

**SITUATION OF CHILDREN AND CHILD PROTECTION PLAN:  
GADAG DISTRICT**



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GADAG DISTRICT**

By

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## LIST OF ABBREVIATIONS

ART	Anti-Retroviral Therapy
CHILDLINE	24 hour help line for children in distress
CWC	Child welfare committee
CWSN	Children with Special Need
DCPS	District Child Protection Society
EFA	Education for All
FGD	Focus Group Discussion
GOI	Government of India
ICTCs	Integrated Counselling and Testing Centres
ICDS	Integrated Child Development Services Scheme
IMR	Infant Mortality Rate
JJB	Juvenile Justice Board
MDGs	Millennium Development Goals
MMR	Maternal Mortality Rate
NPAC	National Plan of Action for Children
NGO	Non-Government Organization
NCLP	National child Labor Programme
NCPCR	National Commission for Protection of Child Rights
NPE	National Policy on Education
POA	Plan of Action
RTE	Right to Education
SCLPs	State Child Labour Programme
SAA	Special Adoption Agency
SSA	Sarva Shiksha Abhiyan
SMN	Seriously Mal Nourished
SAM	Severe Acute Malnutrition
UNICEF	United Nations International Children's Emergency Fund
UNCRC	United Nations Convention of the Rights of the Child
UTs	Union Territories
UN CRPD	United Nations Convention on the Rights of Persons with Disability





## EXECUTIVE SUMMARY

Every child has a right to protection. This not only includes children who are in difficult circumstances and those who have suffered violence, abuse and exploitation but also those who are not in any of these adverse situations and yet need to be protected in order to ensure that they remain within the social security and protective net. The argument is more convincing due to the fact that children constitute the most vulnerable section of our society who are also considered as an asset of the nation.

Many efforts right from the international arena in the past (UNCRC onwards) have culminated in child protection efforts at the national, provincial and finally at the micro level. In India too such efforts have received serious attention and the present report is an attempt to bring out the conditions of vulnerable Children and the efforts to protect their interests as well.

### **About Gadag District:**

Gadag district was formed in 1997 out of the east while Dharwad district. For the administrative purpose the district is divided into 5 taluks- Gadag, Mundargi, Nargund, Ron and Shirahatti. The following table gives the population profile of the district for the year 2011.

Population Profile - Gadag District - 2011 Census

Male Population	537,147
Female Population	527,423
Total Population	1,064,570
Rural Population (%)	64
Urban Population (%)	36
SC Population (%)	16.4
ST Population (%)	5.8

The district is predominantly an agriculture-based district and cultivable land is the backbone of its economy and it contributes about 66% of the district income. The district is having significant proportion of child population i.e. 23 per cent of (below 18 years) the total population. The share of different age groups within this is as indicated below.

0-6 – 45.1

6-14 – 35.7and

14-18 - 19.3

Most of the households in the district are dependent on rain fed agriculture which can't provide sufficient employment and income. The farmer households mostly belong to *Lambani* group and other weaker sections of the society i.e. SC and ST, who often migrate to other places outside the district in search of employment along with the children. In this process most of the children are neglected and hence most of their rights are denied. The Shivaraj Patil committee report also narrates the fact that the district had more number of child marriages. Children also face innumerable venerable factors which make the case for a study like this. In this background the study took up the following objectives.

### **Purpose of the Study:**

The Constitution of India recognizes the vulnerable position and their right to protection. In this background various attempts were initiated in the country to protect the interests in the children. The major focus of the study is to sketch the situation analysis of the conditions of vulnerable children in the district. An attempt is also made to evolve the Child Protection Plan for the benefit. In so doing both primary and secondary data have been collected and used in the report.

### **Objectives of the study**

1. To analyse the situation of children in Gadag district based on the primary data collected from Gram Panchayats, data from concerned government departments and Focused Group Discussions (FGDs) on various issues concerning to children (Child labour, Child Trafficking, School dropouts, Child abuse, Street and Missing Children, and special need children)
2. To prepare District Child Protection Plan by suggesting measures for effective functioning of the agencies specified under Integrated Child Protection Scheme (ICPS) to address these needs, problems and issues faced by the Children specific to the district.

### **Methodology**

The required data has been collected from all the 106 GPs using the schedule designed by the Department of Woman and Child Welfare. Apart from this, data from concerned government departments have also been collected. For getting in-depth information about the child situation, 18 Focus Group Discussions (FGDs) were also

conducted with the key informants, consisting of GP representatives, officials from Health, Education, Police and Women & Child Welfare Department, village elders, children, women members, Religious leaders and NGOs/Voluntary organisations.

### **Findings of the Study**

The following are the major findings of the study.

#### **Sex Ratio:**

There are about 2, 17,849 children aged below 18 years in the district in 2014. The child population in the age group of 0-6, 6-14 and 14-18 are 45%, 36% and 19% respectively. Sex ratio of the district as per 2013 is 992. The same in 2011 was 947 which has improved over the period of time.

**Child Marriage:** There are many cases of child marriages in the district and the district administration has made attempts to prevent them. Lack of education and *Moodhanambike (superstitions)* are the main reasons for child marriages.

**Infant Death Rate:** The infant death rate is on the decline in the district. It was 28 during 2009-10 which got reduced to 18 in the year 2011-12. However during the same period the < 6 death rate remained same at 5.

**Maternal Mortality:** The MMR was 185 for the period 2009-10 which got reduced to 118 during 2011-12.

**Malnourishment:** On an average 1.6 per cent of the children (0-6 years) are seriously malnourished (SMN) and 25.6 per cent of children (0-6 years) are under weight. The extent of SMN and under weight is more in girl children as compared to boys.

**Orphan Children:** There are 755 orphan children in the district. The proportion of orphan in the age group 6-14 is high (i.e. 44.2 %) compared to age group of 0-6 and 14-18 (i.e. 22.3 % and 33.5% respectively).

**Disabled Children:** There are 18,593 disabled children in the district i.e. 8.5 per cent of the total children. Among them 39.4 per cent are blind, 15.5 per cent physically disabled, 15.0

per cent duff & dumb, 5.0 per cent with mental illness, 4.2 per cent mentally retarded, 1.3 per cent leprosy affected and 0.2 per cent are multi disabled children.

**Children with HIV/AIDS:** There are 224 HIV/AIDS infected and 262 HIV/AIDS affected children in the district. The district child protection unit has been providing financial assistance under '*Vishesha Palana Yojane*' for HIV/AIDS infected and affected children in the district.

**Child Labour:** There are 373 child labourers in the district. Out of the total child labourers, 63 per cent are male and remaining 37 per cent are female. About 70 per cent of child labourers are working in non-hazardous occupation, namely, agriculture and other allied occupations like sheep/cattle rearing and remaining 30 per cent are working in hazardous occupation like brick making industry. Efforts are being made to prevent the child labour by the labour department by identifying the child labour and imposing fine on the owners. Efforts are also being made to mainstream such children.

**Enrolment:** Out of the 77,797 children in the age group of 6 to 14, about 0.3 per cent (219 children) are never enrolled and about 4.0 per cent (3140) of them have dropped out from the schools. It seems that out of school children are mostly working as child labourers or potential child labourers. Out of 3359 out of school children in the district, only 373 children are reported to be working as child labours, the working status of remaining 2,986 children needs to be studied to bring in corrective measures. Efforts also need to be made to bring these children back to school.

Abused, neglected and abandoned children are the victims of people who are unable or refuse to accept the responsibilities of raising a child. The district administration has been rendering its duties in this regard for proper care of the needy children. Many efforts have been made by the District Child Protection Unit to stop child begging and identify the missing children . Efforts have also been made to rehabilitate the begging children.

Poverty, illiteracy and negligence of the parents contribute to child trafficking in the district. Recently police have made breakthrough in nabbing the persons involved in child trafficking. These persons were planning to sell the children for illegal activities in

neighbouring states. In this connection the community and the police should take necessary care to protect the children.

### **Key intervention areas indentified for the district**

The study finds that child marriage, child labour, sexual harassment, child beggary and declining sex ratio are the major problems in child protection and these issues need to be addressed in the district. For this, a good data base on these issues needs to be strengthened. The district child protection plan has been presented in the report and the key module for each of the challenge is presented below.

<b>Key Issue</b>	<b>Suggested Actions</b>
Child Marriage	To strengthen IEC activities, Training of Child Marriage Watch Committee, Conducting awareness programs for villagers and finally the need is felt to strengthen the enforcement of laws in this regard.
Child Labor	Awareness programs for villagers, Training for Child Protection Committee & Gram Panchayat members, Need to strengthen identification of children and enforcement of Child Labor Act and finally the mainstreaming of children in this regard needs special attention.
Sexual Harassment	There is a need to promote Community awareness, providing wide publicity and implementation of laws relating to sexual harassment and the training to Child Protection Committee.
Child Beggary	Identification of Child beggary places, to provide training for Child Protection Committee and GP members, reaching out parents / guardians of children who are begging. Finally rescue and rehabilitation efforts need to be strengthened.
Orphan Children	Need to have systematic data on orphan children, to provide training for Child Protection Committee and GP members, need to empower children through exposure visit to police stations, efforts to reintegrate families in co-ordination with other department like Education.

Thus, the need is felt to have a holistic approach for the betterment of children in the district. An action plan with a human face would go a long way in protecting the rights of the children in the district.

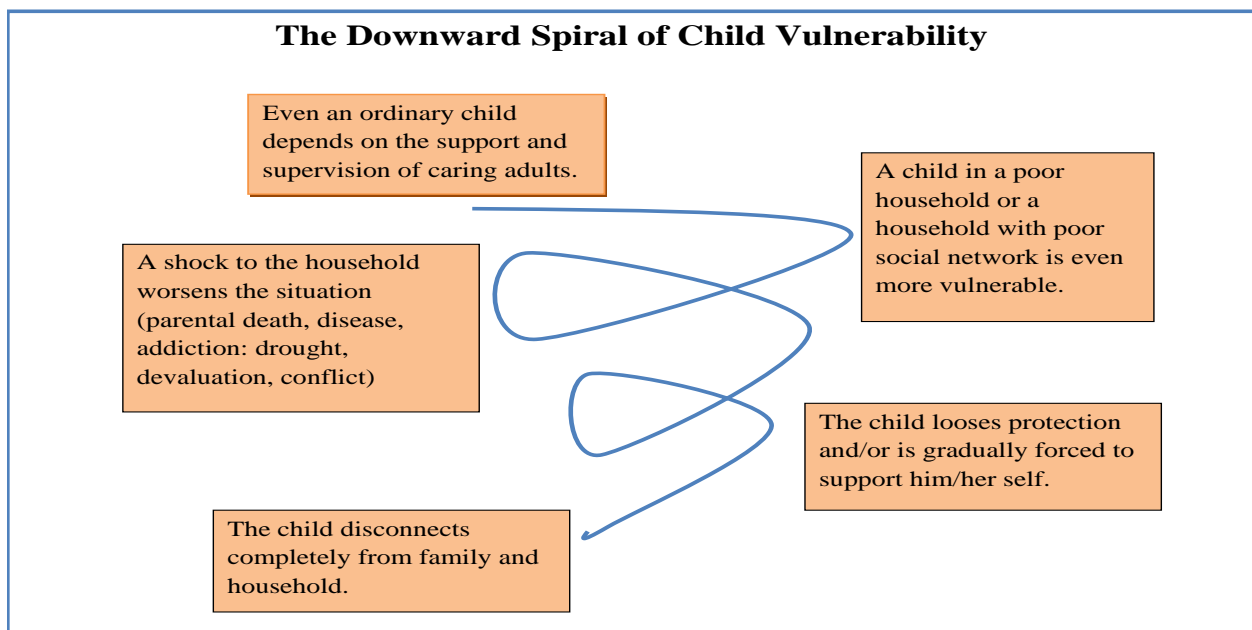
# CHAPTER 1

## INTRODUCTION

### 1.1 INTRODUCTION

Children constitute the most vulnerable section of society and are considered a supremely important asset of our nation. Compared to adults, all children are vulnerable by nature, but some children are more critically vulnerable than others. Child vulnerability is a downward spiral where each shock leads to a new level of vulnerability, and each new level opens up for a host of new risks. In other words, the probability of a child experiencing a negative outcome rises with each shock. At the bottom of this spiral we find children who live outside family care or in situations of severe family abuse and neglect. Orphans and Vulnerable Children (OVC) interventions can be made at all levels to prevent (further) increased vulnerability, or to mitigate the effect of likely shocks. The higher up in the spiral the intervention is made, the more cost-effective it is likely to be. OVC should preferably be assisted before they have reached the most critical stages of vulnerability, because interventions aimed to rescue and rehabilitate the most critically vulnerable children tend to be too expensive to be sustainable and moreover have low rates of success. The following figure shows the downward spiral of child vulnerability.

Picture 1: The Downward Spiral of Child Vulnerability



Source: <http://info.worldbank.org/etools/docs/library/162495/howknow/definitions.htm>

Protection and Development programmes for the specially disadvantaged child should ensure that every child has equal opportunities for optimum personal growth. (Socio-economic circumstances of a family stress, disintegration and child destitution). Special programmes have been evolved as a response to the needs of such families “at risk” These services supplement or substitute parental care and supervision, to promote the overall well-being of vulnerable children prevent neglect abuse and exploitation of children and provide care and shelter for disadvantaged children.

The practice of child protection has undergone a significant change when seen from a historical perspective. The traditional approach of custodial care in an institution is being replaced because of a strong conviction that the right of family is one of the most basic rights of a child. Recognizing this right of a child to a family, all interventions must try and ensure that the physical, social, emotional and educational needs of the child are met in a secure, nurturing family environment. The primary focus of social work intervention is the strengthening of the family, prevention of the family disintegration and abandonment of children. Traditionally in India, the child without parents was by the joint / extended family, but these systems slowly disintegrated and the problem of child destitution has been on the increase. While institutional care has been one of alternatives, even best of institution cannot be a substitute for the individualized care that a family can provide.

The traditional approach of long term institutional care resulted in the child being separated from his family environment. Research studies and experiences have shown that the negative and painful experience in large, de-personalized institutions could result in an “Institutionalized Child Syndrome” accompanied by serious psychological problems. The predominance of institutional care may lead families to seek institutionalization as an option for caring for their children, when faced with crisis. The cost of child care in an institution also far out weights its advantages, and even the best of institutions cannot substitute for the care in a family. Hence it is better to provide support to families in crisis through alternate family based and community oriented Non-Institutional Services, so that the child can be looked after within his/her own family environment.



### **A Paradigm Shift in Approach to Child Protection**

From	To
A Needs Approach	A Rights Based Approach
Welfare of Children	Development of Children
Institutional and Residential Care	Non-institutional and Family Based Alternative Programs
Custodial Care in Institutions	Holistic Development through Quality Child Care in Institutions
Segregation and Isolation from Society	Inclusion and Mainstreaming in Society
The Child Being a Beneficiary and Recipient of Services	The Child Being a Participant and Partner in his/her own Development and decisions that affect his/her life

### **United Nations Convention on the Rights of the Child (UNCRC)**

After sixty years of advocacy and a decade of consultation with various stakeholders, the United Nations Convention on the Rights of the Child (UNCRC) was adopted by the UN General Assembly in 1989. The basic premise of the Convention is that children (all human beings below the age of 18) are born with fundamental freedoms and the inherent rights of all human beings but with specific additional needs because of their vulnerability. The UNCRC is sometimes spoken of as the most complete of the international human rights instruments as it includes civil, political, economic, social, and cultural rights as well as incorporating aspects of humanitarian law. The UNCRC makes children the holders of over 40 fundamental rights while respecting individual traditions and cultures in child care. It is written in such a way that it makes implementation possible in a diverse range of countries with different legal systems. Its language is universal and can be broadly applied.

The UNCRC has been ratified more quickly and by more governments than any other human rights instrument. The USA and Somalia are the only two countries yet to ratify the Convention. By ratifying the UNCRC, countries 'accept an obligation to respect, protect, promote and fulfil the enumerated rights' – including by adopting or changing laws and policies that implement the provisions of the Convention.

Many governments have enacted legislation, created mechanisms and put into place a range of creative measures to ensure the protection and realisation of the rights of those under the age of 18.

## **Evolving capacities**

Children face a confusing array of minimum ages at which they are deemed capable of making decisions for themselves – some of them potentially life-changing. The age at which children can have a say in their medical treatment, for instance, or get married or vote, or choose or reject a religious belief or faith, varies significantly across and even within cultures. The legal minimum age may or may not reflect what children themselves feel they are capable of.

These age-based restrictions are founded on two main assumptions made by adults: first, that children lack the capacity to take responsibility for many decisions about their lives and must therefore be protected from the consequences of bad decisions; and second, that age limits are a crude but simple way to achieve that protection – even if some children might attain competence at a younger age, and others attain competence later.

But are rigid age limits the best way of determining children's competence? Age-based approaches rely heavily on adults' perceptions of children's competence. In some societies, children are already taking on responsibilities for decision-making that would be exceptional elsewhere; other societies protect children to the point where they are given little scope for independent decision-making.

So what are the alternatives? The concept of "evolving capacities", as set out in Article 5 of the United Nations Convention on the Rights of the Child addresses these dilemmas by introducing the idea that children should be able to exercise their rights as they acquire the capacity to do so, rather than when they reach a certain age. It requires parents or legal guardians to guide children appropriately and respect the extent to which they can exercise their rights for themselves. The emphasis is shifted from simple parental authority to include parental responsibility to help children realise their rights and to provide appropriate direction and guidance in the exercise of those rights. This does not undermine the rights of parents. In fact, the principles of the UNCRC recognise the family as 'the natural environment for the growth and well being of its members'.

## **The structure of the UNCRC**

The UNCRC contains 54 sections or 'Articles'. The Articles provide a complete framework of standards, principles and implementation guidance tailored to the specific

needs of childhood. Together these Articles provide, for the maximum possible, children's survival and development.

Part 1 - Articles 1-41 contain the Substantive Provisions of the Convention

Part 2 - Articles 42-45 are concerned with the Implementation and Monitoring of the Convention

Part 3 - Articles 46-54 contain the Final Clauses

### **So why is the UNCRC so important?**

- It lists all children's rights in one document covering the full range of human rights
- It helps us to understand that children need to have access to all their rights if they are to survive and develop fully
- It makes adults see children as individuals with rights
- It applies to all children and young people every where
- 192 countries have ratified it - there is almost universal support for realising the rights of children and more acceptance for this Convention than any other Convention
- It gives us an internationally accepted framework for children's rights that we can use to campaign for children's rights in Wales
- People who know their rights are more able to claim them. So promoting this internationally accepted framework and making its provisions widely known are therefore essential steps in respecting children's rights
- The reporting process – whereby the UN Committee measures how well governments are actually doing, helps to put pressure on governments to make sure children's rights are respected

(Source: <http://www.childrenswales.org.uk/uncrc.aspx>)

### **Child Protection**

The Constitution of India recognizes the vulnerable position of children and their right to protection. Therefore, following the doctrine of protective discrimination, it guarantees in Article 15 special attention to children through necessary and special laws and policies that safeguard their rights. The right to equality, protection of life and personal liberty and the right against exploitation enshrined in Articles 14, 15, 16, 17, 21, 23 and 24 further reiterate India's commitment to the protection, safety, security and well-being of all its people, including children.

The Chapter on Directive Principles of State Policy in the Constitution of India enjoins that the State shall, in particular, direct its policy towards securing:

(.) that the health and strength of workers, men and women, and the tender age of children are not abused and the citizens are not forced by economic necessity to enter avocations unsuited to their age or strength

(..) those children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity, and childhood and youth are protected against exploitation and against moral and material abandonment

(...) that the State shall endeavour to provide early childhood care and education to all children until they complete the age of six years.

Despite such clear commitment to child protection enshrined in the Constitution of India and the UN Convention on the Rights of the Child ratified by India in 1992, and the two Optional Protocols ratified in 2005, and the various national and international commitments made, children continue to remain vulnerable with the number of those needing care and protection ever increasing.

### **Concept of Child Protection**

Every child has a right to protection. This not only includes children who are in difficult circumstances and those who have suffered violence, abuse and exploitation but also those who are not in any of these adverse situations and yet need to be protected in order to ensure that they remain within the social security and protective net.

‘Child Protection’ refers to protection from violence, exploitation, abuse and neglect. Violations of the child’s right to protection, in addition to being human rights violations, are also massive, under-recognized and under-reported barriers to child survival and development. Children subjected to violence, exploitation, abuse and neglect are at risk of: shortened lives, poor physical and mental health, educational problems (including dropping out of school), poor parenting skills later in life, homelessness, vagrancy and displacement.

Conversely, successful protection increases a child's chances to grow up physically and mentally healthy, confident and self-respecting, and less likely to abuse or exploit others, including his or her own children.

'Child Protection' is about protecting children from or against any perceived or real danger/risk to their life, their personhood and childhood. It is about reducing their vulnerability to any kind of harm and in harmful situations. It is also about protecting children against social, psychological and emotional insecurity and distress. It must ensure that no child falls out of the social security and safety net and those who do, receive necessary care and protection to be brought back into the safety net. Child protection is integrally linked to every other right of the child. The failure to ensure children's right to protection adversely affects all other rights of the child and the development of the full potential of the child. Child protection is about protecting every right of every child. It must also relate to children's capacity for self-reliance and self-defence and the roles and responsibilities of family, community, society and State.

<http://wcd.nic.in/wgchilprotection.pdf>

### **The Approach to Child Protection**

The Government's approach to child protection so far has addressed largely those children who have already missed the protective net and fallen into difficult circumstances. Unfortunately the current coverage falls short of reaching the most vulnerable because the interventions through the existing schemes do not cover all the categories of children in difficult circumstances. Even where the interventions exist, for instance, institutional care for children in difficult circumstances, there is much room for improving the infrastructure and expanding the outreach. The quality of services needs up-gradation and regional imbalances need to be addressed.

For building on a comprehensive understanding of children's right to protection, it becomes important to adopt both a preventive and a protective approach to child protection.

The preventive approach – In all these years, application of the preventive approach has been limited to programmes like awareness generation, media advocacy, training and capacity building of various stakeholders, legal literacy, sex education in schools etc. The need of the hour calls for a wider outlook that must go beyond the conventional prevention

strategies and also take into account the link between child protection and other micro and macro development issues. Such a holistic understanding of prevention alone can help keep children within the protective net. Such a proactive approach includes mapping of areas to identify potentially vulnerable families and families with risky behaviour, where children are more vulnerable or likely to come into vulnerable situations. Strengthening the families and family environment must follow. Lateral linkages with different sectors viz. Education, Health, Rural Development Labour, Urban Affairs, Legal Affairs, Home Affairs etc. and different Departments and Ministries of Central and State Governments, including Local Self-Government, PRIs etc. need to be strengthened. A rights-based approach calls for addressing the root causes of any social problem. It is also important that partnership with civil society is strengthened for all stages of planning, implementation and monitoring child protection initiatives. Therefore, a proactive preventive approach as discussed above becomes inevitable.

The protective approach – The protective approach is to deal with situations post-harm and must include immediate as well as long-term protection strategies for all children who need it, including programmes for their physical and psychological recovery, rehabilitation and reintegration, legal aid and access to justice through child-friendly laws and procedures, and clear standards for protection of every individual/family/institution dealing with children.

It is critical to invest in child protection as protection failures are not only human rights violations, but are also major, under-recognized, under-reported and under-acted upon barriers to child survival and development. In addition, the links between protection and other development targets accepted by the country need to be explicitly stated and understood in order to address appropriately the concerns for achieving these and to invest in accordance with the need and magnitude of the problem.

### **Juvenile Justice (Care and Protection of Children) Act**

The Juvenile Justice (Care and Protection of Children) Act, 2000 is the primary legal framework for juvenile justice in India. The Act provides for a special approach towards the prevention and treatment of juvenile delinquency and provides a framework for the protection, treatment and rehabilitation of children in the purview of the juvenile justice system. This law, brought in compliance of Child Rights Convention 1989, repealed the

earlier Juvenile Justice Act of 1986 after India signed and ratified Child Rights Convention 1989 in the year 1992. This Act has been further amended in the years 2006 and 2010. Government of India is once again contemplating bringing further amendments and a review committee has been constituted by Ministry of Women and Child Development which is reviewing the existing legislation. The recent 16 December 2012 gang rape incident in Delhi has raised a popular demand for amending this law to allow harsher punishments to children involved in serious offences.

JJ Act is considered to be an extremely progressive legislation and Model Rules 2007 have further added to the effectiveness of this welfare legislation. However the implementation is a very serious concern even in year 2013 and the Supreme Court of India is constantly looking into the implementation of this law in Sampurna Behrua Versus Union of India and Bachpan Bachao Andolan Versus Union of India. In addition to Supreme Court, various High Courts in India, specifically Bombay High Court and Allahabad High Courts are also monitoring implementation of JJ Act in judicial proceedings. In order to upgrade the Juvenile Justice Administration System, Government of India launched Integrated Child Protection Scheme (ICPS) in year 2009-10 whereby financial allocations have been increased and various existing schemes have been merged under one scheme.

Based on a resolution passed in the year 2006 and reiterated again in 2009 in the Conference of Chief Justices of India, several High Courts have constituted "Juvenile Justice Committees" which are monitoring committees headed by sitting Judges of High Courts. These Committees supervise and monitor implementation of Juvenile Justice Act in their Jurisdiction and have been very effective in improving state of implementation. Juvenile Justice Committee of Delhi High Court is considered a model in this regard.

### **Integrated Child Protection Scheme (ICPS)**

In 2006, the Ministry of Women and Child Development (MWCD) proposed the adoption of the Integrated Child Protection Scheme (ICPS). In 2009, the Central Government gave the scheme its approval and has begun the extensive task of providing children with a protection and safe environment to develop and flourish. The purpose of the Scheme is to provide for children in difficult circumstances, as well as to reduce the risks and vulnerabilities children have in various situations and actions that lead to abuse, neglect, exploitation, abandonment and separation of children. The specific objectives of the Scheme are:

- To institutionalize essential services and strengthen structures
- To enhance capacities at all systems and persons involved in service delivery
- To create database and knowledge base for child protection services
- To strengthen child protection at family and community level
- To coordinate and establish network with government institutions and non-government institutions to ensure effective implementation of the Scheme
- To raise public awareness about child rights, child vulnerability and child protection services.

Within care, support and rehabilitation services the Scheme will provide CHILDLINE services, open shelters for children in need, in urban and semi-urban areas, offer family based solutions through improving sponsorship, foster-care, adoption and after-care services, improve quality institutional services, and general grant-in-aid for need based/ innovative interventions. Within statutory support services the scheme calls for the strengthening of CWCs, JJBs, SJPU, as well as seeing to the set up of these services in each district. Beyond this ICPS also outlines the need for human resource development for strengthening counselling services, training and capacity building, strengthening the knowledge-base, conduct research studies, create and manage a child tracking system, carry out advocacy and public education programmes, and monitoring and evaluation of the Scheme. In order to ensure that the objectives and approaches of ICPS are met, the Scheme also calls for the establishment of new bodies within a service delivery structure.

**At the district level there are:**

- District Child Protection Society (DCPS)
- District Child Protection Committee (DCPC)
- Sponsorship and Foster Care Approval Committee (SFCAC)
- Block Level Child Protection Committee
- Village Level Child Protection Committee

**At the state level there are:**

- State Child Protection Society (SCPS)
- State Adoption Resource Agency (SARA)
- State Child Protection Committee (SCPC)
- State Adoption Advisory Committee



**At the regional level there are:**

- Child Protection Division in the four Regional Centres of National Institute of Public Cooperation and Child Development (NIPCCD)
- Four Regional Centres of CHILDLINE India Foundation (CIF)

**And lastly at the national level there are:**

- CHILDLINE India Foundation- Headquarters
- Child Protection Division in the National Institute of Public Cooperation and Child Development (NIPCCD)
- Central Adoption Resource Agency (CARA)

The Scheme outlines a specific implementation plan. It discusses the need of convergence of services to give the child the integrated plan. This is achieved through coordination of all department and ministries and NGOs involved. The annexure of the Scheme lays out guidelines on how to achieve each service provided in the scheme.

Source: <http://www.childlineindia.org.in/Integrated-Child-Protection-Scheme-ICPS.htm>

## **1.2 NEED FOR SITUATION ANALYSIS OF CHILDREN**

The statement, 'Future of India is the future of the children' indicates the importance of children in the development and welfare of the country. Therefore, concerted efforts should be made to improve the welfare and development of children. Investment on children itself is a good investment for overall socio economic growth. Gadag district is having significant proportion of child population i.e. 23 per cent (below 18 years). The share of children in different age groups, i.e. 0-6, 6-14 and 14-18 years are 45.1 %, 35.7 % and 19.3 % respectively. Most of the households in the district are dependent on rain fed agriculture which can't generate employment and income. Therefore, the farmer households mostly belong to *Lambani* and other weaker sections of the society i.e. SC and ST, who often migrate to other places outside the district in search of employment along with the children. In this process most of the children are neglected and hence most of their rights are denied. The Shivaraj Patil Committee Reports also opines that the district had more number of child marriages. There are many vulnerable factors affecting children in the district. Therefore, the situation of children in the district needs to be studied.

### 1.3 OBJECTIVES OF THE STUDY

1. To analyse the situation of children in Gadag district based on the primary data collected from Gram Panchayats, data from concerned government departments and Focused Group Discussions on various issues concerning children (Child labour, Child Trafficking, School dropouts, Child abuse, Street and Missing Children, and special need children)
2. To prepare District Child Protection Plan by suggesting measures for effective functioning of the agencies specified under Integrated Child Protection Scheme (ICPS) to address the needs, problems and issues faced by the Children specific to the district.

### 1.4 METHODOLOGY OF THE STUDY

The situation analysis and child protection plan has been done for Gadag district in Karnataka. The district has five taluks, namely; Gadag, Nargund, Ron, Shirahatti and Mundargi. The required data has been collected from all the 106 GPs using the schedule designed by the Department of Woman and Child Development, Karnataka. Apart from this, data from concerned government departments have also been collected. Table 1.1 shows taluk wise number of GPs in the district.

**Table 1.1: Taluk wise No. of Gram Panchayats**

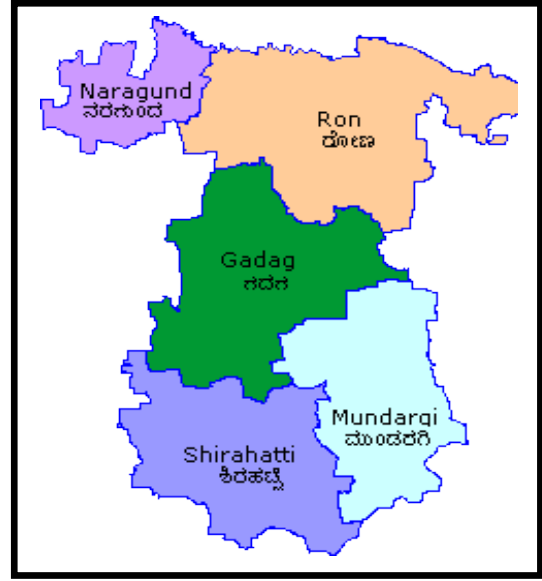
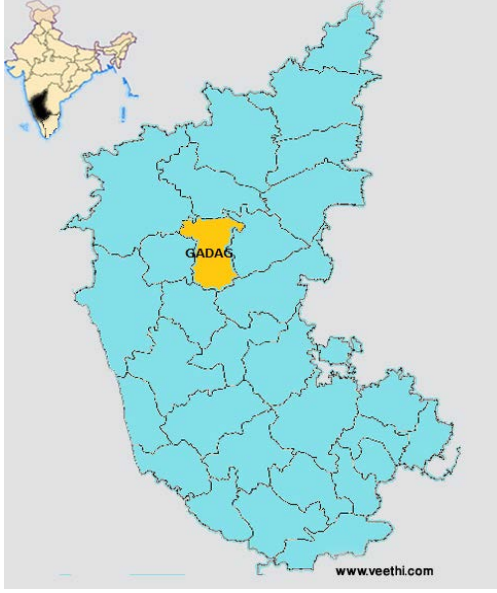
Taluks	No. of Panchayats
Gadag	25
Mundaragi	15
Naragund	12
Ron	30
Shirahti	24
Total	106

For getting in-depth information about the child situation, Focus Group Discussions (FGDs) were also conducted with the key informants, consisting of GP representatives, officials from Health, Education, Police and Women & Child Welfare Department, village elders, children, women members, Religious leaders and NGOs/Voluntary organisations. The names of the organisations which conducted FGD and names of villages where FGDs were conducted are given below.

Taluk	Name of the Organisation	Name of Village where FGD conducted
Nargund	Panchami Mahila and Grameena Abhiruddhi Sansthe (R), Nargund	*Naragund *Chikkanaragund *Shirol *Konnur
Ron	Shri Renuka Vividodyesha Seva Sangh, Gadag-Betageri	*Abbigeri *Holealur *Kotabal *Kurahatti
Gadag	Hiriya Seva Sansthe, Gadag	*Gadag-Kustagi Chawl *Nagavi *Narasapur
Shirhatti	Shrusti Samagra Nagar and Grameena Seva Sansthe, Lakshmeswar	*Battur *Lakshmeswar *Shirahatti *Suranagi
Mundargi	Chirag Grameena Hagu Nagara Abhiruddhi Sansthe (R), Lakshmeswar	*Dambal *Mundargi *Bagewadi *Doni

### 1.5 BRIEF BACKGROUND OF THE DISTRICT

Gadag district was formed in 1997 splitting Dharwad district. Gadag lies between 14.52 North latitudinal parallels and 75.17 and 76.02 East longitudinal parallels. It is bounded by Bagalkot on the north; Koppal on the east; Bellary on the Southeast and Haveri on the Southwest. Gadag is the 26<sup>th</sup> largest district in the state in terms of population and is the 23<sup>rd</sup> largest in terms of land area. For administrative purpose the district is divided into 5 taluks- Gadag, Mundargi, Nargund, Ron and Shirahatti. As per the Census of India, 2001, the district has 9 towns and 329 villages. Gadag town is the administrative head quarters of the district.



In 2011, Gadag had a population of 1,064,570 of which males and females were 537,147 and 527,423 respectively. In 2001 census, Gadag had a population of 971,835 of which males were 493,533 and remaining 478,302 were females. About 64 per cent of the population are in rural area and remaining about 36 per cent are in urban area. SC and ST population constitutes 16.4 per cent and 5.8 per cent respectively.

With regard to Sex Ratio in Gadag, it stood at 982 per 1000 male compared to 2001 census figure of 969. The average national sex ratio in India is 940 as per latest reports of Census 2011 Directorate. In 2011 census, child sex ratio is 947 girls per 1000 boys compared to figure of 952 girls per 1000 boys of 2001 census data. There were total 132,442 children under age of 0-6 against 137,835 of 2001 census. Of total 132,442 male and female were 68,025 and 64,417 respectively. Child Sex Ratio as per census 2011 was 947 compared to 952 of census 2001. In 2011, Children under 0-6 formed 12.44 percent of Gadag District compared to 14.18 percent of 2001. There was net change of -1.74 percent in this compared to previous census of India.

Average literacy rate of Gadag in 2011 was 75.12 compared to 66.11 of 2001. If things are looked at gender wise, male and female literacy rates were 84.66 and 65.44 respectively. For 2001 census, same figures stood at 79.32 and 52.52 for Gadag District. Total literates in Gadag District were 700,177 of which male and female were 397,178 and 302,999 respectively. In 2001, Gadag District had 551,362 literacy rates.

Economy and Infrastructure: Gadag is predominantly an agriculture-based district and cultivable land is the backbone of its economy and it contributes about 66% of the district income. The main food crops are Jawar (sorghum), wheat, maize and pulses while the important commercial crops are groundnut, chillies, onion and cotton. The net sown area of 3.53 lakh hectares constitutes about 76% of the geographical area which is far higher than the state average of 55%. National highway, NH-13 Hubli-Hospet and many district highways crisscross Gadag district.

Gadag District at a Glance									
SlNo	Particulars	Period	Unit	No	SlNo	Particulars	Period	Unit	No
1	Geographical Area	2011	Hectares	465715	19	Primary Schools	2010	Nos.	447
2	Forest Area	2010-11	"	32614	20	High Schools	2010	Nos.	514
3	Net Sowing Area	2010-11	Hectares	3866	21	Allopathic Hospital	2010-11	No.s	85
4	Irrigated Area	2010-11	Hectares	6362	22	Beds in Allopathic hospitals	2010-11	No.s	1008
5	Total Villages	2011	No.s	346	23	Ayurvedic Hospital	2010-11	No.s	3
6	Total Gram Panchayats	2010-11	No.s	106	24	Beds in Ayurvedic hospitals	2010-11	No.s	18
7	Total Population	2011	No.s	1064570	25	Community Health Centers	2010-11	No.s	9
8	Hindu	2011	No.s	883593	26	Primary Health Centers	2010-11	No.s	42
9	Muslim	2011	No.s	117103	27	Dispensaries	2010-11	No.s	49
10	Christians	2011	No.s	42583	28	Private hospitals	2010-11	No.s	29
11	Jain	2011	No.s	8304	29	Net Income (current prices)	2010-11	In Lakhs	422200
12	Others	2011	No.s	12988	30	Per Capita Income (current prices)	2010-11	In Rs	39576
13	Rural Population	2011	No.s	685261	31	G DDP (current prices)	2010-11	In Lakhs	470500
14	Urban Population	2011	No.s	379309	32	Total Banks	2010	Nos.	101
15	S.C. Population	2011	No.s	174196	33	Co-operative Societies	2010	Nos.	11
16	S.T. Population	2011	No.s	61654	34	Post Offices	2010-11	Nos.	210
17	Population Dencity (Per Sq Km)	2011	No.s	229	35	Telephone Connections	2010-11	No.s	17409
18	Literacy	2011	Percentage	75.12	36	Fair Price Shops	31/03/2013	No.s	360

## **1.6 ORGANISATION OF THE REPORT**

The report has been organised in five chapters along with 'Executive Summary' as mentioned below.

Executive Summary

Chapter 1: Introduction

Chapter 2: Situation of Children

Chapter 3: Services/Interventions Available For Children

Chapter 4: District Child Protection Plan

Chapter 5: Major Findings and Concluding Observations

## CHAPTER 2

### SITUATION OF CHILDREN

In this chapter an attempt is made to present the situation of children in the district with a focus on realisation of child rights. In line with human-rights approach, an effort has been made to highlight the immediate, underlying structure and causes of non-realisation of children's rights. It also maps the capacity of various stakeholders local and national governments to work for the realisation of children's rights. The situation analysis of the children has been organised in following sections;

- 1) Child Population and Child Sex Ratio,
- 2) Incidence of child marriage
- 2) Death Rate, Malnutrition and Vaccination
- 3) Orphan and Single Parent Children
- 4) Children with Special need - Vulnerable children, Children of prisoners and commercial sex workers
- 5) Child labourers and out of school children
- 6) Child abuse, neglect and abandoned children
- 7) Street, begging or missing children
- 8) Child trafficking

#### 2.1 CHILD POPULATION AND CHILD SEX RATIO

Based on the primary data collected from the GPs, it is found that Gadag district has 217849 children below 18 years. Table 2.1 shows age group wise, sex wise and taluk wise child population in the district.

**Table 2.1: Child Population in Gadag District 2014**

Taluk	0-6			,6-14			14-18			0-18		
	Male	Femal	Total	Male	Femal	Total	Male	Femal	Total	Male	Femal	Total
Gadag	14239	14542	28781	11193	11255	22448	5875	6191	12066	31307	31988	63295
Ron	12741	12537	25278	10156	9556	19712	4949	4968	9917	27846	27061	54907
Naragund	4145	4278	8423	3611	3526	7137	2323	2350	4673	10079	10154	20233
Mundaragi	7938	7251	15189	6262	6126	12388	3406	3187	6593	17606	16564	34170
Shirahatti	10112	10461	20573	8180	7932	16112	4205	4354	8559	22497	22747	45244
Total	49175	49069	98244	39402	38395	77797	20758	21050	41808	109335	108514	217849

Source: Primary Data Collected from GPs

Diagram 2.1 shows that the child population in the age group of 0-6, 6-14 and 14-18 is 45%, 36% and 19% respectively. It shows that the proportion of younger children is high indicating increasing number of children in recent years.

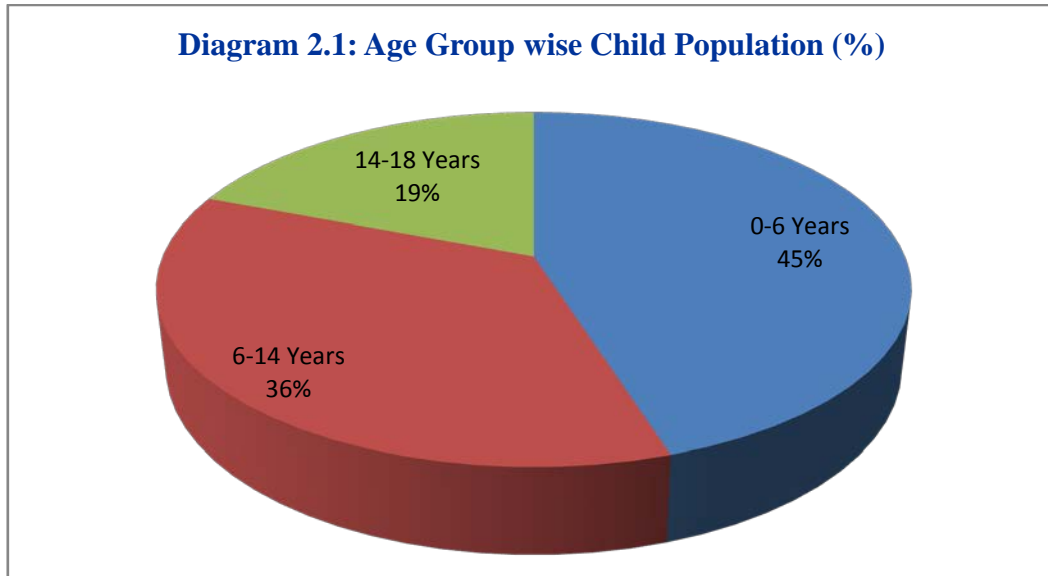
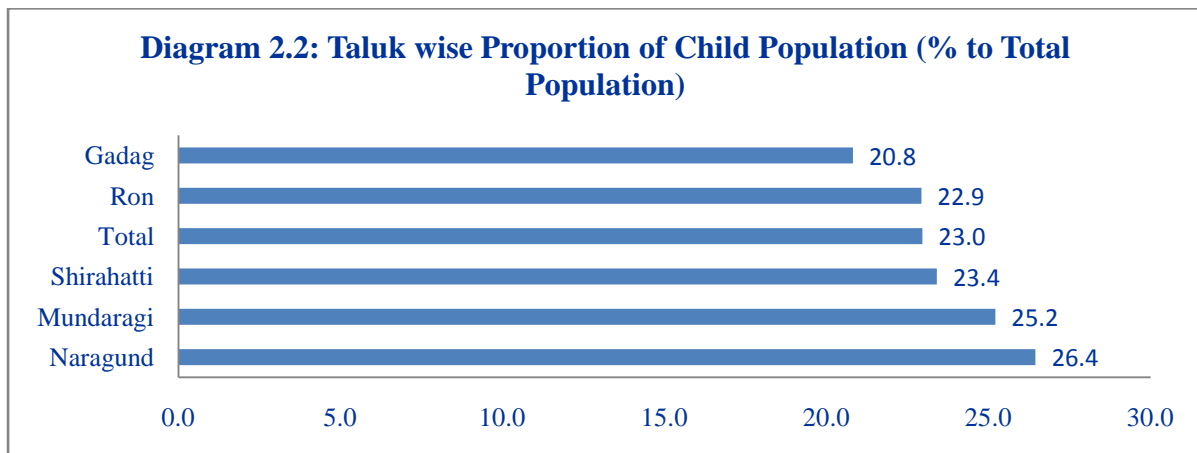


Diagram 2.2 shows the proportion of child population to total population in the district. It reveals that Gadag district has 23 per cent child population with 2,17,849 persons below 18 years among 9,48,911 total population. The following picture shows taluk wise proportion of child population in the district. It reveals that Nargund, Mundargi and Shirahatti have higher proportion of child population compared to district average and Gadag and Ron have lesser proportion of child population.



Sex ratio is an important social indicator to measure the extent of prevailing equity between males and females in a society. It is defined as the number of females per 1000



males in the population. Table 2.2 shows sex ratio in Karnataka and India. It reveals that the overall sex ratio in Karnataka has increased but the child sex ratio has declined from 973 in 2001 to 943 in 2011. The decline in the child sex ratio may be attributed to neglect of girl child, female infanticide, foeticide, selective abortions and misuse of diagnostic procedures.

**Table 2.2: Sex Ratio in Karnataka and India**

Parameter	Year 2011	Year 2001
Sex Ratio of Karnataka	968	964
Child Sex Ratio of Karnataka	943	973
Sex Ratio of India	940	933

*Source: Census, 2011 & 2001*

Table 2.3 shows that the sex ratio of children (0-6 years) in Gadag district is higher than the state average sex ratio i.e. 943 in the year 2011. Though the district child sex ratio is higher than the state average sex ratio, the district's sex ratio has been falling for the period 2001 to 2011. In the year 2001, the sex ratio was 952 and it came down to 947 in the year 2011. The decline in the sex ratio has been observed in both rural and urban areas though the extent of decline is high in urban area. If we look at the taluk wise sex ratio, we find that in Nargund and Gadag taluks the decline in sex ratio is very high, especially in rural areas. In Ron and Mundaragi taluks, it seems that the sex ratio has improved but it has declined in urban areas.

**Table 2.3: Taluk wise and Region wise Sex Ratio of Children (0-6 Years) in Gadag District**

Taluk	2001			2011			Change in Sex Ratio		
	Rural	Urban	Total	Rural	Urban	Total	Rural	Urban	Total
Nargund	949	948	949	902	934	913	-47	-14	-35
Ron	946	983	955	968	960	966	23	-24	11
Gadag	970	945	957	929	954	942	-41	9	-16
Shirhatti	946	975	954	940	965	946	-7	-10	-8
Mundaragi	932	911	928	965	886	949	33	-25	21
Total	950	955	952	946	950	947	-4	-5	-5

*Source: Census of India 2001 & 2011*

Table 2.4 shows age group wise sex ratio, based on the primary data collected in the district.

**Table 2.4: Sex Ratio by Age Group in Gadag (2013)**

Taluk	0-6 Years	,6-14 Years	14-18 Years	0-18 Years
Gadag	1021	1006	1054	1022
Ron	984	941	1004	972
Naragund	1032	976	1012	1007
Mundaragi	913	978	936	941
Shirahatti	1035	970	1035	1011
Total	998	974	1014	992

*Source: Primary data from GPs*

After 2011 census, things do indicate that, there are signs of improvement in the sex ratio in the district. Taking into account the recent data, one can note that in Gadag, Naragund and Shirahatti taluks sex ratio in the age group 0-6 years is more than 1000. In Mundaragi and Ron taluks the data shows that the sex ratio is less than 1000 indicating the need for improvement. Improvement in sex ratio among children might be the result of increased awareness among the people about the girl child, better implementation of the Pre-Natal Diagnostic Techniques (PNDT) Act and implementation of Bhagyalaxmi scheme. The Pre-Natal Diagnostic Techniques (PNDT) Act bans the determination of sex of the foetus. The PNDT Act was introduced in 1996 to prevent misuse of medical technology for pre-natal sex determination and abortion of the female foetus. Because of inadequacies and practical difficulties in the implementation of the Act, it was amended in 2003 and thereafter called Pre-Conception and Pre-Natal Techniques (Prohibition of Sex Selection) Act.

Bhagyalaxmi scheme, which was introduced in 2006, provides financial incentives to BPL families having girl child and thus try to eradicate the social evils like female foeticide, child labour, child marriage and child trafficking. The scheme also has child tracking system. The beneficiary children are being monitored till they attain the age of 18 years, by using the software developed with assistance from NIC. The software, so developed, enables the viewer to know the status of the beneficiaries with regard to health, education, migration from one place to another and benefits availed from other departments under different schemes. Table 2.5 shows number of Bhagyalaxmi beneficiaries in the district.

**Table 2.5: No of Bhagyalaxmi Beneficiaries in Gadag District**

Year	No. of Bhagyalaxmi Beneficiaries
2006-07	6902
2007-08	7509
2008-09	8495
2009-10	7606
2010-11	6714
2011-12	5147
2012-13	5679
2013-14	2337
Total	50280

The general sex ratio by social category reveals that the sex ratio is low compared to district average in Muslim, other religious communities (Jain, Buddhist & Sikh) and ST community and it is 928, 945 and 953 respectively. Christian, SC and other caste have 1114, 1002 and 989 respectively. Therefore, more efforts need to be made to protect the female child in these communities.

## **2.2 INCIDENCE OF CHILD MARRIAGE**

Child marriage is a gross violation of child rights that puts young girls at risk. A marriage where either of the contracting party is a child, is considered as child marriage. Child or minor under this law is defined as 18 years in case of girls and 21 years in case of boys. A Core Committee, headed by Justice Shivaraj Patil, on prevention of child marriages was constituted by the Government of Karnataka. In the year 2011, the Committee submitted its report suggesting some measures to prevent child marriages in the state. According to the report, two out of the five girls in the state are married off before they attain the age of 18. It finds correlation between poverty and illiteracy on one hand and higher incidences of child marriages on the other. It further states proportion of child marriages is high in north Karnataka compared to south Karnataka. DLHS-RCH (2007-08) study also indicates that nearly 1/4<sup>th</sup> of the girls in the state are married before attaining the age of 18 years (22%). In Gadag district, 32.4 per cent of the girls and 7.7 per cent of the boys got married before attaining the age of marriage (i.e. 18 years for girls and 21 years for boys). The following stringent actions have been taken in the district to prevent the child marriages in the district after the release of Shivaji Patil report. They are.

- Additional powers to Tahsildars and Police Officers,
- Registration of organisations which conduct mass marriages so as to exercise control over them
- Producing proof of age at mass marriages made compulsory (birth certificates) to ensure completion of 18 years for girls and 21 years for boys.
- Wherever there are cases of early marriage, the cases are brought to the notice of the Child Welfare Committee. The boys and girls are encouraged to continue their education and some are given technical education. On the whole efforts are being made to bring the boys and girls to the mainstream.

**Table 2.6: Child Marriages Prevented (Nos)**

Taluk	2012-13	2013-14	2014-15
Gadag	52	33	25
Ron	3	3	16
Shirahatti		3	16
Naragund		0	03
Mundaragi		16	18
Total	55	55	75

Table 2.6 shows number of child marriages prevented during the last three years. It reveals that efforts are being made to prevent the child marriages in all the taluks. The reasons for arranging the child marriages in the district are; lack of education, *Moodhanambike*, strengthening and continuing the bonds of the families and maintenance of the property of the households who have no male children. In the district, child marriages are arranged in Lambani communities (nomadic tribe), slum dwellers and traditional joint families. Therefore, efforts should be made to locate and educate these communities to change their practice. Whatever are the reasons we need to have a strong watch dog to prevent such social menace. Role of the Government and Civil Societies deserve attention in this regard.

### **Child Marriage is Violation of Child Rights**

1. Right to live.
2. Right to Protection
3. Right to development
4. Right to participation

*Source: Shivaraj Patil Committee Report 2011*

The following measures can be taken to prevent the child marriages

- Awareness programmes: focusing on vulnerable communities like Lambani's and other weaker sections of the society
- Child marriage prohibition officers need to be trained so as to understand their roles and responsibilities. Protection needs to be given to Probation officers.
- Community and police should keep a watch on the marriages (especially on mass marriages)

### 2.3 DEATH RATE, MALNUTRITION AND VACCINATION

Early onset of sexual activity after marriage and the persistent pressure on a girl child to conceive can have irreparable and adverse consequences for the health of both the mother and the child. According to National Family Health Survey (NFHS) 111, children born to mothers under the age of 20 years are much more likely to die in infancy than children born to mothers in the prime child bearing ages. Table 2.7 shows death rate of infant, child and mother in the district.

**Table 2.7: Infant, Child and Mother Death Rates**

Year	Infant Death Rate *	< 6 Year Children Death Rate *	Death Rate of Mother **
2009-10	28.78	5.5	185
2010-11	27.64	5.0	243
2011-12	18.00	5.0	118

\* *Infant/child death rate= total infant or child death \* 1000/ born live children*

\*\* *Death rate of mother = total no. of death of mothers \* 100000/born live children*

The above table shows that the infant rate in the district has declined from 28.78 to 18.00 during the period 2009-10 to 2011-12. The death rate of children below 6 years has remained same at 5.0 and the death rate of mother was 185 in the year 2009-10 and it declined to 118 in the year 2011-12. IMR seems to be as per the norms laid down in the National Health Policy document. However MMR seems to be on the higher side which deserves attention.

The government has been trying to control the problems of mal-nutrition and under-nutrition through various programmes. The district has been implementing supplementary

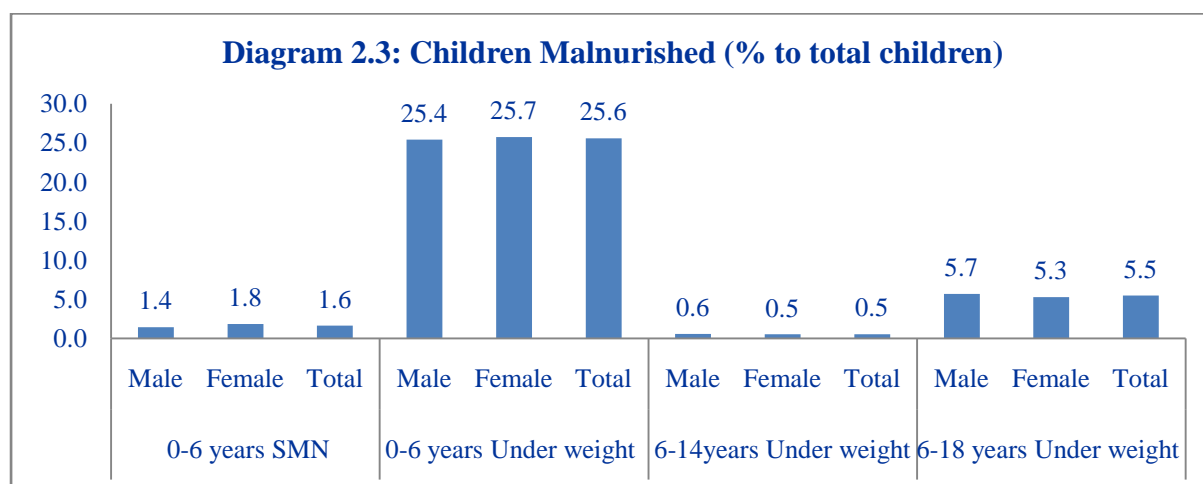
nutrition programme under ICDS (Integrated Child Development Services Scheme) and Ksheera Bhagya scheme. In spite of many efforts, the district is facing the problem of child malnutrition. In this connection, a systematic study needs to be conducted to find out the reasons for malnutrition among the children in the district. Table 2.8 shows number of children suffering from malnourishment.

**Table 2.8: Child Malnourishment**

Taluk	0-6 years SMN			0-6 years Under weight			6-14years Under weight			6-18 years Under weight		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Gadag	236	299	535	3508	3666	7174	.	.	0	529	544	1073
Ron	109	144	253	2401	2474	4875	.	.	0	996	790	1786
Naragund	99	124	223	1493	1379	2872	220	197	417	.	.	0
Mundaragi	132	149	281	2234	2308	4542	.	.	0	920	830	1750
Shirahatti	133	184	317	2871	2802	5673	.	.	0	984	977	1961
<b>Total</b>	<b>709</b>	<b>900</b>	<b>1609</b>	<b>12507</b>	<b>12629</b>	<b>25136</b>	<b>220</b>	<b>197</b>	<b>417</b>	<b>3429</b>	<b>3141</b>	<b>6570</b>

Source: Primary data from GPs

Diagram 2.3 shows proportion of malnourished children in the district. It reveals that on an average 1.6 per cent of the children (0-6 years) are seriously mal nourished (SMN) and 25.6 per cent of children (0-6 years) are under weight. The extent of SMN and under weight is more in girl children as compared to boys.



The Karnataka Institute of Medical Sciences at Hublihas set up a 14-bed Severe Acute Malnutrition (SAM) ward, which comes as a ray of hope to many poor parents in North Karnataka. Many poor parents, who cannot afford better treatment for their malnourished children, are now coming all the way from Koppal, Bijapur, Raichur, Gadag, Haveri and

other districts of North Karnataka. These children will get special attention, with nutrition experts working round the clock to save their lives and make them healthy.

Table 2.9 shows coverage of children for vaccination in Gadag district. It reveals that all the children have been given vaccination and there are no children left out.

**Table 2.9: Coverage of Children for Vaccination in Gadag District (Nos)**

Year	0 to 1 Year			1 to 3 Year			3 to 6 Year			Children who have Not taken any Vaccination		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
2009-10	12343	10515	22858	11053	9416	20469	11233	9569	20802	0	0	0
2010-11	12009	10231	22240	11107	9463	20570	9521	8112	17633	0	0	0
2011-12	11415	9725	21140	11338	9659	20997	9923	8453	18376	0	0	0

## 2.4 ORPHAN AND SINGLE PARENT CHILDREN

There are 755 orphan children in the district and table 2.10 shows number of orphan children by taluk, age group and sex. It reveals that there are more number of orphan children in Gadag, Ron and Shirahatti taluks. The proportion of orphan in the age group 6-14 is high (i.e. 44.2 %) compared to age group of 0-6 and 14-18 (i.e. 22.3 % and 33.5% respectively). The proportion of male and female children is almost same, with some variations across the taluks. One can note that the orphans in the district seem to be very high and need immediate attention to ensure their food, shelter, education and health.

**Table 2.10: No. of Orphan Children by Age Group**

Taluk	0-6 Years			6-14 Years			14-18 Years			0-18 Years		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Gadag	26	73	99	55	55	110	31	28	59	112	156	268
Ron	0	5	5	38	35	73	42	24	66	80	64	144
Naragund	2	7	9	15	14	29	21	18	39	38	39	77
Mundaragi	13	10	23	31	36	67	19	19	38	63	65	128
Shirahatti	20	12	32	34	21	55	31	20	51	85	53	138
Total	61	107	168	173	161	334	144	109	253	378	377	755

Source: Primary data from GPs

Table 2.11 shows number of single parent children. It reveals that there are 7360 single parent children in the district. Ron, Shirahatti and Gadag have more number of single parent children. Number of male single parent children is slightly more compared to female

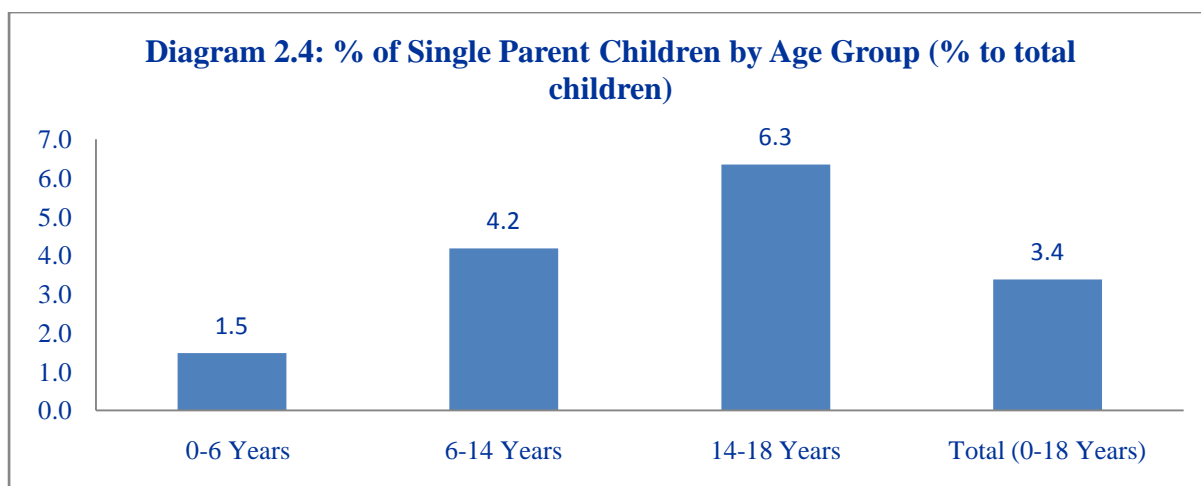
single parent children. The number of single parent children in the age group of 6-14 is more i.e. 3254 compared to other age groups. There are 1454, 3254 and 2652 children in the age group of 0-6 years, 6-14 years and 14-18 years respectively.

**Table 2.11: No. of Single Parent Children by Age Group**

Taluk	0-6 Years			6-14 Years			14-18 Years			0-18 Years		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Gadag	149	179	328	359	337	696	331	237	568	839	753	1592
Ron	215	239	454	477	445	922	445	408	853	1137	1092	2229
Naragund	48	68	116	160	145	305	161	124	285	369	337	706
Mundaragi	69	98	167	275	299	574	200	169	369	544	566	1110
Shirahatti	187	202	389	398	359	757	307	270	577	892	831	1723
<b>Total</b>	<b>668</b>	<b>786</b>	<b>1454</b>	<b>1669</b>	<b>1585</b>	<b>3254</b>	<b>1444</b>	<b>1208</b>	<b>2652</b>	<b>3781</b>	<b>3579</b>	<b>7360</b>

Source: Primary data from GPs

Diagramme 2.4 shows percentage of single parent children in different age groups in the district. It shows that on an average 3.4 per cent of children have single parent in the district. The proportion of children in the age group of 0-6 years, 6-14 years and 14-18 years are 1.5%, 4.2% and 6.3% respectively.



Death of a spouse or partner was a major cause of single parenting in the district. Life in a single parent household could be quite stressful for the adult and the children. Therefore, adequate care needs to be taken for their educational and health requirements.



## 2.5 CHILDREN WITH SPECIAL NEED (CWSN)

India has ratified the UN Convention on the Rights of Persons with Disabilities (UN CRPD) and has undertaken the obligation to ensure and promote the full realization of all human rights and fundamental freedom for all Persons with Disabilities without discrimination of any kind on the basis of disability. In fulfilment of this international commitment, the country is obligated to enact suitable legislation in furtherance of the rights recognized in the UN Convention. Table 2.12 shows the number of children affected by different disabilities, out of total 18593 disabled children in Gadag district.

**Table 2.12: Number of Disabled Children in Gadag District**

Name of Taluks	Physically Disable	Blind	hearing impaired	Mentally Retarded	Mental Illness	Leprosy	Multiple Disabled	Total Disable
Gadag	1430	1968	585	300	225	66	12	4586
Ron	1606	1783	770	164	255	65	19	4662
Mundargi	1164	1360	407	131	164	40	4	3270
Shirahatti	1201	1260	765	125	149	35	2	3537
Naragund	1089	961	264	61	128	35	0	2538
Total	2890	7332	2791	781	921	241	37	18593

Diagram 2.5 shows taluk wise proportion of disabled children. It shows that on an average 8.5 per cent of the children are disabled in the district. The proportion of disabled children is high in Mundaragi (16.2%) and Shirahatti (10.4%) compared to district average. Ron, Gadag and Naragund have 8.5%, 7.2% and 5.6% disabled children respectively.

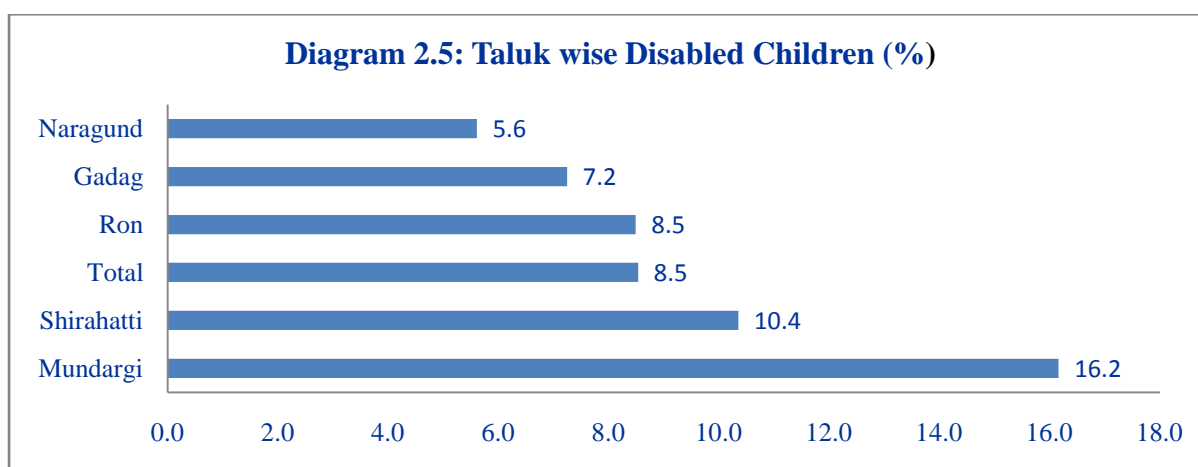
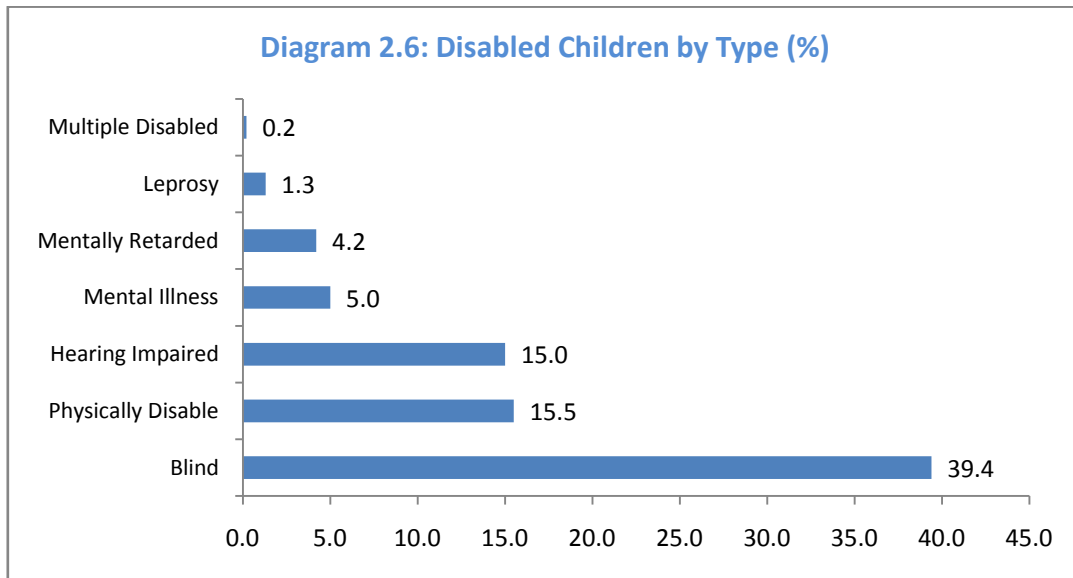


Diagram 2.6 shows the percentage of disabled children by type of disability. It depicts that 39.4 per cent are blind, 15.5 per cent physically disabled, 15.0 per cent deaf & dumb, 5.0

per cent mental illness, 4.2 per cent mentally retarded, 1.3 per cent leprosy affected and 0.2 per cent are multi disabled children. It reveals that most of the disabled children like blind, physically disabled, deaf & dumb and leprosy affected can be educated and given job oriented training for their future employment opportunities. Leprosy, caused by mycobacterium leprae has not been eliminated completely in the district. Therefore, special efforts are needed to eradicate Leprosy in the district.



The district is having special schools for CWSN children.

- School for mentally retarded (named Arunodaya) -1
- Schools for hearing impaired (Lakshmeswar, Gadag and Hole-alur)-3
- School for blind (music) -1

Under SSA programme, there has been provision to provide education to all the CWSN children through the village level volunteers. For severely disabled children Home based education is provided. These children are trained on life skills. A trained education volunteer will go to child's home for two days in a week and teach the child. At the taluk level, a physiotherapy centre has also been constituted to provide free service to these children. Escort facility has also been provided to these children to visit the centres. To facilitate mixing of these children with other children, schools conduct Zilla Darshan tour.

Medical camps are also held every year assess the needs of these children and based on the recommendations of doctors necessary care and equipments are given. However, the parents and the community need to change their attitude towards CWSN children to protect their rights.

## 2.6 VULNERABLE CHILDREN

According to the India Health Action Trust (2010) study, the district has a low epidemic potential among the general population, but a moderate to high potential among the high risk groups with a future potential to introduce the infection into the low-risk population. It is found that there is a large gap between the detection and pre-ART enrolment. Better coordination between the ICTCs and the ART centre will go a long way in bridging this gap. Table 2.13 shows that there are 224 HIV/AIDS infected children in the district. Gadag taluk has more number of infected children as Gadag is district headquarter and commercial city. And in Ron taluk, because of out migration more number of HIV/AIDS infected children can be found.

**Table 2.13: HIV/AIDS Infected Children**

Name of Taluk	0 - 6 Years			6 - 14 Years			14 - 18 Years			0 - 18 Years		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Gadag	12	11	23	31	22	53	4	5	9	47	38	85
Mundargi	6	5	11	17	6	23	0	0	0	23	11	34
Naragund	3	1	4	3	1	4	0	0	0	6	2	8
Ron	10	8	18	26	24	50	2	1	3	38	33	71
Shirahatti	7	2	9	10	6	16	0	1	1	17	9	26
<b>Total</b>	<b>38</b>	<b>27</b>	<b>65</b>	<b>87</b>	<b>59</b>	<b>146</b>	<b>6</b>	<b>7</b>	<b>13</b>	<b>131</b>	<b>93</b>	<b>224</b>

*Revised Data*

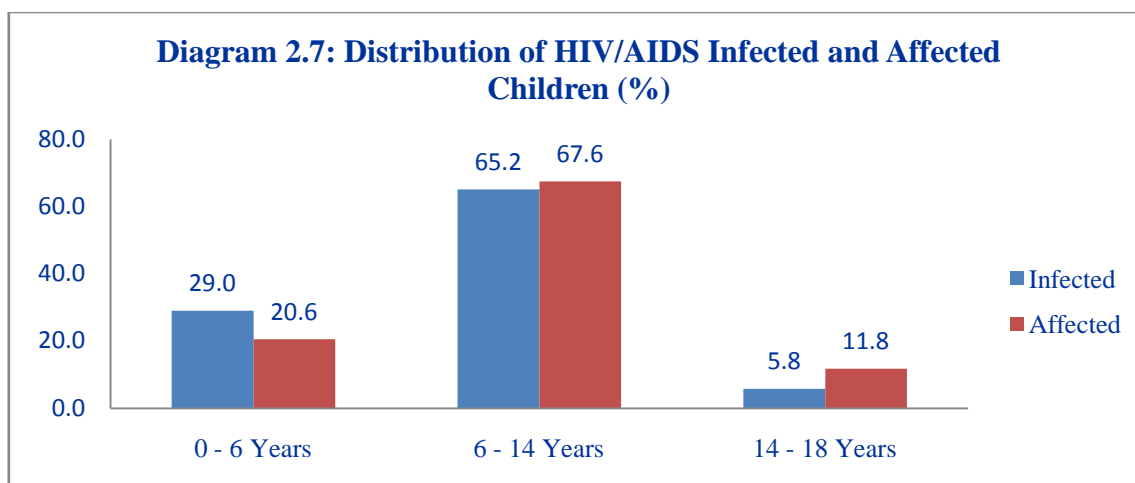
HIV and AIDS profoundly affect children at many levels. A child's family and community can be hard struck by the effects of AIDS as parents get sick, are not able to work or are not there to protect their children. The results of this can disrupt children's lives and put their health and security at risk. Table 2.14 shows that there are 262 HIV/AIDS affected children in the district. It also reveals that there are more number of HIV/AIDS affected children in Ron, Mundargi and Gadag taluks.

**Table 2.14: HIV /ADIS Affected Children**

Name of Taluk	0 - 6 Years			6 - 14 Years			14 - 18 Years			0 - 18 Years		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Gadag	8	4	12	20	20	40	3	4	7	31	28	59
Mundargi	6	3	9	21	23	44	2	7	9	29	33	62
Naragund	1	2	3	3	4	7	0	0	0	4	6	10
Ron	11	8	19	31	33	64	8	4	12	50	45	95
Shirahatti	6	5	11	10	12	22	2	1	3	18	18	36
<b>Total</b>	<b>32</b>	<b>22</b>	<b>54</b>	<b>85</b>	<b>92</b>	<b>177</b>	<b>15</b>	<b>16</b>	<b>31</b>	<b>132</b>	<b>130</b>	<b>262</b>

*Revised Data*

Diagram 2.7 shows proportion of children infected and affected by HIV/AIDS. It shows that around 65 per cent of the children are in the age group of 6 - 14 age groups.



The district child protection has been providing financial assistance under ‘*Vishesh Palana Yojane*’ for HIV/AIDS infected and affected children in the district. In the year 2013-14, out of the 160 families, 167 children have been given assistance. In 2014-15 out of 332 families 344 children have been given assistance. (Sponsorship Rs. 650/month and foster care Rs. 750/month). DCPU & ART centre staff made awareness among the parents of CABA Children about OVC programme, 528 parents of CABA Children visited DCPU Office and 167 families gave consent. So in 2013-14 DCPU released amount to 167 CABA Children (1 child for 1 family).

## **2.7 CHILDREN OF PRISONERS AND COMMERCIAL SEX WORKERS**

According to Department of Women and Child Welfare, there are 12 children of prisoners in the district. Out of 12, one child is about one and half years old and the remaining are going to school. All the children are living with their relatives. However, monitoring is felt necessary to protect their educational and health rights.

Study by India Health Action Trust (2010) indicates that the district has a large network of clients of female sex workers. Of the FSWs registered with the targeted intervention (TI), 78% are street-based, 7% are Devadasi, 43% are currently married, 16% are under age 25 years, and 70% are illiterate. Though there has been increase in the use of condoms, there are possibilities of transmission of disease to child. The district has a vast network of public health services including HIV-related services. But the rights of the HIV/AIDS infected and affected child need to be ensured. In this direction, all commercial sex workers need to be identified along with their children in the district.

## **2.8 CHILD LABOURERS & OUT OF SCHOOL CHILDREN**

National Child Labour Programme (NCLP) and State Child Labour Programme (SCLPs) are initiated to rehabilitate working children. Major activities undertaken under the NCLP is the establishment of the special schools to provide non-formal education, vocational training, supplementary nutrition, etc to children withdrawn from employment.

According to Department of Labour, there are 373 child labourers in the district. Table 2.15 shows number of child labours working in hazardous and non-hazardous occupations by sex. It reveals that out of the total child labours, 63 per cent are male and remaining 37 per cent are female. About 70 per cent of child labours are working in non-hazardous occupation, namely, agriculture and other allied occupations like sheep/cattle rearing and remaining 30 per cent are working in hazardous occupation like brick making industry. Efforts are being made to prevent child labour by the Labour Department by identifying the child labour and imposing fine on the owners. However, the problem of child labour still prevails in the district because of poverty and ignorance of the parents. Therefore, attention needs to be given to these children to bring them back to schools to complete their education.

**Table 2.15: No. of Child Labours in Gadag District**

Taluk	Hazardous Occupation			Non-Hazardous Occupation			Total No. of Child Labour		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Gadag	18	12	30	13	20	33	31	32	63
Shirahatti	10	9	19	65	25	90	75	34	109
Mundargi	6	-	6	26	16	42	32	16	48
Ron	27	15	42	49	25	74	76	40	116
Naragund	5	12	17	16	4	20	21	16	37
<b>Total</b>	<b>66</b>	<b>48</b>	<b>114</b>	<b>169</b>	<b>90</b>	<b>259</b>	<b>235</b>	<b>138</b>	<b>373</b>

Special school for child labour has been started wherein the children are given free meals and hostel facility. Srushti NGO provides hostel facility to child labours. District welfare committee provides Rs. 1000/- for child labours. But it seems that people lack awareness about the availability of facility (residential bridge camp).

Realisation of children's right to education is crucial for reaching the goal of elimination of child labour. In this context, the following paragraphs show status of out of school children in the district.

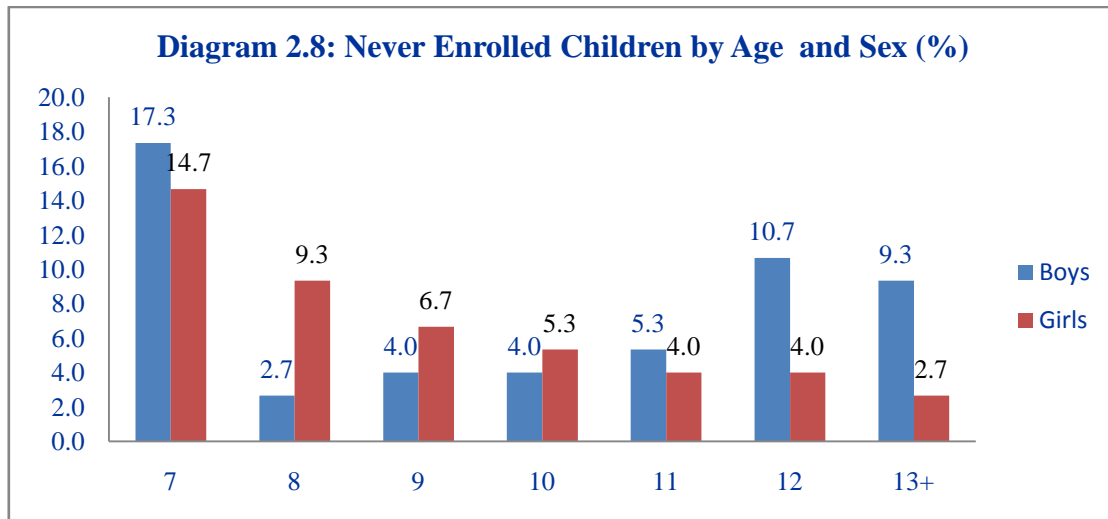
### **2.8.1 OUT OF SCHOOL CHILDREN**

As per the 'Right to Free and Compulsory Education act 2009', every child in the age group of 6 to 14 years has his/her right to get free and compulsory admission and quality elementary education. To ensure the right of children, SSA, Government of Karnataka, has taken several steps to enrol and induct all out of school children in the school. The education department in the district has been implementing bridge courses, conducting Chinnara Angala programme and home based education for disabled children to bring back out of school children to schools. Apart from all, survey of out of school children, which was conducted in the 2014 with the help of teachers and Anganwadi workers, reveals that there are 3215 out of school children in the district. Table 2.16 shows number of out of school children in Gadag district.

**Table 2.16: OOSC identified for the year 2014 in Gadag District ( Dropped Out & Never Enrolled)**

Age	SC		ST		Cat-1		OBC		Muslims		Other		Others		Total		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Total
<b>Dropped Out</b>																	
6	10	15	4	4	0	1	25	20	16	13	0	0	6	4	61	57	118
7	37	25	6	2	3	2	58	33	18	23	0	0	3	10	125	95	220
8	38	34	7	2	0	0	42	50	17	11	0	0	3	3	107	100	207
9	33	33	2	3	4	0	33	28	22	18	2	0	0	2	96	84	180
10	51	75	2	8	2	1	51	35	28	19	0	1	1	1	135	140	275
11	86	116	7	9	2	5	73	57	43	18	0	0	2	1	213	206	419
12	124	153	10	12	9	2	109	84	54	42	3	0	8	7	317	300	617
13+	214	293	38	38	14	6	217	211	84	80	2	0	14	11	583	639	1222
Total (6 to 13+)	593	744	76	78	34	17	608	518	282	224	7	1	37	39	1637	1621	3258
Total (7 to 13+)	583	729	72	74	34	16	583	498	266	211	7	1	31	35	1576	1564	3140
<b>Never Enrolled</b>																	
6	26	18	3	5	1	0	40	27	9	8	1	0	3	3	83	61	144
7	3	4	0	2	0	0	9	4	1	1	0	0	0	0	13	11	24
8	0	4	1	1	0	1	0	1	1	0	0	0	0	0	2	7	9
9	1	2	0	0	0	0	2	2	0	1	0	0	0	0	3	5	8
10	1	3	0	0	0	0	1	1	0	0	0	0	1	0	3	4	7
11	1	0	1	1	0	0	1	0	0	2	0	0	1	0	4	3	7
12	1	2	0	0	0	0	2	1	4	0	0	0	1	0	8	3	11
13+	0	2	0	0	0	0	4	0	1	0	1	0	1	0	7	2	9
Total (6 to 13+)	33	35	5	9	1	1	59	36	16	12	2	0	7	3	123	96	219
Total (7 to 13+)	7	17	2	4	0	1	19	9	7	4	1	0	4	0	40	35	75
<b>Total (Dropped Out and Never Enrolled)</b>																	
6	36	33	7	9	1	1	65	47	25	21	1	0	9	7	144	118	262
7	40	29	6	4	3	2	67	37	19	24	0	0	3	10	138	106	244
8	38	38	8	3	0	1	42	51	18	11	0	0	3	3	109	107	216
9	34	35	2	3	4	0	35	30	22	19	2	0	0	2	99	89	188
10	52	78	2	8	2	1	52	36	28	19	0	1	2	1	138	144	282
11	87	116	8	10	2	5	74	57	43	20	0	0	3	1	217	209	426
12	125	155	10	12	9	2	111	85	58	42	3	0	9	7	325	303	628
13+	214	295	38	38	14	6	221	211	85	80	3	0	15	11	590	641	1231
Total (6 to 13+)	626	779	81	87	35	18	667	554	298	236	9	1	44	42	1760	1717	3477
Total (7 to 13+)	590	746	74	78	34	17	602	507	273	215	8	1	35	35	1616	1599	3215

In Gadag district, out of the 77,7,97 children in the age group of 6 to 14, about 0.3 per cent (219 children) are never enrolled and about 4.0 per cent (3140) of the have dropped out from the schools. The following diagram shows details of never enrolled children.



From the above Diagram one can note that out of the total never enrolled children 17.3 per cent are boys and 14.7 per cent are girls at the age of 7 years. The proportion of children at the age of 8, 9, 10, 11 and 12 years are 2.7%, 4.0%, 4.0%, 5.3%, 10.7% and 4.0% respectively. It reveals that some distance needs to be covered in this regard and the community, government and teachers should take necessary action towards enrolling all the children to the schools.

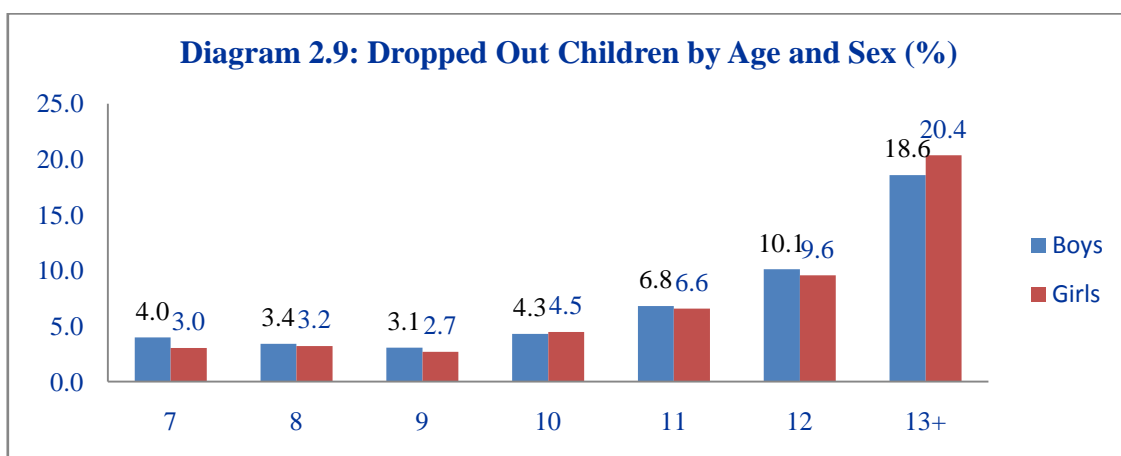


Diagram 2.9 above shows age and sex wise percentage of children who have dropped out from the schools in Gadag district. It reveals that after the age of 8 years, the proportion of children dropping out from the schools has increased with increase in age. At the age of



13+, higher proportion of children, especially girls, are dropping out of school. This needs attention of parents and teachers and other concerned officials.

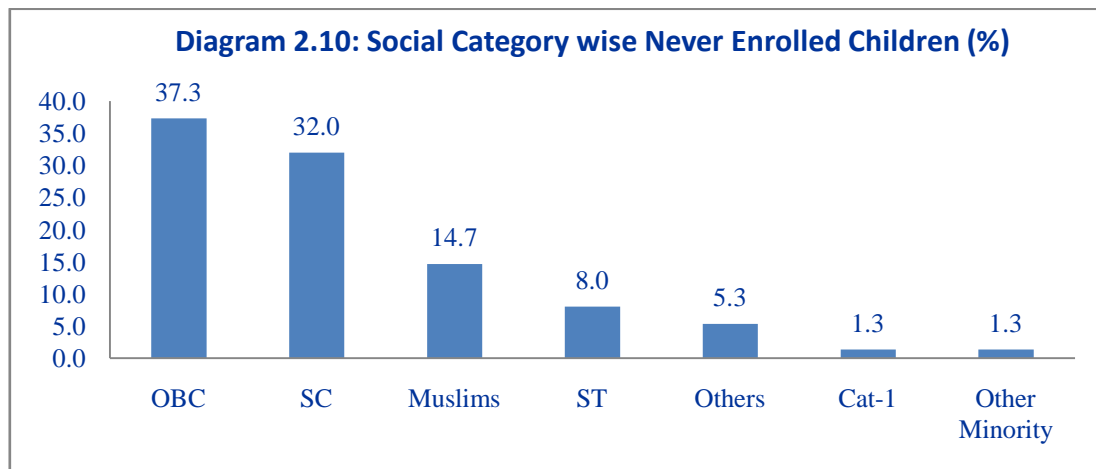
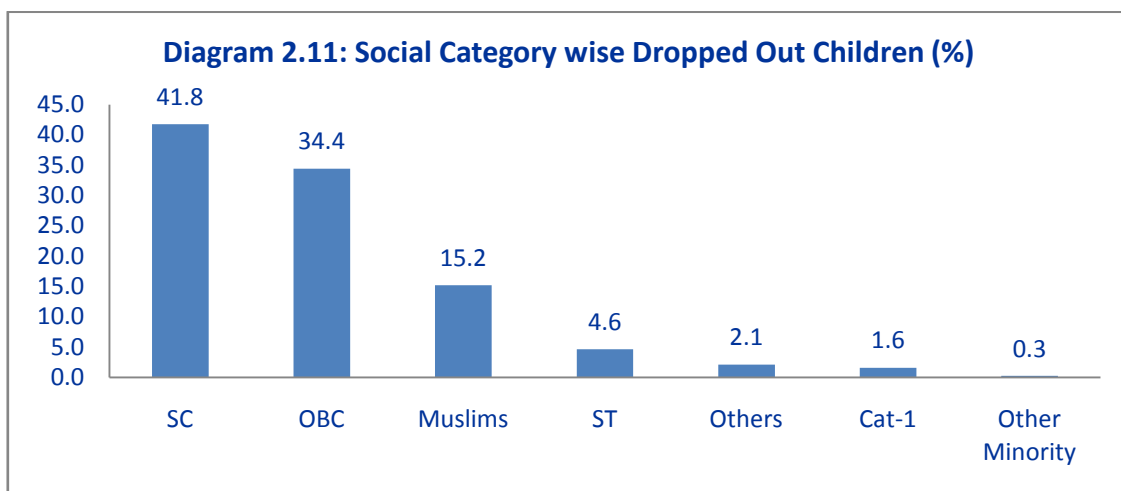


Diagram 2.10 shows percentage of children who have never enrolled by social category. It shows that higher proportion of children belonging to OBC and SC are never enrolled i.e. 37.3 % and 32.0 % respectively. Therefore, attention needs to be given to socially backward poor children in continuing their school education.



If we look at the proportion of dropped out children (Diagram 2.11), we find that the higher proportion of SC and OBC children have dropped out from the school i.e. 41.8 and 34.4% respectively. The proportion of Muslim children who have dropped out is also comparatively high i.e. 15.2%.

Poverty seems to be the main reason for children to be out of school. Usually poor agriculturists take their children to field especially during peak seasons and assign the works such as cattle/sheep/goat rearing. The other reasons are; child labour, migration of households from the village, negligence of parents, children having no interest in learning and longer distance to be covered to reach the school, bad habits of parents and lack of responsibility of officers also has effect on this. It seems that out of school children are mostly working as child labours or potential child labours. Out of 3359 (219 never enrolled and 3140 dropped out) out of school children in the district, only 373 children are reported to be working as child labours, the working status of remaining 2986 children needs to be studied. Efforts also need to be made to bring these children back to school.

## **2.9 CHILD ABUSE, NEGLECT AND ABANDONED CHILDREN**

Abused, neglected and abandoned children are the victims of people who are unable or refuse to accept the responsibilities of raising a child. For no fault of their own, these children are put into a complex, chaotic and uncertain environment. In order to facilitate the placement of orphaned, abandoned and surrendered children for adoption, the Juvenile Justice (Care and Protection of Children) Amendment Act 2006 empowers the State Government to recognize one or more of its institutions or voluntary organizations in each district as Specialised Adoption Agency (SAA). The SAA shall identify vulnerable families and children for foster care support and prepare the Individual Care Plan of the child and recommend the case to the CWC for issuing appropriate order. Once the child is placed in foster care, the SAA will supervise and monitor the progress of the child and periodically report to both CWC and the DCPS. The district administration has been rendering its duties in this regard for proper care of the needy children.

**Agency Name: Amulya (P) S.A.A. (Sevabhathi trust (R) Hubli) Gadag. Code No:KR31 Reg No :E-820**

Name of the child Gender	Date of Birth	Date of Admission and category		Health Status		Status of Adpotion process				Remark (Reason for deleting from carings)
		Adandoned	Surrendered	Normal	Spl Needs	Legally Free Adoption Declared Date	Date Since pending before CWC	Pre-Adoption Foster Care date	Any Other	
Aishwarya(F)	16.03.2013	-	15.04.2013	Normal	-	19.07.2013	-	16.09.2013		(24-02-2014) Adopted
Fathima(F)	02.05.2010	-	14.06.2013	Normal	-	16.11.2013	-	23.11.2013		26-06-2014 Adopted
Abhista (F)	15.06.2013	18.06.2013		Normal	-	06.09.2013	-	24.10.2013		(24-02-2014) Adopted
Suman(F)	18.10.2013	19.10.2013	-	Normal	-	27.06.2014	-	611.2014		
Snaha(F)	24.10.2013	28.10.2013	-	Normal	-	14.02.2014	-	03.04.2014		01.09.2014
Sampath(M)	22.07.2011	-	22.11.2013	Normal	-	30.05.2014	-	11.06.2014		01.09.2014
Soniya(F)	29.01.2013	-	22.11.2013	Normal	-	30.05.2014	-	02.10.2014		
sangita(F)	20.10.2011	-	22.11.2013	Normal	-	30.05.2014	-	-		

## **2.10 STREET, BEGGING OR MISSING CHILDREN**

Because of problems in the family, neglect of parents and due to inspiration by bad elements, use of mobiles, internet, influence of TV and movies, the young children get addicted to bad habits such as using pan, tobacco and intoxicants. The availability of the products near the schools also influences the children to use them. It is reported that some of the children are using FEVI BOND as a proxy for alcohol. All these factors provoke children to run away from the home. In the district, children of certain communities/castes (*Lambanis and Koravaru*) are found on the streets without going to schools. This is mainly because of negligence of the parents. Some of these parents also suggest these children to beg so as to meet their expenditure on tobacco and alcohol. Many efforts have been made by the district child protection unit to stop this bad practice with the help of teachers and local community leaders. Efforts have been made to rehabilitate the begging children. Table 2.17 shows details of children rehabilitated in the district over the period.

**Table 2.17: Children Engaged in Begging**

Year	Children Engaged in Begging	Children Rehabilitated
2012-13	3	2 children have been returned to parents & 1 child is rehabilitated in Balmandir
2013-14	10	10- children have been handed over to parents
2014-15	3	3 - children have been admitted to child labour school

According to Karnataka Missing Child Bureau's statistics, Gadag is one of the districts reporting more number of child missing cases (Indian Express news paper: Oct 1, 2012). Being attracted to the fancies of city life, desire to lead a luxurious life and elopements are said to be the major factors which are driving out the children from homes. A majority of these children are from families belonging to below poverty line (BPL). Their parents are either labourers or those engaged in agricultural activities having huge debt. Table 2.18 shows number of missing children in the district during the last 7 years. It reveals that significant number of children are still to be traced.

**Table 2.18: Missing Children In Gadag District**

Year	Missing Complaints of this year	Children Traced this year	Untraced
2007-08	19	16	3
2008-09	26	5	21
2009-10	16	16	0
2010-11	16	12	4
2011-12	14	11	3
2012-13	2	2	0
2013-14	9	4	5

Source: Missing Child Bureau, Gadag

Table 2.19 shows reasons for being street, begging or missing children and efforts to rehabilitate the children. It reveals that all the identified children have been rehabilitated based on the suggestions of the CWC.

**Table 2.19: Details of Street, Begging or Missing Children from other Districts And States**

Sl No	Children from Other Districts (No. s)		Children from Other States (No. s)		Reasons	Rehabilitation
	Male	Female	Male	Female		
<b>Year 2012-13</b>						
1		4			Begging	3 children-Transferred & 1 child -to parents
2		4			Migration	2 children - Balmandir & 2 children - to parents
3				1	Run away	1 child- transferred
4	7		3		Child Found	5 children- transferred & 5 children - to parents
5	7				Child with out education	7 children - Balmandir
6	1				Orphan (CWSN)	1 child- missing
<b>Year 2013-14</b>						
7	-	2	-	-	Begging	2 children to parents
8	-	3	-	-	Migration	3 children- to Balmandir
9	1	3	-	-	Run away	3 children - Balmandir & 1 child -to parents
10	6	-	-	-	Child Found	2 children- transferred, 2 children -to parents & 2 children to parents
11	-	-	2	-	Child Found	2 children to parents
12	1	-	-	-	Child with out education	child to parents
13	4	2	-	-	Child Labour	3 children transferred, 2 children to Balmandir & a child to parents
14	-	-	-	1	Missing	child to parents
15	-	2	-	-	Orphan	2 children to Balmandir
16	-	1	-	-	Sexual Abuse	child to parents
17	-	1	-	-	Child Marriage	child to parents

To provide emergency services and long-term care and rehabilitation services 24/7 a child line service has been established in the district in the year 1999-2000. The service can be accessed by any child in crisis or an adult on the child's behalf by dialling a four digit toll free number (1098). The street, begging or missing children can use this service and get the required facility. Under Integrated Programme, these children who are without homes and family ties are provided food, clothing, shelter, non-formal education, and referral services for the children. The discussion with the people and the FGD reveals that the people are not aware of the programme either in the town or in villages. Therefore, efforts need to be made to create awareness among the people about the existence of facilities. A list of street and begging children also needs to be prepared for monitoring. The police should try their best to trace the missing children.

## 2.11 CHILD TRAFFICKING

Trafficking of women and children has been increasing in an alarming rate. This evil has to be inevitably tackled at local levels. It is the duty of the civilized society to prevent this and rehabilitate women and children who are being trafficked. In order to control this organised menace, the department felt the need to create awareness at district, taluk and village level. The Scheme for Combating Trafficking of Women and Children was launched during 2006-07. Committees have been constituted at state, district, taluk and Gram Panchayat level. In order to see these committees at the grass root level it was felt that sensitization on the issue of trafficking to the members of these committees needs to be taken up. Accordingly, training programmes were conducted to create awareness among these committee members at taluk and Gram Panchayat level. A one day awareness programme through Jathas, rallies, street plays etc. were organised at taluk level for the general public. Camps for Gram Panchayat members were also conducted.

Poverty, illiteracy and negligence of the parents contribute to child trafficking in the district. Recently police have made a breakthrough in nabbing the persons involved in child trafficking. These persons were planning to sell the children for illegal activities in neighbouring states. In this connection the community and the police should take necessary care to protect the children from trafficking.

Because of poverty the households can't maintain the children and they sell their children, especially girl children, for money. These types of cases are mainly observed in Lambani and other backward caste communities in the district. It is reported that people from Rajasthan take these girls for marriage (*Gujjara Madive*). A case has been reported in Mundaragi police station that a girl has been sold at Rs. 20,000/-. It is also found by the villagers that some of the households who migrate to other parts of the state for employment do not bring back their children along with them. Some cases of *DATTU* which are not legal are also reported from the FGD. In any case the case deserves attention from all the concerned. Sunitha welfare association has been working in Gadag district for prevention, rescue, rehabilitation and re-integration of trafficked children.

## 2.12 MAJOR FINDINGS OF SITUATION ANALYSIS

### Situation of Children in Gadag District

Sl No	Indicator	Situation in the district	Details
1	Total Population	948911 (100.0)	About 25 per cent of the population belong to SC and ST category. These are the vulnerable communities which need careful attention.
	SC	174547 (18.4)	
	ST	64168 (6.8)	
	Muslims	134636 (14.2)	
	Christian	2298 (0.2)	
	Other Caste	567882 (59.8)	
	Other Religion (Jain, Buddhist & Sikh)	5380 (0.6)	
2	Sex Ratio (All)	979	Sex ratio is less (compared to district average) in Muslims, Jains, Sikhs and ST communities. Gadag & Shirahatti have low sex ratio.
3	Literacy (2011)	75.18	Level of literacy is almost the same as the State i.e Gadag 75.18 & Karnataka 75.60. Growth rate of literacy is almost the same over the last decade.
	Male Literacy	84.89	
	Female Literacy	65.29	
4	Children below 18 years (% to total population)	217849 (23.0)	Children below 18 years constitute significant proportion of the population in the district. Among these children, 0-6 years children are more compared to other age group children.
	0-6 years	98244 (10.4)	
	.6-14 Years	77797 (8.2)	
	.14-18 Years	41808(4.4)	
5	Sex Ratio-Children below 18 Years	992	Mundargi and Ron taluks have low sex ratio
	0-6 years	998	
	.6-14 Years	974	
	.14-18 Years	1014	
6	Out of School Children	3359	About 75 per cent of the children who are out of the school belong to OBC and SC community. Efforts should be made them to bring back to school.
	Children Never Enrolled	219	
	Dropped Out Children	3140	
7	No. of Child Labours	373	It seems that only few cases of child labours have been reported. Efforts should be made to identify and bring them to school.
8	Child Marriage	12	Child marriages are mainly held in Tandas and slums. Therefore, efforts should be made to give awareness and prevent them.
9	Early Pregnancy	2	It seems that only few cases have been reported. Efforts should be made to identify them.

Sl No	Indicator	Situation in the district	Details
10	Disable Children	18593	In the district, 39.4 per cent are blind, 15.5 % are physically disabled, 15.0 are duff & dumb and 1.3 % are leprosy infected. Efforts should be made to provide general as well as vocational training so as to make them earn their livelihood. Remaining are multi disabled, mentally retarded and affected by mental illness. These children need medical support.
11	Children of prisoners	12	Dept of Social Welfare is having detailed information about the children of prisoners.
12	Children of commercial sex workers	Information not available	Information needs to be collected about number of children, sex and education, etc by the social welfare department
13	HIV/AIDS infected children	224	
14	HIV/AIDS affected children	262	Better coordination between ICTCs and the ART centre will
15	Immunization	100%	All the children have been covered
16	Malnutrition		Inspite of many efforts, the problem persists
17	Infant Death Rate (2011-12)	18	It seems that infant death rate is less than the state average, still efforts need to be made to document the death of infants
	> 6 Year Child Death Rate	5	It seems that infant death rate is less than the state average, still efforts need to be made to documen the death of infants
	Death Rate of Mother	118	The death rate is still high, efforts need to be made to reduce the death rate of mother.
18	Sexual Harassment	No Cases Reported	It seems that cases of sexual harassment are increasing all over the country; therefore, efforts must be made to prevent them and punish the guilty.
19	Orphan Children	755	Significant proportion of children are Orphan. Therefore, systematic efforts need to be made to provide them protection along with education and health
20	Single Parent Children	7360	attention needs to be given about their education and health
21	Child Trafficking	No Cases Reported	One should keep an eye on the tandas and slums to prevent the child trafficking
22	Children in Conflict with Law	3	Efforts are being made to protect the interest of the children



## CHAPTER 3

### INTERVENTIONS/SERVICES AVAILABLE FOR CHILDREN

This chapter presents efforts of various organisations constituted by government under various policies and acts/laws for the welfare of the children in the district.

#### 3.1 CHILD WELFARE COMMITTEE (CWC)

The Juvenile Justice (Care and Protection of Children) Amendment Act, 2006 makes it mandatory to establish Child Welfare Committee (CWC) in each district as the final authority to dispose off cases for the care, protection, treatment, development and rehabilitation of children in need of care & protection and to provide for their basic needs and protection of human rights. Child Welfare Committee consists of a Chairperson and four other members out of whom one is a woman member and one member is an expert in child related issues for exercising the powers & discharging the duties in relation to child in need of care & protection. Accordingly, district Child Welfare Committee, consisting of a president and four members, has been constituted in the year 2011-12. The district CWC used to conduct the meetings once in a week during 2011-12 and 2012-13 and in the year 2013-14 it conducted 5 meetings per week because of increasing number of cases. Table 3.1 shows working of CWC in the district. It reveals that the CWC has been trying to settle the cases as and when they appear and protect the interests of the children. Most of the children have been rehabilitated with their family, sent to rehabilitation centres and kept in institutions.

**Table 3.1: Details of Child Welfare Committee Activities**

Particulars	2011-12			2012-13			2013-14		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
No. of cases before CWC in a year	252	117	369	59	39	90	261	191	452
Children rehabilitated with family	235	102	337	26	11	37	137	162	299
Children rehabilitated with institutions	11	7	18	21	13	34	24	20	44
Government Institution				0	0	0	2	2	0
Eligible Institution				0	0	0	0	4	4
Special adoption agencies				0	0	0	0	4	4
Rehabilitation Camps				1	1	2	94	0	94
To other states				1	0	1	0	0	0
To other districts	4	7	11	10	6	16	6	1	7
Total	250	116	366	118	70	180	263	199	904

Table 3.2 shows types of cases before CWC. It reveals that number of cases referred to CWC have been increasing over the years. The respective cases during the year 2011-12,

2012-13 and 2013-14 are 366, 180 and 898. Most of the children came before CWC are poverty affected, under single parent care and orphans. The cases of child marriage, atrocity, child labour, run away children, neglected / street children and those pregnant before 18 years also appear before CWC. It seems that compared to the magnitude of problems associated with socio-economic conditions as revealed by the people during the FGD, the cases reported are very less. Therefore, systematic efforts need to be made to identify such children not only in cities but also in villages and Tandas.

**Table 3.2: Type of Cases Before CWC**

Particulars	2011-12			2012-13			2013-14		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Child Marriage				–	5	5	–	12	12
Atrocity	–	1		–	–	–	1	5	6
Child Labor	–	–	–	–	–	–	2	–	2
Child Trafficking	–	–	–	–	–	–	–	–	–
Children who ran away from home	–	–	–	5	–	5	5	–	5
Poverty	163	76	–	22	5	27	335	172	506
Single Parent	16	5	–		107	107	106	72	168
HIV	–	–	–	–	–	–	–	–	–
Sexual Harassment	–	–	–	–	–	–	–	4	4
Corporal punishment	–	–	–	–	–	–	–	–	–
Working children at home	–	–	–	–	–	–	–	1	1
Children who abandoned home	5	2	–	–	–	–	7	3	10
Orphans	10	1	–	7	7	14	8	8	16
Pregnant before 18 years	–	–	–	–	2	2	–	2	2
Neglected children	4	–	–	–	–	–	2	–	2
Street children	2	–	–	–	–	–	2	–	2
Substance abuse	–	–	–	–	–	–	–	–	–
Man made and other natural disaster affected children	2	1	–	–	–	–	2	1	3
Others	50	30	–	15	5	20	102	59	159
Total	250	116	366	49	131	180	560	338	898

### **3.2 JUVENILE JUSTICE BOARD (JJB)**

Juvenile justice board has been constituted in the district in the year 2011. It consists of 3 members, namely; Chief Judicial Magistrate as the Chairperson of JJB and two social workers. The meetings are conducted once in every week and the JJB deals with about 7 cases during the period. There are 4 cases which have not been resolved during 2013 and 2014. Table 3.3 shows details of cases which appeared before juvenile justice board.

**Table 3.3: Details of Cases Apperred Before Juvenile Justice Board**

Particulars	2011		2012		2013		2014	
	Male	Female	Male	Female	Male	Female	Male	Female
IPC 323,324,504,506,	11	3	9	0	6	0	2	0
IPC 406,409,420,365,	0	0	0	0	0	0	0	0
IPC 98	1	0	0	0	3	0	0	0
IPC 302,368,387,201,	6	1	0	0	2	0	0	0
IPC 379,	8	0	0	0	5	0	0	0
IPC 363,366,	0	0	2	0	0	0	0	0
Karnataka Excise Act 11,12,13,32,34,39 (a)	4	0	0	0	0	0	0	0
IPC 448,308,J)	0	0	0	0	0	0	0	0
IPC 368(J)	0	0	0	0	0	0	0	0
IPC 457, 308(J)	9	0	1	0	3	0	0	0
IPC 143, 417, 498	8	3	0	0	0	0	0	0
IPC 306	8	0	0	0	0	0	0	0
IPC 304	0	0	0	0	0		0	0
IPC 394	1	0	0	0	0	0	0	0
IPC 376 (Posco)	0	0	0	0	1	0	0	0
IPC 279,337,338	1	0	0	0	2	0	0	0
IPC 354, 341	8	0	0	0	0	0	1	0
There are 77 cases during 2011, 46 cases are declared and 1 case is pending	65	7	12	0	22	0	3	0

The above table shows that during the year 2011 and 2013 more number of cases of Juvenile have appeared before JJB i.e. 72 and 22 respectively. It further reveals that about 93 per cent of crimes were committed by male children and remaining 7 per cent were committed by girl children. The JJB conducts enquiry twice in a month and hears the cases of children and on an average it deals with 7-8 cases per sitting. The district has two observation homes separately for boys and girls where children are provided protection during the period of pendency.

### **3.3 SPECIAL JUVENILE POLICE UNIT (SJPU)**

According to the JJ Act, special juvenile police unit has been constituted in the district on 14<sup>th</sup> January 2011 to handle the crime among the children. The purpose of the units is to enable police who deal with juveniles to be better equipped with knowledge and procedures on dealing with children in conflict with law. The act provides there be a police officer in every police station who is trained as a juvenile or child welfare officer. As per the provisions of the Integrated Child Protection Scheme (ICPS) each SJPU should have two supporting paid social workers. The District Child Protection Society is responsible for appointing the

social workers. Of the social workers at least one should be a woman. The salary for these social workers will come from the District Child Protection Society budget. Table 3.4 shows details of working of special police force and table 16 reveals information pertaining to crimes on children in the district.

**Table 3.4: Special Juvenile Police Unit**

Details	No.s
Number of police stations in the district	13
No. of cases before SPF during 2011-12	7
No. of cases referred to juvenile Justice Board	5
No. of cases declared by SJP	3

Table 3.5 and table 3.6 show exploitation and crimes on children in the district. They reveal that female children aged between 14-18 are more exploited and sexually harassed.

**Table 3.5: Exploitation of Children**

Exploitation of children	Male	Female
0-6 Years	1	-
6-14 Years	1	3
14-18 Years	0	11

**Table 3.6: Crimes on Children**

Crimes on children	Male	Female
Exploitation	28	31
Sexual	1	12

Police should take necessary steps to prevent the crimes against children and punish the guilty.

### **3.4 CHILDREN IN INSTITUTIONS**

As per the provisions of Juvenile Justice (Care and Protection of Children) Act 2000, institutional care is being provided for both children in conflict with law, and children in need of care and protection in the district. There are two child homes (separately for boys and girls) and five observation homes in the district. For each child, an individual care plan has

been developed keeping in view their overall development in consultation with the DCPS and approval by CWC/JJB. These individual care plans will be reviewed periodically. Table 3.7 shows number of children in such institutions.

**Table 3.7: Children in Institutions**

Details	0-6 Year		.6-14 Year		.14-18 Year	
	Male	Female	Male	Female	Male	Female
<b>Children's Homes</b>	2					
No. of children	-	-	31	23	10	6
No. of children going to other village schools	-	-	31	23	10	6
No. of children in Institutions	-	-	31	23	10	6
<b>Eligible institution/orphan cottage</b>	5					
No. Of children	1		88		18	
No. of children going to other village schools	1		88		18	
No. of children in Institutions	1		88		18	
<b>Total</b>	3		119	23	28	6

For the general education purpose, 2059 children are residing in government and private hostels in the district. Among the children who are residing in hostels, about 87 per cent are boys and remaining 13 per cent are girls. Table 3.8 shows number of children in residential care by age group and sex in different taluks of the district. One can also note from the table that about 72% of the children are placed in Government run institutions.

**Table 3.8: Children in Residential Care**

Taluk	No. of hostels		Government Run homes/ Hostels						No. of hostels		Private Homes/ Boardings/Hostels					
			0-6 years		6-14 years		14-18 years				0-6 years		6-14 years		14-18 years	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Gadag	9	3	0	0	124	77	79	13	15	3	0	0	12	0	234	74
Ron	7	2	0	0	134	29	81	48	6	2	0	0	12	0	154	20
Mundargi	9	2	0	0	170	47	289	99	2	0	0	0	0	0	62	0
Shirahatti	8	1	0	0	74	44	296	77	0	0	0	0	0	0	0	0
Naragund	2	0	0	0	76	0	40	0	1	0	0	0	1	0	4	0
<b>Total</b>	35	8	0	0	578	197	785	237	24	5	0	0	25	0	454	94

The discussion with the care takers reveals that there is a shortage of workers in the institutions. Therefore more number of workers need to be provided to improve the services.

### **3.5 CHILDLINE SERVICE**

CHILDLINE is a 24 hour emergency phone outreach service for children in need of care and protection linking them to emergency and long- term care and rehabilitation services. The service can be accessed by a child in difficulty or an adult on his behalf by dialing 1098. The CHILDLINE service has been provided in the district. But it has been observed that the services have not been effectively working in the district because of lack of staff and equipments. The CHILDLINE service also needs to be spread effectively, especially in schools and GPs. Some efforts have been made by Spoorthy Organization for Education and Social Development to disseminate the true cause of Child Help Line through hand outs, stickers and wall posters. But it seems that the efforts are not enough to cover all the people. Therefore, adequate staff and equipments need to be provided and net work of child line services needs to be improved and knowledge about the use of child line service need to be improved.

### **3.6 DISTRICT CHILD PROTECTION UNIT**

District child protection unit has been constituted and it is functioning effectively. Child Protection Units at the lower level, i.e. Taluk level and GP level need to be constituted.















### **3.7 AWCs/CRÈCHES**

Adopting centres and government homes have provision of crèches in the district. It seems that the people have no awareness about the existence this of facility. Therefore, community awareness needs to be created. To provide better service adequate staff needs to be provided. It is suggested during the discussion with child protection members and community leaders that the Creches should be kept in all the PHCs.

# ಗದಗ ಜಿಲ್ಲೆ



ಜಿಲ್ಲಾ ಆಡಳಿತ ಭವನ ಹಾವೇರಿ

- |                                                                                     |                              |                                                                                     |                                                      |
|-------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------|
|  | ಜಿಲ್ಲಾ ಆಡಳಿತ ಭವನ             |  | ಕಾಣೆಯಾದ ಮಕ್ಕಳ ಬ್ಯೂರೋ-1                               |
|  | ಪೋಲಿಸ್ ವರಿಷ್ಠಾಧಿಕಾರಿಗಳ ಕಛೇರಿ |  | ವಿಶೇಷ ದತ್ತು ಕೇಂದ್ರ-1                                 |
|  | ಪೋಲಿಸ್ ಠಾಣೆಗಳು-13            |  | ನಿರ್ಗತಿಕರ ಕುಟೀರ-4                                    |
|  | ಜಿಲ್ಲಾ ಆಸ್ಪತ್ರೆ              |  | ಜಿಲ್ಲಾ ಮಹಿಳಾ ಮತ್ತು ಮಕ್ಕಳ ಅಭಿವೃದ್ಧಿ ಇಲಾಖೆ ವಸತಿ ನಿಲಯ-1 |
|  | ಜಿಲ್ಲಾ ಮಕ್ಕಳ ರಕ್ಷಣಾ ಘಟಕ      |  | ಸಮಾಜ ಕಲ್ಯಾಣ ಇಲಾಖೆ ವಸತಿ ನಿಲಯ-51                       |
|  | ಬಾಲಕರ ಬಾಲ ಮಂದಿರ-1            |  | ಹಿಂದುಳಿದ ವರ್ಗ ಮತ್ತು ಅಲ್ಪಸಂಖ್ಯಾತರ ವಸತಿ ನಿಲಯ-          |
|  | ಬಾಲಕಿಯರ ಬಾಲ ಮಂದಿರ-1          |  | ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರ-39                            |





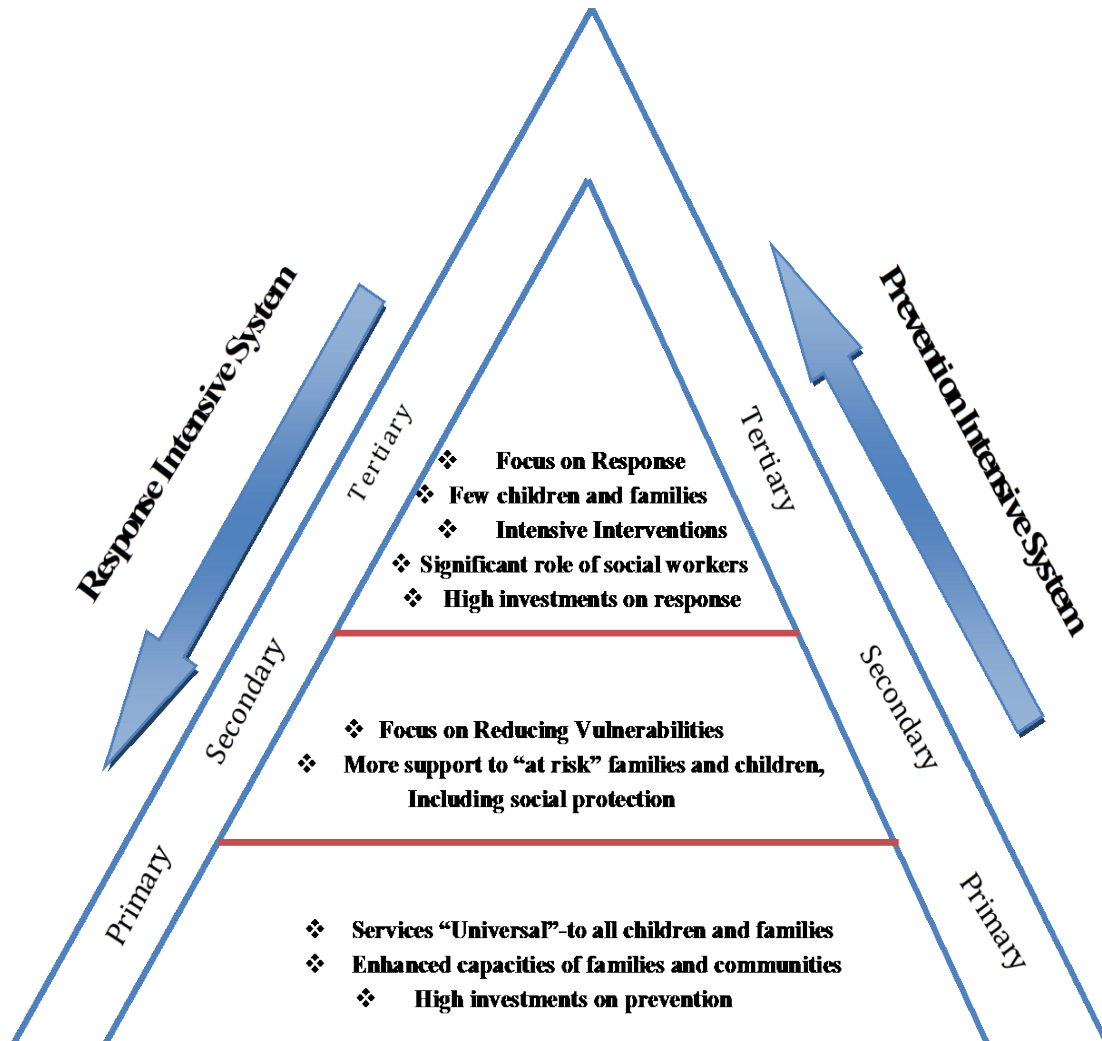
## CHAPTER 4 CHILD PROTECTION PLAN

*...the family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community...*

*Preamble to the Convention on the Rights of the Child (UN-CRC)*

Prevention is better than cure. The experiences across the world indicate that the preventive measures ameliorate the conditions that create the problems and such prevention is a critical function of a sound child protection system. However, the focus on primary prevention should not undermine the need to establish strong response systems (UNICEF 2013). The preventive measures include, empowering and enabling children, families, and communities to take charge of protection of children from violence, exploitation and abuse. This means that significant investment will have to be channelled to direct engagement with communities, organizing communities, and providing them with information, knowledge, and the tools to address protection concerns to eliminate harm to children. Developing critical awareness of one's reality, or the process of sensitization, leads to increased willingness and openness to take action to change the reality. Awareness, therefore, is often the first step towards preparing individuals and communities to initiate action. While awareness is critical, resultant action depends upon having the necessary tools to take actions based on this awareness. Accurate information, availability of resources, and established accountability mechanisms can facilitate necessary action, and lead to a positive change.

**Figure: Child Protection Pyramid**



Source: UNICEF 2013

## 1. Key Issue: Child Marriage

Suggested Strategies	Action Plan	Resource	Time Frame
1. IEC	*Deputy Commissioner Letter Addressing to All Secondary School Children Regarding Child marriage * Canvas Paintings Regarding Child Marriage	DCPU & Education department	2014-15
2. Training	Formation of Child Marriage watch committee and conducting Training	DCPU & CWC	2014-15
	Formation of Child Protection Committee at Gram Panchayat and conducting Training	DCPU & UNICEF	2014-15
3.Awareness	Awareness programmes (including legal awareness) need to be conducted especially at villages, Tandas & slums. Awareness on Child Marriage Act-2006 and related legislations need to be explained along with the bad effects of child marriage.	DCPU & CWC	2015-16
4. Empower the Adolescent girls and boys	Training program on life skill	DCPU Education & Health dept,	2015-16
	Exposure visit to Police Station (Open House)	DCPU Education & Police Dept	2015-16
5. Enforcement of Legislation	*Strict actions should be taken on the parents of boys and girls. *Child marriages are more during Ugadi festival season in Tandas. Therefore, strict vigilance needs to be kept by the police department.	DCPU, Police, social welfare dept & local community.	2016-17

## 2. Key Issue: Child Labour

Suggested Strategies	Action Plan	Resource	Time Frame
1.Awareness	*Awareness programmes (including legal awareness) need to be conducted especially at villages, Tandas & slums. Awareness on child labour related legislations need to be explained along with the bad effects of child labour. *Efforts should also be made to change the minds of the households who practice child labour.	DCPU, Labour & education Dept	2014-15
2. Training	Formation of Child Protection Committee at Gram Panchayat and conducting Training	DCPU & UNICEF	2014-15
3.Education to Children	Efforts should be made to bring back all the children who are out of school. The advantages of schooling need to be explained to the vulnerable households.	DCPU Education dept, social welfare dept & local community.	2014-15
	Exposure visit to Police Station (Open House)	DCPU Education & Police Dept	2015-16
4. Enforcement of Child Labour Act	Strict measures should be taken on the owners of the firms engaging child labour.	DCPU, Labour, Police & social welfare dept.	2015-16
5.Improve the coverage and effectiveness of social protection schemes	Efforts should be made to cover all the vulnerable households under social protection schemes. In this connection, GP can play very important role in identifying such families and providing them various benefits	DCPU, GP, elected representatives & concerned officers.	2015-16
6.Identification of child labours	It seems that identification of child labour is the biggest challenge. Therefore, effective training needs to be given to the concerned officers.	DCPU, Labour dept, & Community	2016-17
7.Mainstreaming the child labour	*General education and vocational training needs to be given to the children. *Financial assistance to the children may also be given.	DCPU, Education & Labour Dept	2016-17

### 3. Key Issue: Sexual Harassment

Suggested Strategies	Action Plan	Resource	Time Frame
1.Promoting community education	*Consciousness Programs (about safer behaviour) *Using IEC materials to educate the community.	DCPU, Health and education Dept.	2014-15
2. Training	Formation of Child Protection Committee at Gram Panchayat and conducting Training	DCPU & UNICEF	2014-15
3.Strengthen the legislations and wide publicity	*Awareness programs to various government departments, NGOs, youth groups. Campaigns, role plays in village level.	Dept of Police, DWCD & DCPU	2015-16
4.Educational awareness programmes to children	*Empower the children *Open discussion about unwanted words and touch *Adolescent Life-skill training program	DCPU, Dept of education & community	2015-16
	Exposure visit to Police Station (Open House)	DCPU Education & Police Dept	2015-16
	Setting up of Child Guidance Clinic	DCPU Education Police Dept & Health Dept	2015-16
5. Implementation of Laws	Implementation of POCSO 2012	Police dept, Judicial dept, Health dept and community.	2016-17
6.Rehabilitation programs of victims	*Counseling *Medical treatment *Education	Dept of Education, health, BCM, SW & DCPU	2016-17

#### 4. Key Issue: Child Beggary

Suggested Strategies	Action Plan	Resource	Time Frame
1. Identification of places and community where child begging prevails	*Spot visits *Mapping *Establishing rapport with community leaders	DCPU, Anganwadi supervisors and helpline	2014-15
2. Training	Formation of Child Protection Committee at Gram Panchayat and conducting Training	DCPU & UNICEF	2014-15
3. Contacting begging children and their parents and custodian	*Home visits *SIR * group meetings *Counseling *Sharing incidences *Capacity building training for working teams	DCPU, Social workers, Child helpline & Counselors of Santhwana and Swadhara	2015-16
4. Creating conducive environment	*Identifying the needs of the children	DCPU, Local NGOs, BCOs and social workers	2015-16
6. Rescue and Rehabilitation	*Rescue operation *Presenting children before CWC *Admission to Juvenile homes/fit institutions/hostels *Sponsorship *Foster care Admission to regular schools and bridge	CWC, Health, Police, BCM, Social Welfare, DCPU, child helpline & NGOs	2016-17

## 5. Key Issue: Orphan Children

Suggested Strategies	Action Plan	Resource	Time Frame
1. Collection of secondary data	*Survey *Tabulation of data *Analysis of data *Data Presentation	AWWs, Staff of DCPU and Research Experts	2014-15
2. Contacting Orphan children and their custodian and creating conducive environment	*Home visits *SIR *Individual and group meetings *Identifying the needs of the children	Staff of DCPU, social workers, Local NGOs and CBOs	2014-15
3. Training	Formation of Child Protection Committee at Gram Panchayat and conducting Training	DCPU & UNICEF	2014-15
4. Empower the children	Exposure visit to Police Station (Open House)	DCPU, Education & Police Dept	2015-16
5. Reintegration into families	*Identify the foster parent *Provide the sponsorship program *Adoption	CWC, Local NGOs, Child helpline and Staff of DCPU	2015-16
6. Convergence between the other dept (education)	*Education *Scholarship *Hostel facilities	DCPU, Dept of education, BCM, Social Welfare, DWCD, NGOs, Fit institutions and Govt Children Homes	2016-17
7. Capacity building of these children to work in future.	*Identification of skills, knowledge, interest and aptitude *Imparting vocational training programs (NGOs, IITs, VISITI, Labour dept)	Staff of DCPU and NGOs	2016-17

## 6. Key Issue: Declining Sex Ratio

Suggested Strategies	Action Plan	Resource	Time Frame
1. Awareness	Awareness to women and husband & wife about protecting girl child.	DCPU, health Dept	2014-15
2. Training	Formation of Child Protection Committee at Gram Panchayat and conducting Training	DCPU & UNICEF	2014-15
3. Empower the Adolescent girls and boys	Implementation of ARYAN (Adolescent Empowerment ) Programme	DCPU & UNICEF	2014-15
4. Vigilance	Vigilance by the CPC and health workers on the pregnant women	DCPU, health workers, SHGs & hospitals.	2015-16
5. Enforcement of Legislation	The guilty should be punished	DCPU ,CWC, Police & Judiciary	2016-17



## **CHAPTER 5**

### **MAJOR FINDINGS AND CONCLUDING OBSERVATIONS**

Keeping in mind the analysis of the situation of children, the gaps identified in implementation of existing policies and programmes and the commitments made for the protection of children, a holistic and comprehensive approach to child protection and the development of a protective environment for children has been suggested below.

- **Data Base:** A protective environment for children requires a good knowledge base. Lack of data adversely affects planning of appropriate access and nature of services required for children. Therefore, development of the data base is the prerequisite in developing child protection plan and its implementation.
- Ensuring the implementation of existing legislation and wide dissemination of information about the provisions and mechanisms for complaints/monitoring of implementation is very important step.
- **Rescue and Rehabilitation of the children:** the children should be rehabilitated taking into consideration their educational and health requirements.
- Child protection units should be constituted to protect the interests of the children at the village level.