly review meeting at District Child Protection Unit with NGO towards monitoring the progress of the KAVAL programs carried out by the NGOs.
 - viii. Legal Cum Probation Officer shall coordinate quarterly review meeting in the district.
 - ix. Legal Cum Probation Officer shall report the progress of children to Juvenile Justice Board on a monthly basis as well as inform if any specific need or support is needed for CCL as reported by the NGO in providing psychosocial intervention.
 - x. Legal Cum Probation Officer shall carry out quarterly follow up visit along with JJB/OH counselors to NGO and families of children to monitor the progress of child as well as activities carried out by the NGOs.
 - xi. Legal Cum Probation Officer shall review the records of the child and reports regarding KAVAL maintained in the NGO during quarterly visit.
 - xii. Legal Cum Probation Officer shall coordinate monthly review meeting with JJB to monitor progress of the KAVAL program in the district and report to JJB on psychosocial intervention (Form 5).
 - xiii. Legal Cum Probation Officer shall coordinate the quarterly review meeting in the district to review of cases of CCL on an individual basis at JJB (Form 4 & Form 5). Appendices 4&5
 - xiv. In case when the child need to be terminated from KAVAL, the Legal Cum Probation Officer shall conduct a detailed enquiry to ensure the safety of the child and to assess the child's vulnerability to commit offence and give a report to the JJB along with consolidated ICP from the NGO and the psychosocial assessment report from the OH/JJB counsellor and recommend for termination(Form3). Appendix 3
 - xv. On recommendation of termination of the child's case, the Legal Cum Probation Officer shall ensure to mute the details of the child from MIS system by taking a hard copy of child's ICP and submit the same in JJB for the purpose of official recording.
 - xvi. Details of the children officially terminated shall be maintained by the Legal Cum Probation Officer who after a definite period of time shall recommend the court to destroy the details from all records including the MIS system.
 - xvii. Legal Cum Probation Officer shall work as a link between the NGOs and all other stakeholders supporting the NGO to ensure support services for the CCL.

vi. The Counselor on receiving the case of a child shall

- i. As a child is apprehended and brought to the JJB

- a. The counsellor shall provide psychosocial first aid for children in conflict with law.
 - b. The counsellor shall clarify the doubts the parents and child may have about the Juvenile Justice system.
 - c. The counsellor shall provide legal literacy to the child and the parent.
 - d. The counsellor shall educate the parent and child on juvenile justice system.
 - e. The counsellor shall inform the parent and the child about KAVAL program to support child to ensure reintegration to the society.
- ii. On receiving the case of the child, OH/JJB counsellor shall carry out psychosocial assessment of CCL within 15 days of the apprehension and share the information with the LCPO to prepare primary ICP.
 - iii. OH/JJB counsellor shall work in coordination with the LCPO to develop primary individual child care plan for the CCL within 20 days of apprehension (Form 3).
 - iv. OH/JJB counsellor shall brief the NGO on the psychosocial problems of the child and coordinate with the NGO in the implementation on ICP through psychosocial interventions.
 - v. Quarterly evaluation of the ICP and progress of psychosocial intervention shall be carried out by the OH/JJB counsellor and report to LCPO.
 - vi. OH/JJB counsellor shall conduct quarterly follow up with LCPO to the fit facility and families to confirm the progress of children.
 - vii. OH/JJB counsellor shall support LCPO to organize monthly and quarterly meetings.
 - viii. OH/JJB counsellor shall support LCPO in reporting of individual cases on a quarterly basis to the JJB.

7. Non-Governmental Organizations

- i. The non-governmental organizations shall be declared as the implementing agencies for providing psychosocial care for children in conflict with law.
- ii. The NGO will receive cases of children from JJB through DCPU.
- iii. As the NGOs receive the cases from the DCPU, NGOs shall acknowledge the receipt of the cases to DCPU through an official letter (Form 7). Appendix 7
- iv. As the NGO receives the details of the CCL who needs psychosocial intervention, the NGO shall report to the concerned police station within 5 days of receipt of the official order from the DCPU on initiation of intervention and build up a good network with the police to ensure child's safety and protection (Form 8). Appendix 8
- v. The NGO shall start the psychosocial interventions soon after the police station visit i.e., within one week of receipt of case details from the DCPU.
- vi. Family visits will be conducted by the NGO to initiate family level intervention.
 - a. The NGO's shall conduct group work with family.
 - b. The NGO shall conduct sessions on managing children behaviour, parenting, stress management, etc.
 - c. The NGO's shall address other problems in the family such as economic difficulties, social problems, physical and mental health needs of the family, needs of other children in the family, etc.
 - d. The NGO can identify CNCP in the families of CCL and refer the children to CWC through DCPO.

- vii. The NGO shall refer children for mental health services including deaddiction services
 - a. The NGO shall seek special order from JJB if needed to refer the child for mental health care or deaddiction.
 - b. The NGO shall support the child and family in continuing the mental health support by educating on their mental health needs and specific treatment.
 - c. The NGO can educate family member as well as the child on regular medication and ensuring regular follow up.
 - d. The mental health professional shall brief the NGO staff on the mental health condition of the child and needed interventions as well as specific care and precautions to be taken for the child.
 - e. The NGO can avail support from CLW (Asha worker or ICDS worker) if need for medication or other support activities
- viii. The NGO shall provide following psychosocial services for the CCL
 - a. Individual counselling
 - b. Group work
 - c. Life skills Education
 - d. School and community level intervention.
 - e. The NGO shall provide referral services for CCLs to appropriate service providers, agencies, professionals or persons through DCPO.
 - f. The NGO shall network with governmental and non-governmental organizations to support children and their families in availing benefits from government program.
 - g. NGO shall work under constant monitoring of the DCPO.
 - h. The NGOs shall do weekly planning and reporting and submit to the DCPU every Monday (Form 1). Appendix 1
 The NGO shall do monthly reporting to the DCPU 5 days before the scheduled monthly meeting (Form 2). Appendix 2
 - j. The NGO shall report the progress of the child in the ICP and submit the same to the DCPU to assess the progress. The NGO can make changes or additions in services as per the child's specific needs in the ICP as the intervention progress (Form 3). Appendix 3
 - k. The NGO shall submit quarterly report every quarter on the 1st week of the quarter or as directed by the DCPO (Form 2 & Form 4). Appendices 2 & 4
 - l. The NGO shall submit half yearly report on half yearly reporting format to DCPO on the 1st week of the second quarter or as directed by DCPO.
 - m. The NGO shall submit annual report and annual audit statement to the DCPO at the end of every year.
- ix. The NGOs shall work in coordination with Juvenile Justice System
 - j. KAVAL staff/s appointed in the NGO shall meet at DCPU during every monthly meeting. The staff shall be responsible for the psychosocial interventions and will be answerable for any queries about the CCL by the JJB and DCPO.

- k. The KAVAL staff shall work in close association with DCPU and keep the DCPO well informed about the KAVAL activities.
- l. The KAVAL staff/s shall attend all the monthly and quarterly meetings organized by the DCPO to update JJB on KAVAL activities.
- x. The NGO shall report to the DCPO on completion of psychosocial interventions and reintegration of the child to the society in the monthly meeting and can recommend for the termination. Consolidated ICP shall be produced for the LCPO and OH counsellor to verify.
- xi. The NGO shall not take photograph which may reveal the identity of the child or parent during the psychosocial intervention process. The school or community level program shall not violate the privacy of the child or family as well as give chances for labelling the child and family.

8. Selection of Non-Governmental Organisation (Kaval implementing NGO)

- i. The NGO should be registered either under Travancore cochin literary, Scientific and Charitable Societies Registration Act 1955, Indian Trust act 1882, Societies Registration Act 1860 or should be an Outreach Centre of Schools of Social Work offering MSW, BSW courses.
- ii. The NGO should be an accredited NGO by a Government Department or should have minimum two years' experience in the areas of working with children.
- iii. The NGO should be willing to work for and among children in conflict with law.
- iv. The NGO should have legally formulated governing body.
- v. The NGO should be financial capable to run the program.
- vi. The DCPO should invite application from the NGOs willing to run the program in the respective district. The advertisement should be published in newspapers and official website of Department of Women and Child Development.
- vii. The NGO should submit audited statement of accounts and annual report for the last two years.
- viii. In order to select NGOs, a district level committee need to be constituted consisting of Juvenile Justice Board member as chairman of the committee decided by the JJB, District child protection officer and legal cum probation officer as the convener

9. Staffing in NGOs

- i. The NGO need to appoint two staff to work for KAVAL. One coordinator and a case worker.
- ii. The qualification for the staff is preferably Masters in social work or M.A in psychology, M.A. in sociology. First preference should be given to persons with MSW / social work background as the psychosocial care for children in conflict with law program involves implementation of program through social work approaches.
- iii. The coordinator should have the above said qualification along with 3 to 5 years of experience working with children
- iv. The case worker should have the MSW qualification(any specialisation) and can be a fresher.
- v. The NGO should inform DCPO regarding staff recruitment & interview need to be conducted by a panel of JJB members DCPO & NGO representative.

10. Role of coordinator in implementing KAVAL

- i. Coordinate KAVAL activities in NGO.
- ii. Plan and implement program in accordance with the project in consultation with the NGO head
- iii. Plan, organize and implement programs (Home visit/ LSE/ Parent Orientation/ Group Work/ Case Work etc.,)
- iv. Networking with support agencies (vocational training center/ rehabilitation services/ health/ education etc.)
- v. Coordinate and take support from DCPU and JJB whenever needed for each case for support
- vi. Coordinator need to organize monthly and weekly meetings at NGO level
- vii. Present the report and cases at weekly/monthly meetings at DCPU
- viii. Plan and report the activities to DCPU through NGO
- ix. The coordinator should attend JJB sittings whenever the NGO cases are called for hearing or directed by JJB
- x. The coordinator should communicate with JJB if any case specific orders need to be passed through the LCPO

11. Role of Case Worker in implementing KAVAL

- i. Executing the programs
- ii. Supporting coordinator in planning & reporting
- iii. Supporting and conducting programs along with the coordinator (Home visit/ LSE/ Parent Orientation/ Group Work/ Case Work)
- iv. Monthly reporting to the coordinator

CHAPTER-4

Questions and Answers on Child in Conflict with Law with Reference to Psychosocial Intervention

1. Will the child in conflict with law be sent to jail or lockup?
*Children below the age of 18 will not be sent to jail nor will be kept in lockup.
2. Should the police file an FIR in all cases involving children?
*No. In matters involving children, the police is required to file a FIR, only when the offence alleged to have been committed by the child is heinous in nature and punishable with a sentence of seven years or more.
3. At the time of apprehension of the child, whom should the Police mandatorily inform?
*The Police shall mandatorily inform the parents/guardian and Legal Cum Probation Officer/ Probation Officer of the district.
4. Who shall produce a Child before the Juvenile Justice Board and in what time frame?
*A designated Child Welfare Police officer or police officer from Special Juvenile Police Unit should produce a Child before the Juvenile Justice Board within 24 hours.
5. Is the police supposed to produce all CCL before the Juvenile Justice Board?
*In all cases when a Child is apprehended, production before the Juvenile Justice Board is mandatory
6. What is mandatory at the time of apprehension for Police?
 - In no case the child shall be sent to lockup or jail or kept with adult accused.
 - Not to delay his charge being transferred to the Child Welfare Police Officer from the nearest police station.
 - Police officer should not to handcuff, chain or otherwise fetter a child.
 - Provide appropriate medical assistance, assistance of interpreter if the child cannot understand the language or any other assistance which the child may require.
 - Give food to the child if s/he has not had meals.
 - The parents shall be present during the interview of the child by the police.
 - The child should not be compelled to confess his/her guilt and s/he should be interviewed only at the Special Juvenile Police Unit or at a child-friendly premises or a child friendly corner in the police station.
7. What is SJPU?
* Special Juvenile Police Unit (SJPU) means a unit of the Police force of a district or city exclusively dealing with the cases of children. The SJPU should be headed by a Police officer not below the rank of Deputy Superintendent of Police.

8. What is the difference between Police officer and Child Welfare Police officer?

*The duty of a Police Officer is to enforce laws, investigate crimes and arrest the culprits. A Child Welfare Police Officer is an officer placed in every Police Station of the district and the CWPO shall not be below the rank of Assistant Sub Inspector dealing exclusively with children either as victims or perpetrators.

9. Where will the child who comes in to conflict with law be placed if bail is not granted?

*If the child who comes in to conflict with law is not granted bail or is in need of overnight stay he or she will be sent to observation home. The child will be placed in observation home for a period directed by the board or children court and extended time to time.

10. Will the child be granted bail?

*Bail is the right of child, in most of the cases the child is let on bail. If the child is not let on bail, reasons should be recorded in writing by JJB. It has been mentioned in the Act that 'Bail and not the jail is a rule', and the Board and Children's court should be liberal in granting the bail to the CCL produced before them.

*As per Section 12, it is clear that it is mandatory for the Juvenile Court to release a juvenile on bail with or without surety if such a juvenile is arrested or detained or appears or is brought before a Juvenile Board in a bailable or non-bailable offence, notwithstanding anything contained in the Code of Criminal Procedure.

*The only exception is that if there are reasonable grounds for believing that the release of the CCL is likely to bring him/her into association with any known criminal or expose him/her to moral, physical or psychological danger or that his/her release would defeat the ends of justice, then s/he shall not be released on bail.

11. Who can release a child on bail?

*In petty offences, the police may release a child on bail. But in all non-bailable matters involving heinous or serious offences, only the Juvenile Justice Board is authorized to release a child on bail.

12. How does a child get bail?

*By considering a bail application any fit person may receive the child and let free on bail.

13. Who is a fit person?

*A fit person means any individual who is fit to temporarily receive a child for care, protection or treatment for a period as may be necessary, may be recognized by the board or the committee as fit person. The fit person can be appointed by the board or committee for specific purpose and specific period.

14. Explain institutionalisation details of the child in conflict with law ?

*Different types of stay are provided for the CCL at various stages of JJB Procedures Protective custody: When the ccl is not given bail and need protection, it can be provided by the observation home under the direction of JJB or children court.

Overt night protective stay: When the child needs to be given overnight stay, the child can be boarded at observation home.

Rehabilitative stay: The child may be sent to special home or similar place of safety at the order of JJB or children court for his/her rehabilitation. (Ref: sec. 8 (f) & rules 9, 10 and 69 of JJ Act)

15. Once the child is let free by bail, what are the intervention strategies applied?

1. Referral to mental health care
2. Counseling
3. Psychosocial intervention
4. Deaddiction
5. Enrolment for education
6. Vocational training/skill development etc...

16. What should the police do if a child is apprehended for a crime that is punishable by a sentence of less than seven years?

*In such cases the police should not file an FIR. These are cases where only a GD entry is supposed to be made by the police and the child has to be produced before JJB within 24 hours. The police is required to prepare a social background report of the Child, a report stating the circumstances of the alleged offence, a report about recovery of any stolen articles from the child and age proof of the child along with other relevant documents before the Board before the first hearing.

17. Child has been apprehended by the police, but the family cannot afford a lawyer. How can we help them?

*They can approach CWPO/PO to get free legal aid which is being provided by the District Legal Service Authority (DLSA).

18. Does the child/ family need to pay money to release the child?

*No. But s/he may be released by the board either by personal bond or by surety bond. If s/he failed to fulfill the condition of the bond or s/he willfully neglects to appear before the board, then the board shall recover the bond amount from the concerned persons.

19. Will the child be subjected to physical punishment?

*Children below the age of 18 will not be subjected to any type of punishments by Police or Judiciary.

20. What will happen if the child doesn't appear before JJB?

*The child will be called upon to attend JJB through notice. If he/she did not appear even after receiving the notice, the board will cancel his/her bail and forfeit (fine) the bond amount from the surety or the child as the case may be.

21. What are the types of offences described under JJ Act 2015?

*Petty Offences: An offence is petty if the maximum punishment prescribed in any law in force is imprisonment up to 3 years (Eg: Rash and negligence riding (279 IPC), Voluntary causing hurt).

*Serious offences: Offences for which punishment prescribed in any law in force is imprisonment between 3 to 7 years (Eg: Theft in dwelling house).

*Heinous offences: Offences for which minimum punishment prescribed in any law in force is imprisonment for 7 years or more (Eg. Rape, Murder, Abetment to commit suicide, Dacoity).

22. What if a child is found to be guilty of offences?

*In case of petty and serious offences, a child in conflict with law who is found guilty is decided under sec. 18 of JJ Act(2015) by Juvenile Justice Board. In case of heinous offences JJB may transfer the case to children's court after the preliminary assessment of CCL who has attained 16 years of age.

23. Who is the authority for judgment in the case of children in conflict with law?
*Judgment in cases where children are involved is carried out by the Juvenile Justice board and children's court.
24. Is there any disqualification on findings of any offence?
*By the virtue of section 24, there is no disqualification on findings of an offence against the child in conflict with law for educational employment including governmental, issuance of passport and going abroad and such other things.
25. What is the time period prescribed under JJ Act for final findings of a case?
*The time period prescribed for final findings of a case at JJB is four months and it is extended to further 2 months under the direction of Chief Judicial Magistrate.
26. How is the pendency of cases at JJB reviewed?
*The chief judicial magistrate review the pendency of cases at JJB once in every three months.
27. Who is the appellate authority?
*Any person aggrieved by the order of JJB may file appeal at children's court within thirty days of receiving the order.
28. Who is the monitoring authority of implementation to Act?
*Commission of protection of child rights
29. Will the child in conflict with law's studies and future be affected?
*Child's studies will not be affected in any ways just because the child comes in to conflict with law. School cannot expel the child or keep the child away from school due to this reason. If such issue happens the DCPU can be contacted who will conduct an enquiry and take up needed action.
30. Will the child be haunted for the case he/she was involved in future life?
*Once when the case is closed, the child's information will be destroyed forever after the period of appeal.
31. How are children identified for psychosocial intervention?
*An assessment will be conducted with the child and parents to understand the child's psychosocial problems and behavior. Social investigation will be carried out to understand the child's social background. In both these assessments if the officers in charge identify threat to child's normal psychosocial development, it will be informed to the JJB. JJB will take appropriate decisions about referring the child for psychosocial interventions to the competent NGO in the district.
32. What is psychosocial intervention?
*Psychosocial care is holistic intervention for the child to ensure better care and protection by understanding the child's problems at individual, family, education and social levels and addressing the same through structured activities to enhance child skills and potentials to ensure care, protection, development, treatment and social reintegration as directed by JJAct 2015 in a child friendly approach.
33. Why is psychosocial intervention needed for the child?
*Most of the children coming in to conflict with law will be undergoing problems beyond their capacity to manage. The problems can be: individual problems, difficulties or problems in the family, problems

related to education/studies, problem with friends or peers, problem in the community, etc. The child and family need support to deal with these issues effectively to ensure better environment for holistic living and social reintegration of child.

34. What if the child doesn't agree for psychosocial intervention?

*If JJB orders for psychosocial intervention it becomes mandatory for the child and family to undergo psychosocial intervention. During the psychosocial assessment if the counselor identifies that the child is in need of support, it has to be informed to the JJB. Parents and the child need to be convinced. Request can be made to JJB on possible alternatives to ensure psychosocial support for the child.

35. Will others come to know about the identity and personal problems of child and family?

*Psychosocial support is given by trained professionals who are bound to follow the professional ethics. They will not disclose the identity of the child to anyone. In case if the child need referral, only relevant information that will not harm the child or family will be shared to the agency referred. The child and family will be informed about the same. Information about the progress of intervention will be shared with JJB on a regular basis through DCPO.

36. What is the procedure of psychosocial intervention?

*a) Psychosocial intervention starts with a psychosocial assessment conducted by the psychosocial counselor at OH/JJB

b) The assessment report along with Social investigation report will be reviewed by JJB and the case will be transferred to NGO through DCPO.

c) The NGO official will contact the family and inform about the psychosocial intervention planned

d) The intervention consist of family visits, intervention sessions (group and individual) for parents, individual and group counseling session for children, life skills education for children and other relevant programs such as reproductive health education, stress management, career orientation programs, etc. There will also be individual specific sessions as per the need of the child such as school level and vocational interventions, social interventions etc.

e) Each child's progress will be reported separately and submitted to JJB at regular intervals

f) Decision will be taken by the JJB in consultation with the NGO, LCPO and the OH/JJB counselor.

37. How do the child and parent know which NGO will support them?

*The child and parent will be informed by JJB about the NGO who will support them. The officials from NGO will contact the parent and the child and conduct home visit with appropriate letter from the DCPU to inform initiation of the intervention.

38. Can the child and family select any NGO that they feel like for support?

*The NGOs are selected by the Government and the JJB in each district. The staff in this NGOs are specially trained for working with children in conflict with law. They are the only approved agencies in each district

39. Will the child be reminded of the stressful situation each time the social worker does the intervention?

*The social workers are trained persons in handling the issues of children in conflict with law. They ensure that the child is comfortable. They will ensure that the child is out of the trauma caused by the incident and mainstream the child.

40. Can family take decision on which mental health professional/psychiatrist to see if mental health support is needed?
- *It is suggested to take support from mental health professionals referred by the JJB or NGO as they belong to the panel of experts. However if the child is already under treatment then they can continue the treatment by providing report to the NGO and JJB on quarterly basis.
41. Should the doctor or other mental health practitioner need to appear before the JJB to give the details of the treatment?
- *No, the mental health professionals need not appear before the JJB. They only need to provide report to JJB.
42. What if the child continues to come in to conflict with law?
- *If the child is repeatedly coming in to conflict with law, it shows that the child needs higher level of support.
- Assessment will be conducted to understand the child's problems.
 - Appropriate referral will be made such as for mental health support, residential support, deaddiction, etc., as per the need of the child.
 - Ensure more support from all sectors of care including police.
 - The child may have to be followed up as per the ICP prepared for a longer time.
43. Is there any payment to be given for psychosocial services provided for the children and family?
- *Psychosocial services are completely free of cost. If referral is made then as much as possible parents of the child need to bear the expenses. In case if the family is unable to afford, special request can be made to ICPS through DCPU for supporting the child.
44. Whether the CCL can be considered as CNCP or not?
- *As per sec 8(g) of the Act, the JJB can transfer to the Child Welfare Committee regarding matters concerning the child alleged to be in conflict with law is stated to be a child in need of care and protection, at any stage.
45. If the child is not safe at home or if the child may have threat that will affect child or if the environment is not conducive for the child in conflict with law what can be done?
- *If the Social investigation report and psychosocial assessment identifies that the child is vulnerable at home environment, the child can be placed in observation home for a maximum period of three months where the child need to be availed support from multidisciplinary team to address the unacceptable behaviors and then transfer to child welfare committee is to be considered as child is in need of care and protection simultaneously. The child can be transferred to children home to continue education, vocational and skill training along with other psychosocial services. (Ref: sec. 8 (g))
46. If the child crosses 18 years and still the child need continuous psychosocial support what can be done?
- *The child can be provided after care services as per the order from the JJB. The Legal Cum Probation Officer can request the JJB for placing the child in after care service until the child attains 21 years.
47. If a child belonging to Kasargode is apprehended for crime in Thiruvananthapuram, what will be the procedure?

*The Juvenile Justice Board will mark the out station Social investigation inquiry to the District Child Protection Unit, Thiruvananthapuram, headed by District Child Protection officer. Further it will be forwarded to DCPO of Kasargode and the report will be submitted to JJB with in the stipulated time period. Further if the child is not released on bail, then he/she will stay in observation home during the period of enquiry.

48. Can a child in conflict with law apply for anticipatory bail? And is an application for anticipatory bail at the instance of a child in conflict with law maintainable before the high court or the Court of Session?

*A child in conflict with law can very well apply for an anticipatory bail as there is nothing in the Juvenile Justice (JJ) Act which bars him/her from doing so. An application for anticipatory bail under Section 438 of the Criminal Procedure Code at the instance of a child in conflict with law is maintainable before the high court or the Court of Session.

49. When can a child be terminated from KAVAL services?

*A child can be terminated from services of KAVAL if the child is provided all the services as per the individual care plan prepared for the child that include varied psychosocial care programs such as individual counselling, group work, life skills education, social skills training, de-addiction service, mental health support, physical health support, vocational or skill training, family level intervention, etc.

The NGO need to present the case to be terminated in the monthly review meeting where open discussion can be conducted and suggestions and observation from other important stakeholders such as JJB members, CWC members, SJPU, DCPO can be taken. Following this the LCPO and the Observation home counsellor should verify 1) the current status of the child i.e., if the child is socially reintegrated and can continue without support from KAVAL staff, 2) services provided for the child and 3) in cases where the child was referred to mental health professional or de-addiction opinion can be sought regarding follow up. Based on this enquiry, LCPO need to submit a report in the following monthly meeting and the monthly review committee can request Juvenile Justice Board to terminate or continue service.

If the child need further care, the child can be referred to appropriate services and it has to be informed to Juvenile Justice Board.

The NGO should hand over the case files of the child to the DCPO. NGO should not keep any details or documents regarding the child in their records at any circumstance in case of termination.

50. When can the child be excluded from KAVAL services?

*In cases where the child's case is disposed before transferring to KAVAL and if the parents of the child or the child is not cooperating even after repeated follow up.

If the child is currently staying out of state and chances of returning in immediate future is less due to job or studies and the parents are taking responsibility of the child.

Children who are above 21 years of age.

Children above 21 years who need further support can be referred to other similar services that need to be mentioned in the report that is given to JJB.

The NGO should handover the case files of the child to the DCPO. NGO should not keep any details or documents regarding the child in their records at any circumstance in case of exclusion.

Code of Ethics for Stakeholders Working for Children in Conflict with Law

We will work under the guidance and support of Juvenile Justice Board and abide the rules of the State and thrive for the holistic care and development of Children in Conflict with Law

We Will Maintain Confidentiality

We will not share children's information
We will not make false promises to the children
We will take care of ourselves and our colleagues
We will strive to enlighten children's lives
We will reach out and seek help when we feel low
We will always keep smiling

Working with families we always try to:

Be honest and genuine
Be supportive to family members
Increase the interaction among the family members
Insist on roles and shared responsibilities
Value each and every family member
Teach family values and spirituality
Develop sense of humor and play
Reward and reinforce positive behaviour
Follow rituals as a family
Understand what is happening to other family members
Encourage trust and confidence in family
Teach giving and taking support from each other

NEVER:

Be prejudiced
Enforce personal values and attitudes
Take decisions for the family
Reprimand any person in the family
Be critical or hostile

APPENDIX

APPENDIX 1 - WEEKLY REPORT

FORM-1

PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW-A PILOT PROGRAM BY DEPT. OF WOMEN AND CHILD DEVELOPMENT, KERALA
IN COLLABORATION WITH NIMHANS, BENGALURU

IMPLEMENTED BY -----(NGO) (PLACE)

WEEKLY PLAN FOR THE PERIODTO.....

| SL.NO | Date of intervention planned | Childs name Case number | Nature of offence | Weekly plan | Weekly report | Remarks NGO | Remarks DCPU (LCPO&JJJB counsellor) | NGO future plan for the child |
|-------|------------------------------|----------------------------|-------------------|-------------|---------------|-------------|--|-------------------------------|
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Appendix 3

Individual Child Plan

The individual care plan aims to provide a comprehensive and holistic care plan for children in conflict with law. Children in conflict with law experience multiple problems that need to be addressed. Hence the current Individual care plan looks at areas such individual, family, social, education, physical health, mental health and substance use.

Multiple stake holders are involved in child's care and protection. Each stake holder has a specific task to perform in psychosocial intervention of the child which is mentioned in detail below.

Details of the case (Section.1 ICP): The details of the case will be filled up by the legal cum probation officer,

Socio Demographic Profile (Section. 2&Section.6 ICP): Socio demographic profile of the child, psychosocial assessment of the child and the summary of psychosocial problem of the child (Section-2, Section no: 7, ICP) will be filled up by the counsellor at Juvenile justice Board **Observation Report- Home Superintend(Section.3, ICP):** The home superintend will give their observation about the child in the prescribed format in ICP (Section. 3, ICP).

The legal cum probation officer will give a consolidated report to the JJB on the psychosocial problem of the child and details of the NGO to be referred.

Reporting of quarterly/ half yearly posting JJB (Section.4, ICP): JJB will refer the child to the concerned NGO for psychosocial intervention and report the same in the ICP (Section.4, ICP). The ICP format will be handed over to the NGO by the DCPU through an official memo.

NGO will report about the progress in the child and psychosocial care interventions to the JJB every quarter that will be entered in the ICP (Section-4)

Networking with Police(Section.5, ICP): As NGO receives the intimation from DCPU an acknowledgement will be sent to DCPU from NGO .The NGO representative will visit the police station where the case is registered and inform the police regarding the psychosocial intervention that will be provided for the child. The observations regarding the child's problems/ concerns and remarks will be given by Child welfare police officer in the ICP (Section.5)

The NGO will report to the police regarding the intervention every quarter and get the report from police in the ICP (Section.5)

Family profile, Family Intervention and Support: The NGO coordinator will report the problems in the family in the first half of the Section. 7 in ICP. The problems that need to be addressed will be written down in the Section 7.1 in ICP. The intervention planned and provided for the family will be reported correspondingly in Section 7.3 and 7.4 in ICP. Changes observed in the family due to intervention will be reported in the Section 7.4 & 7.5 in ICP. This will be reported on a quarterly basis. Brief report about the family intervention will be recorded in every quarter (Section 7.7, ICP). Family support services in the form of welfare programs and schemes will be provided for the family will be mentioned. As the planned intervention is completed summary of the intervention and changes observed will be noted. The follow up details of the family over a definite period as decided will be recorded in Section 7.7 (ICP)

Physical health needs: Details of the physical health problems will be mentioned in the summary report of ICP, Section-8. The physical health problems and needs among children will be assessed by the project coordinator at NGO and needed referral will be made to nearby PHC or hospital. Health problem of the child will be recorded in Section 8.1, ICP. Health and hygiene habits will be recorded in Section 8.2 followed by referral for health care in 8.3, ICP. Other physical health support needed for the child or child's family members will be identified and appropriate referrals will be made and reported in Section 8.7, ICP. Once the intervention for physical health is completed the summary of intervention will be reported in ICP section 8.8. Quarterly assessment of physical health will be made and mentioned in the follow up section.

Mental health needs of the child: The detailed mental health and developmental disorders of the child will be carried out by the JJB counsellor and the observation will be recorded in Section-9, ICP. The project coordinator will make necessary arrangements to refer to mental health professional in need of psychiatric intervention. The NGO staff needs to mention the mental health problem of the child as reported by the mental health professional and report it in the section in Section 9.1 of ICP. The medical care and psychosocial care planned and provided need to be recorded in Section 9.3 & 9.4 of ICP respectively. The changes observed in the child in definite period of time as mentioned by the mental health professional and observation of the NGO staff need to be mentioned in the Section 9.4 of ICP. If the child is attending the regular group work sessions and individual counselling session that also need to be mentioned in the appropriate areas (Section 15 & Section 16 of ICP). Reporting should be on a quarterly basis. Other mental health support services needed and provided need to be recorded in Section 10.6. Summary of the intervention should be mentioned in Section 9.6 of ICP. Once the major intervention is completed summary and regular follow up need to be planned and reported in Section 9.7 of ICP.

Alcohol/ Other Substance Use Support Services: The problem of alcohol and other substance use details will be assessed by the counsellor at JJB and will be mentioned in Section 10 of ICP. The NGO coordinator will make necessary arrangements for the referral if de-addiction service is needed. The preventive intervention will be carried out at NGO through group work, individual counselling and life skills education as well as other community programs if necessary. The specific problem of the child will be mentioned in section in Section-10.1 of ICP. The intervention planned and provided will be mentioned in the section

10.3 and 10.4 respectively and the changes observed in the child will be mentioned in Section 10.5. Any other support services needed for the child with regard to substance use will be recorded in section 10.6. Once the intervention for the child is completed the summary of intervention will be mentioned in Section 10.7. The follow up services planned for the child and details of the follow up will be mentioned in table given below on a quarterly basis.

Educational and vocational support services for children: The problems of the child related to education will be assessed by the counsellor at JJB and mentioned in Section. 11. The coordinator from the NGO will do the assessment and appropriate intervention will be planned at NGO level. Referral services will be provided and recorded in case of learning difficulties. Other problem in child such as lack of motivation, lack of facilities, problems at school etc. will be mentioned in the Section 11.1 ICP. The details of intervention planned and provided will be mentioned in Section 11.4 and 11.5 of ICP respectively. The changes due to the intervention will be recorded in Section 11.6 of ICP. Quarterly evaluation will be conducted and recorded in the same section. Other educational support and vocational support services if needed will be recorded in Section 11.7, ICP. Once the intervention planned for the child is completed summary of the evaluation will be recorded. Follow up services that are planned will be recorded in Section 11.8 of ICP.

Legal support services. The free legal service provided for the child will be informed to the child in JJB. The NGO to ensure the child gets free legal aid service, any other legal support services needed for the child will be identified by the NGO and recorded in Section 12.1 of ICP. The legal support needed and provided will be mentioned in Section. 12.3 and 12.4 of ICP respectively. . the result of the legal intervention will be recorded in Section 12.5 of ICP. This will recorded in a quarterly basis. Any other legal support service needed for the child or the family will be identified and reported in Section 12.6 of ICP. Summary of the legal intervention and follow up services will be recorded in Section 12.7 of ICP.

Social issues experienced by children: Social issues experienced by children will be assessed by the counsellor at JJB and will be recorded in Section.13. The coordinator from NGO will confirm the social problems and identify problems to be addressed and recorded in Section 13.1 of ICP. The intervention planned and provided will be recorded correspondingly n Section 14.3 and 13.4 of ICP respectively and the changes observed due to intervention will be recorded in Section. 13.5 of ICP. This will be recorded quarterly. the follow up services needed will be identified, provided and recorded in Section 13.6 and 13.7 of ICP.

Other issues experienced by the child. If the child is experiencing any other issues in life that will be recorded in Section 14.

Group work with children in conflict with law: Group work will be conducted with children. Detail report of children outcome will be recorded in the concerned area in Section. 15 of ICP. Any specific problem that need to be addressed that came up through group work will be mentioned in Section 15.3 of ICP and summary of intervention will also be mentioned here.

Individual counselling session for the child: The individual counselling sessions for the child according to the specific need will be carried out for each child. The details of the session will be documented in Section 16 of ICP. The Objective of the session will be mentioned in Section 16.1 and the outcome will be mentioned in Section. 16.2 of ICP. Details of support services need for the child identified through individual counselling will be recorded in Section 16.3 of ICP. The referral services needed to address the specific issues will be recorded in Section no 16.4 of ICP. Summary of the individual counselling sessions with the child will be recorded in Section 16.5 of ICP. Details of follow up needed and provided will be mentioned in Section 16.6 of ICP.

Life skills education for children in conflict with law: Life skills education will be provided for all the children. The life skills education program attended by the child with session details will be mentioned

in Section 17.1 of ICP. The participation of the child will be mentioned as good average or poor in each session. Major output from the child for the session will be reported.

Networking with Other Government and Non Government Agencies Departments and Offices): The NGO need to network with government and non government agencies to provide holistic spectrum of services to the child in conflict with law. The appropriate government programs and schemes to support children need to be identified and made available for the child and family to ensure better social, family and educational environment for the child. The welfare programs and schemes received by the child will be entered in the ICP(Section.18)

Specific skills or talents of children: The specific skills and talents or qualities in children that need to be encouraged and addressed will be mentioned in Section: 19 of ICP (eg: sports, arts, drawing etc.).

Quarterly review by legal cum probation officer: The legal cum probation officer will conduct the quarterly review of each child on the intervention provided, changes observed and comments will be submitted to the JJB. The comments from legal cum probation officer will be recorded in Section. 19 of ICP

FORM-3

Individual Care Plan

| Section. 01 - DETAILS OF THE CASE | | | | | | |
|---|--------------------|----------|-------------------------|------------------------------------|------------|-----------------------------|
| Police station: | | Case no: | | Section: | | |
| Nature of alleged offence: | | | | | | |
| Past history of alleged offence: | | | | | | |
| Case summary: | | | | | | |
| Section. 02 - SOCIO DEMOGRAPHIC PROFILE | | | | | | |
| 1. Child name: | | 2. Age: | | 3. Gender: | | 4. Education: |
| 5. Religion: | | | | 6. Caste: | | |
| 7. Family Type: | | | | | | |
| 8. Other family characteristics: | | | | | | |
| 9. Monthly family income: | | | | 10. Domicile: | | |
| 11. Date of admission: | | | | 12. Date of starting intervention: | | |
| Details of other members in the family | Age | Gender | Relationship with child | Education | Occupation | Crime history/ Case history |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |
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| Sec. 03 - OBSERVATION REPORT - HOME SUPERENDENT | | | | | | |
| Date | Observation | | | Concerns | | Remark |
| | | | | | | |
| Section. 04 - REPORTING OF QUARTERLY/ HALF YEARLY POSTING JJB | | | | | | |
| Quarter/ Date | Observation by JJB | | | | | |
| | | | | | | |
| Section. 05 – QUARTERLY REPORTING WITH POLICE | | | | | | |
| Quarter/ Date | Observation | | | Concerns | | Remark |
| | | | | | | |

| | | | |
|--|--------------------|-----------------|--|
| Section. 04 - REPORTING OF QUARTERLY/ HALF YEARLY POSTING JJB | | | |
| Observation by JJB | | | |
| | | | |
| Section. 05 – QUARTERLY REPORTING WITH POLICE | | | |
| Quarter/ Date | Observation | Concerns | |
| | | | |
| Section. 06 –SUMMARY | | | |
| 1. Problem in family structure or parental characters of the child: | | | |
| How severe is the problem | 1 | 2 | |
| 2. Problems in the family (interactions and relationships) | | | |
| How severe is the problem | 1 | 2 | |
| 3. Stressful life events: | | | |
| How severe is the problem | 1 | 2 | |
| 4. Social and environmental factors: | | | |
| How severe is the problem | 1 | 2 | |
| 5. Problems at individual level for the child: | | | |
| How severe is the problem | 1 | 2 | |
| 6. Problems related to education/ vocation | | | |
| How severe is the problem | 1 | 2 | |
| 7. Work related problem | | | |
| How severe is the problem | 1 | 2 | |
| 8. High risk behavior | | | |
| How severe is the problem | 1 | 2 | |
| 9. Anxiety | | | |
| How severe is the problem | 1 | 2 | |
| 10. Emotional problem | | | |
| How severe is the problem | 1 | 2 | |
| 11. Conduct problems | | | |

| | | | | | |
|--|--|---|---|---|---|
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 1. Hyper activity | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 2. Problem with peers | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 3. Suicidality | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 4. Alcohol abuse | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 5. Non alcoholic psychoactive substance use | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 6. Poor pro social behavior | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 7. Other psychosocial problems | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| 8. Other psychosocial problems | | | | | |
| How severe is the problem | 1 | 2 | 3 | 4 | 5 |
| Section.07 - FAMILY PROFILE, FAMILY INTERVENTION AND SUPPORT | | | | | |
| Check the following factors: a) Family interaction b) family developmental stage c) boundaries and subsystem, d) leadership in the family and decision making, e) role structure and functioning, f) communication in the family g) presence of reinforcement h) cohesiveness g) family rituals h) adaptive patterns and social support system. Give details: | | | | | |
| Any specific problems identified in the family? | | | | | |
| 7.3 Intervention Plan | 7.4 Intervention provided Session details | | | 7.5 Changes observed | |
| <ul style="list-style-type: none"> First Quarter: Second quarter: Third quarter: Fourth quarter | <ul style="list-style-type: none"> First Quarter Second quarter: Third quarter: Fourth quarter | | | <ul style="list-style-type: none"> First Quarter: Second quarter: Third quarter: Fourth quarter | |
| 7.7 Summary of the intervention and follow up services | | | | | |
| Section. 08 - PHYSICAL HEALTH NEEDS | | | | | |
| 8.1 Is the child having any major health complain? (Injury, growth, impaired mobility, hearing, sight, speech, allergies, major or minor illness, poor hygiene and health habits etc.) Give details: | | | | | |

| | | |
|---|---|---|
| 8.4 Intervention Plan | 8.5 Intervention provided Session details | 8.6 Changes observed in child's health |
| <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter |
| 8.8 Summary of the intervention and follow up services | | |
| Section.9- MENTAL HEALTH NEEDS | | |
| 9.1 Is the child suspected to have any mental health problem? (Anxiety, Depression, Emotional problem, Conduct disorder, Hyperactivity, self harm and suicidality, others). Give details: | | |
| 9.3 Intervention Plan | 9.4 Intervention provided Session details | 9.5 Changes observed in child's health |
| <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter |
| 9.7 Summary of the intervention and follow up services | | |
| Section.10 -ALCOHOL/ OTHER SUBSTANCE USE SUPPORT SERVICES | | |
| 10.1 Is the child alcohol/substance dependent? Give details: | | |
| 10.3 Intervention Plan | 10.4 Intervention provided Session details | 10.5 Changes observed in child's health |
| <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter |
| 10.7 Summary of the intervention and follow up services | | |
| Section.11 - EDUCATION/ VOCATIONAL SUPPORT SERVICES | | |
| 11.1 Is the child having any problem in school/ college/ institute/ education ? Give details: | | |
| 11.4 Intervention Plan | 11.5 Intervention provided Session details | 11.6 Changes observed in child's health |
| <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter |
| 11.8 Summary of the intervention and follow up services | | |
| Section. 12 - LEGAL SUPPORT SERVICES | | |
| 1.1 Is the child in need of any legal support? Give details: | | |

| Section. 13 - SOCIAL ISSUES EXPERIENCED BY CHILDREN | | |
|---|---|---|
| 13.1 Social issues experienced by the child and family? Give details: | | |
| 13.3 Intervention Plan | 13.4 Intervention provided Session details | 13.5 Changes observed in child's health |
| <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter |
| 13.7 Summary of the intervention and follow up services | | |
| Section. 14 - OTHER ISSUES EXPERIENCED BY CHILDREN&FAMILY | | |
| 14.1 Is the child having any other problem that needs to be addressed?Give details: | | |
| 14.3 Intervention Plan | 14.4 Intervention provided Session details | 14.5 Changes observed in child's health |
| <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter | <ul style="list-style-type: none"> · First Quarter: · Second quarter: · Third quarter: · Fourth quarter |
| 14.7 Summary of the intervention and follow up services | | |
| Section.15- GROUP WORK WITH CHILDREN IN CONFLICT WITH LAW | | |
| Medium used | Outputs (Attach the original out puts of the child in the file) | |
| Facialexpressioncard | Stage - 1 | |
| | Stage - 2 | |
| | Stage - 3 | |
| | Stage - 4 | |
| | Stage - 5 | |
| Thematic story card | Stage - 1 | |
| | Stage - 2 | |
| | Stage - 3 | |
| | Stage - 4 | |
| | Stage - 5 | |
| Drawing | Stage - 1 | |
| | Stage - 2 | |
| | Stage - 3 | |
| | Stage - 4 | |
| | Stage - 5 | |

| | | |
|---|-----------|--|
| Family portrait | Stage - 1 | |
| | Stage - 2 | |
| Family of dolls / Story from my life | Stage - 1 | |
| Writing | Stage - 1 | |
| | Stage - 2 | |
| | Stage - 3 | |
| | Stage - 4 | |
| | Stage - 5 | |
| Clay modeling | Stage - 1 | |
| | Stage - 2 | |
| | Stage - 3 | |

16.3 Summary of the psychosocial intervention through psychosocial medium and details of follow up needed:

Intervention completed by: (Name): Signature with date

Section. 16 - INDIVIDUAL COUNSELING SESSION WITH CHILDREN

| Date & Time | 16.1 Objective | 16.2 Outcome |
|-------------|----------------|--------------|
| | | |

16.5 Summary of the individual session with children:

Intervention completed by: (Name): Signature with date

Section. 17 - LIFE SKILLS EDUCATION FOR THE CHILD

| Date and time | 18.1 Life skills | 18.2 Participation: | | | 18.3 Major outputs from the child |
|--|------------------|---------------------|---|---|-----------------------------------|
| | | 1. Good | | | |
| | | 2. Average | | | |
| | | 3. Poor | | | |
| | Day – 1 | 1 | 2 | 3 | |
| Life skills to address issues among children | | | | | |
| | Day – 2 | 1 | 2 | 3 | |
| | Day – 2 | 1 | 2 | 3 | |

**Section. 18 - NETWORKING WITH OTHER GOVERNMENT AND NON
GOVERNMENT AGENCIES DEPARTMENTS AND OFFICES**

| Date | Agency | Purpose | Remark |
|-------------|---------------|----------------|---------------|
| | | | |

Section. 20 - QUARTERLY REVIEW BY LEGAL CUM PROBATION OFFICER

| Quarter | Observations |
|----------------|---------------------|
| Quarter-1 | |
| Quarter-2 | |
| Quarter-3 | |
| Quarter-4 | |

Appendix 4

FORM-4

PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW-A PILOT PROGRAM BY DEPT. OF WOMEN AND CHILD DEVELOPMENT, KERALA IN COLLABORATION WITH NIMHANS, BENGALURU

IMPLEMENTED BY -----(NGO)---(PLACE)

[illegible]

APPENDIX 5 DCPO - MONTHLY / QUARTERLY / HALF YEARLY / ANNUAL REPORT

FORM-5

PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW-A PILOT PROGRAM BY DEPT. OF WOMEN AND CHILD DEVELOPMENT, KERALA IN COLLABORATION WITH NIMHANS, BENGALURU

IMPLEMENTED BYNGO.....PLACE.....

| Item No. | Intervention | First Quarter | | | Second Quarter | | | Third Quarter | | | Fourth Quarter | | | Total For The Year |
|---------------------|--|---------------|-------|-------|----------------|-------|-------|---------------|-------|-------|----------------|-------|-------|--------------------|
| | | Ngo-1 | Ngo-2 | Total | Ngo-1 | Ngo-2 | Total | Ngo-1 | Ngo-2 | Total | Ngo-1 | Ngo-2 | Total | |
| 1. | Total number of children | | | | | | | | | | | | | |
| 2. | Number of children whose psychosocial assessment is completed | | | | | | | | | | | | | |
| 3. | Number of children whose individual care plan is prepared | | | | | | | | | | | | | |
| 4. | Number of children supported through family intervention | | | | | | | | | | | | | |
| 5. | Number of children provided educational Support | | | | | | | | | | | | | |
| 6. | Number of children supported through vocational training (Joined) | | | | | | | | | | | | | |
| 7. | Number of children referred for psychiatric services | | | | | | | | | | | | | |
| 8. | Number of children referred for physical health Support | | | | | | | | | | | | | |
| 9. | Number of children who were provided police support | | | | | | | | | | | | | |
| 10. | Number of children who were provided legal support | | | | | | | | | | | | | |
| 11. | Number of children supported through preventive intervention for substance use | | | | | | | | | | | | | |
| 12. | Number of children supported through referral for de addiction | | | | | | | | | | | | | |
| 13. | Number of community level intervention program Conducted | | | | | | | | | | | | | |
| 14. | Number of children supported through individual counseling | | | | | | | | | | | | | |
| 15. | Number of children supported through life skill education | | | | | | | | | | | | | |
| 16. | Number of children supported through parent management training sessions | | | | | | | | | | | | | |
| 17. | Number of children supported through group work | | | | | | | | | | | | | |
| 18. | Other services | | | | | | | | | | | | | |
| 19. | Others | | | | | | | | | | | | | |
| PROCESS OF CHANGE | | | | | | | | | | | | | | |
| 1. | Process initiated | | | | | | | | | | | | | |
| 2. | Maintaining development | | | | | | | | | | | | | |
| 3. | Intersectoral SUPPORT | | | | | | | | | | | | | |
| 4. | Rehabilitation | | | | | | | | | | | | | |
| 5. | Reintegration to family and COMMUNITY | | | | | | | | | | | | | |
| 6. | Termination | | | | | | | | | | | | | |
| 7. | Excluded from the project | | | | | | | | | | | | | |
| INTERVENTION STATUS | | | | | | | | | | | | | | |
| 1. | No. of children terminated | | | | | | | | | | | | | |
| 2. | Number of children in follow up | | | | | | | | | | | | | |
| 3. | Children referred or in other services and in follow up | | | | | | | | | | | | | |
| 4. | Recidivism reported | | | | | | | | | | | | | |

APPENDIX 6 - CASE TRANSFER FORM

FORM-6



GOVERNMENT OF KERALA

District child protection unit

Place.....

Date.....

Phone.....

District Child Protection Officer

District.....

To

.....

.....NGO)

Sir/Madam

Subject: Children to be included in KAVAL program

Given below are the details of children to be included in KAVAL program as per the referral form
Juvenile Justice Board.....District)

| Child name | Case number | Sections | Address | Phone |
|------------|-------------|----------|---------|-------|
| | | | | |

Yours faithfully

(Signature)

Name.....

(District child protection officer)

District

APPENDIX 7 - CASE ACKNOWLEDGEMENT FORM

FORM-7 KAVAL

NGO.....

Email.....

Phone No:

Place.....

Date.....

To

The District Child Protection Officer

District.....

Sir/ Madam,

Subject.....

.....NGO) Children to be included in KAVAl program

Ref: Order no:

We here by acknowledge the receipt of following children to be included in Kaval program for provision of psychosocial care services.

| Child name | Case number | Sections | Address | Phone |
|------------|-------------|----------|---------|-------|
| | | | | |

Yours faithfully

(Signature)

Name.....

NGO.....

APPENDIX 8 - SJPU INFORMATION FORM

FORM-8
KAVAL

NGO.....

Email.....

Phone No:

Place.....

Date.....

To

The Sub Inspector of Police

Police station.....

Place

Sir/ Madam,

Subject.....

.....NGO) Children to be included in KAVAl program

Ref:(DCPO Order no:)

As per the order mentioned above the following children are being referred to be included for KAVAl program in

.....NGO name) for provision of psychosocial care.

We request all support form police towards the same.

| Child name | Case number | Sections | Address | Phone |
|------------|-------------|----------|---------|-------|
| | | | | |

Yours faithfully

(Signature)

Name.....

NGO.....

QUARTERLY REPORTING FORMAT

KAVAL-PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW IMPLEMENTED
BY(NGO).....(PLACE)
QUARTERLY REPORT FOR THE PERIODTO

BACK GROUND INFORMATION OF CHILDREN IN CONFLICT WITH LAW

| Name of NGO | | Till previous quarter From..... to | Current quarter From.....to..... | Total |
|--|----------------------------------|---|-------------------------------------|-------|
| Number of cases allotted | | | | |
| Gender | Male | | | |
| | Female | | | |
| | Others | | | |
| Age | Less than 10 years | | | |
| | 11-15 years | | | |
| | 16-18 years | | | |
| | 18 years and above | | | |
| Education | Upper primary | | | |
| | High school | | | |
| | 10th pass | | | |
| | Plus two(twelfth) | | | |
| | Vocational and Technical course | | | |
| | Graduation | | | |
| | Drop out(before completing 10th) | | | |
| | others | | | |
| Family type | Joint family | | | |
| | Nuclear family | | | |
| | Single parent family | | | |
| | Others | | | |
| Economic status | APL | | | |
| | BPL | | | |
| Occupation | Working | | | |
| | Non-working | | | |
| | Part time (with studies) | | | |
| | Student | | | |
| Frequency of offences | Repeat offender | | | |
| | First time offenders | | | |
| History of crime in family | Yes | | | |
| | No | | | |
| Offence after or during intervention(Recidivism) | Yes | | | |
| | No | | | |
| Alleged crime | Attempt to murder | | | |
| | POCSO | | | |
| | Theft | | | |
| | Hurt | | | |
| | Narcotics/ substance | | | |
| | PDPP | | | |
| | M.V. Act | | | |
| | Others | | | |

PSYCHOSOCIAL INTERVENTION SUMMARY

| | | | |
|--|---|---------------------------------------|---------------------------------------|
| District | | | |
| Name of NGO | | | |
| | Till previous quarter From..... to | Current quarter From..... to | Total number of children supported |
| Total number of children | | | |
| Number of children whose psychosocial assessment is completed | | | |
| Number of children whose individual care plan is prepared | | | |
| Number of children supported through family intervention | | | |
| Number of children supported through educational support | | | |
| Number of children supported through vocational support / career guidance | | | |
| Number of children referred for psychiatric service | | | |
| Number of children who were provided mental health support | | | |
| Number of children who were provided physical health support | | | |
| Number of children who were provided support through police | | | |
| Number of children who were provided legal support / legal awareness | | | |
| Number of children supported through preventive intervention for substance use | | | |
| Number of children supported through referral for de addiction | | | |
| Number of community level intervention program conducted | | | |
| Number of children supported through individual counselling | | | |
| Number of children supported through life skill education | | | |
| Number of children supported through parent management training sessions | | | |
| Number of children supported through group work others | | | |
| Others (competitions and other activities) | | | |

KAVAL-PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW IMPLEMENTED
 BYNGO).....(PLACE)
 QUARTERLY REPORT FOR THE PERIODTO

PROCESS OF CHANGE

| Name of NGO | Till previous quarter From.....to..... | Current quarter From.....to..... | TOTAL |
|------------------------------------|---|-------------------------------------|-------|
| Total number of cases | | | |
| Process initiated | | | |
| Maintaining development | | | |
| Intersectoral approach | | | |
| Rehabilitation | | | |
| Reintegration | | | |
| Termination | | | |
| Excluded from the programme | | | |

KAVAL-PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW IMPLEMENTED
 BY(NGO).....(PLACE)
 QUARTERLY REPORT FOR THE PERIODTO

INDICATORS OF PROGRESS

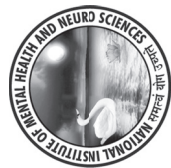
| DISTRICT | | | |
|--|--|---|-------|
| Name of NGO | Till previous quarter From.....to | Current quarter From.....to | TOTAL |
| Total number of children | | | |
| No of children reinitiated study | | | |
| No of children joined vocational training | | | |
| No of children completed vocational training | | | |
| No of children placed after training | | | |
| No of children employed (Without training) | | | |
| No of children sought de-addiction treatment | | | |
| No of children completed de addiction treatment with follow up | | | |
| Others | | | |

REFERENCE

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2. Kavitha P, Sekar K, & Raj. Psychosocial Care for Children in Difficult Circumstances-A Community Based Approach. National Journal of Professional Social Work. 2012. 13(1–2);28–41.
3. The Juvenile Justice (Care and Protection of Children) Act, 2015.
4. Sekar K, Kavitha P, Soc Sci AJ. Psychosocial Problems among Children in Difficult Circumstances. Artha J Soc Sci. 2015;14(2):53-70. doi:10.12724/ajss.33.4



KAVAL- PSYCHOSOCIAL CARE FOR CHILDREN IN CONFLICT WITH LAW CONTRIBUTORS



| District | Juvenile Justice Board | Peer validators from ICPS | Peer validators from NGO | Special Juvenile Police Unit |
|------------|---|--|--|---|
| Kasargode | Hon. Mag. Smt Sreeja Janardhanan Nambar Members Adv. B Mohankumar Smt. Baby Balakrishnan | DCPO : Ms. Bindu LCPO: Adv. Sreejith A Counsellor: Ms. Anu | Health Line Kasaragod Coordinator: Sijo Thomas Case worker: Akhil .B | Mr. Prithvirajan . E.P. ASP, Kerala Police Mr. Amminikuttan. DYSP, Kerala Police Saji Narayanan, DYSP, Kerala Police Subair , DYSP, Kerala Police Abdul Wahab , DYSP, Kerala Police Anil Kumar.K, DYSP, Kerala Police Pradeep Kumar.P, DYSP, Kerala Police Radhakrishnan , DYSP, Kerala Police M. Sukumaran , DYSP, Kerala Police T.R Rajesh Ramanan, DYSP, Kerala Police A. Santhosh Kumar, DYSP, Kerala Police Shaju Paul, DYSP, Kerala Police |
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| | | | | |
|--------------------|--|---|---|---|
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