



# FAMILY STRENGTHENING AND FAMILY-BASED ALTERNATIVE CARE

**Resource Handbook for Master Trainers** 

TRAINING AIDS



# Chapter 3

# **Case Management**

Handout: Case Studies (1 to 4)

# Case Study 1- Rescue from Forced Labour and Family Reintegration (for group discussion)

#### Instructions:

• Divide the participants into smaller groups, depending upon the total no. of participants

Provide the case study given below and give following instructions:

 Read the case study and prepare interventions using the framework of 5 steps of case management - i.e. prepare intervention plans for the case in Intake, Assessment, Planning, Implementation, Follow up, Closure.

Brothers Asif (7) and Mansoor (10) were rescued from a Zari factory near Delhi in October 2018 by an NGO and the police. After their rescue, they were taken to the Child Welfare Committee (CWC), which placed them in a Child Care Institution (CCI) and ordered medical examinations. The boys were found malnourished with minor skin infections. The NGO provided clothing, food, and counseling support, developing an Individual Care Plan (ICP) and encouraging their participation in education and recreation.

The boys revealed they were from Nepal, trafficked to India by a relative due to their family's poverty and their father's disability. Legal action ensued, with an FIR filed and two individuals arrested for trafficking and forced child labor. The NGO, with the CWC, contacted the Central Child Welfare Board (CCWB) in Nepal for a detailed social investigation, which highlighted the family's dire situation and limited government support.

A plan for the boys' reintegration was developed in collaboration with the CWC, CCWB (Central Child Welfare Board - a government body in Nepal), and NGOs from both countries. The boys were escorted to the Nepal border by the Indian NGO and handed over to the Nepali NGO. They were reunited with their family, who received a monthly subsistence allowance. The boys were enrolled in school, with the Nepali NGO providing quarterly follow-up reports. After a year of follow-up, the case was officially closed by the CWC.

#### Suggestive response for case study 1:



Change of Case	Coop Church
Steps of Case	Case Study
Intake	Brothers, Asif (7 years) and Mansoor (10 years) were rescued from a 'Zari' factory near Delhi in October 2018 during a rescue operation conducted by a non-governmental organization with the police. The NGO had identified the location as having children in forced labor.  After the rescue operation the children were produced before the Child Welfare Committee (CWC) which ordered them to be placed in a CCI and a medical examination to be conducted. The rescuing NGO was instructed to provide support to the children and conduct the social investigation within a month's time.  The NGO staff admitted the children to the CCI where an intake form was filled, and all details of the children were noted down. The children were provided with clothing, slippers, toiletries, and food for the night in the CCI.  A counselor accompanying the rescue team interacted with the brothers to reassure them and gather initial information.  After the rescue a First Information Report (FIR) was filed in the police station.  A woman police constable and social worker from the NGO accompanied the children for their medical examination to the local district hospital the next day. The brothers were found to be malnourished and suffering from minor skin infections. They were otherwise healthy.  The NGO and CCI staff also started work on an initial Individual Care Plan (ICP) for the brothers. They were encouraged to participate in education and recreation sessions in the CCI.  Both brothers were provided counseling support.



#### **Assessment**

In initial conversations with the brothers, it was discovered that they belonged to Nepal and had been brought to India to work in the factory by an 'uncle'. Their father was disabled, and mother did odd jobs to support the family. The boys had never attended school.

As this was a legal case, information was also gathered from the brothers by the legal team of the NGO and the police on how they came to India, who brought them, how long they had been working here, what were the working conditions, and how they were treated. During the raid two persons present at the 'factory' were arrested on charges of trafficking and forced child labour.

In discussion with the CWC, the NGO contacted Central Child Welfare Board (CCWB), a government body in Nepal for assistance in conducting a detailed social investigation. The CCWB referred them to a local NGO. Details of the boys' district, village and family gathered from them was provided to the Nepal based NGO to enable them to locate the family. The NGO was also provided the format and details of the information to be collected.

The NGO provided a detailed report on the family. They lived in a village and district which was insurgency affected, hence government support services were limited. The father being disabled was bedridden and unable to support the family. The family did not own any land. The mother was barely able to provide for the family with odd jobs around the village. This had pushed her to send her sons to India with a 'distant relative' in the hope of them learning a trade and earning some money for the family.

# **Planning**

Upon receiving the social investigation report the NGO and CCI staff had a joint planning session to determine the next steps. It was decided that it would be in the best interest of the brothers to be reunited with their family and supported to stay there.

Several discussions were held with the CCWB and the local Nepali organization to decide the best course of action.

The CCWB assured the CWC that they would support the reintegration of the boys with their family.



Implementation	In a collaboration between the CWC, CCWB, Indian NGO and Nepali NGO the reintegration of the boys was planned and implemented.  The CWC ordered that the local NGO accompany the boys and hand them over the Nepali counterpart and carry out periodical follow-up to ensure the welfare of the boys.  In discussion a suitable date was decided, and the boys were accompanied to the Nepal border by the Indian NGO and handed over to the Nepali NGO. All relevant background papers and documents were also provided to them.
Follow – up	The boys were reunited with their family and the local NGO helped them enroll in school and ensured that they continued to attend. The family was provided with a monthly subsistence allowance to enable them to sustain themselves. The Nepali NGO and CCWB provided quarterly follow-up reports on the boys.
Case Closure	After one year of follow-up reports the case was officially closed by the CWC.

# Case Study 2 – Care deprived Sisters Receive Support at the Community Level (for group discussion)

#### Instructions:

- Divide the participants into smaller groups, depending upon the total no. of participants
- Provide the case study given below and give following instructions:
  - Read the case study and prepare interventions using the framework of 5 steps of case management - i.e. prepare intervention plans for the case in Intake, Assessment, Planning, Implementation, Follow up, Closure.

In Jalna district, Maharashtra, the NGO 'ABC' identified sisters Deepa (15) and Rupa (12), whose lives turned upside down when they lost their grandfather, their only caregiver, to a chronic illness. They had previously lost their father to alcohol addiction and their mother in an accident. Their elder sister Seema and her husband Ganesh, despite limited resources, took them in.

The NGO provided immediate relief with a month's supply of dry rations and informed the CWC and DCPU to link the girls to social protection schemes. Regular visits and counseling revealed the family's economic hardships. The NGO, in coordination with the CWC and DCPU, secured support for Deepa and Rupa under the Bal Sangopan Yojana, easing financial strains. The case was presented to the District Task Force who required monthly updates. The sisters' name was



also registered to receive support from the state government that had made special provisions for extremely vulnerable children.

As a result of the concerted efforts of all the stakeholders, Deepa and Rupa received the fixed deposit certificate of INR 5,00,000 each.

Deepa and Rupa are now adjusting well with Seema and Ganesh. The NGO and DCPU continue to monitor the family's progress, with plans to close the case when the sisters turn 18, though periodic follow-ups will continue to ensure their welfare.

# Suggestive response to case study 2:

#### Intake

In Jalna district of Maharashtra, a community-based NGO 'ABC" identified sisters Deepa and Rupa aged 15 and 12 years respectively whose lives turned upside down when they lost their only caregiver - the grandfather who passed away due to a chronic illness.

They had lost their father to alcohol addiction a few years ago. Their mother had been looking after the family when she too passed away in an accident a few months later.

Their paternal grandfather had stepped in as their main caregiver, but he succumbed to the incurable sickness.

Their elder sister Seema and her husband Ganesh who lived nearby, agreed to take on the responsibility of Deepa and Rupa.



# Assessment NGO 'ABC visited Seema's house to gather more information about the sisters. The girls were comfortable in their sister's house but realized that resources were tight. Seema and Ganesh had a limited income and their own responsibilities to take care of. The NGO provided a month's dry ration supply to the siblings and the family for immediate relief. Information about the two girls was also shared with the CWC and the DCPU with a view to linking the girls to social protection schemes and other services. The NGO team continued to visit the family and slowly gained the trust of the girls. Counseling sessions were initiated with the girls and the entire family. They realized that although the girls wanted to stay with their sister and were welcomed by her and her husband, the family was battling poverty and economic hardships. Planning and In discussion with the CWC and DCPU, the NGO applied for Deepa and Rupa to receive support under Bal Sangopan Yojana, a scheme run by the Maharashtra government to provide support to orphans and vulnerable children. Linking the children to the Bal Sangopan Scheme alleviated some of the financial problems. The matter was presented to the District Task Force and the Task Force asked for monthly updates. The sisters' name was also registered to receive support from the state government that had made special provisions for extremely vulnerable children. As a result of the concerted efforts of all the stakeholders, Deepa and Rupa received the fixed deposit certificate of INR 5,00,000 each. Both Deepa and Rupa are settling down well with their sister and brother -in-law. Follow – up The NGO team and the DCPU team maintain follow up with the family and support them to recovery.



Case Closure

The case will be closed once both sisters have reached 18 years of age. At that time support from Bal Sangopan will also stop. However, 'XXX' will continue to follow -up on the welfare of the girls at periodic intervals.

#### Case Study 3 - For Group Discussion

#### Instructions:

- Divide the participants into smaller groups, depending upon the total no. of participants
- Provide the case study given below and give following instructions:
- Read the case study and discuss the following questions in your group.
- Does this case qualify to be taken up for case management?
- If you were an NGO worker, what are some of the steps you could take to help Raju and his family?

#### Case Study for group work:

Raju is a 12-year-old boy living with his mother. His father passed away a few years ago, and his mother, who had no support, married her husband's younger brother. They went on to have 3 additional children who are currently 9, 7 and 3 years old. Both parents wash and iron clothes for a living. They also take on other odd jobs like washing cars, walking dogs etc. to make ends meet.

The family lives in a one room house in a slum area outside Delhi. Raju used to attend school but was forced to drop out by his stepfather who wanted him to work to help the family. The mother does not like this but is unable to say anything to her husband.

The stepfather now intends to send Raju to work full time in a factory. When confronted he says that Raju is 14 years old and should work to support the family. A social worker of 'Pratibha' NGO came across a sad and despondent looking Raju.

#### Suggestive responses to the case study:

- Does this case qualify to be taken up for case management?
  - Yes, the case certainly qualifies to be taken up for case management as it is evident that the child is at the risk of getting into child labor.
- If you were an NGO worker, what are some of the steps you could take to help Raju and his family?

If I were the NGO worker, I would have immediately started implementing the case



management process for Raju.

#### Intake:

- Verify Raju's age and immediate situation to ensure he is not sent to work prematurely.
- Report the case to the Child Welfare Committee (CWC) and local authorities if necessary.

#### Assessment:

- Conduct a Social Investigation Report to understand the family's background, financial situation, and living conditions.
- Assess the family's strengths, such as their ability to work, and weaknesses, including economic instability and the stepfather's stance on child labor.
- Evaluate Raju's emotional state, educational background, and current needs.

#### Planning:

- Develop a comprehensive plan to address Raju's immediate needs and long-term goals, including his return to education and protection from child labor.
- Plan for legal interventions to ensure Raju's right to education is upheld.
- Identify resources for the family, such as government welfare schemes and vocational training.

#### Implementation:

- Enroll Raju back into school and provide educational support, including tutoring or scholarships.
- Assist the family in accessing financial aid, government subsidies, and job placement services.
- Provide counseling to Raju and his mother and mediate with the stepfather to clarify the legal aspects of child labor and the benefits of Raju's education.

#### Follow-Up:

- Establish regular follow-up visits to monitor Raju's educational progress and the family's improved economic situation.
- Continue working with community support groups to provide ongoing assistance and ensure that the family's needs are being met.

#### **Case Closure:**

- Close the case once Raju is consistently attending school and the family's situation has stabilized.
- Ensure that Raju's educational needs are being met and that the family has sustained improvements in their financial situation.



• Conduct a final review to confirm that all interventions have been successfully implemented and that Raju and his family are in a stable and secure position.

## **Case Study 4 – For Group Discussion**

#### Instructions:

- Divide the participants into smaller groups, depending upon the total no. of participants
- o Provide the case study given below and give following instructions :
- You are the case manager appointed by the CWC. What are some of the next steps you will plan to support Sonia and her family in her rehabilitation

Sonia is an 8-year-old girl living in Sangam Vihar area of Delhi. Her parents passed away a few years ago and she lives with her married sister and her family. Her sister has one child of her own.

One evening when Sonia was out of her house playing with her friends, she was lured to a lonely place by her neighbor and sexually assaulted. When her sister discovered the deed, she rushed Sonia to the hospital where she remained for 15 days due to extensive injuries. She needed several surgeries to repair the damage done by the brutal sexual assault. A case was registered under POCSO, and the police searched for the accused who absconded.

Sonia was highly traumatized and the CWC ordered her to be transferred to a CCI once she was ready to be discharged from the hospital. In the CCI Sonia received extensive support like medical aid, counseling, and therapy to overcome the trauma.

Sonia's sister visited her in the CCI occasionally. At one point she refused to take her home on account of safety issues.

#### Suggestive response to the case study:

#### Intake:

• Collect all relevant information about Sonia, including her medical history, trauma details, current condition, and family background.



• Verify her status and current needs at the Child Care Institution (CCI), including her ongoing medical and psychological support.

#### **Assessment:**

- Conduct a thorough assessment of Sonia's physical and emotional state, including the extent of her injuries and trauma.
- Prepare a Social Investigation Report on Sonia's family situation, including her sister's capacity to provide a safe and supportive home environment.
- Identify Sonia's strengths, such as her resilience and support from the CCI, and weaknesses, such as her ongoing trauma and the risk factors in her current living situation.

#### Planning:

- Develop a tailored rehabilitation plan for Sonia that includes continued medical care, psychological counseling, and trauma therapy.
- Plan for alternative care arrangements if returning to her sister's home poses safety risks.
- Coordinate with legal authorities to ensure the prosecution of the perpetrator and provide Sonia with legal support throughout the process.
- Explore long-term care options, such as a safe and stable placement within the CCI or a suitable foster care arrangement.

## Implementation:

- Ensure Sonia receives all necessary medical treatments and therapeutic support at the CCI.
- Provide regular counseling sessions to help Sonia cope with her trauma and emotional distress.
- Work with Sonia's sister to address her concerns and assess any potential for safe reintegration into her home.
- Collaborate with law enforcement and legal aid to keep Sonia informed about the progress
  of the case against the perpetrator.

#### Follow-Up:

- Monitor Sonia's progress through regular visits and consultations with medical professionals, counselors, and CCI staff.
- Assess the stability and safety of her current environment, including any potential changes in her sister's willingness to take her back.
- Maintain communication with Sonia's sister to address any ongoing issues or concerns related to her reintegration.

#### Case Closure:



- Close the case once Sonia's immediate medical and psychological needs are met, and she is in a stable and secure living situation.
- Ensure that Sonia has a comprehensive support network in place, whether within the CCI or in a new foster care arrangement.
- Conduct a final review to confirm that all aspects of her rehabilitation plan have been successfully implemented and that Sonia's long-term safety and well-being are ensured.



# **Chapter 4**

#### **Assessment of Children & Families**

- 1. Handout 1: Tools for Child Assessment: JJA Form 7 ICP (blank format)
- 2. Handout 2: Case Studies for Practice Session on ICP
- 3. Child Aryan
- 4. Child Radha
- 5. Handout 3: Response to the case studies (filled ICP)
- 6. Handout 4: Guidelines for Family Visits
- 7. Handout 5: Tools for Family Assessment: SIR
- 8. Handout 6: Practice session using SIR
- 9. Handout 7: Response to the case studies (filled SIR)
- 10. Handout 8: Tools for Family Assessment: Thrive Scale
- 11. Handout 9: Case Management Tracker

# 1. Handout 1: Tools for Child Assessment: JJA Form 7 ICP (Blank format)

# 

Address of the Board or the Committee.....

Date of Admission (if child is in an institution .....

Admission No. (If child is in an institution) .....



# Stay of the child (Fill as applicable)

- (i) Short term (up to six months)
  - (ii) Medium Term (six months to one year)
  - (iii) Long term (more than 1 year)

# FOR BOTH CATEGORIES OF CHILDREN WHO ARE PLACED IN INSTITUTIONAL OR NON-INSTITUTIONAL CARE

1. Personal details (to be provided by child/parent/both on admission of the child in the institution)
(a) Name of the Child
(b) Age/Date of Birth
(c) Sex: Male/Female
(d) Father's name
(e) Mother's name
(f) Nationality
(g) Religion
(h) Caste
(i) Language spoken
2. Level of Education
3. Details of Savings Account of the child, if any
4. Details of awards/rewards received by the child, if any
5. Details of child's belongings, if any
6. Details of child's parents' property, if any-
7. Details of child's parents bank accounts, if any-
8. Details of child's insurance policy, if any-
9. Details of child's parents' insurance policy, if any-
10. Details of child's parents job compensation, pension if any-
11. Details of child's fixed deposits, savings, financial policy, mutual funds if any-

12. Details of parent's loans, Mortgages, other financial liabilities, if any-



- 13. Details of property to be inherited, if any-
- 14. Whether succession certificate issued or not?- a. yes b. no
- 15. Details of succession certificate-
- 16. Whether legal heir certificate issued or not?- a. yes b. no
- 17. Details of legal heir certificate-
- 18. Whether the child is orphan/abandoned/surrendered?
- 19. Based on the results of Case History, Social Investigation report and interaction with the child, give details on following areas of concern and interventions required, if any- (This is for both categories of children who are placed in institutional or non-institutional care)

#	Category	Areas of concern	Proposed Interventions
1	Child's expectation from  care and protection(Child's thoughts, wishes, desires)	<ul> <li>Caring Adults</li> <li>Safety</li> <li>Personal needs addressed (health, education, emotional, etc)</li> <li>Contact with family</li> <li>Desire to return to family</li> <li>Desire to consider other care options</li> <li>Other:</li> </ul>	<ul> <li>Meet personal needs (health, education, emotional, etc)</li> <li>Maintaining contact/visitation with families</li> <li>Work toward return to family</li> <li>Work toward other care options</li> <li>Other:</li> </ul>



2	Health needs	and	nutrition	<ul><li>Immunizations</li><li>Malnutrition/low weight/anemia</li></ul>	<ul><li>Regular medical attention</li><li>Special diet</li></ul>
				Physical Impairment	Medications
				Visual impairment	• Support for
				Hearing impairment	impairments
				Speech impairment	• Other:
				Dental care	
				Hygiene issues	
				<ul><li>Disease (HIV/AIDS, Epilepsy, etc)</li><li>Specify</li></ul>	
				• Other:	



3	Emotional psychological support needed	and	<ul><li>Anger management</li><li>Adjustment issues</li><li>Abused/neglected</li></ul>	<ul> <li>Additional support and attention from staff/community members/role models</li> </ul>
			<ul> <li>Aggression/violence</li> <li>Bedwetting</li> <li>Bullying</li> <li>Disobedience</li> <li>Depression</li> <li>Stealing</li> <li>Trauma</li> <li>Hyperactivity</li> <li>Self-harm/suicidal thoughts</li> <li>Lying</li> <li>Sexualized behavior</li> <li>Alcohol/drug abuse</li> <li>Lack of trust in adults</li> <li>Other:</li> </ul>	<ul> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>



4	Educational and training needs	<ul> <li>Learning Issues</li> <li>Delayed learning (for late starters)</li> <li>Concentration issues</li> <li>Behavior issues at school</li> <li>Study skills</li> <li>School supplies</li> <li>Computer Training</li> <li>Career Counseling</li> <li>Relationship with teachers</li> <li>Other:</li> </ul>	<ul> <li>LD testing</li> <li>ADHD Testing</li> <li>IQ testing</li> <li>Additional educational support</li> <li>Career Counseling</li> <li>Other:</li> </ul>
5	Leisure, creativity and play	<ul> <li>Lack of interest in leisure activities</li> <li>Lack of participation in leisure activities</li> <li>Lack of time for leisure activities</li> <li>Other:</li> </ul>	<ul> <li>Encourage finding time for leisure</li> <li>Help identify interests</li> <li>Enroll in lessons/join team</li> <li>Other:</li> </ul>



6	Attachments and interpersonal relationships	<ul> <li>Bonding with adult figure</li> <li>Interactions with caregivers</li> <li>Interactions with peers/friendships</li> <li>Other:</li> </ul>	<ul> <li>Guidance from caregivers</li> <li>Counseling with social worker</li> <li>Counseling with psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>
	Removed Religious Beliefs Category		
7	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment	<ul> <li>Communication Skills</li> <li>Self-confidence/self-a wareness</li> <li>Problem solving/decision making</li> <li>Conflict resolution</li> <li>Expressing emotions</li> <li>Stress Management</li> <li>Responsible Sexual Behavior</li> <li>Information about personal history/cultural identity</li> </ul>	Life skills education  Individual guidance  Other:



		• Other:	
8	Independent living skills	<ul> <li>Vocational training</li> <li>Financial training</li> <li>Nutrition/cooking</li> <li>Health/hygiene</li> <li>Household chores</li> <li>Social and community network</li> <li>Using public transportation</li> <li>Other:</li> </ul>	<ul> <li>Life skills education</li> <li>Enroll in vocational course</li> <li>Group activities/field trips</li> <li>Support to develop and sustain relationships</li> <li>Individual guidance</li> <li>Other:</li> </ul>
9	Any other significant experiences which may have impacted the development of the child, like trafficking, domestic violence, parental neglect, bullying in school, etc. (Please specify)	<ul> <li>Bullying</li> <li>Neglect</li> <li>Physical abuse</li> <li>Sexaul abuse</li> <li>Trafficking</li> <li>Drug/alcohol abuse</li> <li>Other:</li> </ul>	<ul> <li>Additional support from caregivers</li> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>

20. Whether the child has any siblings? Yes/No

21. Whether the child and his/her sibling are being placed together? A. Yes B. No



- 22. Whether the child and his/her siblings are being surrendered by the single parent/ Guardian? A. Yes
- b. No C. Not Applicable
- 23. Case/Profile No. of the sibling/siblings-
- 24. In case the child is with disability or special needs or is terminally ill

(This may be relevant for both child in conflict with law and child in need of care and protection, as the case may be)

(i) Whether the child who is suffering from disabilities has been provided with disability certificate.

Yes/No. If Yes, please state the disability certificate no .....

(ii) Whether such child has been provided with medical equipment like hearing aid, crutches etc.

Yes/No. If Yes, please specify.....

(iii) Whether the child has been provided for compensation /relief for his/her disability. Yes/No. If yes,

please specify.....

- (iv) Education requirements of the child.....
- (v) Any other special needs of the child.....
- (vi) Any other recommendation.....
- 25. If the child belongs to Children in Street Situations/Trafficked/Involved in Drug Peddling/Child Labour (This may be relevant for both child in conflict with law and child in need of care and protection, as the case may be)
- (i) Whether the child belongs to Children in Street Situation: Yes/No.
- (ii) Whether the child is a victim of child trafficking: Yes/No. If yes,
- (iii) Whether the child was involved in drug- peddling: Yes/No.
- (iv) Whether the child is a victim of child labour. Yes/No. If yes,
- (v) Whether the child who has been a victim of Child-Labour has been provided compensation under the Child Labour Rehabilitation-cum-Welfare Fund or any other scheme. Please Specify......



(vi) Whether such child who have been victim of child labour/ child trafficking/drug peddling/ or is a children in street situation provided with counselling? Yes/No
(vii) Whether the child has been provided any compensation? Yes/ No. If yes, please
Specify
26. If the child is a victim of abuse including sexual abuse: (This may be relevant for both child in conflict with law and child in need of care and protection, as the case may be)
(i) Whether the child has been provided counselling?
(ii) Whether any action has been taken against such offender/perpetrator? If Yes, Please
specify
(iii) Whether the child who has been a victim of sexual assault has been provided compensation as per the compensation scheme under the Protection of Children from Sexual Offences Act, 2012
(iv) Any other compensation or relief provided to the child?
(v) Any other observations
FOR CHILDREN PLACED IN INSTITUTIONAL CARE
27. Progress report of the child (to be prepared every fortnight for first three months and thereafter to be prepared once a month)
[Note: Use different sheet for Progress Report]
1. Name of the Probation Officer/Case Worker/Child Welfare Officer
2. Period of the report
3. Admission No
4. Board or Committee details
5. Profile No
6. Name of the Child
7. Place of interviewDates
8. General conduct and progress of the child during the period of the report



9. Progress made with regard to proposed interventions as mentioned in point 19 of Part A of this form.

S.No	Category	Proposed Interventions  (Interventions needed/provided as indicated in the table under Personal Details. Please be specific. Include any new concerns that develop.)	Progress of the Child  Please rate and give rationale for ratings.  4= No further intervention needed  3= Good progress  2= Some progress  1= No progress
1	Child's expectation from care and protection (Child's thoughts, wishes, desires)		
2	Health and Nutrition Needs		
3	Emotional and psychological support needed		
4	Educational and training needs		
5	Leisure, creativity and play		
6	Attachments and interpersonal relationships		



	Removed Religious Beliefs Category		
7	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment		
8	Independent Living Skills		
9	Any other significant experiences which may have impacted the development of the child, like trafficking, domestic violence, parental neglect, bullying in school, etc. (Please specify)		
1	<ul><li>11. Variation of conditions of</li><li>12. Change of residence of</li></ul>	e committee or Board or Children's of bond:	
		lict with the law) Period of supe	
1:	5. Result of supervision with rema	arks (if any):	
	6. Name and Addresses of the phild is to live after the supervision	arent or guardian or fit person un	der whose care the
	Date of report:		

Signature of the Probation Officer.....



- 28. Pre-release report (to be prepared 15 days prior to release):
  - 1. Details of place of transfer and authority concerned responsible in the place of transfer/release:
  - 2. Details of placement of the child in different institutions/family:(CCI name, address, date of placement) ......
  - 3. Training undergone and skills acquired: ......
    - Life Skills Education
    - Computer Training
    - Aptitude Testing
    - Vocational Courses
    - LifeBook Work
    - Child preparation for placement
    - Other: \_\_\_\_\_
  - 4. Last progress report of the child (to be attached)
  - 5. Rehabilitation and restoration plan of the child (to be prepared with reference to progress reports of the child.

S. No	Category	Rehabilitation and Restoration Plan of the Child Indicate support required to meet the child's needs based upon prior interventions and child's progress.
1	Child's expectation from care and protection (Child's thoughts, wishes, desires)	
2	Health and nutrition	



3	Emotional and psychological				
4	Education and training				
5	Leisure, creativity and play				
6	Attachments and interpersonal relationships				
7	Self-care and life skill training for Protection from all kinds of abuse, neglect and maltreatment				
8	Independent living skills				
9	Any other				
<ol> <li>Date of release/transfer/repatriation:</li></ol>					
	☐ Home Visit				

Phone Call



☐ Future visits indicated on calendar.

(Per JJA: Minimum once a month call or visit for first 6 months, then once every 3 months for next year minimum - More frequent calls/visits may be required if issues arise)

☐ Information provided to caseworker when child moves to another state/district

- 11. Memorandum of Understanding with Non-Governmental Organisation identified for post-release follow-up (Attach a copy)
- 12. Details of sponsorship agency/individual sponsor, if any:.....
- 13. Memorandum of Understanding between the sponsoring agency and individual sponsor (Attach a copy): ......
- 14. Attach Medical examination report before release: ......
- 15. Any other information: .....
- 29. Post-release/restoration report of the child:
  - 1. Status of Bank Account: Closed/Transferred
  - 2. Earnings and belongings of the child: handed over to the child or his parents/guardians Yes/No

  - 4. Progress made with reference to Rehabilitation and Restoration Plan: .......
  - 5. Family's behaviour/attitude towards the child: .....
  - 6. Social milieu of the child, particularly the attitude of neighbours' / community: .........
  - 7. How is the child using the skills acquired: .....
  - 8. Whether the child has been admitted to a school or vocation? Give date and name of the school/institute/any other agency Yes/No .........
  - 9. Report of second and third follow-up interaction with the child after two months and six months respectively: ......
  - 10. Efforts towards social mainstreaming and child's opinion/views about it: .......
  - 11. Identity Cards and Compensation



(Instruction: Please verify with the physical documents)

IDENTITY CARDS	Present Status (Please tick whichever applicable)					
	Yes	No	Action Taken			
Birth certificate						
School certificate						
Caste certificate						
Below Poverty Line Card						
Disability Certificate						
Immunization Card						
Ration Card						
Adhaar Card						
Received Compensation from Government						

# 30. Adoption

(i) Whether the child has been declared legally free for adoption?



## A. Yes B. No C. Not Applicable

(If not applicable, then subsequent questions do not apply)

- (ii) Whether the child has been placed in a Specialised Adoption Agency or Child Care Institution?
  - A. Specialised Adoption Agency B. Child Care Institution
- (iii) Social Investigation Report by Child Welfare Officer/Case worker/social worker, as the case may be submitted?
  - A. Yes B. No
- (iv) Deed of surrender executed by the parents/guardian before the Committee?
  - A. Yes B. No C. Not Applicable
- (v) Declaration submitted by District Child Protection Unit and Child Care Institution or Specialised Adoption Agency that all restoration efforts have been made for the child-
  - A. Yes B. No
- (vi) Nobody has approached District Child Protection Unit and Child Care Institution or Specialised Adoption Agency for claiming the child as biological parents or legal guardians-
  - A. Yes B. No
- (vii) All timelines under Section 38 of the Act have been adhered to before declaring the child legally free for adoption
  - A. Yes B. No

# FOR CHILDREN PLACED IN NON-INSTITUTIONAL CARE (EXCEPT ADOPTION)



8. Language spoken
9. Level of Education
10. Whether the child has been provided compensation/relief under various schemes of government
11. Where is the child being placed? –
(a) guardian (b)foster care (c) sponsorship (d) single parent
12. Whether the child is being surrendered by the single parent/Guardian?
A. Yes B. No C. Not Applicable
13. If yes, then whether the surrender deed has been made? A. Yes B. No
14. Education- (Yes/No/Not applicable) If yes, then
(i) Whether the child has been enrolled in school or a special training center?
(ii) If child is enrolled in school, then
(a) Name of the school
(b) Government/Private
(c) Class
(iii) Unified District Information System for Education Code of the said school
(iv) If child is enrolled in special training centre then,
(a) Center is Residential or Non-Residential
(b) Duration of enrollment
(v) Whether the child has been enrolled in school under clause (c) of sub-section (1) of section 12 of the Rigt to Education Act, 2009? Yes / No / NA
(vi) The Child Welfare Committee has recommended for continuing of education of the child in the same school as the child was studying in? Yes / No

the same school as he was studying in? Yes/ No

(vii) On the basis of the recommendation, whether the child is continuing education in

(viii) The Child Welfare Committee has recommended for transfer of school for the child? Yes / No



(a) If yes, then what are the reasons given by the Child Welfare Committee for recommending transfer of school?
(ix) Whether the child has been admitted to/transferred to a new school? Yes/ No
(x) Details of new school along with its Unified District Information System for Education
Code
(xi) Address and Contact Details
(xii) Class in which admission/transfer taken place
(xiii) Class in which the child was transferred from previous school
(xiv) On the basis of the recommendations of Child Welfare Committee, whether the school in which the child is studying in is giving the benefit under clause (c) of sub-section (1) of section 12(1)(c) of the Right to Education Act, 2009 to the child? Yes/No
(xv) Whether the child is being given free education by the appropriate government?
Yes / No
(xvi) Is the child availing any scholarship? Yes / No
a. If yes, name of the scholarship
b. Amount of scholarship
(xvii) Any other observation and recommendation made by the Child Welfare Committee for education of the child
15. Sponsorship
(i) The child has been recommended for sponsorship by the Child Welfare Committee?
A. Yes B. No (If no, then subsequent questions do not apply)
(ii) Whether sponsorship for the child has been approved by a Committee headed by District Magistrate:
A. Yes B. No
(iii) Nature of sponsorship: i. Government ii. Private
(iv) Type of sponsorship
(a) Individual to Individual sponsorship



	(b) Group Sponsorship
	(c) Community or organisation sponsorship
	(d) Support to families through sponsorship
	(e) Support to children homes and special homes
	(f) Sponsorship through:
	i. Institutions,
	ii. Companies
	iii. Corporations either public or private
	(g) Any other
	(v)Whether child has started receiving money under the sponsorship program-
	A. Yes B. No
	(vi) Recommended duration of sponsorship:
	(vii) Any other information:
16. Re	storation of the child:
	(i) Whether the child is being restored to:-
	Single Parent / Biological Parents / Guardian/ Relative
	(ii) Name of the person to whom the child is being restored to
	(iii) Address and contact details of person where the child is being restored to
	(iv) If the child is being restored to Guardian/relative, then-
	(v) Relationship of the child with the guardian/relative-
	(vi) Does the guardian/relative have children of their own? A. yes B. No
	(vii) If yes, Details of guardian/relatives' children-
	(viii) Social and financial condition of the guardian/relative-
	(ix) Whether the child will be staying in the same State where the child was found? Yes/No



(x) Whether the	child	needs	to be	transferred	to	another	State	for	restoration?	Yes/No.	lf
yes:											

- (a) Name of the State where the child is restored to-
- (b) An escort is required for transfer of the child to another State?

A. Yes B. No.

If yes: Identification Proof of escort such as driving license, Aadhar Card, etc.....

(c) Whether District Child Protection Unit/ Child Welfare Committee of the concerned district of the

State where the child is being transferred to has been informed about the transfer orders? Yes/No

(d) Whether the child's documents/Social Investigation Report/ Individual Care Plan/ Orders of

Child Welfare Committee have been transferred to the concerned CWC of the State? Yes/No

- (e) Details of Child Welfare Committee where the case is transferred.....
- (xi) Child Welfare Committee has recommended follow-up of the child post restoration: Yes / No
- (xii) Status of bank accounts of the child.....
- (xiii) The belongings of the child are handed over to the child/parent/guardian: Yes/No
- (xiv) Identity Cards and Compensation:

IDENTITY CARDS	Present Status (Please tick whichever applicable)					
	Yes	No Action Taken				
Birth certificate						



School certificate		
Caste certificate		
Below Poverty Line Card		
Disability Certificate		
Immunization Card		
Ration Card		
Adhaar Card		
Received Compensation from Government		

# REPATRIATION OF THE CHILD

- (i) Whether the child needs to be repatriated. Yes/No
- (ii) If yes, whether such repatriation is: (tick whichever is applicable)
  - inter-district
  - inter-state
  - Inter-country
- (iii) Whether information about repatriation of the child has been informed to the:-
  - District Magistrate



- State Government.
- Central Government.
- (iv) Has the process of repatriation of the child been initiated? Yes / No . Details:......
- (v) Whether the details of the child to be repatriated has been informed to National or State Commission for Protection of Child Rights, as the case may be?
- (vi) Any other recommendation.....

Signature of the Probation Officer/

Child Welfare Officer/District Child Protection Unit

Stamp and Seal where available"

#### 2. Handout 2: Case Studies for Practice Session on ICP

Trainer will ask each group to use the case study to fill the ICP. If a question on the ICP asks for information not provided in the case study, the trainer will tell the group to either leave the question blank, or create a potential response. Give them 5-7 minutes to complete the Personal Details table by checking the appropriate boxes.

The trainer will let the groups continue working on further sections of ICP, referring to information in the Case Study. Ask each group to complete certain sections of the table. Trainer can swap it at each section (i.e. if group 1 was doing pt.1,2,3 in Personal Details, they will do 4,5,6 in Progress Report and so on.

On the same lines, the groups will complete the sections allotted to them with the information from the Case Study about the Pre-Release and Post-Release part. Remember, this exercise is designed to give practice in using the form.

Trainer will allow 30-40 minutes for the groups to complete the ICP. The trainer will now invite participants to present their completed ICP, Trainer shall review the group activity closely and open room for discussions, questions and sharing of thoughts about the case and process.

Trainer can discuss on the questions

- What was the kind of discussion in their groups?
- What was the purpose of doing assessment in this case?
- What are the challenges / barriers they see while filling ICP?
- Note any other suggestions from the groups



Trainer will refer and show the filled form from Handout to participants to do self-review or provide a hard copy of that as a follow up activity post training (Handout in the Training Aids doc).

Trainer will explain that the ICP must be updated on Track Child Portal (as per the state - India context) monthly and reviewed by the CCI Management Committee quarterly. (Track Child Portal is the system for child protection data management and reporting. Portal holds the live database of missing and found children, and tracks the overall progress of the children living in CCIs. One of the key features of the portal is to maintain and monitor ICPs for each CCI child.

Above mentioned points are just one way of conducting the activity. The trainer is free to use his/her creativity to make the activity more effective. Rather than giving a case study, the trainer can ask them to use any real case they are working on.

Instructions: Use the following information to complete the assessment tools. You may not have all of the information you need, so either leave certain questions blank, or make assumptions and fill in the question with a possible answer. In real situations you would need to follow up with the child/family to gather the information you are missing.

## 2.1. Case Study - Child Aryan

#### Overview

Aryan is a 12-year-old boy who lives in Namaste CCI and goes to a government school in the fourth grade. He ended up in the CCI because his dad passed away, and his mom, Meena, couldn't take care of Aryan and his two younger brothers. Meena does household work for others but doesn't have much education. She has a heart problem but finds it hard to go to the hospital because she has to take care of her kids. Meena's older brother, Keyer, helps with money, so they have a small place to live with basic facilities.

But because Meena's income is uncertain, she still struggles to provide her kids with good food and basic things they need. Meena rarely sees her extended family or relatives because she's busy with work and her children. She loves her kids but gets overwhelmed and sometimes loses her temper, leading to arguments. Aryan is doing okay at the CCI. He helps with chores and gets along with other kids. He seems healthy but has toothaches because he's never been to a dentist. The main problem is that he doesn't do well in school. While the IQ tests say he is of average intelligence, he barely manages to get passing marks due to his unwillingness to study. Even though he's smart, he doesn't try hard, and his teachers get frustrated. This makes him feel like he's failing.



Aryan still cares about his family and visits them during holidays to see his mom, brothers, and uncle, but he doesn't see them outside of these visits.

#### <u>Aryan</u>

My one true wish is to go back home to live with my mother and brothers. We are a close family and I get to visit them on holidays, but I hate returning to the CCI after the celebrations. My Uncle Keyer helps my mother a lot and I really like to spend time with him too.

I used to be a good student, but my marks have not been as good since I've been in the CCI. I find myself daydreaming about my life before the CCI – when my father was still alive – and I can't bring myself to think about my school work. The other kids tease me sometimes about my marks, and then I feel really stupid – like I'm a failure. And my teacher gets angry at me because she says I disrupt the class, but I can't just let the other kids tease me like they do. Sometimes I get really mad at them and can't control myself. I guess I just don't care anymore – why do I need an education anyway? Why does it matter?

I would work really hard if I could just go home. I'd help my mother with the chores and promise that I would study harder. It's just so hard to be away from my family.

## Meena

I miss my husband so much. I don't know how to go on. Some mornings I just want to put the blanket over my head and hide from the world. I love my kids so much, but I just can't handle all three of them right now. I have a heart condition that makes me feel really tired, so it's hard to work and take care of my kids. In fact, it's hard for me to get to doctor appointments because I have to take the kids with me, so I often have to cancel.

I know I have to earn a living so I do household work for a few families, but it doesn't pay enough and I keep losing work due to my bad health. I'm lucky that my older brother, Keyer, helps me out with some extra money each month. It helps pay for the rent so we can have a roof over our heads. Our home is small, but we have the basics of indoor plumbing and cooking facilities, and the neighborhood is safe so I don't have to worry when the boys play outside. And it's really important that the boys play outside because they have so much energy! I just don't know how to keep up with them, and sometimes I feel like they're running the house – they pretty much do whatever they want, the only way I can stop them from misbehaving is slapping them around a bit every now and then.

I miss Aryan and feel guilty for sending him to live at the CCI, but I had no choice. It was the hardest decision I ever had to make. I don't get to see him very often, but



when he visits it's like "the old days" when we were all a family. I don't have the chance to visit with neighbors or any of my extended family, so my only contact with the world is with Keyer. Aryan is a good boy. He never caused trouble and has always been a good student. His teachers loved him. He has always been polite and did his chores around here. But something has changed in him since he has been at the CCI. He doesn't seem as happy, he is struggling with his school work, and is causing trouble in his classes. I would love to have him home again, but I just don't know how I could handle all three boys.

## CCI Caregiver

Aryan is usually polite to the staff and does what he is told, but sometimes gets in trouble with his friends, especially during coaching classes. He doesn't open up to me, but I can tell he really misses his father and misses living at home. Sometimes, I see him sitting alone, lost in his thoughts and staring into the distance. When I ask what he's thinking about he just says, "Nothing."

I've heard that he has always been a good student, but that has changed since he's been here. His marks are low and he doesn't want to work harder to get them up. Instead of studying he sits and stares, or worse, he causes trouble with the other kids. He was tested and has an average IQ, but it sure doesn't show.

He had a checkup with the doctor recently and he doesn't have any health concerns—he eats well and doesn't have any trouble sleeping. I don't know the last time he saw a dentist, though, he does keep having frequent toothaches.

I know he enjoys his visits with his family, but he doesn't see them very often. Other than spending time with his family, he doesn't really enjoy any activities like sports, art, reading, or anything like that. I feel bad for him because he doesn't have any close friends. I sure hope someday he will be able to go home for good.

#### CCI Social Worker

Aryan is a sweet boy who is struggling with the loss of his father and his family at the same time. At first he wouldn't talk about it, but I worked hard to build a relationship with him, and over time he has opened up to me. He desperately wants to go home, and while he understands his mother's struggles and why she decided she had to move him to the CCI he can't stop wondering why she chose him over his brothers. What did he do to deserve this?

These thoughts run through his head day and night, and he finds it difficult to concentrate on schoolwork, or even enjoy playing with the other kids. I know it is interfering with his studies and impacting his marks. He tells me that the other kids



tease him about his low marks and call him stupid. We have talked about how he can handle this appropriately, but too often his anger wins out and he acts out.

Aryan's mood and behavior would improve if he was able to return to his family, but it is likely he would need some support through the adjustment period of moving home. He needs to work through his feelings of grief, guilt and anger and learn new ways of coping.

## **Uncle Keyer**

My heart goes out to my sister and her amazing boys. They have been through so much. I try to help as much as I can financially, and I visit as often as I can to play with the younger boys and get rid of their unending energy. I feel good that they are able to have a small but comfortable home in a safe community, thanks to my support.

I am worried about my sister with her heart issues, and she doesn't have the opportunity to take care of herself as well as she should. I know the loss of her husband has taken a toll on her emotionally as well. She looks worn out and beats up the children instead of talking to them.

But I am especially concerned about Aryan. He has always been mature and hard working. He was a serious student, and I always thought we wouldn't have to worry about his future because of his work ethic. Now I wonder...he tells me he hates to study and doesn't care about school. I've tried to get him interested in other things like football or music, but he doesn't seem to care about anything. I know he wants nothing more than to come home.

I feel good about the help I've been able to offer, and would be willing to do more if it would mean Meena's family could be whole again. I just don't know how I could help.

# Aryan's Doctor

I saw Aryan a few months ago. He was in good health and developing normally for his age. I got him up to date on his immunizations and checked his hearing and vision - all seemed normal. He denied any symptoms or issues. I made a note to watch his hemoglobin level as it was near borderline and should be rechecked in 6 months. He also needs to visit a dentist to get his molars checked for decay.

#### Meena's Doctor

Meena has been dealing with a heart condition for several years now, and her recent stress has not helped. Her blood pressure has been high and I keep telling her she needs more rest, but she says she can't get it since she has to work and care for her



two energetic boys. I really think some outside help with her boys after school would be beneficial to her health.

She also reports that she feels exhausted much of the day, and while her heart issues likely contribute to this, it is more likely that she is dealing with high levels of stress, and grief surrounding the death of her husband, and the loss of Aryan as he entered the CCI. She told me that she still feels guilty about moving Aryan, but she didn't know what else to do.

Meena needs to make her health a priority and maintain regular visits with me. In the recent past she has been missing appointments due to lack of child care.

## 2.2. Case Study: Child Radha

#### Overview:

Radha, an 11-year-old girl, found herself in the care of a Child Care Institution (CCI) due to challenging circumstances in her life. Radha's life took a tragic turn when her mother passed away when she was just 7 years old. Her father, an agricultural laborer, struggled to make ends meet, and the family faced economic hardships. Eventually, he remarried and had a son from his second marriage, leaving Radha feeling unloved by her stepmother. Radha carried the emotional scars of witnessing her parents' constant fights, which had driven her mother to take her own life.

Radha's trauma manifested in her frequent nightmares, bed-wetting episodes, and aggressive behavior towards other children, who taunted her as "Cry Baby" and "leaking pants." She withdrew from her peers and only interacted with younger children. Despite her struggles, Radha found solace in dancing and prayer.

Radha has been in the CCI for the past 8 months. Currently she is adjusting well. She has made a few friends of her own age group. The bullying from other children has also reduced tremendously. Radha's bedwetting has reduced with regular support from House mother and guidance of counselor/Social worker, but still a lot of improvement is needed. Her nightmares have reduced in frequency and was able to talk about her fears with the counselor. There is some progress in Radha's educational performance with special attention from coaching teachers and school teachers but still has problems in reading and writing words in Hindi.

After 1 year living at the CCI, the SIR was conducted for Radha. The Case Worker visited the child's family home. It was seen that the family's financial situation had worsened as the father suffered an acute crop failure. Currently it is very difficult for them to fulfill even the basic needs. After rounds of family counseling and regular contact, the step mother and Radha have bonded well. There is also a school in the village of the family home where Radha will be going once she is reunited with her



family. Radha was referred for an LD assessment post in which she was provided special guidance by the teachers per recommendation of the counselor. Radha is improving well in her education. Parents were guided about bedwetting issues and how to support Radha's personal hygiene. Parents were also educated about the importance of nutritious food and how they can ensure the family is taking a balanced diet with vegetables available. It was determined that Radha could be reunited with her family, as soon as the financial situation of the family stabilizes. Radha is very excited about this and is keenly looking forward to living with her family.

#### Radha:

I miss my father a lot! It was such a happy time when I used to be with my family, with my mother and father. I wish to cherish that time again. I'm constantly trying to behave well here at the CCI, so that they can send me back home. I have a few friends here, but I do not like when other children tease me. I like talking to Rajshree didi (counselor). She tells me that after some months, I should be able to go home.

<u>Father</u>: I desperately wait for my daughter to join us in the family. However, with the recent crop failure I am in a bad situation. It is getting difficult for me to meet the needs of my wife and son. I am in a great dilemma. On one hand, I want to have my daughter soonest. On the other hand, I am reluctant to bring my daughter home knowing that my current circumstances do not allow me to adequately provide for her needs, and I don't want her to suffer as a result. The fear of being unable to meet the additional expenses, especially Radha's education and well-being, bothers me. I long to provide a nurturing environment to my daughter but am troubled by uncertainty.

My 3 year old son is allergic to certain foods as a result of falling sick often, we need money for his frequent medication as well. Recently I was so much in crisis that I had to borrow some money from a relative to keep the family running. This has added on to my stress.

#### **CCI** Caregiver:

Radha has come a long way with us. With support, she has gradually been able to improve tremendously with her bedwetting issues. Her hygiene has also improved a lot, however she still needs close guidance. She's a fussy eater, but if one is persistent with her, she is able to eat nutritious meals.

I have closely seen her yearning for her father and to return home. I hope the condition at her family home improves soon so we are able to send her back.

#### Rajshree, Radha's Counselor:



I'm so glad that over time Radha has made a good bond with me, as a result of which she's able to have heart to heart talks with me. We could help her to a good extent to overcome the childhood trauma. Subsequently, her nightmares and bedwetting episodes have reduced greatly, still some more work is needed in that direction.

I well recognize Radha's emotional turmoil and longing for her family. We are actively working to address her bedwetting issues and provide guidance for her education. I am acutely aware of the father's willingness to have Radha back but I'm also mindful of the financial constraints he faces.

#### Case Worker:

Our biggest worry with reuniting Radha was the unacceptance from step mother. However, the events have taken such a turn that the family is in a financial crisis. Radha's bond with step mother could be improved, but our biggest concern with her reunification is now the unstable financial condition of the family. Remaining conditions are mostly fine, if only this issue could be resolved, we'll be able to go ahead with Radha's reunification. However, this is such a critical issue that it has to be certainly resolved, before we move ahead with her reunification.

We are trying to link the family to the social protection schemes and explore employment opportunities for the father.

Handout 3: ICP Reference Sheet/Suggested Responses - Filled JJA Form 7 ICP practice -Case Study : Child Aryan

JJA Form 7 ICP

FORM 7

[Rules 11(3), 13(7)(vi), 13(8)(ii), 19(4), 19(17), 62(6)(vii), 62(6)(x) and 69 I (3)]

INDIVIDUAL CARE PLAN

Child in Conflict with Law or Child in Need of Care and Protection

(Tick whichever is applicable)

Name of Case Worker/Child Welfare Officer/Probation Officer Subathra C

Date of preparing the Individual Care Plan 12.01.2023



Case/Profile Noof 20 (not known)
FIR No(not known)
Under Sections (Type of offence), applicable in case of Children in Conflict with Law(not known)
Police Station(not known)
Address of the Board or the Committee (not known)
Admission No. (If child is in an institution) (not known)
Date of Admission (if child is in an institution (not known)
Stay of the child (Fill as applicable)
• (i) Short term (up to six months)
(ii) Medium Term (six months to one year)
<ul> <li>(iii) Long term (more than 1 year)</li> </ul>
FOR BOTH CATEGORIES OF CHILDREN WHO ARE PLACED IN INSTITUTIONAL OR NON-
INSTITUTIONAL CARE
1. Personal details (to be provided by child/parent/both on admission of the child in the institution)
(a) Name of the Child <mark>Aryan</mark>
(b) Age/Date of Birth <mark>12 years</mark>
(c) Sex: Male/Female <mark>Male</mark>
(d) Father's name (not known)
(e) Mother's name <mark>Meena</mark>
(f) Nationality <mark>Indian.</mark>
(g) Religion (not known)
(h) Caste (not known)
(i) Language spoken (not known).
2. Level of Education <mark>IV</mark>



- 3. Details of Savings Account of the child, if any.... (not known)
- 4. Details of awards/rewards received by the child, if any.. (not known)
- 5. Details of child's belongings, if any. (not known)
- 6. Details of child's parents' property, if any- (not known)
- 7. Details of child's parents bank accounts, if any- (not known)
- 8. Details of child's insurance policy, if any- (not known)
- 9. Details of child's parents' insurance policy, if any- No
- 10. Details of child's parents job compensation, pension if any- (not known)
- 11. Details of child's fixed deposits, savings, financial policy, mutual funds if any- (not known)
- 12. Details of parent's loans, Mortgages, other financial liabilities, if any- (not known)
- 13. Details of property to be inherited, if any- (not known)
- 14. Whether succession certificate issued or not?- a. yes b. no
- 15. Details of succession certificate- Not applicable
- 16. Whether legal heir certificate issued or not? a. yes b. no (not known)
- 17. Details of legal heir certificate- Not applicable
- 18. Whether the child is orphan/abandoned/surrendered? Single parented
- 19. Based on the results of Case History, Social Investigation report and interaction with the child, give details on following areas of concern and interventions required, if any- (This is for both categories of children who are placed in institutional or non-institutional care)



S. No	Category	Areas of concern	Proposed Interventions
1	Child's expectation from  care and protection(Child's thoughts, wishes, desires)	<ul> <li>Caring Adults</li> <li>Safety</li> <li>Personal needs addressed (health, education, emotional, etc)</li> <li>Contact with family</li> <li>Desire to return to family</li> <li>Desire to consider other care options</li> <li>Other:</li> </ul>	<ul> <li>Meet personal needs (health, education, emotional, etc)</li> <li>Maintaining contact/visitation with families</li> <li>Work toward return to family</li> <li>Work toward other care options</li> <li>Other:</li> </ul>



2	Health and nutrition needs	<ul><li>Immunizations</li><li>Malnutrition/low</li></ul>	<ul> <li>Regular medical attention</li> </ul>
		weight/anemia  Physical Impairment	<ul> <li>Special diet(Incorporat</li> </ul>
		Visual impairment	<ul><li>e foods which improves HB)</li><li>Medications</li></ul>
		<ul><li>Hearing impairment</li></ul>	<ul> <li>Support for impairments</li> </ul>
		<ul> <li>Speech impairment</li> </ul>	<ul><li>Other: Visit to Dentist for tooth Decay</li></ul>
		<ul><li>Dental care</li><li>Hygiene issues</li></ul>	<mark>issues</mark>
		<ul><li>Disease (HIV/AIDS, Epilepsy, etc) Specify</li></ul>	
		<ul><li>Other: _Border line HB</li></ul>	



3 Emotional psychological support needed	<ul> <li>Anger management</li> <li>Adjustment issues</li> <li>Abused/neglecte d</li> <li>Aggression/viole nce</li> <li>Bedwetting</li> <li>Bullying</li> <li>Disobedience</li> <li>Depression</li> <li>Stealing</li> <li>Trauma</li> <li>Hyperactivity</li> <li>Self-harm/suicida I thoughts</li> <li>Lying</li> <li>Sexualized behavior</li> <li>Alcohol/drug abuse</li> <li>Lack of trust in adults</li> <li>Other: Lack of Friendship with other children.</li> </ul>	<ul> <li>Additional support and attention from staff/communit y members/role models</li> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>
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4	Educational and training needs	<ul> <li>Learning Issues</li> <li>Delayed learning (for late starters)</li> <li>Concentration issues</li> <li>Behavior issues at school</li> <li>Study skills</li> <li>School supplies</li> <li>Computer Training</li> <li>Career Counseling</li> <li>Relationship with teachers</li> <li>Other:</li> </ul>	<ul> <li>LD testing</li> <li>ADHD Testing</li> <li>IQ testing</li> <li>Additional educational support</li> <li>Career Counseling</li> <li>Other: Meeting the teacher and talk about his situation and suggesting the teacher to support this child. Giving him activities which improves his concentration.</li> </ul>
5	Leisure, creativity and play	<ul> <li>Lack of interest in leisure activities</li> <li>Lack of participation in leisure activities</li> <li>Lack of time for leisure activities</li> <li>Other:</li> </ul>	<ul> <li>Encourage finding time for leisure</li> <li>Help identify interests</li> <li>Enroll in lessons/join team( To make friends)</li> <li>Other:</li> </ul>



6	Attachments and inter-personal relationships	<ul> <li>Bonding with adult figure</li> <li>Interactions with caregivers</li> <li>Interactions with peers/friendships</li> <li>Other:</li> </ul>	<ul> <li>Guidance from caregivers</li> <li>Counseling with social worker</li> <li>Counseling with psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>
	Removed Religious Beliefs Category		
7	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment	<ul> <li>Communication Skills</li> <li>Self-confidence/s elf-awareness</li> <li>Problem solving/decision making</li> <li>Conflict resolution</li> <li>Expressing emotions</li> <li>Stress Management</li> <li>Responsible Sexual Behavior</li> <li>Information</li> </ul>	<ul> <li>Life skills education</li> <li>Individual guidance</li> <li>Other:</li> </ul>



		about personal history/cultural identity  • Other:	
8	Independent living skills	<ul> <li>Vocational training</li> <li>Financial training</li> <li>Nutrition/cooking</li> <li>Health/hygiene</li> <li>Household chores</li> <li>Social and community network</li> <li>Using public transportation</li> <li>Other:</li> </ul>	<ul> <li>Life skills education</li> <li>Enroll in vocational course</li> <li>Group activities/field trips</li> <li>Support to develop and sustain relationships</li> <li>Individual guidance</li> <li>Other:</li> </ul>



9 Any other significant Bullying Additional support from Neglect experiences which caregivers may have impacted Physical abuse the development of Individual the child, counseling like by Sexaul abuse trafficking, domestic social worker parental violence, Trafficking Individual neglect, bullying in school, etc. (Please counseling by Drug/alcohol abuse psychologist specify) Other: \_\_\_\_\_ Group counseling Other: \_\_\_\_\_

- 20. Whether the child has any siblings? Yes/No
- 21. Whether the child and his/her sibling are being placed together? A. Yes B. No.
- 22. Whether the child and his/her siblings are being surrendered by the single parent/Guardian? A. Yes
- b. No C. Not Applicable
- 23. Case/Profile No. of the sibling/siblings- Not applicable
- 24. In case the child is with disability or special needs or is terminally ill

(This may be relevant for both child in conflict with law and child in need of care and protection, as the case may be) Not applicable

(i) Whether the child who is suffering from disabilities has been provided with disability certificate.

Yes/No. If Yes, please state the disability certificate no .....

(ii) Whether such child has been provided with medical equipment like hearing aid, crutches etc.

Yes/No. If Yes, please specify.....



	(iii) Whether the child has been provided for compensation /relief for his/her disability. Yes/No. If yes,
	please specify
	(iv) Education requirements of the child
	(v) Any other special needs of the child
	(vi) Any other recommendation
Peddlii	the child belongs to Children in Street Situations/Trafficked/Involved in Drug ng/Child Labour (This may be relevant for both child in conflict with law and child in need and protection, as the case may be) Not applicable
	(i) Whether the child belongs to Children in Street Situation: Yes/No.
	(ii) Whether the child is a victim of child trafficking: Yes/No. If yes,
	(iii) Whether the child was involved in drug- peddling: Yes/No.
	(iv) Whether the child is a victim of child labour. Yes/No. If yes,
	(v) Whether the child who has been a victim of Child-Labour has been provided compensation under the Child Labour Rehabilitation-cum-Welfare Fund or any other scheme. Please Specify
	(vi) Whether such child who have been victim of child labour/ child trafficking/drug peddling/ or is a children in street situation provided with counselling? Yes/No
	(vii) Whether the child has been provided any compensation? Yes/ No. If yes, please
	Specify
	the child is a victim of abuse including sexual abuse: (This may be relevant for both child flict with law and child in need of care and protection, as the case may be)
Not ap	pplicable
	(i) Whether the child has been provided counselling?
	(ii) Whether any action has been taken against such offender/perpetrator? If Yes, Please
	specify
	(iii) Whether the child who has been a victim of sexual assault has been provided compensation as per the compensation scheme under the Protection of Children from Sexual Offences Act, 2012



(iv) Any other compensation or relief provided to the child?
(v) Any other observations
FOR CHILDREN PLACED IN INSTITUTIONAL CARE
27. Progress report of the child (to be prepared every fortnight for first three months and thereafter to be prepared once a month)
[Note: Use different sheet for Progress Report]
1. Name of the Probation Officer/Case Worker/Child Welfare OfficerMs. Subathra.
2. Period of the report 12.01.2023
3. Admission No Not known
4. Board or Committee details Not known
5. Profile No Not known
6. Name of the Child <mark>Aryan.</mark>
7. Place of interviewNamaste CCIDates12.01.2023
8. General conduct and progress of the child during the period of the report <mark>Polite and Calm</mark>
9. Progress made with regard to proposed interventions as mentioned in point 19 of Part A of this form.



S.No	Category	Proposed Interventions  (Interventions needed/provided as indicated in the table under Personal Details. Please be specific. Include any new concerns that develop.)	Progress of the Child  Please rate and give rationale for ratings.  4= No further intervention needed  3= Good progress  2= Some progress  1= No progress
1	Child's expectation from care and protection (Child's thoughts, wishes, desires)	<ul> <li>Meet personal needs (health, education, emotional, etc)</li> <li>Maintaining contact/visitation with families</li> <li>Work toward return to family</li> <li>Work toward other care options</li> </ul>	
2	Health and Nutrition Needs	<ul> <li>Special diet(Incorporate foods which improves HB)</li> <li>Other: Visit to Dentist for tooth Decay issue</li> </ul>	



3	Emotional and psychological support needed	<ul> <li>Additional support and attention from staff/community members/role models</li> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> </ul>	
4	Educational and training needs	<ul> <li>Additional educational support</li> <li>Other: Meeting the teacher and talk about his situation and suggesting the teacher to support this child. Giving him activities which improves his concentration.</li> </ul>	
5	Leisure, creativity and play	<ul> <li>Help identify interests</li> <li>Enroll in lessons/join team(         To make friends)</li> </ul>	
6	Attachments and interpersonal relationships	<ul> <li>Guidance from caregivers</li> <li>Counseling with social worker</li> </ul>	



	Removed Religious Beliefs Category		
7	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment	• Life skills education	
8	Independent Living Skills	<ul> <li>Enroll in vocational course</li> <li>Support to develop and sustain relationships</li> </ul>	
9	Any other significant experiences which may have impacted the development of the child, like trafficking, domestic violence, parental neglect, bullying in school, etc. (Please specify)	Additional support from caregivers	

10. Any proceeding held before the committee or Board or Children's Court, details:-
11. Variation of conditions of bond: Not known
12. Change of residence of the child: Not known
13. Other matters, if any: Not known
14. (Related to children in conflict with the law) Period of supervision completed Details:NA
15. Result of supervision with remarks (if any):



child is to live after the supervision is over:
Date of report:
Signature of the Probation Officer
28. Pre-release report (to be prepared 15 days prior to release):
1. Details of place of transfer and authority concerned responsible in the place of transfer/release:
2. Details of placement of the child in different institutions/family:(CCI name, address, date of placement) Namaste CCI
3. Training undergone and skills acquired:
<ul> <li>Life Skills Education</li> </ul>
Computer Training
Aptitude Testing
<ul> <li>Vocational Courses</li> </ul>
<ul> <li>LifeBook Work</li> </ul>
<ul> <li>Child preparation for placement</li> </ul>
• Other:
4. Last progress report of the child (to be attached) Not known
5. Rehabilitation and restoration plan of the child (to be prepared with reference to progress reports of the child.

S. No	Category	Rehabilitation and Restoration Plan of the Child
		Indicate support required to meet the child's needs based upon prior interventions and child's progress.



1	Child's expectation from care and protection (Child's thoughts, wishes, desires)	Planning to settle him with his family after family strengthening
2	Health and nutrition	Dental Check up and HB follow up
3	Emotional and psychological	Individual Counseling and Group counseling
4	Education and training	Coaching support, Career counseling, life skill education
5	Leisure, creativity and play	Making him plan comfortably with other children by involving
6	Attachments and interpersonal relationships	Counseling to develop better social skills
7	Self-care and life skill training for Protection from all kinds of abuse, neglect and maltreatment	Life skill training on basic skills.
8	Independent living skills	Vocational skill development for the child.
9	Any other	Additional support from the care givers

- 6. Date of release/transfer/repatriation:...... Not known.....
- 7. Requisition for escort if required: ...... Not known......
- 8. Identification Proof of escort such as driving license, Aadhaar Card, etc: Not known



9. Recommended rehabilitation plan including possible placements/sponsorship Not known				
10. Details of Probation Officer/Non-Governmental Organization for post-release follow				
Up:				
Date of first follow-up				
☐ Home Visit				
Phone Call				
☐ Future visits indicated on calendar.				
(Per JJA: Minimum once/month call or visit for first 6 months, then once every 3 months for next year minimum - More frequent calls/visits may be required if issues arise)				
☐ Information provided to caseworker when child moves to another state/district				
11. Memorandum of Understanding with Non-Governmental Organisation identified for post-release follow-up (Attach a copy) Not known				
12. Details of sponsorship agency/individual sponsor, if any: Not known				
13. Not known				
14. Attach Medical examination report before release: Not known				
15. Any other information: <mark>Not known</mark>				
29. Post-release/restoration report of the child:				
1. Status of Bank Account: Closed/Transferred Not known				
2. Earnings and belongings of the child: handed over to the child or his parents/guardians – Yes/No Not known				
3. First interaction report of the Probation Officer/Child Welfare Officer/Case Worker/social worker/Non-Governmental Organization identified for follow-up with the child post-release:				
4. Progress made with reference to Rehabilitation and Restoration Plan:				
5. Family's behaviour/attitude towards the child: Not known				
6. Social milieu of the child, particularly attitude of neighbours' / community: Supportive				
7. How is the child using the skills acquired: Not known				



- 8. Whether the child has been admitted to a school or vocation? Give date and name of the school/institute/any other agency Yes/No .... Not known.....
- 10. Efforts towards social mainstreaming and child's opinion/views about it: Not known
- 11. Identity Cards and Compensation

(Instruction: Please verify with the physical documents)

IDENTITY CARDS	Present Status (Please tick whichever applicable)		
	Yes	No	Action Taken
Birth certificate	Not known	Not known	
School certificate	<mark>√</mark>		
Caste certificate	Not known	Not known	
Below Poverty Line Card		<b>√</b>	To link up with Local SHG
Disability Certificate	Not Applicable	Not Applicable	
Immunization Card	<mark>√</mark>		
Ration Card		<mark>√</mark>	To link up with PDS



Adhaar Card	Not known	Not known	
Received Compensation from Government	Not known	Not known	

## 30. Adoption

- (i) Whether the child has been declared legally free for adoption?
- A. Yes B. No C. Not Applicable

(If not applicable, then subsequent questions do not apply)

- (ii) Whether the child has been placed in a Specialised Adoption Agency or Child Care Institution?
  - A. Specialised Adoption Agency B. Child Care Institution
- (iii) Social Investigation Report by Child Welfare Officer/Case worker/social worker, as the case may be submitted? Not Applicable
- A. Yes B. No
- (iv) Deed of surrender executed by the parents/guardian before the Committee? A. Yes B. No C. Not Applicable
- (v) Declaration submitted by District Child Protection Unit and Child Care Institution or Specialized Adoption Agency that all restoration efforts have been made for the child-Not Applicable
- A. Yes B. No
- (vi) Nobody has approached District Child Protection Unit and Child Care Institution or Specialized Adoption Agency for claiming the child as biological parents or legal guardians
  Not Applicable
- A. Yes B. No
- (vii) All timelines under Section 38 of the Act have been adhered to before declaring the child legally free for adoption-
- A. Yes B. No Not Applicable



# FOR CHILDREN PLACED IN NON-INSTITUTIONAL CARE (EXCEPT ADOPTION)

1. Guardian's name (if applicable) Meena (Mother)
2. Parents/Guardian's Nationality <mark>Indian.</mark>
3. Parents/Guardian's Religion <mark>Not known</mark>
4. Child's nationality- <mark>Indian</mark>
5. Details of Adhaar card/voter Identity Card/pan card of the child Not known
6. Details of Adhaar card/voter Identity Card /pan card of the child's parents
7. Caste <mark>Not known</mark>
3. Language spoken <mark>Not known</mark>
9. Level of Education <mark>IV.</mark>
10. Whether the child has been provided compensation/relief under various schemes of government Not known
11. Where is the child being placed? –
(a) guardian (b)foster care (c) sponsorship (d) single parent
12. Whether the child is being surrendered by the single parent/Guardian?
A. Yes B. No C. Not Applicable
13. If yes, then whether the surrender deed has been made? A. Yes B. No Not known
14. Education- (Yes/No/Not applicable) If yes, then
(i) Whether the child has been enrolled in school or a special training center? yes
(ii) If child is enrolled in school, then
(a) Name of the school Government School
(b) Government/Private
(c) Class <mark>IV</mark>
(iii) Unified District Information System for Education Code of the said school Not known

(iv) If child is enrolled in special training centre then,



(a) Center is Residential or Non-ResidentialNot applicable
(b) Duration of enrollment Not applicable
(v) Whether the child has been enrolled in school under clause (c) of sub-section (1) of section 12 of the Rigt to Education Act, 2009? Yes / No / NA
(vi) The Child Welfare Committee has recommended for continuing of education of the child in the same school as the child was studying in? Yes / No
(vii) On the basis of the recommendation, whether the child is continuing education in the same school as he was studying in? Yes/ $\frac{No}{No}$
(viii) The Child Welfare Committee has recommended for transfer of school for the child? Yes / No Not Known
(a) If yes, then what are the reasons given by the Child Welfare Committee for recommending transfer of school?
(ix) Whether the child has been admitted to/transferred to a new school? Yes/ No
(x) Details of new school along with its Unified District Information System for Education
Code Not Known
(xi) Address and Contact Details
(xii) Class in which admission/transfer taken place
(xiii) Class in which the child was transferred from previous school
(xiv) On the basis of the recommendations of Child Welfare Committee, whether the school in which the child is studying in is giving the benefit under clause (c) of sub-section (1) of section 12(1)(c) of the Right to Education Act, 2009 to the child? Yes/No
(xv) Whether the child is being given free education by the appropriate government?
Yes / No
(xvi) Is the child availing any scholarship? Yes / No Not Known
a. If yes, name of the scholarship Not Known
b. Amount of scholarship Not Known



# 15. Sponsorship

(i) The child has been recommended for sponsorship by the Child Welfare Committee?

A. Yes B. No (If no, then subsequent questions do not apply) Not Known

(ii) Whether sponsorship for the child has been approved by a Committee headed by District Magistrate:

A. Yes B. No Not Known

- (iii) Nature of sponsorship: i. Government ...... ii. Private .............. Not Known
- (iv) Type of sponsorship Not Known
  - (a) Individual to Individual sponsorship
  - (b) Group Sponsorship
  - (c) Community or organisation sponsorship
  - (d) Support to families through sponsorship
  - (e) Support to children homes and special homes
  - (f) Sponsorship through:
    - i. Institutions,
    - ii. Companies
    - iii. Corporations either public or private
  - (g) Any other
- (v)Whether child has started receiving money under the sponsorship program-

A. Yes B. No

- (vi) Recommended duration of sponsorship:.....
- (vii) Any other information:....
- 16. Restoration of the child:
  - (i) Whether the child is being restored to:-

Single Parent / Biological Parents / Guardian/ Relative



- (ii) Name of the person to whom the child is being restored to Meena (Mother)
- (iii) Address and contact details of person where the child is being restored to Not Known
- (iv) If the child is being restored to Guardian/relative, then- Not applicable
- (v) Relationship of the child with the guardian/relative- Good and cordial
- (vi) Does the guardian/relative have children of their own? A. yes B. No Not applicable
- (vii) If yes, Details of guardian/relatives' children-Not applicable
- (viii) Social and financial condition of the guardian/relative- Not applicable
- (ix) Whether the child will be staying in the same State where the child was found? Yes/No
- (x) Whether the child needs to be transferred to another State for restoration? Yes/No. If yes:
- (a) Name of the State where the child is restored to-Not Known
  - (b) An escort is required for transfer of the child to another State?
    - A. Yes B. No. Not applicable

If yes: Identification Proof of escort such as driving license, Aadhar Card, etc.......... Not applicable

(c) Whether District Child Protection Unit/ Child Welfare Committee of the concerned district of the

State where the child is being transferred to has been informed about the transfer orders? Yes/No

(d) Whether the child's documents/Social Investigation Report/ Individual Care Plan/ Orders of

Child Welfare Committee have been transferred to the concerned CWC of the State? Yes/No

- (e) Details of Child Welfare Committee where the case is transferred... Not known....
- (xi) Child Welfare Committee has recommended follow-up of the child post restoration: Yes / No
- (xii) Status of bank accounts of the child...... Not known.....



(xiii) The belongings of the child are handed over to the child/parent/guardian: Yes/No Not known

(xiv) Identity Cards and Compensation:

IDENTITY CARDS	Present Status (Please tick whichever applicable)		
	Yes	No	Action Taken
Birth certificate	Not known	Not known	
School certificate	Not known	Not known	
Caste certificate	Not known	Not known	
Below Poverty Line Card	Not known	Not known	
Disability Certificate	Not known	Not known	
Immunization Card	Not known	Not known	
Ration Card	Not known	Not known	
Adhaar Card	Not known	Not known	



Received Compensation from Government	Not known	Not known	
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#### REPATRIATION OF THE CHILD

- (i) Whether the child needs to be repatriated. Yes/No
- (ii) If yes, whether such repatriation is: (tick whichever is applicable)
  - inter-district
  - inter-state
  - Inter-country
- (iii) Whether information about repatriation of the child has been informed to the:-
  - District Magistrate
  - State Government.
  - Central Government.
- (iv) Has the process of repatriation of the child been initiated? Yes / No . Details:......
- (v) Whether the details of the child to be repatriated have been informed to National or State Commission for Protection of Child Rights, as the case may be?
- (vi) Any other recommendation Child and Family preparation for reunification

Entitlement with Government schemes

Financial Benefits

Signature of the Probation Officer/

**Child Welfare Officer/District Child Protection Unit** 

Stamp and Seal where available"

3. Hand out - ICP Reference Sheet/Suggested Responses - Filled JJA Form 7 ICP practice - Radha case study)



# JJA Form 7 ICP

# **Personal Details**

S. No	Category	Areas of Concern	Proposed Intervention  And Who will be responsible
1.	Child's expectation from care and protection  (Child's thoughts, wishes, desires)	<ul> <li>Caring adults</li> <li>Safety</li> <li>Personal needs addressed (health, education, emotional, etc.)</li> <li>Contact with family</li> <li>Desire to return to family</li> <li>Desire to consider other care options</li> <li>Other:</li> </ul>	<ul> <li>Meet personal needs (health, education, emotional, etc.)</li> <li>Maintaining contact/visitation with families</li> <li>Work toward return to family</li> <li>Work toward other care options</li> <li>Other:</li> </ul>
2.	Health and Nutrition Needs	<ul> <li>Immunizations</li> <li>Malnutrition/low weight/anemia</li> <li>Physical impairment</li> <li>Visual impairment</li> <li>Hearing impairment</li> <li>Speech impairment</li> <li>Dental Care</li> <li>Hygiene issues</li> <li>Disease (HIV/AIDS, Epilepsy, etc)</li> </ul>	<ul> <li>Regular medical attention</li> <li>Special Diet</li> <li>Medications</li> <li>Support for impairments</li> <li>Other:Caregiver Guidance_</li> </ul>



		Specify  • Other:	
3.	Emotional and Psychological support needs	<ul> <li>Anger Management</li> <li>Adjustment issues</li> <li>Abused/neglected</li> <li>Aggression/violence</li> <li>Bedwetting</li> <li>Bullying</li> <li>Disobedience</li> <li>Depression</li> <li>Stealing</li> <li>Trauma</li> <li>Hyperactivity</li> <li>Self-harm/suicidal thoughts</li> <li>Lying</li> <li>Sexualized behavior</li> <li>Alcohol/drug abuse</li> <li>Lack of trust in adults</li> <li>Other:</li> </ul>	<ul> <li>Additional support and attention from staff/community members/role models</li> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> <li>Other:Help in developing Peer Relationships</li> </ul>
4.	Educational and Training needs	<ul> <li>Learning Issues</li> <li>Delayed learning (for late starters)</li> <li>Concentration issues</li> <li>Behavior issues at school</li> <li>Study Skills</li> <li>School supplies</li> </ul>	<ul> <li>LD Testing</li> <li>ADHD Testing</li> <li>IQ Testing</li> <li>Additional educational support</li> <li>Career Counseling</li> <li>Other:</li> </ul>



		<ul> <li>Computer Training</li> <li>Career counseling</li> <li>Relationship with teachers</li> <li>Other:</li> </ul>	
5.	Leisure, Creativity and play	<ul> <li>Lack of interest in leisure activities</li> <li>Lack of participation in leisure activities</li> <li>Lack of time for leisure activities</li> <li>Other:</li> </ul>	<ul> <li>Encourage finding time for leisure</li> <li>Help identify interests</li> <li>Enroll in lessons/join team</li> <li>Other:</li> </ul>
6.	Attachments and interpersonal Relationship	<ul> <li>Bonding with adult figure</li> <li>Interactions with staff</li> <li>Interactions with peers/friendships</li> <li>Other:</li> </ul>	<ul> <li>Guidance from CCI staff (HPs, In-charge, etc)</li> <li>Counseling with SW</li> <li>Counseling with Psychologist</li> <li>Group Counseling</li> <li>Other:</li> </ul>
8.	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment	<ul> <li>Communication Skills</li> <li>Self-confidence/self-awaren ess</li> <li>Problem Solving/Decision Making</li> <li>Conflict Resolution</li> <li>Expressing Emotions</li> <li>Stress Management</li> <li>Responsible Sexual Behavior</li> <li>Information about personal</li> </ul>	<ul> <li>Life Skills Education</li> <li>Individual guidance</li> <li>Other:</li> </ul>



9.	Independent living skills	history/cultural identity  Other:  Vocational training  Financial training  Nutrition/cooking  Health/hygiene  Household chores  Social and community network  Using public transportation  Other:	<ul> <li>Life Skills Education</li> <li>Enroll in vocational course</li> <li>Group activities/field trips</li> <li>Support to develop and sustain relationships</li> <li>Individual guidance</li> <li>Other:</li> </ul>
10.	Any other such as significant experiences which any have impacted the development of the child like trafficking, domestic violence, parental neglect, bullying in school ect. (please specify)	<ul> <li>Bullying</li> <li>Neglect</li> <li>Physical Abuse</li> <li>Sexual Abuse</li> <li>Trafficking</li> <li>Drug/Alcohol Abuse</li> <li>Other:</li> </ul>	<ul> <li>Additional support and attention from CCI staff</li> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>

	Proposed Interventions	Progress of the Child
Progress Report S. No.	needed/provided as indicated in Personal Details	4= No further intervention needed



		child's stay.)	3= Good progress 2= Some progress 1= No progress
1.	Child's expectation from care and protection  (Child's thoughts, wishes, desires)	<ul> <li>Meet personal needs (health, education, emotional, etc.)</li> <li>Maintaining contact/visitation with families</li> <li>Work toward return to family</li> <li>Work toward other care options</li> <li>Other:</li> </ul>	2
2.	Health and nutrition needs	<ul> <li>Regular medical attention</li> <li>Special Diet</li> <li>Medications</li> <li>Support for impairments</li> <li>Other:HM Guidance</li> </ul>	3
3.	Emotional and psychological support needed	<ul> <li>Additional support and attention from staff/community members/role models</li> <li>Individual counseling by social worker</li> <li>Individual counseling</li> </ul>	2



4.	Educational and training needs	by psychologist  • Group counseling  Other:Help in developing Peer Relationships  • LD Testing  • ADHD Testing	2
		<ul> <li>IQ Testing</li> <li>Additional educational support</li> <li>Career Counseling</li> <li>Other:</li> </ul>	
5.	Leisure, creativity and play	<ul> <li>Encourage finding time for leisure</li> <li>Help identify interests</li> <li>Enroll in lessons/join team</li> <li>Other:</li> </ul>	3
6.	Attachments and interpersonal relationships	<ul> <li>Guidance from staff (HPs, In-charge, etc)</li> <li>Counseling with SW</li> <li>Counseling with Psychologist</li> <li>Group Counseling</li> <li>Other:</li> </ul>	3



	1		
7.	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment	<ul><li>Life Skills Education</li><li>Individual guidance</li><li>Other:</li></ul>	3
8.	Independent living skills	<ul> <li>Life Skills Education</li> <li>Enroll in vocational course</li> <li>Group activities/field trips</li> <li>Support to develop and sustain relationships</li> <li>Individual guidance</li> <li>Other:</li> </ul>	3 – Age Appropriate Progress
9.	Any other such as significant experiences which may have impacted the development of the child like trafficking, domestic, violence, parental, neglect, bullying in school, etc., (Please specify)	<ul> <li>Additional support and attention from staff</li> <li>Individual counseling by social worker</li> <li>Individual counseling by psychologist</li> <li>Group counseling</li> <li>Other:</li> </ul>	3

### **Pre-Release Report**

(To be prepared 15 days prior to release)

- **1.** Details of place of transfer and authority concerned responsible in the place of transfer/release
- 2. Details of placement of the child: (Name of family/home, address, date of placement)
- 3. Training undergone and skills acquired (Child and Family)



□ Computer Training: (Specify)
□ Aptitude Testing: (Specify)
□Vocational Courses (if any):
□LifeBook Work for Children
⊠Child Preparation for Placement
Last progress report of the child (to be attached)

4. Rehabilitation and restoration plan of the child (to be prepared with reference to progress reports of the child)

S .No.	Category	Rehabilitation and restoration plan of the child Indicate support required to meet a child's needs based upon prior interventions and child's progress.
1.	Child's expectation from care and protection (Child's thoughts, wishes, desires)	<ul> <li>Prepare Child for reunification (Visits, Overnight contacts etc on Realistic Expectation)</li> <li>Prepare Family for reunification (Positive parenting, Attachment)</li> </ul>
2.	Health and nutrition	<ul> <li>Educate child/ Family About Health and Nutrition</li> <li>Connect family to PHC</li> <li>Guide parent to reinforce Personal Hygiene for child</li> </ul>
3.	Emotional and psychological	- Guidance to family on positive reinforcement techniques (Nightmares, Bedwetting)



4.	Educational and training	<ul> <li>Further edu support (Individual guidance by school/ coaching teacher)</li> <li>Enrolling in nearby school</li> <li>Identify transport to school</li> <li>Ensure TC obtained</li> <li>School Supplies</li> </ul>
5.	Leisure, creativity and play	<ul> <li>Guide parents to help child to develop age appropriate relationships (as child takes time to open up)</li> <li>Helping the child to participate in school clubs (Dancing or extra-curricular Activities)</li> </ul>
6.	Attachments and interpersonal relationships	<ul> <li>Prepare Child for reunification (Visits, Overnight contacts etc on Realistic Expectation)</li> <li>Prepare Family for reunification (Positive parenting, Attachment)</li> </ul>
7.	Religious beliefs	- No Action Required
8.	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment	<ul> <li>Child made aware about CP through training and bullying</li> <li>Understand Parents' opinion and Guidance of parents re above</li> </ul>
9.	Independent living skills	- No Action Required
10.	Any other	- N/A

5.	Date of release /	transfer/
	repatriation	XX/XX/XXXX



6.	Requisition for escort if requiredYes Outreach Worker
7.	Identification proof of escort such as driving license, Aadhar card, etc.,
8.	Recommended rehabilitation plan including possible placements/ sponsorships (See Section C, Question #2)
9.	Details of probation officer/ non-governmental organization for post-release follow-up ⊠ Date of first follow-up:
	⊠Home Visit
	□Phone Call
	□Future visits indicated on calendar.
	□ Information provided to caseworker when child moves to another state/district
10.	Memorandum of understanding between the sponsoring agency and individual sponsor (Attach a copy)
11.	Details of sponsorship agency/individual sponsor, if any
12.	Attach Medical Examination report before release.
13.	Any other information
PO9	ST-RELEASE / RESTORATION REPORT OF THE CHILD
1.	Status Bank Account: Closed / Transferred
2.	Earnings and belongings of the child - handed over to the child or their parents/guardians? Yes/ No
3.	First interaction report of the probation officer/ Child Welfare Officer/ Case Worker/ Social Worker/ non-governmental organization identified for follow-up with the childpost-release.
ļ	4. Progress made with reference to Rehabilitation and restoration plan



enjoying it. Bonding well with family including step mother. Radha is also getting educational support (extra help) from neighbor tutor who also was guided by counsellor on teaching style for Radha. There are no concerns regarding her bedwetting and personal hygiene appears.......

5.	Family able to spend quality time
6.	Social milieu of the child, particularly the attitude of neighbors/
	community
7.	How is the child using the skills acquired
	- Personal Hygiene Maintained
	Socially Adaptable and able to make secure friendships with same age
	- Bonding with family improved
	<mark>- Nutrition</mark>
_ •	- More confident and improved self esteem
8.	Whether the child has been admitted to a school or vocation? Give date and name of the school/ institute/ any other agency. Yes / No
	Yes Child has been admitted to neighborhood
<mark>sch</mark>	<mark>ool</mark>
9.	Report of second and third follow-up interaction with the child after two months and six
	months respectively
10.	Efforts towards social mainstreaming and child's opinion/ views about it

- Educational support
- Peer relationships
- Connected family to the Pradhan Mantri Krishi Sinchayee Yojana
- Good physical health
- 11. Identity cards and compensations

[Instruction: Please verify with the physical documents]

IDENTITY CARDS	Present status whichever is applied		Action taken
	Yes	No	
Birth Certificate	Х		



School certificate	х		
Caste certificate		Х	N/A
BPL card	х		
Disability certificate		Х	N/A
Immunization card	xx		
Ration card		Х	Family was guided to the process
compensation from government		х	N/A

### 4. Handout 4: Guidelines for Family Visit

### Purpose of the document:

This document serves as a guideline for the team for planning and conducting effective family visits of children either in prevention or transition model. The document also entails the areas to be observed during visits and list out the resources that comprises the family visit tool kit. The sections cover the requirements / tasks that are to be undertaken for family visit.

### Points to be kept in mind during interaction with family

- Do not make any promises/ unrealistic commitment to be made
- Do not make judgments/ speculations about the family based on the information that you have
- Do not try to enter the personal space of family members
- Do not offer any gifts or direct financial support to the family in any case

### Observations & Interaction with the children and family members

- Observation is the key- everyone visiting a family has a role. Refer the respective handout for the kind of questions/ observations that are need to be considered
- Focus on the child's safety across all the 5 wellbeing domains- Plan interventions with family members and child based on strength-based approach
- Make an eye contact while talking to family



- Strictly adhere to the organization's Child Safeguarding Policy which is paramount, while taking information/ pictures.
- Ensure to understand the expressions / unsaid communication using Effective listening skills, understand different perspectives



- •Visit shall be always informed in advace to family
- Time shall be based on famiy's conveneiece making sure taht children schooling / parents work wage does not get compromised
- •SW-CW shall be open to work on flexible days ie like Sunday family visit
- •Miracle team shall always accompany family visit along with DCPU/CCI staff
- •Identify the children well for family visit where value addition can be given to case worker like red flags cases, successful case, complex transition case from CCI etc
- Discuss the case sceanario and make sure it is presented before visiting and have a thorough information of the family / child.
- •Refer the last Thrive scale or any other assessment done for the child



- •Go through the checklist of observations
- Take some acitivties on parenting skills/ child safeguarding / LSE/ PSS or as the case may be
- $\bullet$  Find some time to talk to child individually (gender sensitive ), especially in the scenario of complext family situations.
- Explain the consent form for getting thrive scale done with family and get that signed
- . Avoid talking in front of a child about any conflict situation in the family
- •Be polite and empathize in the situation wher any family members get difficult to handle his/ her emotions
- •Identify existing affiliations of the family with local structures
- Family culture, dynamics and routine to be understood throughout the visit
- Explore neighbourhood, community workers/groups, parents meeting in community as per the situation
- •DEBRIEF- Always summarize the discussion with an action plan with child & family before leaving and clear responsbilities
- $\bullet {\tt Conduct\, debriefing\, meeting\, post\, family\, visit\, , guide\, case\, workers\, on\, following\, up\,\, the\, plan\,\,/\,\, visit}$
- Conduct thrive scale / SIR/ ICP as per case management process and record in children's file
- Document the visit, putting observations. Refer family visit report template Annex
- Take follow up on the action for the intervention plan and list out the areas to address on priorty
- $\bullet\:\text{If red flasgs}\:\:\text{are plotted, then work on the immeediate next steps}\:\:$
- $\bullet$  Provide report of red flags casss to districts along with intervention plan
- Share atleast one case story post visit



### Checklist for questions / areas of observations during family visit

The list will enable the case worker to observe and facilitate the interactions with the family/community effectively. The observations from these may be consolidated for family visit reports or while filling Thrive scale. This is to be noted not all below questions/ observations would be relevant in all situations, this only serves as a guide to case workers.

### Questions related to Child Safety, safeguarding and Protection

- Did any member of the family directly speak about the child's behavior or attitude? (Pointers to be brought in)
- Did you feel that child wanted to speak to you individually? (Carefully observe the body language of the child)
- Did you observe/feel anything extraordinary or unusual with the family's conversation



- which needs more follow up? Did the family directly/indirectly hint on admitting the child back in a CCI?
- Key observations on the family culture (early marriage, gender discrimination, child labour, school drop outs etc.) Key observations on the family dynamics (decision maker, relationship between different family members, voice of the child, immediate family members)
- Did the caregiver or the child become emotional during any point of conversation? (Spell of cry, incomplete sentence, silent moments, expression of sadness on face etc.)
- Is the family aware of child protection issues, including all types of child abuse?
- Are the family members sure whether wherever the child visits or spends time, is a safe space and safe people for the child?
- Are the family members and child aware how to identify abuse in any form?
- Are the family members and child aware of the reporting procedure in case of child abuse, either with the concerned child or with any other child in their neighbourhood?
- Has there been any history of child abuse or severe neglect in the family? At present, what is their level and way of taking care of children in the family? (The family members are likely not to give correct information for this if there has been any such incident in the past, try to read between the lines and link parts of conversation from the whole discussion)

### Questions on all 5 wellbeing domains:

### 1. Living conditions

- Is the house in a liveable condition? (Room, electricity, water, functional sanitation, functional kitchen) State key observations
- Is it a rented accommodation or their own? If rented, are they able to pay rents timely without any stress?
- Is it a safe accommodation for them or is there any fear of eviction (because of expected/recurrent natural disasters, or any govt. project etc.)?
- Does the family have an amicable neighborhood? State key observations
- If the family lives in isolation, state reasons.
- Have you seen the entire house/ kitchen area etc to understand their meal pattern?

### 2) Health, Hygiene and Nutrition

(Evidence - Check randomly medical documents/ prescription etc)

- Does the family live in a hygienic environment? Key observations
- What is the level of personal hygiene of the child and the family? Key observations
- Does the child and primary caregiver have awareness on menstruation and menstrual hygiene? Key observations (applies only for female children and female caregivers)
- Does the child and caregiver look pale and undernourished? Any persistent health conditions reported during the visit? State key observations
- Does the family have a balanced diet every day?
- Do they mostly consume nutritious food or not?
- Is any family member dealing with health issues?



• Are they aware of the nutritional value of different foods? If not, did you impart any guidance here?

### 3) Family & Social relationship - Psychologist and mental health support

- Do all the family members mostly remain happy and in a state of good wellbeing?
- If any family member(s) remain stressed/worried/anxious most of the times, observe reasons.
- What are their coping strategies?
- Does the family spend some time on leisure activities? If yes, what all activities do they
  engage in?
- Has there been any history of mental health issues in the family? If yes, specify
- Does the family have access to a psychologist or mental health hospital, any mental health helpline etc.? Are they aware and do they access such services?
- If psychosocial support and Mental Health services are not available anywhere close to their community, where do they go for such issues?
- Did you impart any basic and necessary information/ knowledge to the family/child regarding mental health and psychosocial wellbeing? If yes, explain what all you covered.

### 4) Education

(Evidence- Check randomly tablet (view history), books etc to ensure child has access)

- Is the child attending online/in-person classes in school? State key observations.
- Is the child attending any tuition and/or extracurricular classes? State key observations.
- How many hours does the child use the mobile/TAB for education and leisure purposes?
- Does the family have any concerns about the child's academic routine?
- Does the family have regular discussions with the child on educational progress? What is the level of their involvement in a child's education? If the involvement is minimal or less than required, state reasons.
- Is the child involved in extensive household chores? State key observations.
- Is the child involved in parents'/ caregivers' professional work? (e.g. agricultural work) If yes, to what extent?

### 5) Household economy

- Does the primary caregiver have regular income?
- List out all the sources of income for the family members.
- In case of a joint family, is the total family income used to incur all the expenses for family members? Or is it divided between family members (e.g., son, daughter in law and their children bearing their own expenses through their own personal income)
- Does the family have the capacity to purchase the essential commodities? State key observations.
- Does the primary caregiver have multiple skills to pursue



- different jobs? State key pointers from the conversation.
- Does the family have a vision or a plan for the future?
- Is the family interested in improving their income prospects? What kind of support do they need to upscale their work or start a new work using their skills?

### Other Resources Identified during the Home Visit

- Does the family know any of the influential people in the community? If yes, what kind of relationship do they have with them?
- Does the family have regular contact with the following structures/groups?
  - SHGs
  - Youth Volunteers
  - Child Protection Committee
  - Village Panchayat
  - o PHC
  - ASHA
  - Anganwadi
  - Any other local NGOs working in the area
- Other pertinent information for accessing resources
- Were you able to meet any of the above listed groups/structures during the visit?

### Schemes and Programs already linked/accessed

#### Red flags:

- Did you identify any red flags in the family during the visit? (e.g., involved in illegal/anti-social activities, some legal cases going on, living conditions severely hazardous to health etc.)
- Did you get the opportunity to discuss the red flag areas openly with the family? If NO, state reasons. If yes, how did you guide the family, are they willing to change the condition?

# 5. Handout 5: Tools for Family Assessment: JJA Form 22 Social Investigation Report (blank template)

FORM 22 [Rule 19(8)]

SOCIAL INVESTIGATION REPORT FOR CHILD IN NEED OF CARE AND PROTECTION OR CHILDREN IN CONFLICT WITH LAW

(Tick whichever is applicable)

Completed when the child enters the CCI (within 15 days), and annually thereafter to determine suitability of reunification with family or other family-based care options.

To be used in conjunction with the child's ICP (JJA Form 7- Individual Care Plan)



1. Sl. No 2. Produced before		I4 W	Iolfara Cam	mittoo				
3. Case No				ttee				
4. Social Investigat				<b>hv</b> : District (	hild Prot	ection Unit/ S	ocial Worker	/
Case Worker/ Person	-		-	-				
5. Details of child in		_			14011 40	verninental Or	garnzation	
(i) Name			-					
(ii) Age								
(iii) Gender								
(iv) Caste: (tick as ap				•••••				
	plicable	1						
Scheduled Ca     Scheduled Trib								
Scheduled Tri								
Other Backwa		S						
Others, specifically a specific	-							
Not Known								
(v) Religion								
(vi) Father's Name								
(vii) Mother's Name								
Marital Status of pare	ents:							
□Married □Separated								
□Divorced								
□Widowed/\ □Remarried:			r/fathor nam	oc.				
□ Nemameu.	Step Inc	Jule	i/iatrier riairi	165.				
(viii) Guardian's Name (ix) Family's Permane Family's Present Add (x) Landmark of the a (xi) Address of last re (xii) Contact informat (xiii) Whether the chile (xiv) Whether the chile (xv) Previous institution (xvi) Nuclear Family D	nt Addresers, if conditions and the conditions and the conditions are conditions are conditions and the conditions are conditional conditions.	ess differ er/m er/m an i	nother/family interpreter/tr n / Abandone story and inc	rmanent  r	ardian No red / Othe	ers		
Name and Relationship	Ag S	Sex	Educatio n	Occupatio n	Incom e	Health Status	History of Mental	Addict

S.N.	Name ar	nd Ag	Sex	Educatio	Occupatio	Incom	Health	History of	Addicti
	Relationship	е		n	n	е	Status	Mental	on
	(Parents, sibling	s)						Illness	



(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

Other Relatives or extended Family Members (Grandparents, Aunts, Uncles, etc.):

Name	Type of Relationship with Child	Location and Contact Information	Income Status	Support they provide to children and family (practical help, emotional support, financial help, etc.)

Г	200	the	child	vicit	his/har	siblings?	Vac/No
L	<i>1</i> 065	uie	CHIIIG	VISIL	1115/1161	Sibilitius :	162/140

Details:

Does the child spend holidays with their family? Yes/No

Details and frequency:

Do family members or others visit the child? Yes/No

If yes, list the names of the people who visit and frequency:

Name/relationship	Address and contact information	Frequency of Visits



### (xvii) Relationship among family members:

Father and mother	Cordial/Non-cordial/Not known
Father and child	Cordial/Non-cordial/Not known
Mother and child	Cordial/Non-cordial/Not known
Father and siblings	Cordial/Non-cordial/Not known
Mother and siblings	Cordial/Non-cordial/Not known
Child and siblings	Cordial/Non-cordial/Not known
Child and relative	Cordial/Non-cordial/Not known

What are the parents' level of parenting skills and abilities (eg, discipline, emotional connection, etc):

□Good
□Could be improved
□Poor

□Lacking

\*Removed history of family members in offences, if any

# **6. With whom was the child staying prior to production before the Committee:** (tick as applicable)

- Parent(s) Mother / Father / Both
- Siblings / Blood relative
- Guardian(s) Relationship
- Friends
- On the street
- Night shelter
- Orphanages / Hostels/ Similar Homes
- Child Care Institution:
  - Children's home
  - Shelter home
  - Specialised Adoption Agency
  - Fit Facility

<sup>\*</sup>Removed attitude toward religion



Other (please specify)
7. In case of orphan and abandoned child-
(i) Where was the child found?
(ii) What steps are being taken to trace the biological parents/relatives of the child?
Please specify
(iii) If the biological roots of the child are known, reasons for death of both parents of the
child
8. Whether the child needs to be repatriated: Yes/No. If yes:
Inter- district repatriation
Inter- state repatriation
<ul> <li>Inter- country repatriation</li> </ul>
9. Whether child is eligible for the benefit of sponsorship: Yes/No
10. Whether the child is eligible for any scheme or entitlement.
Yes/No (If Yes, lease specify)
11. Whether child has received any kind of compensation in regard to the demise of any
parent: Yes/No; Please
Specify
12. Whether child should get benefit under clause (c) of sub-section (1) of section of Section 12
of the Right to Education Act, 2009: Yes / No
13. Financial support recommended for the child:
(i) Whether the child's parents had any property/FD/Cash/Insurance/bank accounts prior
to their sudden demise: Yes/No; Details thereof
(ii) Whether the child's parents have any loans, mortgages, financial liabilities?
A. Yes B. No. Details thereof
(iii) Whether the child's parents have any collateral against that mortgage?
A. Yes B. No. Details thereof
(iv) Whether the child's parents have any family business?
A. yes B. no. Details thereof
(v) Whether the child has acquired any right/share in the property
(self-acquired/ancestral) from the deceased parent: Yes/No; Details thereof
Household Economy
Is the head of household in paid employment? Yes/No
Are there any other adults in the family in paid employment? Yes/No
If yes, explain:
Is employment reasonably secure? Yes/No
Is the family gaining income through?
□ Seasonal work
□ Occasional work
□Working abroad



☐Working away from home	e for peri	ods of the ye	ear	
Do the patterns of work advers	sely impa	act child care	? Yes/No	
Explain number of hours, days	/times, e	tc:		
Are all entitled benefits claime	d? Yes/N	lo		
Specify:				
Are household bills paid regula	arly? Yes	/No		
Is the family managing with th	ne incom	e they receive	e? Yes/No	
Is the family in debt? Yes/No	If ye	s, is this incr	easing? Yes/N	lo
Does the family hold BPL or a	vail them	selves of su	pport scheme	s?
Does the family own cultivable	e land? Y	es/No		
Does the family own livestock	? Yes/No			
ls the family involved in other i	income g	enerating ac	tivity? Yes/No	ı
Specify:				
Total income/month:				
Total bills/month:				
Total debt:				
<u>Living Conditions</u>				
Family's Present living condition	ons:			
A. Type of dwelling:				
□Owned				
□Rented				
☐Informal arrangemen	t			
************	**			
□Rased in Community				



<b>□ Chawl</b>	
□Wada	
□Farm	
□House	
□Tin house	
☐Brick walls with tin roof	
□Apartment	
□Shared residence	
□Shelter	
□Homeless	
Is the family vulnerable to eviction? Yes/No	
Is the family in temporary accommodations? Yes/No	
Is the house and immediate surroundings safe for the child? Yes/No	
If no, explain:	
E. Does the house have basic amenities?	
□Safe Water	
□Cooking facilities	
□ Food Storage	
☐Sleeping arrangements	
□Sanitation	
Community Support	
	N/ /N
Does the family feel accepted in their community?	Yes/No
Do family members experience discrimination and harassment?	Yes/No
Does the family have local friends?	Yes/No
Is the family involved in local organizations/activities?	Yes/No
Is the family receiving support from government/NGOs?	Yes/No



## Are there accessible community resources? Yes/No Yes/No a. Does the family take advantage of community resources? b. Specify: 14. Details of education of the child: (i) Whether the child has received education: Yes/No (ii) If yes, specify education up to which class..... (iii) If the child is enrolled in school, then name of the school-..... (iv) Whether the school of the child is registered on Unified District Information System for Education, if Yes, state Unified District Information System for Education Code..... (v) Type of school- Government/ Private. (vi) Whether the child has been enrolled in special training centre. Yes/No. If Yes specify duration of enrolment of child in Special Training center..... (vii) Whether the Special Training Center was Residential/Non- Residential (viii) The reason for leaving School (tick as applicable) • Failure in the class last studied Lack of interest in the school activities Indifferent attitude of the teachers Peer group influence To earn and support the family Sudden demise of parents Bullying in school Rigid school atmosphere Absenteeism followed by running away from school There is no appropriate level of school nearby Abuse in school Humiliation in school Corporal punishment Medium of instruction Others (please specify) ..... (ix) Attitude of classmates towards the child (If applicable) ...... (x) Attitude of teachers and classmates towards the child (If Applicable) ....... (xi) Child's Vocational Training (if any) ...... Do all children of school age in the household go to school? Yes/No If no, specify the reasons: Family's attitude toward child's education: □ Value education and supportive/involved (with children at home) ☐ Would like to be supportive but don't feel they are able to help

□Indifferent



□ Not supportive	
Formal education for head of household	For partner of head of household:
□Primary school	□ Primary School
□Secondary school	□ Secondary School
□X Standard	☐X Standard
□ Above X Standard	☐ Above X Standard
□Vocational School	□Vocational School
□College/university	□College/university
□Unable to read or write	☐Unable to read or write
Skills of head of household:	Skills of partner of head of household
□Tailor	□Tailor
□Builder	□Builder
□ Agriculture/farming	☐ Agriculture/farming
□Driver	□Driver
□Other: (Specify)	□Other: (Specify)
15. Other factors of importance if any	
<ul> <li>16. Habits of the child: (tick as applicable)</li> <li>Watching TV/movies</li> <li>Playing indoor/outdoor games</li> <li>Reading books</li> <li>Drawing/painting/acting/singing</li> <li>Religious activities</li> <li>Begging</li> <li>Gambling</li> <li>Alcohol consumption</li> <li>Smoking</li> <li>Drug use, if yes, specify</li> <li>Any other, please specify</li> <li>17. Extra-curricular interests</li> <li>18. Outstanding characteristics and personalit</li> <li>19. Majority of the friends are (tick as applicable)</li> </ul>	
• Educated	



- The same age group Older in age Younger in age Male Female Addicts Children in conflict with law 20. If child is friends with adults, please specify..... 21. Attitude of the child towards friends..... 22. Attitude of friends towards the child..... 23. Observation about neighborhood (to assess the influence of neighborhood on the child) 24. Whether the child has any addiction- YES / NO, if yes, specify...... 25. In case the child is with disability or special needs or is terminally ill (If Yes, Specify): A. Health status of the child (i) Respiratory disorders - present / not known / absent (ii) Hearing impairment - present / not known / absent (iii) Eye diseases- present / not known / absent (iv) Dental disease- present / not known / absent (v) Cardiac diseases- present / not known / absent (vi) Skin disease-present / not known / absent (vii) Sexually transmitted diseases- present / not known / absent (viii) Neurological disorders- present / not known / absent (ix) Mental handicap- present / not known / absent (x) Physical handicap- present / not known / absent (xi) Urinary tract infections -present / not known / absent (xii) Others (please specify) ..... B. Whether the child is differently abled- Yes or No, if yes, specify-(a) Hearing Impairment (b) Speech Impairment (c) Physical disability (d) Mental disability (e) Locomotive disability (f) Others (please specify) ..... C. Whether the child has a valid disability certificate. (If Yes, provide details) D. Mental condition of the child: (Present and past) .....
- ......

  I. Previous institutional/case history and individual care plan, if any......

J. Whether the child is receiving any pension under disability schemes. Yes/No (If yes then specify)......

G. Special education already included in the current school curriculum: Yes/No/Not Applicable H. Whether the Child requires or has been using any medical equipment. (If yes, please specify)

K. Any other remark/observation.....



Does a member of the family have a chronic physical health condition?
□Asthma
□Epilepsy
□Diabetes
□ Heart condition
□Other: (Specify)
How is the condition being treated?
Does a member of the household experience:
□Poor mental health
□ Behavior issues
□ Physical disability
□ Learning disability
□Alcohol/drug abuse
□Other:
How is the issue being treated?
Do all family members have health insurance? Yes/No
Does the family have access to a doctor that they visit regularly or in case of emergency? Yes/No
If no, please specify the reason:
26. In case the child belongs to Children in Street Situations/Trafficked/Involved in Drug Peddling/Child Labour:  A. Whether the child belongs to any of the categories under Children in Street Situations: Yes/No. If yes, specify:  (i) Children without support living on the streets all alone  (ii) Children stay on the streets in the day and are back home in the night with their families who reside in a nearby slum/hutments.  (iii) Children living on the streets with their families:  B. With whom was the child staying prior to production before the Committee:  (i) Parent – Mother / Father / Both  (ii) Siblings / Blood relative  (iii) Guardian – Relationship



(iv) Friends (v) On the street (vi) Night shelter (vii) Orphanages / Hostels/ Similar Homes (viii) Other (please specify) ..... C. If there is history/ tendency of the child to run away from home. Yes/ No. If yes: ..... (i) What is the parents' attitude towards discipline in the home and child's reaction...... (ii) Reasons for leaving the family: (a) Abuse by parent(s)/guardian(s)/step parents(s) (b) In search of employment (c) Peer group influence (d) Incapacitation of parents (e) Criminal record of parents (f) Separation of Parents (a) Demise of parents (h) Poverty Abandoned by family; lack of acceptance (young mother, remarriage, etc) (i) Others (please specify) ..... D. Where was the child found, please specify ........ E. Whether the child has been used for begging: Yes/No F. Whether the child has been involved in rag-picking: Yes/No G. Whether the child is used by any gangs or adults or group of adults or has been used for drug peddling: Yes/No H. Whether the child has been bought or sold or procured or trafficked for any purpose: Yes/No, if yes: I. Whether the child was trafficked with knowledge of parents: Yes/No J. Whether the child was sold by the parents/relatives: Yes/No If yes, then whether any action has been taken against the parents/relative: Yes/No K. Whether the child was employed as a labour: Yes/No, if yes: (i) Industry in which the child was employed..... (ii) Whether the child has faced exploitation at work: Yes/No (a) Extracted work without payment (b) Little or low wages with longer duration of work (c) Others (Please specify)..... (iii) Details of income utilization..... (iv) Any occupational hazard faced by the child: Yes/No. If yes, specify...... (v) Whether case filed against employer: Yes/No. If yes, specify case detail........ (vi) Compensation provided to the child: (a) Interim (b) Final (c) Child Labour Rehabilitation cum Welfare Fund L. Previous institutional/case history and individual care plan, if any..... M. Whether temporary shelter has been provided to child: Yes/No N. Has any plan been made for rehabilitation of the child, specify...... O. Any other remarks/observations.....



# 27. In case the child has faced any kind of abuse, including sexual abuse, or has been a victim of any offence:

A Whather the shild is a victim of any offenses Vac/No
A. Whether the child is a victim of any offense: Yes/No
B. Types of abuse faced by the child:
(a) Verbal abuse– parents/siblings/ employers/others (please specify)
(b) Physical abuse- parents/siblings/ Employers/others (please specify)
(c) Sexual abuse by- (tick as applicable)
relatives through blood
relatives through adoption
relatives through marriage
relatives through guardianship
persons in foster care
<ul> <li>person living in the same or shared household</li> </ul>
<ul> <li>any person in the ownership, or management, or staff, of any institution providing services to a</li> </ul>
• child
any person in position of trust or authority
Others (please specify)
(d) Others– parents/siblings/ employers/others (please specify)
C. Types of ill- treatment met by the child:
(i) Denial of food- parents/siblings, employers/others (please specify)
(ii) Beaten mercilessly– parents/ Siblings/employers/other (please specify)
(ii) Causing injury– parents/ siblings/employers/other (please specify)
(iii) Causing injury- parents/ siblings/employers/other (please specify) (iv) Detention- parents/ siblings/employers/other (please specify)
(v) Any other (please specify)
D. In case of sexual abuse:
(i) Relationship with the perpetrator
(ii) Gender of the perpetrator
(iii) Age of the perpetrator
(iv) How the child came in contact with the perpetrator
(v) Any other child from the same place who is abused / harassed / taken / sent by the
perpetrator
(vi) Whether any other person/s were involved in the offence
(vii) Whether any compensation has been recommended to the child under the
Protection of Children from Sexual Offences Act, 2012: Yes/No.

- E. Case/FIR registered by the police: Yes/No. If yes, specify Case No./ FIR No......
- F. Whether the child has been a victim of cyberbullying: Yes/No. If yes:
  - (i) Cyber bullied while using internet system at home

If any other, please specify.....

- (ii) Cyber bullied while using internet system in school
- (iii) Cyber- bullied while attending school classes from home
- G. Has the child been counselled: Yes/No, if yes, provide details.....
- H. Any other remark/observations.....
- I. Previous institutional/case history and individual care plan, if any......
- 28. In case the child is victim of child marriage or is married:
- A. Name of the spouse.....



B. Age of the spouse C. Date of marriage (DD/MM/YY)
D. Place of marriage
E. Reasons for conducting marriage of the child
F. People who were involved in getting the marriage of the child conducted- i. Parents ii.
Relatives iii. Others.
G. If others, please specify
H. Whether any case has been registered by police: Yes/No.
If yes, provide details
I. If any action is taken, details thereof
J. Any other remarks/observations
29. Whether the child needs to be repatriated: Yes/No. If yes: (tick as applicable)
(i) Inter- district repatriation
(ii) Inter- state repatriation
(iii) Inter- country repatriation
OBSERVATIONS OF INQUIRY  30. Emotional factors
of placement (CCI, Reunification, Adoption, Emergency Reasons Action plan Timeline

Type of placement (CCI, Reunification, Adoption, Emergency foster care, etc.)	Reasons	Action plan	Timeline

Child's view of proposed placement:

Family's view of proposed placement:

Signature (of the person assigned



### 6. Handout 6: Practice Session using SIR

# Referring to the same case studies of Aryan and Radha as used above for the ICP practice session

The following steps need to be followed:

- The trainer will divide the participants into 6-7 groups as per thematic domain in SIR form.
- Co-trainers will be assigned to each group to assist with completing the form and answering questions.
- The participants will be provided with the 'Case Study of Child Aryan (refer case study in Training Aids document) for practice session and (refer handout: 'Suggestive Responses to the corresponding case study, Training Aids). (Note, there are two options of case study provided in the Training Aids doc: case study for child Aryan, case study for child Radha, either of these can be taken up for the practice session)
- Now ask the small groups to review the completed SIR using the case study information as outlined on the handout.
- Guide them to skip question 6 to begin this practice exercise. Note that there will be questions that are not covered in the Case Study, and they can either skip those questions, or create an answer.
- After thorough review of each section, they must collate their inputs as to what else can be added to the SIR, what can be modified etc. to make it more comprehensive
- Allow around 45 minutes for the groups to review the SIR and collate their inputs/suggestions. Remind the participants that this is just a learning exercise and they may not be able to thoroughly review the complete SIR at this time. However, advise them that the more time spent on review of a particular SIR, the better insights one tends to derive from it.
- Now the trainer will facilitate discussion around the reviewed SIRs. Mention that There are no correct or wrong answers the idea is to see how in-depth the teams can analyse the situation.
- The trainer may want to display the reference sheet for the completed sections on the screen; the link can be accessed through

Post practice session the trainer will again bring attention that while reviewing an SIR, the case manager has to ensure that the fundamentals of supportive supervision are kept in mind. Discuss the differences between control supervision and supportive supervision and emphasize the importance of supportive supervision that ensures focus on relationship and improving performance through continuous follow up and mentoring case managers.



### 7. Handout 7: Reference Sheet for SIR: Suggestive Responses - Aryan's Case

### **FORM 22**

[Rule 19(8)]

SOCIAL INVESTIGATION REPORT FOR CHILD IN NEED OF CARE AND PROTECTION OR CHILDREN IN CONFLICT WITH LAW

(Tick whichever is applicable)

Completed when the child enters the CCI (within 15 days), and annually thereafter to determine suitability of reunification with family or other family-based care options.

To be used in conjunction with the child's ICP (JJA Form 7- Individual Care Plan)

- 1. SI. No......

  2. Produced before the Child Welfare Committee......

  3. Case No......

  4. Social Investigation Report Prepared by: District Child Protection
- **4. Social Investigation Report Prepared by:** District Child Protection Unit/ Social Worker/ Case Worker/ Person in charge of Home/ representative of Non- Governmental Organization
- 5. Details of child in need of care and protection:
- (i) Name Aryan
- (ii) Age..12 years old DD/MM/YY .....
- (iii) Gender Male



General Scheduled Caste Scheduled Tribe Other Backward Class Others, specify..... Not Known ..... (v) Religion Not Known (vi) Father's Name. Not Known (vii) Mother's Name Meena Marital Status of parents: □ Married □ Separated Divorced ■Widowed/widower ☐ Remarried: Step mother/father names: (viii) Guardian's Name Meena (Mother) (ix) Family's Permanent Address Not Known Family's Present Address, if different from Permanent Not Known (x) Landmark of the address Not Known (xi) Address of last residence Not Known (xii) Contact information father/mother/family member/guardian Not Known (xiii) Whether the child needs an interpreter/translator: Yes/ No (xiv) Whether the child is- Orphan / Abandoned / Surrendered / Others (Single parented) (xv) Previous institutional/case history and individual care plan, if any No (xvi) Nuclear Family Details: (YES/NO) If yes, then:

(iv) Caste: (tick as applicable)



S.N.	Name and Relationship (Parents, siblings)	Ag e	Sex	Educatio n	Occupatio n	Incom e		History of Mental Illness	Addiction
1	Meena		Femal e	-	Househol d work	-	Havin g cardia c issues	nil	nil
2	Sibling 1 ABC		male	-	-	-	-	-	-
3	Sibling 2 EFG		male	-	-	-	-	-	-

Other Relatives or extended Family Members (Grandparents, Aunts, Uncles, etc.):

Name	2.1	Location and Contact Information	Income Status	Support they provide to children and family (practical help, emotional support, financial help, etc.)
1	Keyer	-	-	Financial and Emotional Support

Does the child visit his/her siblings? Yes/No

Details: only during his school holidays

Does the child spend holidays with their family? Yes/No

Details and frequency: only during his school holidays

Do family members or others visit the child? Yes/No

If yes, list the names of the people who visit and frequency:

Name/relationship	Address and contact information	Frequency of Visits
Meena (Mother)	-	Monthly basis
ABC Sibling 1	-	-



EFG Sibling 2	-	-
Keyer	-	-

### (xvii) Relationship among family members:

Father and mother	Cordial/Non-cordial/Not known
Father and child	Cordial/Non-cordial/Not known
Mother and child	Cordial/Non-cordial/Not known
Father and siblings	Cordial/Non-cordial/Not known
Mother and siblings	Cordial/Non-cordial/Not known
Child and siblings	Cordial/Non-cordial/Not known
Child and relative	Cordial/Non-cordial/Not known

What are the parents' level of parenting skills and abilities (eg, discipline, emotional connection, etc):

	Good	
ш	GUUU	

☐ Could be improved

□ Poor

□ Lacking

\*Removed history of family members in offences, if any

\*Removed attitude toward religion

### 6. With whom was the child staying prior to production before the Committee:

(tick as applicable)

- Parent(s) Mother / Father / Both
- Siblings / Blood relative
- Guardian(s) Relationship
- Friends



- On the street
- Night shelter
- Orphanages / Hostels/ Similar Homes
- Child Care Institution:
  - Children's home
  - Shelter home
  - Specialised Adoption Agency
  - Fit Facility
  - Other (please specify)......

### 7. In case of orphan and abandoned child-

- (i) Where was the child found? Not applicable
- (ii) What steps are being taken to trace the biological parents/relatives of the child? Please specify Not applicable
- (iii) If the biological roots of the child are known, reasons for death of both parents of the child Not applicable
- 8. Whether the child needs to be repatriated: Yes/No. If yes:
  - Inter- district repatriation
  - Inter- state repatriation
  - Inter- country repatriation
- 9. Whether child is eligible for the benefit of sponsorship: Yes/No
- 10. Whether the child is eligible for any scheme or entitlement.

Yes/No (If Yes, lease specify) .....

11. Whether child has received any kind of compensation in regard to the demise of any parent: Yes/No; Please

Specify.....

- 12. Whether child should get benefit under clause (c) of sub-section (1) of section of Section 12 of the Right to Education Act, 2009: Yes / No
- 13. Financial support recommended for the child:
  - (i) Whether the child's parents had any property/FD/Cash/Insurance/bank accounts prior to their sudden demise: Yes/No; Details thereof Not Known
  - (ii) Whether the child's parents have any loans, mortgages, financial liabilities?
  - A. Yes B. No. Details thereof Not Known
  - (iii) Whether the child's parents have any collateral against that mortgage?
  - A. Yes B. No. Details thereof Not Known
  - (iv) Whether the child's parents have any family business?
  - A. yes B. no. Details thereof....
  - (v) Whether the child has acquired any right/share in the property (self-acquired/ancestral) from the deceased parent: Yes/No; Details thereof Not Known

### **Household Economy**



Is the head of household in paid employment? Yes/No	
Are there any other adults in the family in paid employment? Yes/No	
If yes, explain: Not applicable	
Is employment reasonably secure? Yes/ <mark>No</mark>	
Is the family gaining income through?	
□Seasonal work	
□Occasional work	
□Working abroad	
☐Working away from home for periods of the year	
Do the patterns of work adversely impact child care? Yes/No	
Explain number of hours, days/times, etc: Not Known	
Are all entitled benefits claimed? Yes/No	
Specify:	
Are household bills paid regularly? Yes/ <mark>No</mark>	
Is the family managing with the income they receive? Yes/No	
Is the family in debt? Yes/No Not Known If yes, is this increasing? Yes/No Not Known	
Does the family hold BPL or avail themselves of support schemes? Not Known	
Does the family own cultivable land? Yes/No	
Does the family own livestock? Yes/No	
Is the family involved in other income generating activity? Yes/No	
Specify: Not Known	
Total income/month:  Not Known	_
Total bills/month: Not Known	



Total debt:	Not Known
-------------	-----------

## **Living Conditions**

Family's Present living conditions:

. Type of dwelling:
□Owned
□Rented
□Informal arrangement
***********
☐Based in Community
□Chawl
□Wada
□Farm
□House
□Tin house
☐Brick walls with tin roof
□Apartment
☐Shared residence
□Shelter
□Homeless
family vulnerable to eviction? Yes/No
family in temporary accommodations? Yes/No
house and immediate surroundings safe for the child? Yes/No
If no, explain:

E. Does the house have basic amenities?

Is the

Is the

Is the



□Safe Water	
□ Cooking facilities	
□ Food Storage	
☐ Sleeping arrangements	
□Sanitation	
Community Support	
Does the family feel accepted in their community?	<mark>Yes</mark> /No
Do family members experience discrimination and harassment?	Yes/ <mark>No</mark>
Does the family have local friends?	Yes/ <mark>No</mark>
Is the family involved in local organizations/activities?	Yes/ <mark>No</mark>
Is the family receiving support from government/NGOs?	Yes/ <mark>No</mark>
Are there accessible community resources?	Yes/ <mark>No</mark>
a. Does the family take advantage of community resources?	Yes/ <mark>No</mark>
b. Specify:	
14. Details of education of the child:	
(i) Whether the child has received education: Yes/No	
(ii) If yes, specify education up to which class III Standard (as he is in IV standard	d now)
(iii) If the child is enrolled in school, then name of the school Yes, Government	School
(iv) Whether the school of the child is registered on Unified District Information, if Yes, state Unified District Information System for Education Code	
(v) Type of school- Government/ Private.	

- (vi) Whether the child has been enrolled in a special training centre. Yes/No. If Yes specify duration of enrolment of child in Special Training center Not applicable
- (vii) Whether the Special Training Center was Residential/Non- Residential Not applicable
- (viii) The reason for leaving School (tick as applicable)
  - Failure in the class last studied



- Lack of interest in the school activities
- Indifferent attitude of the teachers
- Peer group influence
- To earn and support the family
- Sudden demise of parents
- Bullying in school
- Rigid school atmosphere
- Absenteeism followed by running away from school
- There is no appropriate level of school nearby
- Abuse in school
- Humiliation in school
- Corporal punishment
- Medium of instruction
- (ix) Attitude of classmates towards the child (If applicable) Bullying
- (x) Attitude of teachers and classmates towards the child (If Applicable) Teacher is showing anger towards the child as he is disturbing others.
- (xi) Child's Vocational Training (if any) NO

Do all children of school age in the household go to school? Yes/No Not known

If no, specify the reasons: Not applicable Family's attitude toward child's education:

□ Value education and supportive/involved (with children at home)

☐ Would like to be supportive but don't feel they are able to help

□Indifferent

□ Not supportive

Formal education for head of household:

For partner of head of household:

□ Primary school □ Primary School

☐ Secondary school ☐ Secondary School

□X Standard □X Standard

□ Above X Standard □ Above X Standard

□Vocational School □Vocational School



□ College/university	□College/university
□Unable to read or write	□Unable to read or write
Not Known	
Skills of head of household:	Skills of partner of head of household:
□Tailor	□Tailor
□Builder	□Builder
☐ Agriculture/farming	□Agriculture/farming
□Driver	□Driver
□Other: (Specify) Not Known	□ Other: (Specify)
15. Other factors of importance if any	
<ul> <li>Habits of the child: (tick as applicable)</li> <li>Watching TV/movies</li> <li>Playing indoor/outdoor games</li> <li>Reading books</li> <li>Drawing/painting/acting/singing</li> <li>Religious activities</li> <li>Begging</li> <li>Gambling</li> <li>Alcohol consumption</li> <li>Smoking</li> <li>Drug use, if yes, specify</li> <li>Any other, please specify not involve</li> </ul>	

- 17. Extra-curricular interests Not Known
- 18. Outstanding characteristics and personality traits polite and Calm
- 19. Majority of the friends are (tick as applicable)
  - Educated
  - The same age group
  - Older in age
  - Younger in age
  - Male
  - Female
  - Addicts
  - Children in conflict with law

Not having friends in the CCI



- 20. If child is friends with adults, please specify NO
- 21. Attitude of the child towards friends Not applicable
- 22. Attitude of friends towards the child Bullying and teasing
- 23. **Observation about neighborhood** (to assess the influence of neighborhood on the child) Supportive
- 24. Whether the child has any addiction- YES / NO, if yes, specify Not applicable
- 25. In case the child is with disability or special needs or is terminally ill (If Yes, Specify): Not applicable
- A. Health status of the child
  - (i) Respiratory disorders present / not known / absent
  - (ii) Hearing impairment present / not known / absent
  - (iii) Eye diseases- present / not known / absent
  - (iv) Dental disease- present / not known / absent
  - (v) Cardiac diseases- present / not known / absent
  - (vi) Skin disease-present / not known / absent
  - (vii) Sexually transmitted diseases- present / not known / absent
  - (viii) Neurological disorders- present / not known / absent
  - (ix) Mental handicap- present / not known / absent
  - (x) Physical handicap- present / not known / absent
  - (xi) Urinary tract infections -present / not known / absent
  - (xii) Others (please specify) Tooth Decay
- B. Whether the child is differently abled- Yes or No, if yes, specify- Not applicable
  - (a) Hearing Impairment
  - (b) Speech Impairment
  - (c) Physical disability
  - (d) Mental disability
  - (e) Locomotive disability
  - (f) Others (please specify) .....
- C. Whether the child has a valid disability certificate. (If Yes, provide details) Not applicable
- D. Mental condition of the child: (Present and past) Emotionally stable during the past and should able to control his emotions in a proper way but after entering in to the CCI losing his control and acts for it, and feeling lonely sometimes.
- E. Physical condition of the child: (Present and past) Good health condition except tooth aches
- F. Whether the child needs special education- Yes/No. If yes, specify: Not applicable
- G. Special education already included in the current school curriculum: Yes/No/Not Applicable Not known



H. Whether the Child requires or has been using any medical equipment. (If yes, please specify)  Not applicable
I. Previous institutional/case history and individual care plan, if any Not applicable
J. Whether the child is receiving any pension under disability schemes. Yes/No (If yes then specify)
K. Any other remark/observation
Does a member of the family have a chronic physical health condition?
□Asthma
□Epilepsy
□Diabetes
☐ Heart condition
□Other: (Specify)
How is the condition being treated? Mother is having cardiac issues and not taking any proper treatment for that.
Does a member of the household experience:
□Poor mental health
□ Behavior issues
□Physical disability
□ Learning disability
□Alcohol/drug abuse
□Other: Not applicable
How is the issue being treated? Not applicable
Do all family members have health insurance? Yes/No
Does the family have access to a doctor that they visit regularly or in case of emergency? Yes/No
If no, please specify the reason:



# 26. In case the child belongs to Children in Street Situations/Trafficked/Involved in Drug Peddling/Child Labour: Not applicable

A. Whether the child belongs to any of the categories under Children in Street Situations: Yes/No. If yes, specify:

- (i) Children without support living on the streets all alone
- (ii) Children stay on the streets in the day and are back home in the night with their families who reside in a

nearby slum/hutments.

- (iii) Children living on the streets with their families:
- B. With whom was the child staying prior to production before the Committee:
- (i) Parent Mother / Father / Both
- (ii) Siblings / Blood relative
- (iii) Guardian Relationship
- (iv) Friends
- (v) On the street
- (vi) Night shelter
- (vii) Orphanages / Hostels/ Similar Homes
- (viii) Other (please specify) .....
- C. If there is history/ tendency of the child to run away from home.

Yes/ No. If yes: .....

- (i) What is the parents' attitude towards discipline in the home and child's reaction mother couldn't able to control her anger and yells at the children
- (ii) Reasons for leaving the family:
  - (a) Abuse by parent(s)/guardian(s)/step parents(s)
  - (b) In search of employment
  - (c) Peer group influence
  - (d) Incapacitation of parents
  - (e) Criminal record of parents
  - (f) Separation of Parents
  - (g) Demise of parents
  - (h) Poverty

Abandoned by family; lack of acceptance (young mother, remarriage, etc)

- (i) Others (please specify) .....
- D. Where was the child found, please specify ........
- E. Whether the child has been used for begging: Yes/No
- F. Whether the child has been involved in rag-picking: Yes/No
- G. Whether the child is used by any gangs or adults or group of adults or has been used for drug peddling: Yes/No



- H. Whether the child has been bought or sold or procured or trafficked for any purpose: Yes/No, if yes: I. Whether the child was trafficked with knowledge of parents: Yes/No Not applicable J. Whether the child was sold by the parents/relatives: Yes/No Not applicable If yes, then whether any action has been taken against the parents/relative: Yes/No Not applicable K. Whether the child was employed as a labour: Yes/No, if yes: Not applicable (i) Industry in which the child was employed Not applicable (ii) Whether the child has faced exploitation at work: Yes/No (a) Extracted work without payment (b) Little or low wages with longer duration of work (c) Others (Please specify)..... (iii) Details of income utilization..... (iv) Any occupational hazard faced by the child: Yes/No. If yes, specify...... (v) Whether case filed against employer: Yes/No. If yes, specify case detail....... (vi) Compensation provided to the child: (a) Interim (b) Final (c) Child Labour Rehabilitation cum Welfare Fund L. Previous institutional/case history and individual care plan, if any Not applicable M. Whether temporary shelter has been provided to child: Yes/No N. Has any plan been made for rehabilitation of the child, specify Yes, planning to reunify with the family after proper strengthening O. Any other remarks/observation no 27. In case the child has faced any kind of abuse, including sexual abuse, or has been a victim of any offence: A. Whether the child is a victim of any offense: Yes/No B. Types of abuse faced by the child: Not applicable
- - (a) Verbal abuse- parents/siblings/ employers/others (please specify) .........
  - (b) Physical abuse- parents/siblings/ Employers/others (please specify) ........
  - (c) Sexual abuse by- (tick as applicable)
    - relatives through blood



- relatives through adoption
- relatives through marriage
- relatives through guardianship
- persons in foster care
- person living in the same or shared household
- any person in the ownership, or management, or staff, of any institution providing services to a
- child
- any person in position of trust or authority
- Others (please specify)
- (d) Others– parents/siblings/ employers/others (please specify) ......
- C. Types of ill- treatment met by the child: Not applicable
  - (i) Denial of food- parents/siblings, employers/others (please specify) ......
  - (ii) Beaten mercilessly- parents/ Siblings/employers/other (please specify)
  - (iii) Causing injury- parents/ siblings/employers/other (please specify) ......
  - (iv) Detention- parents/ siblings/employers/other (please specify) ...........
  - (v) Any other (please specify) .....
- D. In case of sexual abuse: Not applicable
  - (i) Relationship with the perpetrator.....
  - (ii) Gender of the perpetrator.....
  - (iii) Age of the perpetrator.....
  - (iv) How the child came in contact with the perpetrator.....
  - (v) Any other child from the same place who is abused / harassed / taken / sent by the perpetrator....
  - (vi) Whether any other person/s were involved in the offence.....
  - (vii) Whether any compensation has been recommended to the child under the Protection of Children from Sexual Offences Act, 2012: Yes/No.
  - If any other, please specify.....
- E. Case/FIR registered by the police: Yes/No. If yes, specify Case No./ FIR No.....
- F. Whether the child has been a victim of cyber-bullying: Yes/No. If yes:
  - (i) Cyber bullied while using internet system at home
  - (ii) Cyber bullied while using internet system in school
  - (iii) Cyber- bullied while attending school classes from home
- G. Has the child been counselled: Yes/No, if yes, provide details (planning to place him in counseling session)
- H. Any other remark/observations He has been teased by his friends and couldn't concentrate on his studies and having the thought of why he has been put up in the CCI over his brothers.
- I. Previous institutional/case history and individual care plan, if any Not applicable



28. In case the child is victim of child marriage or is married: Not applicable
A. Name of the spouse
B. Age of the spouse
C. Date of marriage (DD/MM/YY)
D. Place of marriage
E. Reasons for conducting marriage of the child
F. People who were involved in getting the marriage of the child conducted- i. Parents ii. Relatives iii. Others.
G. If others, please specify
H. Whether any case has been registered by police: Yes/No.
If yes, provide details
I. If any action is taken, details thereof
J. Any other remarks/observations
29. Whether the child needs to be repatriated: Yes/No. If yes: (tick as applicable)  (i) Inter- district repatriation  (ii) Inter- state repatriation  (iii) Inter- country repatriation

#### **OBSERVATIONS OF INQUIRY**

- 30. Emotional factors: Emotionally being unstable sometimes, feeling him as a failure, having the thought of am I deserve to be in this state?, feeling bad and not being able to control his anger when other children are teasing him for performing poorly in academics.
- 31. Physical condition: Having good health but having borderline HB level and often getting tooth aches.
- 32. Social and economic factors: Mother is the only breadwinner of the family and couldn't meet with the family expenses.
- 33. Suggestive causes of the problems : sudden demise of father and mother's health condition is not good to have consistent income.
- 34. Analysis of the case, including reasons/contributing factors for the offence. Not applicable
- 35. Reasons for child's need for care and protection Poverty and lack of parenting skills



- 36. Opinion of experts consulted Not Known
- 37. Mental Health Expert assessment Not applicable

\*Removed Religious factors

38. Risk analysis for the child to be restored to the surviving parent/relatives/guardian Inconsistency in income

Poor health condition of the mother

Lack of parenting skills

Lack of entitlement with social protection schemes

- 39. Previous institutional/case history and individual care plan, if any Not applicable
- 40. Recommendation of District Child Protection Unit/Case Worker/Social Worker regarding psychological support, rehabilitation and reintegration of the child and suggested plan Child counseling and parental counseling

Type of placement (CCI, Reunification, Adoption, Emergency foster care, etc.)	Reasons	Action plan	Timeline
Reunification with the Birth Family	He has a family to live with and deliberately wants to go home	For the Child: Counseling, Life skill education for the Child to control his emotions, Improve his study skills and social skills.  For the Family Family: Strengthening through parental counseling on positive parenting skills, Health insurance support for the mother, livelihood support for the family, linking her with the widow pension scheme and PDS.	3 months 6months

Child's view of proposed placement: Child wishes to go back to the family and wants to live with her mother and siblings.

Family's view of proposed placement: Mother is confused and doesn't know what can be done next for the betterment of her child Aryan; she is thinking that she has no other options than sending him to the CCI.



Signature (of the person assign)

# 8. Handout 8: Reference Sheet for SIR: Suggestive Responses - Radha's Case

# **FORM 22**

[Rule 19(8)]

SOCIAL INVESTIGATION REPORT FOR CHILD IN NEED OF CARE AND PROTECTION OR CHILDREN IN CONFLICT WITH LAW

(Tick whichever is applicable)

Completed when the child enters the CCI (within 15 days), and annually thereafter to determine suitability of reunification with family or other family-based care options.

To be used in conjunction with the child's ICP (JJA Form 7- Individual Care Plan)

- SI. No......

   Produced before the Child Welfare Committee......

   Case No......
- **4. Social Investigation Report Prepared by**: District Child Protection Unit/ Social Worker/ Case Worker/ Person in charge of Home/ representative of Non- Governmental Organization
- 5. Details of child in need of care and protection:
- (i) Name: Radha
- (ii) Age..11 years old DD/MM/YY .....
- (iii) Gender: Female
- (iv) Caste: (tick as applicable)
  - General
  - Scheduled Caste
  - Scheduled Tribe
  - Other Backward Class
  - Others, specify......
  - Not Known .....
- (v) Religion Not Known
- (vi) Father's Name. Not Known



# (vii) Mother's Name Not Known . Biological mother is deceased

# Marital Status of parents:

- □ Married
- □ Separated
- Divorced
- □Widowed/widower
- ☐ Remarried: Step mother/father names: Step mother name not known
- (viii) Guardian's Name Father (name not known)
- (ix) Family's Permanent Address Not Known

Family's Present Address, if different from Permanent Not Known

- (x) Landmark of the address Not Known
- (xi) Address of last residence Not Known
- (xii) Contact information father/mother/family member/guardian Not Known
- (xiii) Whether the child needs an interpreter/translator: Yes/ No
- (xiv) Whether the child is- Orphan / Abandoned / Surrendered / Others No
- (xv) Previous institutional/case history and individual care plan, if any No
- (xvi) Nuclear Family Details: (YES/NO) If yes, then:

S.N	Name and Relationshi p (Parents, siblings)	Ag e	Sex	Educa tion	Occupati on	Inco me	Health Status	Histor y of Menta I Illness	Addictio n
1	Father		Male	-	Agricultur al work	-	Fine, but much stressed because of financial	nil	nil



						crisis		
2	Step Mother	Femal e	-	-	-	Fine	nil	nil
3	Step Brother	male	-	-	-	Allergic to certain foods	nil	nil

Other Relatives or extended Family Members (Grandparents, Aunts, Uncles, etc.):

Name	Type of Relationship with Child	Location and Contact Information	Income Status	Support they provide to children and family (practical help, emotional support, financial help, etc.)
		-	-	

Does the child visit his/her siblings? Yes/No

Details: only during her school holidays. She loves playing with her step brother

Does the child spend holidays with their family? Yes/No

Details and frequency: only during her school holidays

Do family members or others visit the child? Yes/No

If yes, list the names of the people who visit and frequency:

Name/relationship	Address and contact information	Frequency of Visits
-------------------	---------------------------------	---------------------



Father	-	Once in two months
	-	-

# (xvii) Relationship among family members:

Father and (step)mother	Cordial/Non-cordial/Not known
Father and child	Cordial/Non-cordial/Not known
(Step)Mother and child	Cordial/Non-cordial/Not known
Father and siblings	Cordial/Non-cordial/Not known
(step)Mother and siblings	Cordial/Non-cordial/Not known (now cordial, after interventions)
Child and siblings	Cordial/Non-cordial/Not known
Child and relative	Cordial/Non-cordial/Not known NA (Not Known)

What are the parents' level of parenting skills and abilities (eg, discipline, emotional connection, etc):

	~~
ıuı	υu

☐ Could be improved

□Poor

□ Lacking

\*Removed history of family members in offences, if any

\*Removed attitude toward religion

# 6. With whom was the child staying prior to production before the Committee:

(tick as applicable)

- Parent(s) (step)Mother / Father / Both
- Siblings / Blood relative
- Guardian(s) Relationship
- Friends



- On the street
- Night shelter
- Orphanages / Hostels/ Similar Homes
- Child Care Institution:
  - Children's home
  - Shelter home
  - Specialised Adoption Agency
  - Fit Facility
  - Other (please specify)......

# 7. In case of orphan and abandoned child-

- (i) Where was the child found? Not applicable
- (ii) What steps are being taken to trace the biological parents/relatives of the child? Please specify Not applicable
- (iii) If the biological roots of the child are known, reasons for death of both parents of the child Not applicable
- 8. Whether the child needs to be repatriated: Yes/No. If yes:
  - Inter- district repatriation
  - Inter- state repatriation
  - Inter- country repatriation
- 9. Whether child is eligible for the benefit of sponsorship: Yes/No
- 10. Whether the child is eligible for any scheme or entitlement.

Yes/No (If Yes, lease specify) .....

11. Whether child has received any kind of compensation in regard to the demise of any parent: Yes/No; Please

Specify.....

- 12. Whether child should get benefit under clause (c) of sub-section (1) of section of Section 12 of the Right to Education Act, 2009: Yes / No
- 13. Financial support recommended for the child:
  - (i) Whether the child's parents had any property/FD/Cash/Insurance/bank accounts prior to their sudden demise: Yes/No; Details thereof Not Known
  - (ii) Whether the child's parents have any loans, mortgages, financial liabilities?
  - A. Yes B. No. Details thereof Not Known
  - (iii) Whether the child's parents have any collateral against that mortgage?
  - A. Yes B. No. Details thereof Not Known
  - (iv) Whether the child's parents have any family business?
  - A. yes B. no. Details thereof....
  - (v) Whether the child has acquired any right/share in the property (self-acquired/ancestral) from the deceased parent: Yes/No; Details thereof Not Known

## **Household Economy**



Is the head of household in paid employment? Yes/No Are there any other adults in the family in paid employment? Yes/No If yes, explain: Not applicable Is employment reasonably secure? Yes/No Is the family gaining income through? ☐ Seasonal work - The agricultural work is regular, but income comes through only during harvesting season when the crop gives yield □ Occasional work ■Working abroad ☐ Working away from home for periods of the year Do the patterns of work adversely impact child care? Yes/No Explain number of hours, days/times, etc: Not Known Are all entitled benefits claimed? Yes/No Specify: Are household bills paid regularly? Yes/No Is the family managing with the income they receive? Yes/No Is the family in debt? Yes/No If yes, is this increasing? Yes/No Not Known Does the family hold BPL or avail themselves of support schemes? Not Known Does the family own cultivable land? Yes/No Does the family own livestock? Yes/No Is the family involved in other income generating activities? Yes/No Specify: Not Known Total income/month: **Not Known** 



Total bills/month:	Not Known
Total debt:	Not Known

# **Living Conditions**

Family's Present living conditions:

. Type of dwelling:
□Owned
□Rented
□ Informal arrangement
*****
☐ Based in Community
□Chawl
□Wada
□Farm
□House
☐Tin house
☐ Brick walls with tin roof
□Apartment
☐Shared residence
□Shelter
□Homeless
family vulnerable to eviction? Yes/No

Is the

Is the family in temporary accommodations? Yes/No

Is the house and immediate surroundings safe for the child? Yes/No



# If no, explain:

E. Does the house have basic amenities?	
□Safe Water	
□Cooking facilities	
□Food Storage	
□Sleeping arrangements	
□Sanitation	
Community Support	
Does the family feel accepted in their community?	Yes/No
Do family members experience discrimination and harassment? Yes/No	
Does the family have local friends?	Yes/No
Is the family involved in local organizations/activities?	Yes/No
Is the family receiving support from government/NGOs?	Yes/No
Are there accessible community resources?	Yes/ <mark>No</mark>
<ul> <li>a. Does the family take advantage of community resource</li> <li>Yes/No</li> </ul>	es?
b. Specify:	
14. Details of education of the child:	
(i) Whether the child has received education: Yes/No	
(ii) If yes, specify education up to which class III Standard (as she is in	n IV standard now)
(iii) If the child is enrolled in school, then name of the school Yes, Go	vernment School
(iv) Whether the school of the child is registered on Unified Distr Education, if Yes, state Unified District Information System for Educa	

(v) Type of school- Government/ Private.



- (vi) Whether the child has been enrolled in a special training centre. Yes/No. If Yes specify duration of enrolment of child in Special Training center Not applicable
- (vii) Whether the Special Training Center was Residential/Non- Residential Not applicable

(viii) The reason for leaving School (tick as applicable	(viii	) The	reason	for	leaving	School	(tick	as	ap	plicable	e)
--	-------	-------	--------	-----	---------	--------	-------	----	----	----------	----

- Failure in the class last studied
- Lack of interest in the school activities
- Indifferent attitude of the teachers
- Peer group influence
- To earn and support the family
- Sudden demise of parents
- Bullying in school
- Rigid school atmosphere
- Absenteeism followed by running away from school

☐ Would like to be supportive but don't feel they are able to help

- There is no appropriate level of school nearby
- Abuse in school
- Humiliation in school
- Corporal punishment
- Medium of instruction

Others (please specify)
ix) Attitude of classmates towards the child (If applicable) Bullying
x) Attitude of teachers and classmates towards the child (If Applicable) Satisfactory
xi) Child's Vocational Training (if any) NO
Do all children of school age in the household go to school? Yes/No <mark>NA (no child of school going age at home yet)</mark>
If no, specify the reasons: Not applicable
Family's attitude toward child's education:
□Value education and supportive/involved (with children at home)

□Not supportive		
Formal education for head of household	For partner of head of household:	
□Primary school	□Primary	Schoo

Indifferent



☐Secondary school	□Secondary School
□X Standard	□X Standard
□ Above X Standard	☐ Above X Standard
□Vocational School	□Vocational School
□College/university	□College/university
□Unable to read or write	☐Unable to read or write
Skills of head of household:	Skills of partner of head of household:
□Tailor	□Tailor
□Builder	□Builder
□ Agriculture/farming	□ Agriculture/farming
□Driver	□Driver
□Other: (Specify)	□Other: (Specify)
15. Other factors of importance if any	
<ul> <li>Habits of the child: (tick as applicable)</li> <li>Watching TV/movies</li> <li>Playing indoor/outdoor games</li> <li>Reading books</li> <li>Drawing/painting/acting/singing</li> <li>Religious activities</li> <li>Begging</li> <li>Gambling</li> <li>Alcohol consumption</li> <li>Smoking</li> <li>Drug use, if yes, specify</li> <li>Any other, please specify enjoys dan</li> </ul>	
17. Extra-curricular interests Not Known	
18 Outstanding characteristics and personality	traite Cooperative child

- 18. Outstanding characteristics and personality traits Cooperative child
- 19. Majority of the friends are (tick as applicable)
  - Educated
  - The same age group
  - Older in age
  - Younger in age (now few friends are also of same age group)



- Male
- Female
- Addicts
- Children in conflict with law
- 20. If child is friends with adults, please specify Rajshree, child's counselor
- 21. Attitude of the child towards friends good
- 22. Attitude of friends towards the child Bullying and teasing in past, now normal
- 23. **Observation about neighborhood** (to assess the influence of neighborhood on the child) Supportive
- 24. Whether the child has any addiction- YES / NO, if yes, specify Not applicable
- 25. In case the child is with disability or special needs or is terminally ill (If Yes, Specify): Not applicable
- A. Health status of the child
  - (i) Respiratory disorders present / not known / absent
  - (ii) Hearing impairment present / not known / absent
  - (iii) Eye diseases- present / not known / absent
  - (iv) Dental disease- present / not known / absent
  - (v) Cardiac diseases- present / not known / absent
  - (vi) Skin disease-present / not known / absent
  - (vii) Sexually transmitted diseases- present / not known / absent
  - (viii) Neurological disorders- present / not known / absent
  - (ix) Mental handicap- present / not known / absent
  - (x) Physical handicap-present / not known / absent
  - (xi) Urinary tract infections -present / not known / absent
  - (xii) Others (please specify) Malnourished
- B. Whether the child is differently abled- Yes or No, if yes, specify- Not applicable
  - (a) Hearing Impairment
  - (b) Speech Impairment
  - (c) Physical disability
  - (d) Mental disability
  - (e) Locomotive disability
  - (f) Others (please specify) .....
- C. Whether the child has a valid disability certificate. (If Yes, provide details) Not applicable
- D. Mental condition of the child: (Present and past) She had childhood trauma of her mother's death, which she has overcome to an extent. But needs support there. She has nightmares because of the trauma which is followed by bedwetting episodes. However, that has improved to an extent. But much more work is required in this direction.



E. Physical condition of the child: (Present and past) Good health condition except being malnourished
F. Whether the child needs special education- Yes/No. If yes, specify: Not applicable
G. Special education already included in the current school curriculum: Yes/No/Not Applicable Not known
H. Whether the Child requires or has been using any medical equipment. (If yes, please specify) Not applicable
I. Previous institutional/case history and individual care plan, if any Not applicable
J. Whether the child is receiving any pension under disability schemes. Yes/No (If yes then specify)
K. Any other remark/observation
Does a member of the family have a chronic physical health condition? No
□Asthma
□Epilepsy
□Diabetes
☐ Heart condition
□Other: (Specify)
How is the condition being treated? Mother is having cardiac issues and not taking any proper treatment for that.
Does a member of the household experience:
□Poor mental health
□ Behavior issues
□ Physical disability
□ Learning disability
□Alcohol/drug abuse
□Other: Not applicable

How is the issue being treated? Not applicable



Do all family members have health insurance? Yes/No

Does the family have access to a doctor that they visit regularly or in case of emergency? Yes/No

If no, please specify the reason:

# 26. In case the child belongs to Children in Street Situations/Trafficked/Involved in Drug Peddling/Child Labour: Not applicable

A. Whether the child belongs to any of the categories under Children in Street Situations: Yes/No. If yes, specify:

- (i) Children without support living on the streets all alone
- (ii) Children stay on the streets in the day and are back home in the night with their families who reside in a

nearby slum/hutments.

- (iii) Children living on the streets with their families:
- B. With whom was the child staying prior to production before the Committee:
- (i) Parent Mother / Father / Both
- (ii) Siblings / Blood relative
- (iii) Guardian Relationship
- (iv) Friends
- (v) On the street
- (vi) Night shelter
- (vii) Orphanages / Hostels/ Similar Homes
- (viii) Other (please specify) .....
- C. If there is history/ tendency of the child to run away from home.

Yes/ No. If yes: .....

- (i) What is the parents' attitude towards discipline in the home and child's reaction mother couldn't able to control her anger and yells at the children
- (ii) Reasons for leaving the family:
  - (a) Abuse by parent(s)/guardian(s)/step parents(s)
  - (b) In search of employment
  - (c) Peer group influence
  - (d) Incapacitation of parents
  - (e) Criminal record of parents
  - (f) Separation of Parents
  - (g) Demise of parents (mother)
  - (h) Poverty

Abandoned by family; lack of acceptance (young mother, remarriage, etc)

- (i) Others (please specify) .....
- D. Where was the child found, please specify ........
- E. Whether the child has been used for begging: Yes/No



- F. Whether the child has been involved in rag-picking: Yes/No
- G. Whether the child is used by any gangs or adults or group of adults or has been used for drug peddling: Yes/No
- H. Whether the child has been bought or sold or procured or trafficked for any purpose: Yes/No, if yes:
- I. Whether the child was trafficked with knowledge of parents: Yes/No Not applicable
- J. Whether the child was sold by the parents/relatives: Yes/No Not applicable
- If yes, then whether any action has been taken against the parents/relative: Yes/No Not applicable
- K. Whether the child was employed as a labour: Yes/No, if yes: Not applicable
- (i) Industry in which the child was employed Not applicable
  - (ii) Whether the child has faced exploitation at work: Yes/No
    - (a) Extracted work without payment
    - (b) Little or low wages with longer duration of work
    - (c) Others (Please specify).....
  - (iii) Details of income utilization.....
  - (iv) Any occupational hazard faced by the child: Yes/No. If yes, specify......
  - (v) Whether case filed against employer: Yes/No. If yes, specify case detail.......
  - (vi) Compensation provided to the child:
    - (a) Interim
    - (b) Final
    - (c) Child Labour Rehabilitation cum Welfare Fund
- L. Previous institutional/case history and individual care plan, if any Not applicable
- M. Whether temporary shelter has been provided to child: Yes/No
- N. Has any plan been made for rehabilitation of the child, specify Yes, planning to reunify with the family after proper strengthening
- O. Any other remarks/observation no
- 27. In case the child has faced any kind of abuse, including sexual abuse, or has been a victim of any offence:
- A. Whether the child is a victim of any offense: Yes/No



B. Types of abuse faced by the child: Not applicable	
(a) Verbal abuse– parents/siblings/ employers/others (please specify)	
(b) Physical abuse- parents/siblings/ Employers/others (please specify)	
(c) Sexual abuse by- (tick as applicable)	
relatives through blood	
relatives through adoption	
relatives through marriage	
relatives through guardianship	
persons in foster care	
<ul> <li>person living in the same or shared household</li> </ul>	
any person in the ownership, or management, or staff, of any instituti	ion
providing services to a	
• child	
<ul> <li>any person in position of trust or authority</li> </ul>	
Others (please specify)	
(d) Others- parents/siblings/ employers/others (please specify)	
C. Types of ill- treatment met by the child: Not applicable  (i) Denial of food- parents/siblings, employers/others (please specify)  (ii) Beaten mercilessly- parents/ Siblings/employers/other (please specify)  (iii) Causing injury- parents/ siblings/employers/other (please specify)  (iv) Detention- parents/ siblings/employers/other (please specify)  (v) Any other (please specify)  D. In case of sexual abuse: Not applicable  (i) Relationship with the perpetrator  (ii) Gender of the perpetrator  (iii) Age of the perpetrator  (iv) How the child came in contact with the perpetrator  (v) Any other child from the same place who is abused / harassed / taken / sent by the perpetrator	the
(vi) Whether any other person/s were involved in the offence	the
E. Case/FIR registered by the police: Yes/No. If yes, specify Case No./ FIR No	
F. Whether the child has been a victim of cyber-bullying: Yes/No. If yes:  (i) Cyber bullied while using internet system at home  (ii) Cyber bullied while using internet system in school  (iii) Cyber- bullied while attending school classes from home	
G. Has the child been counselled: Yes/No, if yes, provide details counseling for childhotrauma, nightmares and bedwetting	od



- H. Any other remark/observations She used to be bullied by other children at CCI calling her 'cry baby' and 'leaking pants' but that has been improved now by the efforts of counselor and caregiving staff
- I. Previous institutional/case history and individual care plan, if any Not applicable

28.	In case	the child	l is victim	of child	marriage	or is	married:	Not applicable
Α. Ι	Name of	the spou	se					

B. Age of the spouse.....

C. Date of marriage (DD/MM/YY) .....

D. Place of marriage.....

E. Reasons for conducting marriage of the child.....

- F. People who were involved in getting the marriage of the child conducted- i. Parents ii. Relatives iii. Others.
- G. If others, please specify.....
- H. Whether any case has been registered by police: Yes/No.

If yes, provide details.....

- I. If any action taken, details thereof......
- J. Any other remarks/observation.....
- 29. Whether the child needs to be repatriated: Yes/No. If yes: (tick as applicable)
  - (i) Inter- district repatriation
  - (ii) Inter- state repatriation
  - (iii) Inter- country repatriation

## **OBSERVATIONS OF INQUIRY**

- 30. Emotional factors: Has outburst of emotions sometimes as she desperately wants to go home, sometimes cries missing her biological mother
- 31. Physical condition Having good health condition but malnourished
- 32. Social and economic factors: Father is the only breadwinner of the family and couldn't meet with the family expenses.
- 33. Suggestive causes of the problems : sudden demise of mother and there was no one to take care of the child



- 34. Analysis of the case, including reasons/contributing factors for the offence. Not applicable
- 35. Reasons for child's need for care and protection Lack of parenting skills, difficult attitude of step mother
- 36. Opinion of experts consulted Not Known
- 37. Mental Health Expert assessment Recommends family reunification, after family strengthening particularly addressing the financial crisis at home

\*Removed Religious factors

38. Risk analysis for the child to be restored to the surviving parent/relatives/guardian Inconsistency in income

Incompetent parenting skills

Lack of love and affection from step mother

Lack of entitlement with social protection schemes

- 39. Previous institutional/case history and individual care plan, if any Not applicable
- 40. Recommendation of District Child Protection Unit/Case Worker/Social Worker regarding psychological support, rehabilitation and reintegration of the child and suggested plan Child counseling and parental counseling, imparting parenting skills training to the parents, linking the family to social protection benefits on priority

Type of placement (CCI, Reunification, Adoption, Emergency foster care, etc.)	Reasons	Action plan	Timeline
Reunification with the Birth Family	He has a family to live with and deliberately wants to go home	For the Child: continued Counseling, Life skill education for the Child to regulate her emotions, Improve his study skills, self care skills, nutrition. For the Family Family: Strengthening through parental counseling on positive parenting skills, strengthening the bond with step mother, livelihood support for the family, linking father with employment schemes	3 months 6 months

Child's view of proposed placement: Child wishes to go back to the family and wants to live with her father, step mother and step brother.



Family's view of proposed placement: Father is willing to have the daughter back, step mother also agrees to this plan. However, financial difficulties are forcing them to have second thoughts

Signature (of the person assign)

-----

# 8. Handout 9: Case Management Tracker (Excel based)

The case management tracker (CMT) is an excel based tool, given below is the overall view of the CMT broken into four parts proceeded with a dashboard.

#### Part View 1

											INT	AKE/ADMISSIO	N								
3.1	DATE	OF ADM	ESSELIN	NAME OF CHILDRE N	AGE IN COMPLE TED YEARS	GENDER OF THE CHILD	STATUS ON FAMILY	NAME OF FATHERWOT HERWGUARDIA N	OF LAST	ADDORESS OF LAST RESIDENCE - DISTRICT	ADDDRESS OF LAST RESIDENCE - VILLAGE/WA RD	WHETHER THE CHILD IS DIFFERENTLY ABLED	MARRIED	SCHOOL ENROLLMENT STATUS	CURRENTALAS T CLASS IN WHICH THE THE CHILD IS ENROLLED	TYPE OF SCHOOL	HE ASONS	WITH WHOM THE CHILD WAS STAYING PRIOR TO PRODUCTION BEFORE THE COMMITTEE	REASONS FOR LEAVING THE FAMILY	REASONS FOR ADMISSION (Select all that	If Other, please specify (referring to primary reasons for admission)
	Date	Month	Year	SIRQ1	SIRQ2	SIRQ3	Based on Observations of Inquiry section of SIR	SIRQ97/8	SIRQIUII	SIRCIUM	SIRQIWII	SIRQ13	SIRQ16		SIRQM	SIRQ25	SIRQ28	SIRQ41	SIRQ14	SIR Observations of Ingiry - point 7	
7	- 15	- 5	2021		13	Male	Both Parents Available Both Parents					No	No	Currenity Enrolled		Govt High School		Single Parent - Mother		Poor financial conditionflow income Possibility of early	
- 2	5	6	2022		13	Male	Both Parents Deceased Single Parent					Yes	No	Enrolled	9th	School Govi High School Bovi High		Single Perent - Moher		Possibility of early memiese	
3	7	Б	2022			Female	Single Parent - Mother					Na	No	Enrolled		School		Single Parent - Mother			
4																					
5																					
8																					
7																					

# Part View 2

							ASSE	SSMENT (ICP - F	art A)							1
Health and nutrition needs Sup		suppor	Emotional and Psychological eupport needs (ICPQ1443) Educational and Training (ICPQ1443)				tivity and Play QMS)	relation	nd Interpersonal onohips (2146)		s beliefs 21477]	proteotion from a neglect and	e skill training for Il kinds of abuse, maltreatment (1948)	Independent (ICP)	Any att which m the chil paren	
Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area of Concern	Proposed Intervention	Area (

## Part View 3

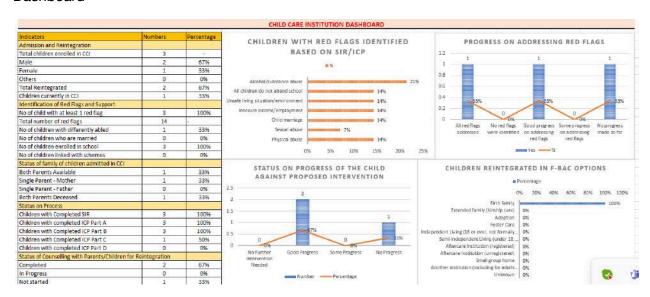
						PLANNING								IMP	LEMENTATION (ICP PART I	1	
OMPLETED?	FREQUENCY OF COMPLETING ICP PART B		OF COMP CP PART		THE CHILD AGAINST PROPOSED	STATUS ON PROGRESS OF THE RED FLAGS IDENTIFIED? [Till beautings]	FAMILYICHILD LINKED WITH SOCIAL PROTECTION SCHEMES	Name of the Scheme	POSSIBLE?	ICP PART C COMPLETED?	PART C		epured 5	PREPARATION, COUNSELLING WITH CHILD AND/OR FAMILY BY SWIMHRP	RESTORATION PLAN OF THE CHILD	DETAILS OF SPONSHERSHIP AGENCYINDIVIDUAL AGENCY, IF ANY	2 5
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# **Chapter 5**

# Planning & Implementation

# **Preparation of Children & Families towards Family Strengthening**

# 1. Handout 1: Overview of Activities for Preparing Children

S.No.	Name of Activity	Purpose	Quick Descriptions	Practiced/ Reference Shared in session
1	Expressing Emotions	Helps in expressing emotions	These are quick questions which help caseworker to dive deep helping child expressing their feeling	Post the session
2	STOP, THINK & SPEAK TECHNIQUE	Anger Management	Practice the STOP, THINK, SPEAK Technique with the children to control anger. (ie, tell the children to STOP and take some calming breaths, then guide them through thinking about possible solutions, and finally discuss some possible ways to respond.)	Post the session
3	Recognizing When We Have Been Angry	Anger Management	This worksheet is another good technique which enables a child to reflect on 3 times he/she got angry looking back on how he/she could have acted differently	Post the session



	•			
4	Helicopter View	Problem solving	When you are in a tough situation, imagine you are in a helicopter. You expand your view of what's going on. Picture yourself high above the situation. see another person's point of view, see new solutions that you didn't see before	Post the session
5	Blowing Bubbles	Stress relieving/Anxiety	Children can learn deep breathing skills by using bubbles. Deep breathing is an excellent way to manage anxiety, and the idea of blowing bubbles can make this easier and more fun for children to learn and practice.	Practiced- During the session
6	Role Play/ Scenario Based Questions	controlling emotional outburst	Through role-play and provind scenarios based on questions and offering choices. Child learns practice their behavior to avoid emotional outburst.	Post the session
7	Expressing Emotions through Art	Expressing complex emotions through art	This helps explore more about themselves, their family, explore a memory and also is a Good activity for healing from grief.	Post the session
8	Book Suggestions	For story telling	4 book references shared for inculcating positive emotions.	Post the session



9	Make a Worry Box	Expressing fear, anxiety	Help the child write, draw, paint, cut out of magazines all of their worries about her family.  When the child is ready, destroy or get rid of the box in an appropriate way. (eg. throw away, burn, step on etc.) to symbolize getting rid of the worries.	Post the session
10	Role Model Wall/ Poster	Helps to build resilience/ ability to tackle difficult situation and develop positive self-esteem	about role models who have shown resilience in	Post the session



11	Gratitude Journal	Inculcating Gratitude, promoting positive emotions and build self-esteem	Journaling refers to taking stock of 'emotions'  it can be done in many ways  Weekly gratitude journal  Color in all the positive emotions -  Fill a gratitude jar with everything you're grateful for  Write a letter to someone you are thankful for  Draw a portrait of someone you're thankful for	PRACTICED- During the session
12	Blow-up Balloon	Help in releasing difficult emotions like sadness, anger, fear etc	Blow up a balloon, and tell the child to imagine the balloons as some of the feelings they have. The feelings have not been expressed and they are getting bigger and bigger inside of your heart. Some of the feelings are those of sadness, anger or fear.	Post the session
13	All About My family	Building trusting relation with caregiver	child fills up the worksheet (writes/ draw) which has some questions about their family	Post the session



## 2. Handout 2: Reference Worksheets for Practice Activities

# 2.1: Expressing Emotions:

# 1). Identify your emotions.

 What are you feeling...angry, hurt, worried, guilty, insulted, jealous, or another emotion?

# 2). Analyze why the situation bothers you.

- Did something turn out differently than you had hoped or planned?
- Did someone you trust let you down?
- Are you concerned about how others will react to what happened?
- Is something else that was upsetting you earlier the real reason you are upset?

# 3). Analyze the effect the situation is having or can have on your life.

- What does the situation mean to you? What are the probable consequences on your life?
- Are the consequences serious and long lasting or just momentarily disappointing?

# 4). Decide what you can and cannot change.

 You can always change your reaction even if the rest of the situation is out of your control.

# 5). Choose a positive way to react.

- If, for example, you failed a test, a positive reaction is to study harder for the next one.
- If you could not make a basket the last time you played basketball, a positive reaction is to practice more.

# 6). Think of something positive you can learn from the situation.

Positive things you could learn might include a way to keep the situation from repeating
or the recognition that you are improving your ability to handle disappointment or
frustration.

#### 2.2: Expressing Emotions through Art -

Purpose: This activity helps to express child's emotions through ART - helps explore more about themselves, their family, explore a memory and also is a Good activity for healing from grief

## **SELF-DRAWING**

Ask the child to draw him/herself. This may give you an idea about the image the child has of him/herself. Points for Case worker:

- Pay attention to how the drawing is on the paper: is it very small or big considering the
- size of the paper?
- Does the picture make a happy or sad impression to you?
- Look at the facial expressions, and if there are none, explore the reasons
- Is the drawing complete or incomplete?
- Ask the child to explain the drawing to you, noting these items.

#### **FAMILY DRAWING**



Ask the child to draw their family or their family within the children's home. Points for Case worker:

- Pay attention to how the child draws themselves in the family: are they close or away
- from the rest of the family?
- What activities are the family engaged in?
- Does the drawing look happy or sad?
- Is every member in the drawing, and if not, why not?
- Is there anything unusual in the picture?
- Again, ask the child to explain the drawing to you.

#### **DRAW A MEMORY**

Ask the child to draw a memory that they have about their life; let the child choose which one. It is very interesting to see which memory the child chooses to draw. Or, you may ask them to draw a particular memory. Points for Case worker:

- Why did the child choose that memory to draw?
- What happens in the memory drawing?
- Is it happy or sad?
- Ask the child to explain the drawing to you.

#### **Drawing for Healing**

Drawings can be used in the healing process to allow the child to tap into emotions that have been buried or hidden, and express feelings that are difficult to talk about. Introduce the technique to the child with something like, "Drawings allow us to use pictures instead of words, and sometimes drawings can say more than our words. You do not need to be an artist; anything you do is fine. After you have drawn something, we can talk about your drawing." Begin with Introductory Drawings which are unrelated to the child's situation, but are designed to make the child feel comfortable with the materials and with creating drawings in this setting. The topics can be general such as pictures of animals, favorite foods, a flower, etc.

When the child seems ready, move on to Drawings with Direct Meaning - ask the child to make a picture of something specific such as a stressful situation, a dream for their future, a bad memory, loving or difficult relationships, etc. When completed, ask the child questions such as:

- Can you tell me what you have drawn here?
- What does this mean to you?
- What feeling does the drawing give you?
- How did you feel making it?
- What part of the picture would you like to change?
- Can you give a title to your work?

<u>A Drawing Journal</u> can be used daily, just during counseling sessions, or whenever needed. Drawings can include real life scenes and objects, or they can be more free and abstract to symbolize feelings. Not all drawings are meant to be discussed or kept. One activity that can be of great benefit is to destroy/dispose of a picture that is associated with negative emotions. This action can be a great emotional release.



**Practice Session: Expressing Emotions** (5 minutes): 'What are you feeling', purpose: fun way to understand different kind of emotions - apt for young kids *Instructions*:

- The participants divided in pairs, face each other
- One participant is handed the print-out of the emotion card (same as on slide)
- The participant enacts the emotion on the card and other participant must guess it
- Once the participants complete the process the trainer will ask 1 or 2 participants to share with the larger group how they felt about this activity - was it hard to enact and guess certain emotions.

Sometimes the emotions the child is feeling are masked under a different emotion e.g. the child might be showing anger but might be hurt inside or the child is misbehaving in class and troubling everyone but is very scared due to his learning issue and using misbehavior as a coping mechanism. Hence, it will be important to not judge the emotions of the child at their face value. One should always understand the situation the child is in without labeling or judging the child. Try to talk to the child - dwell deeper.

Addressing Emotions: the goal of the entire process is for the child to be able to express her/his emotions freely without being labeled/judged or prompted. The case manager should focus on:

- Engagement at each step is very crucial while working with children & families. Particularly while engaging with children, its critical to provide:
  - Space: Provide a safe & inclusive space for child to express their views
  - Voice: Able to express their views freely
  - o Audience: Child's views must be listened to
  - o Influence: Ensure that child's views are taken seriously & acted upon when appropriate
- Listen, listen, listen to the child's views, hopes and hesitations.
- Communicating honestly with the child throughout the process it helps them understand what to expect at each step. Establish predictability in the process for children so they know what to expect.
- Assuring children that they are valued by those around them. This sends the message that his/her feelings matter.
- Assuring children that their safety is paramount AT EACH STEP!
- Guiding children & their parents to resolve differences this is a part of the process of family strengthening.
- Healing the pain of the past death of mother, change of parents' attitude.

# 2.3: STOP, THINK & SPEAK TECHNIQUE - Managing Anger

It is normal to feel angry from time to time. It happens to everyone. But when you're angry you might say or do bad things that you wouldn't if you were happy.

- Ask the child to demonstrate what they look like when they're angry.
- What are some things they say when they are angry? Are these things they would say when they are happy or only when they're angry?



- How does your body feel when you are angry?
- Explain that it is important for them to recognize what makes them feel angry. Invite them to list some things that make them angry.
- It is normal to feel angry, but it's not ok to be mean, break things, hurt others or hurt yourself.
- Instruct the children in the STOP, THINK, SPEAK Technique, which can be used when you're feeling angry and might lose your temper.
- STOP, take some deep breaths and think some calming thoughts. Then when you're feeling calmer, THINK about what is making you angry along with some solutions to the problem. Finally, SPEAK to address the problem.
- Practice the STOP, THINK, SPEAK Technique with the children to control anger. (ie, tell
  the children to STOP and take some calming breaths, then guide them through thinking
  about possible solutions, and finally discuss some possible ways to respond.)
- What are some other things you can do when feeling angry? Brainstorm strategies with child and write ideas on chart paper.



#### 2.4: Recognizing When We Have Been Angry -

Purpose: This worksheet is another good technique which enables a child to reflect on 3 times he/she got angry looking back on how he/she could have acted differently.

Instructions: Ask the child to draw/share verbally or write down three times when they got angry, that looking back on it, they wish they hadn't:

What happened?	How could I have acted differently?



# **2.5: Helicopter View** Source: Counsellor Kerl <u>LINK</u>

Purpose: Helps in problem solving in tough situations for older children

Instructions: When you are in a tough situation, imagine you are in a helicopter. You can rise above to expand your view of what's going on. When you are up in the air, you see more than you can while standing on the ground. Picture yourself high above the situation. What else can you see now? Can you see another person's point of view? Can you see new solutions that you didn't see before?

My view of the situation	Other person's view of the situation
Something I see now that I didn't see Before.	The choice I will make now

## 2.6: Blowing Bubbles:

Purpose: Children can learn deep breathing skills by using bubbles. Deep breathing is an excellent way to manage anxiety, and the idea of blowing bubbles can make this easier and more fun for children to learn and practice.

Instructions: Demonstrate and have children use bubbles while focusing on how they breathe to create a big bubble. Also, emphasize how this impacts their body and how it can train the body to feel more relaxed and to help them not to be so worried or nervous. Additionally encourage the children to pop the bubbles like imagining they are 'stressors'. Kids can practice their deep breathing skills even when they don't have the bubbles on hand.

## 2.7: Role Play/ Scenario Based Questions

Source: Anger Management Workbook for Kids, Samantha Snowden (2018)
Purpose: Helping child practice controlling emotional outburst - anger through role-play & scenarios which will help them to practice the skill

Instructions: **Role-Play** Provide situations which might trigger difficult emotions (e.g. argument with parents/ sibling)

- Explore particular triggers what could have caused it?
- Encourage child to practice saying 'stop' to emotional outburst instead think of positive
  ways of reacting e.g. listening other's point of view, putting your point calmly or
  sometimes politely walking away from situation explaining other person you would need
  time to calm down and think about the situation and comeback for discussion.



**Scenarios and their outcomes:** Work through the scenarios provided here that typically lead to anger, and discuss the best option from the three possible responses for each one. Discuss why the other options are not healthy. Continue with other scenarios if desired.

I have been blamed for something I didn't do.

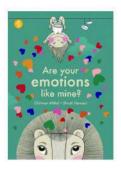
- 1) I am going to get angry and behave badly.
- 2) I am never going to do anything again.
- 3) I am going to explain that I am upset because I didn't do it.
- 4) I can't do anything new.
- 5) I am going to cry and get angry.
- 6) I am going to sulk and give up.
- 7) I am going to talk to someone and learn how to do it.

My friend has borrowed something and hasn't given it back

- 1) I am going to get angry with them and demand they give it back.
- 2) I will never talk to my friend again.
- 3) I am going to explain that I am upset and would like to have it back. If that doesn't work, then I will talk it through with an adult.

## 2.8: Book Suggestions

- 1) Are Your Emotions Like Mine? by Chitwan Mittal and Shruti Hewani
- 2) How I Feel by Varsha Seshan
- 3) When Sadness Is at Your Door A powerful approach to seeing sadness as a visitor that helps kids through the feeling with a series of activities etc
- 4) Hindi Books: वह लड़की जो कर सकती ह Story of young girl Martha
- 5) मैं आपका आभारी हँ Book on gratitude towards small things in life









# 2.9: Make a Worry Box - Write, paint etc-

Purpose: Helps the child to express their fear worry in a safe environment and learn to deal with them

Instructions: Help the child write, draw, paint, cut out of magazines all of their worries about her family. Once all of the worries are in the box, have the child close the worries in the box and put the box away. Every once in a while, address the worries in the box and see if they are still worries. You can involve the parents to participate in the process (first as observer, then conducting the activity with the child). When the child is ready, destroy or get rid of the box in an appropriate way. (eg. throw away, burn, step on etc.) to symbolize getting rid of the worries.



#### 2.10: Role Model Wall/ Poster:

Purpose: Helps to build resilience/ ability to tackle difficult situation and develop positive self-esteem

Instructions: Together with the child, research and learn about role models who have shown resilience in different fields such as sports, science, art, or community leadership. Create a visual "Role Model Wall/ Poster" with pictures, quotes, and key achievements of these people. Regularly discuss what makes these people resilient and how the child can apply similar principles in their daily life.

## 2.11: Gratitude Journal:

Purpose: It helps to build a child's resilience/ ability to deal with difficult situations, improve their self esteem, help build important social skills while also encouraging positive emotions.

Instructions: Ask the child to fill each day of week (shown below) with something positive that might have happened that week. This can be drawing or writing.



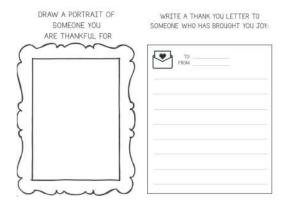
Ask the child to fill the Gratitude jar (below) with positive thoughts. Note it can be an actual jar as well.



FILL THIS GRATITUDE

Draw Portrait/ Or write a letter to someone you are thankful for





## Color the Positive Emojis

COLOR IN ALL THE POSITIVE EMOTIONS ON THIS PAGE:



# Practice Session to build coping skills referring to the activities indicated above (2.2 - 2.11)

**Build Coping Skills:** referring to some of the above indicated activities, let us practice building coping skills which can be utilized to address the emotions.

- A) Blowing Bubbles: The trainer will practice this activity with the participants -
  - The trainer will provide participants few bubble stick toys to make bubbles
  - Trainer will instruct the participants to take deep breaths and blow into the stick releasing stress/anxiety or negative thoughts they might be having.
  - The trainer will ask the participants to help each other to pop these bubbles to burst the 'stressors/negative thoughts' (give 1-2 minutes for the activity)
  - Once completed, the trainer will ask the participants "how did they feel about the activity? let 1-2 participants share their responses.



The trainer will sum-up by concluding Children can learn deep breathing skills by using bubbles. Deep breathing is an excellent way to manage anxiety, and the idea of blowing bubbles can make this easier and more fun for children to learn and practice.

## B). Role-play & Scenario Outcomes

- Role-Play Trainer will provide situations which might trigger difficult emotions (e.g. argument with parents/ sibling)
  - Explore triggers what could have caused it?
  - Encourage child to practice saying 'stop' to emotional outburst instead think of positive ways of reacting e.g. listening other's point of view, putting your point calmly or sometimes politely walking away from situation explaining other person you would need time to calm down and think about the situation and comeback for discussion.
- Scenarios and their outcomes: Trainer will share with participants Work through the scenarios provided here that typically lead to anger, and discuss the best option from the three possible responses for each one. Discuss why the other options are not healthy.
  - 1) I have been blamed for something I did not do.
    - a) I am going to get angry and behave badly.
    - b) I am never going to do anything again.
    - c) I am going to explain that I am upset because I didn't do it.
  - 2) I cannot do anything new.
    - a) I am going to cry and get angry.
    - b) I am going to sulk and give up.
    - c) I am going to talk to someone and learn how to do it.
  - 3) My friend has borrowed something and has not given it back.
    - a) I am going to get angry with them and demand they give it back.
    - b) I will never talk to my friend again.
    - c) I am going to explain that I am upset and would like to have it back. If that does not work, then I will talk it through with an adult.
- C). Encouraging the child to draw to express feelings that are difficult to express through words. These include: **self-drawing, family drawing, memory drawing.** The case manager can ask provided followup questions to gain insight on the reason behind the drawings children create
- D). Use **Books & Storytelling** to talk about stressful and everyday events (*refer Book Suggestions in Training Aids document*). Stories can help children relate to characters that are in stressful situations and learn how to work out their problems. Some suggested books for children include
  - i. Are Your Emotions Like mine? by Chitwan Mittal and Shruti Hewani
  - ii. How I Feel by Varsha Sesha



iii. When Sadness Is at Your Door - A powerful approach to seeing sadness as a visitor that helps kids through the feeling with a series of activities etc

iv. Hindi Books: वह लड़की जो कर सकती ह - Story of young girl Martha

E). **Gratitude Journal:** An activity for practicing one of the techniques (10 minutes) Trainer will ask the participants to either *draw a picture of someone they are thankful for or write a brief letter to someone they are thankful for.* Trainer will give a few minutes. Trainer will invite a few participants to share if they feel comfortable to do so.

## F) Blow-up a balloon

Purpose: Helps to express feeling and release stress

Blow up a balloon, and tell the child to imagine the balloons as some of the feelings they have. The feelings have not been expressed and they are getting bigger and bigger inside of your heart. Some of the feelings are those of sadness, anger or fear.

What would happen if you continued to blow up the balloon? (it would burst). You could say to the child, "You were upset, but now you are angry (blow up the balloon more), now you are really mad (blow more), you feel like hitting someone or something and shouting" (blow up more, the balloon may burst).

Now, blow up another balloon. Tell the child to imagine a situation where they were upset with their friend because s/he did not come yesterday as promised and made you wait for hours. "The next day you talked to your friend about how upset you were and felt better." (The trainer should symbolize this by not blowing the balloon any further, but letting it stay the size it was.) "As you talk more and more with your friend, you realize that s/he had to rush to the hospital because his/her younger sister had hurt herself badly. The anger goes away (Let the air out of the balloon slowly.)

After this demonstration you could ask the child to close their eyes and imagine the balloon. This is their balloon. It is filled with feelings of sadness, intense anger and fear. "These feelings are getting bigger and bigger, but then you find someone to talk to, or you tell yourself you are good. Take a deep breath. Relax. The balloon starts getting smaller because air is slowly going out of it. You relax and talk, you feel good. All the feelings that hurt are becoming smaller. Eventually they become so small that the balloon becomes limp and is blown away by the wind. Feel the balloon blowing away. Feel light as if a weight has been lifted. Relax and open your eyes. You are feeling so much better."

Be sure to provide opportunities for children to explore their feelings and release them.

## 3. Handout 3: Case study to practice the learnt skills

## Case study of Rama (For Practice session)

When preparing and strengthening the child, we want to focus on several critical items:



- Helping them work through the impact of past experiences and trauma.
- Teaching them how to express emotions in a healthy manner.
- Guiding them to develop coping skills so they can tackle the stresses of life today as well as into the future.

Rama (11) lives with her father, Mohan and step-mother, Sarita along with her step brothers Mahesh (2) and Suresh (twins).

Mohan remarried Sarita after the demise of Rama's mother due to terminal illness. Rama still misses her mother and feels neglected by Sarita and often feels she isn't loved by her father since the birth of her step-brothers. Mohan keeps very busy with his tea stall and in the evenings when he comes back, he is often very tired and likes to play with Mahesh & Suresh. Rama feels that her step-mother is too occupied working as house help during the day and asks Rama to help out with household work and caring for young siblings or study, due to which she is unable to play with friends as much as she would want. Rama's school grades have dropped in the past year and she has lost interest in studies. She often has arguments with Sarita who feels Rama has become rebellious, doesn't listen to her and is often comparing herself to her toddler brothers and how they get all the attention. She has twice attempted to run-away from her home. Once she was brought back home by the teacher in the area who saw Rama loitering around.

In a recent argument Rama informed the caseworker that Sarita told her that she was fed up with her & would get her married as soon as she turned 18. She ran away and was found unattended at a bus station by the Child-line worker who presented the case to CWC.

Saddened by the situation Mohan expressed that he loves Rama and would want her to stay with the family. However, he is very concerned about Rama's safety and was having second thoughts if it would be better for Rama to stay in an institution. Sarita feels guilty about what she has said which led to Rama running away and stated that she only said this as Rama wasn't listening to her and was loitering around with friends. Rama shared that she misses the time when her father and step mom would spend quality time with the family. They would go out for picnics, she would get presents and a lot of attention. Rama said that she loves her brothers but since their arrival the parents do not pay attention to her. Her step mother would help with school work which stopped as she started working and when she was home she was with the siblings.

After speaking to child and family and the SIR conducted by the Childline worker the following was recommended:

- 1. Relationship work between Rama and her parents which includes parenting support
- 2. Educational tuition support for Rama
- 3. Connecting family to PM Awaas yojna to address the living condition as the space was very cramped
- 4. Exploring community support for family parent groups, CPC support to deal with any CP matters



CWC ordered the child to stay in the family home with planned supervision and intervention by the Childline caseworker to strengthen family ties ensuring Rama's safety is paramount.

## Instructions for the trainer

- Read the case study for the participants
- Divide the participants in groups of 4 or more depending on the size of the group.
- Distribute: Handout (refer Case Study of Rama in session 12 Training Aids) to each group.
- The participants must answer the following questions:
  - What approach they would choose to prepare Rama: Strength-based Approach or deficit-based Approach. Identify key-strengths.
  - What are Key emotions Rama is feeling? Use the feeling card provided to circle?
  - Role play: Practice any tool (learnt today) you are confident to address any 1 emotion. (should include: practice how case manager will facilitate the discussion with Rama who is very overwhelmed) - use Addressing emotions key points & Handout (building coping skills activities)
- For the role play, the trainer will let the group decide amongst themselves who will play which role (Roles: Child: Rama, Childline Worker & 2 facilitators who will take notes, facilitate discussion, and share the over-all points of discussion in a larger group)

Once completed, the trainer will invite the participants to share. The facilitator of the group's shares responses to question 1 & 2 and also what tool they practiced and their experience, talking about their observations from the role-play.

Referring to Rama's case study, the case manager will need to focus on the following

- *Identifying strengths:* Family wants to stay together, Rama's friendship with her peer group, Father & Step mother willing to work on parenting skills
- Encouraging and instilling hope by LISTENING: Active listening can be used to help Rama identify their own strengths and resiliency. Use metaphors/ statements to describe or identify strengths (e.g.: Rama is caring, kind, and empathetic, she can share, take turns, and can compromise, she puts effort into making friends and keeping them etc.
- Focusing on solution versus problems: focusing on strengthening relationships within the family, developing parenting skills & developing resilience with Rama. Resilience helps children navigate these stressful situations. When children have the skills and the confidence to confront and work through their problems, they learn that they have what it takes to confront difficult issues.

'What are some key emotions Rama might be feeling?' add the following if not already mentioned:

• Confusion and Anger, Hurt- Rama may not really understand why the affection of her parents changed after the birth of her step-siblings - why did they stop spending quality



- time with her? Why did both parents suddenly get so busy with work and then taking care of the kids? She may even be angry with them for doing so.
- Fear & Anxiety Rama may worry that her step- mother and father might not be able to care for her at home. With recent arguments with step-mother and seemingly her father giving up on her, she fears she will be neglected further. This reflects in her school performance which has suddenly dipped.
- Sadness & Grief There is sadness of being neglected and some amount of grief with her loss of mother who she has been remembering recently more often with the change in circumstances.
- Jealousy Rama struggles while realizing she is no longer the center of attention; she has feelings of bitterness & envy towards her younger siblings.

The goal of the entire process is for Rama to feel settled into her family home. The case manager should focus on:

- Engagement at each step
  - Space: provide a safe & inclusive space for Rama to express her views.
  - Voice: Able to express her views freely.
  - o Audience: Rama's views must be listened to.
  - o influence: Ensure that Rama's views are taken seriously & acted upon when appropriate.
    - Listen, listen to Rama's views, hopes and hesitations.
    - Communicating honestly to Rama throughout the process it helps her understand what to expect at each step. Establish predictability in the process for Rama so she knows what to expect.
    - Assuring Rama that she is valued by those around her. This sends the message that her feelings matter.
    - Assuring Rama that her safety is paramount.
    - Guiding Rama and her parents to resolve differences this is a part of the process of family strengthening
    - Healing the pain of the past death of mother, change of parents' attitude.

Let us now focus on certain other key points which are important incases when child in process of transitioning from institutional care to Family, r

## 4. Handout 4: Well-planned Move and Unplanned Move

Cut outs for practice activity 'Planned and Unplanned Move'

Assures child that he is valued by those around him

Predictability for child; knows what to expect

Child loses a sense of who they are

Assures the child's safety is paramount and his participation at every step



Mitigation of immediate concerns & Red Flags under the 5 well being domain

Child avoids the risk of other attachments

Gets the message that they are replaceable; their feelings don't matter

Timely & quality assessments (ICP, SIR, TS) of child & family needs lead to better intervention on all 5 well being domains

Sends message that his feelings matter

Absence/incompletion of assessments can mislead the required intervention

They decide that they either need to be in charge and controlling all the time or just give up

Importance given to family strengthening process – through pre-placement visitation with family

Child lives in fear that their world can change at any time

Tend to miss/skip immediate concerns & Red Flags which may hinder the move towards the placement

Transfer child's attachments from his CCI caregiver to parent/ other key members in the family

Limited supported system

Haphazard

Identification and activation of resources

Process involves time & patience

Absence of family strengthening may result in placement disruption

## **Practice Session: Well-Planned Move and Unplanned Move.**

In order to understand the difference between A Well-Planned Move and Unplanned Move of a child from CCI/ Institution to family, trainer will conduct the following activity with the participants to get participants involved and move around

## Instructions for the trainer:

- Prepare one poster for Well-planned and one for Lack of Planning.
- Have each statement typed separately on a small piece of paper (prepared ahead of the session) - refer to handout (refer handout cut outs for activity: Planned and Unplanned Move in Training Aids document)
- Now ask a volunteer (or select someone) to read one (they could pull a piece of paper out of a bag/basket) and place it on the poster either marked Well-planned Move or Lack of Planning (Distribute handout printout)



• Keep going until all statements have been placed. This will force the group to do some thinking about placement of the statements too.

A well-planned move shows the child that:

- There is some predictability in his/her world. The move will be planned so the child knows what to expect along the way. (Child participation is a MUST!!)
- He/she will not be moved abruptly and without warning. He/she can relax instead of guarding himself.
- The people he/she values, such as his parents, siblings and other family members also value him/her. They understand the complexities of moving such as a new school and friends, and will comfort him/her when he/she feels confused
- Transferring attachments from his/her CCI caregiver to his family.
- Child's feelings matter. Child matters.

Lack of proper transition planning and preparation (unplanned move) can have a negative impact on children in many ways:

- Children lose the people to whom they are attached, so they decide not to risk other attachments.
- Children get the message that people are replaceable.
- Children are afraid much of the time. They believe that their worlds can be changed at any moment.
- Children begin to believe that their feelings don't matter. No one really cares how they feel about leaving the home and people they love. They are not worth much.
- Children feel that adults do not have children's best interests in mind. Therefore, they will control adults as much as possible.
- Children decide that they need to either be in charge all of the time or just give up.
- Children lose a sense of who they are. Their identity formation is interrupted. They
  become easily manipulated by others. They struggle to choose life patterns that fit well,
  careers, and life partners because they do not have enough sense of self to make these
  choices.

The goal of the planned move is for the child to feel settled back into his family home as soon as possible. Life in his family is likely quite different from his life in the CCI or even different than he imagines. The case manager can explore the child's wishes, dreams, and fantasies about life in his family. What is he hoping for when he returns home? What will be different from his life in the CCI?

Let us look at the importance of having pre-placement visitation as a key aspect in preparing a child for transition. Pre-placement visits provide an opportunity for the child and family to get to know each other and for the family, child, and social worker to identify and resolve problems which occur during visits.

• The Time frame for pre-placement visiting will vary with children and with age. There is no single plan that fits all children. The amount and kind of preparation necessary will



vary according to the child's age, length of time in out-of-home care and relationship with the family and caregiver. As a guideline:

- Ages five to eight, plan on two weeks to transition from the first visit to the move.
- Age eight to twelve will likely need at least three weeks.
- A teenager might be longer or shorter than three weeks, depending on the teen's personality, confidence, and how close the new home/school matches what they are leaving behind.
- Plan out the pre placement visit schedule move forward as the child and family are ready. Do not rush.
- Give the child a written schedule of the visits and process and make every effort to stick
  to it. It can be difficult for families to accept that the number of visits varies according
  to the needs and readiness of the child, not their own convenience.
- It is important not to move the child before he/she feels safe with the new parents, and the parents have had a realistic view of the child's behavior. Whenever possible, it helps to have an extended visit, longer than a weekend, prior to moving day.

## 5. Handout 5 : What If Plan worksheet

## What If Plan

Name of the Child/ Family:

Dated:

To be reviewed next on:

## What should the Child do If he/she:

- Wets the bed:
- Wakes up at night:
- Does Not like a particular food:
- Gets scared:
- Other:

## What should the family do If the child:

- Gets Scared:
- · Gets Sick:
- Has temper tantrum:
- Wants to run away or return to CCI(IF APPLICABLE):
- Other

It is important to develop a "What If" plan with the child and parents. Trainer will encourage participants to discuss what the child should do IF . . . he/she wets the bed, wakes up in the night, does not like a particular food, gets scared, etc. Let the family know what to do if the child gets sick, has a temper tantrum, or wants to return to the children's home. This lets the child know that everyone is working together and that problems don't have to be a big deal.



## 6. Handout 6: Key Activities for Preparing Parents / Caregivers

## 6.1: Guide the Blindfolded

Material needed: Scarf/ piece of cloth (1 per pair)

Purpose of the activity: To cite the importance of parenting in a child's life. This activity will also help participants to experience the vulnerability of a child and how he/she depends on the adult in their life to protect, nurture and for their overall wellbeing.

## **Practice Session**

Instructions by the trainer:

- The trainer will divide the participants into pairs, one acting as a child and the other as parent in each pair.
- The trainer will begin by asking participants to tie a scarf or any piece of cloth on their partner's eyes to cover their sight.
- The trainer will have them walk around the room with the partner and ask the guide to describe to the blindfolded some of the things in the room they are passing. e.g. There is a window on the left side of the room which has a view of the park etc.
- After about 2-3 minutes, the trainer will call everyone back.
- Now the trainer will ask participants to share how they felt during the experience? (the guides and the blindfolded ones). Responses should include vulnerability, scared, fear, trust etc.
- The trainer will now explain that this is a metaphor for parents who must guide their young children (between ages 0-8) and that describing things to them helps them learn language while they are learning to balance, walk, and other skills.

Next, Trainer will distribute a blank sheet of paper to each person and ask participants to individually come up with three parenting skills that they believe are the most important in bringing up healthy and happy children. The trainer will explain the term 'parenting skills' to the participants in a simple way, with the help of a couple of examples, so that you get appropriate responses. Eg. Parenting skills are our ways of bringing up our children in our own unique ways - eg. avoiding punishments and only practicing positive disciplining, raising children who are ambitious, trustworthy etc.

- After a few minutes, the trainer will ask volunteers to read their three parenting skills and explain why they believe those are the most important.
- The Trainer/co-trainer will take note of all the points mentioned by the volunteers and highlight top five parenting skills which emerge during the discussion. These can include: Attachment, Positive discipline, Role Modelling, Active listening, validating feelings, Communicating care, Non-judgmental etc

## 6.2: Practicing Empathy:

## Struggles of Single Mother Kumari



Kumari lives with her 2 children Sarita (8) & Kamal (4) in a rented room. Kumari's husband abandoned them for another woman a few years ago. Earlier she had moved with her children to her father's place, a street vendor, but in 2021, her father died due to a pandemic. Kumari, who never worked, found work at a chemical factory which is about 2 hours away to support her kids.

Kumari works a 12 hour shift trying to support her son Kamal who has a disability due to which he can not walk independently and Sarita stays at home to take care of Kamal. Kumari constantly worries about her inability to provide for her children and their safety, and is desperately exploring institutional care options for her children.

## **Practice Session**

## Activity - Practicing empathy: Close your eyes & Imagine Activity (5 min)

Purpose of the activity: Before we move forward it is important to empathize with the parent/caregiver, get to know their struggles, be respectful, encourage two-way communication and take a Strength Based approach rather than Problem-Finding Approach.

Instructions: The Trainer will ask the participants to close their eyes and imagine. (Refer activity Practicing Empathy: Struggles of a Single Mother Kumari in Training Aids document). 'Close your eyes & Imagine Activity - Struggles of Single Mother Kumari'.

Now the trainer will ask the participants - What are key struggles you think Kumari would be going through? (What is her state of mind, how is she feeling).

Responses must include but not limited to:

- Kumari feels overwhelmed with all the responsibility which has suddenly crashed on her shoulders
- She might feel frustrated with her situation no support from husband/ losing father's support
- Grief death of father/ husband abandoning family
- Alone in the process
- Scared unsure of what future hold
- Uncertain of what future holds and where can she could access support/ resources
- AND MOST IMPORTANTLY she might feel like she is not a good enough parent unable to cater to needs of her children

Key Points while working with family:

- ALWAYS REMEMBER and reiterate You (the case manager) and the parents are on the SAME TEAM to support the child in achieving the best outcome.
- The child's welfare and safety should always remain paramount.
- A comprehensive assessment gives you a better understanding on family dynamics and struggles - so you can plan preparation work more effectively



## 6.3: The Bouncy Balloon Game

## Purpose:

- To build self-esteem, respect and positive self-talk of each family member
- Enhance relationship with each member and improve communication
- Allows family members to see each other outside their current roles

## Materials:

- Balloons
- Marker pen to draw feeling OR Feeling stickers



## Instructions:

- Blow up the balloons and draw or stick a feeling sticker on each balloon.
- Have everyone get in a circle and begin throwing two balloons in the air at the same time.
- If a balloon touches the ground, everyone will take turns sharing about the time they felt the emotion mentioned on balloon e.g. Tell about a time you felt proud of yourself (can take tips from questions mentioned under sample questions below).
- Continue to add remaining balloons in until everyone gets a chance.

## **Sample Questions for reference:**

Tell about a time you felt proud of yourself
Tell about a time you were helpful to someone
Tell about a time that you helped yourself feel better
Tell about a time you felt courageous
Tell about a time you were patent to someone
Say something nice to someone else in the room

## 6.4: Tangled Up In Knots

Purpose: To illustrate that there are anxious family systems where everyone feels tangled. A secure and healthy family is connected but also maintains autonomy.

Materials: None needed



## Instructions:

- Family stands in a circle facing each other.
- Everyone puts their hands in the middle or the circle and grabs someone's hand.
- Once everyone is holding hands (very tangled up) explore what this feels like.
- Now as a family they must untangle themselves without letting go of each other's hands.
- When the family has untangled, what does it feel like now to have space but still be connected.

# 7. Handout 7 for preparation of parents / caregivers (for more practice during training session or post that)

## List of Activity Handout with brief description

Anex. Sno.	Name of Activity	Purpose	Quick Descriptions
7.1	Communication Building	Build communicati on & active listening	Sit down with your child in a quiet place, Both think about 2 things you like about the other person and 2 things you would change. Form ground rules & take turns discussing.  Activity helps to clear the air between the parent & Child
7.2	Analyzing an Event	strengthen communicati on & develop empathy	Sit in a quiet place with your child. Reflect on your feelings about a particular situation or event that involves both parties.  Set ground rules before sharing. Share & discuss your feeling with the other person and the significant impact the situation had on your life
7.3	Feeling Charades	identify feelings for young children	Create feeling cards (provided) or Cut out different facial expressions from old magazines and stick it on the cards. Identify what emotion is expressed
7.4	Love Circle	Attachment & Build self-esteem	Family forms a circle. One person chooses to sit in the middle of the circle. Each person says a positive thing about the person sitting in the middle. Take turns until everyone has been in the middle and received positive compliments
7.5	Positive Discipline Techniques	Positive Discipline	When dealing with misbehavior, work to understand the child's needs. Why are they having the issue? Then, correct their behavior by addressing the need.



7.6	Time-In Technique	Positive Discipline	After behavior outburst, sit down with your child to read a book together/ or do an activity: cook together/ water plants/ artwork or go out for a walk rather than shouting at them. When child calms discuss better choices for next time, and encourage them to apologize.
7.7	Positive Reinforcement/Rew-ar d	Positive Discipline	Praise the specific act of good behavior rather than the child's character or personality. Praise can be informed by Clapping and cheering, Hugging or patting on the back Or even more effective than praise are natural rewards for good behavior.
7.8	Deep Breathing technique	Positive Discipline, Stress releasing	Teach them the simple technique of deep breathing. Repeat several times whenever you need to feel calm
7.9	Attachment	Attachment	Attachment occurs when the child's physical, psychological and emotional needs are met. Attachment is the word for a strong kind of love that is predictable and consistent. People who are well loved as a child are able to love others.

## 8: Handout 8: Communication Building

Purpose: forming a positive and healthy relationship between parents and children. This first exercise can help build communication because it allows adults and children to practice effective communication skills and active listening. Can also be used with older children.

Materials: Quiet place with no interruptions, Optional:paper. pens/ crayons

## Instructions:

- 1. Sit down with your child in a quiet place where there will be no interruptions.
- 2. Think about 2 things you like about the other person and 2 things you would change. **Optional:** You can choose to write these/ younger children can draw if required
- 3. Ground Rules to follow:
  - a. take the time to agree that you will both try your best to listen when the other person is talking, without interruptions.
  - b. You will give the other person your undivided attention
  - c. Also agree that you both will do your best to react respectfully in the discussion without becoming defensive, angry, or judgmental.
  - d. Remember: this is an exercise to strengthen communication skills.
- 4. Take turns discussing the three things about each other.
- 5. This activity helps to clear the air between the parent/Caregiver & Child/ young person.



## 8.1: Analyzing an Event

Purpose:Often, it is hard to communicate about an event that has occurred, especially if it is negative, because we may not feel the other person understands or is listening to how we are feeling wholeheartedly without judgment. This is a writing or drawing exercise that involves examining an event or situation that has occurred between adult and older child/teen. The event could be either positive or negative.

Materials: paper, pen/pencil to write or draw

### Instructions:

- 1) Sit down in a quiet place with paper and pens.
- 2) Without looking at each other's work, write 6 sentences (or draw pictures) reflecting how you feel about a particular situation or event that involves both parties.
- 3) Share or Read your sentences out loud to the other person.
- 4) Discuss your feelings with the other person and the significant impact the situation had on your life.
- 5) Take turns doing this writing (or drawing) exercise.

## 8.2: Feeling Charades

Purpose:For families to be able to identify feelings and facial expressions together.

SAMPLE EMOTION CARD FOR REFERENCE

Materials: Index cards, Markers, Glue, Magazines

Instructions: Invite the family to create feeling cards. Cut out different facial expressions from old magazines and stick it on the cards. Identify what emotion is expressed optional you can also write the emotion at the back of the card.

# angry bored confident sad curious sitty scared excited kind confident sad excited

## 8.3: Love Circle

Purpose: Explore what it feels like to be praised. The positive comments boost self-image.

Materials: None needed

## Instructions:

- 1. Family forms a circle. One person chooses to sit in the middle of the circle.
- 2. Each person says a positive thing about the person sitting in the middle.



- 3. The person in the middle does not speak.
- 4. Take turns until everyone has been in the middle and received positive comments

## 9. Handout 9: Positive Discipline Techniques

The goal of positive discipline is: Self-control, Self-discipline

When dealing with misbehavior, work to understand the child's needs. Why are they having the issue? Then, correct their behavior by addressing the need:

- Dehydration can have an impact on mood and the ability to focus and concentrate.
- Chronic Stress high levels of early stress are linked to issues with learning and behavior.
- Imbalances in Brain Chemistry have difficulty calming themselves.
- Difficulty with Sensory Processing over sensitive to sights, sounds, textures, flavors and smells.
- Teach the children to listen to their bodies. How is their engine running? (Red, blue, green)
- Often misbehavior results from children acting out on their emotions. Teach them to use their words to talk about what is troubling to them.

## Key Points in Positive Discipline

- Role model the behavior you want to see in the children
- Maintain an environment that is free from clutter and chaos
- State the rules clearly and apply them consistently
- Take care of yourself
- Four Levels of Discipline
- 1. No real danger, no threat "Give me that!" use this as a teachable moment "Look at me and give me words."
- 2. More persistent behavior "No, I don't want to and you can't make me." Give the child a voice. Offer choices or compromises.
- 3. Child losing control guide the child to calm themselves, think about what they need, and use their words to ask for it.
- 4. Aggression and violence guide the child to calm themselves. Do not try to problem solve while the child is acting aggressively. Let them know you are there for them when they have calmed down and can tell you what they need.

## **Discipline Strategies**

- Positive encouragement find good behaviors and praise them.
- Designated space (ages 2-10) send them to a space where they can calm down and think about what they need. (One minute for every year of life) Then tell the house parent what they need and receive a hug from the house parent.
- Distraction (up to age 6) Give them another activity to distract them from their inappropriate behaviors
- When you \_\_\_ then you can \_\_\_. Keep repeating as much as needed.
- Loss of privilege what you take away must be equal to their misbehavior.
- Reward reward positive behavior.
- Misuse of Discipline.



- Physical punishment is not allowed.
- Humiliating or degrading punishment is not allowed.

## 9.1: Time-In:

Purpose: Used as a positive disciplinary technique for promoting good behavior. Most effective when used with children in situations when a child is having difficulty in emotion regulation.

Instructions: After a behavior outburst, sit down with your child to read a book together/ or do an activity: cook together/ water plants/ artwork (if interests the child) or go out for a walk rather than shouting at them or sending them for time-out alone. When your child has calmed down, discuss better choices for next time, and encourage them to apologize for their behavior.

## 9.2: Positive Reinforcement & Reward

Purpose: Positive Disciplining Technique to reward the good behaviors you want to see from your child.

Instructions:

- Praise the specific act of good behavior rather than the child's character or personality.
   Example: If your child shows concern for someone who might be hurt or seem sad, point out what they did right (like asking if their friend was OK). Be sure to emphasize how the recipient of their kindness appreciated their gesture.
- Praise can be inform of Clapping and cheering, Hugging or patting on the back Or even more effective than praise are natural rewards for good behavior e.g.s. If your child helps you prepare a meal, you can let them decide on what meal to be cooked OR if your child shares their toy with their sibling, you can allow them to stay up a bit later to continue playing or give them a small new plaything the next day.

## 9.4: Positive Discipline Technique Case scenarios for practice

Below are two case scenarios. As the casework helps the parent/caregiver towards positive parenting utilizing positive disciplining techniques.

**Scenario #1** Prisha's mother caught her again writing letters to her "boyfriend" from school. She has been told several times that this is not allowed, but she isn't listening.

**Scenario #2** Aarush doesn't pay attention during tuition and always bothers the children around him by talking to them and playing with his supplies. Sometimes he even gets up from the table to talk to a friend on the other side of the room. The coaching teacher called his parents to tell them about his behavior, and is expecting improvement.

# Following are Key Points in Positive Discipline which the Case worker can take note of while working on the case scenarios:

- Understand the child's need...why are they having the issue?
- Teach them to use their words to talk about what is troubling them



- State the rules clearly and apply them consistently
- Give positive encouragement find good behaviors and praise/reward them
- Use designated space (ages 2-10) where they can calm down and think about what they need.
- Distraction (up to age 6) give them another activity to distract them from their inappropriate behaviors
- When you \_\_\_\_, then you can \_\_\_\_.
- Loss of privilege what you take away must be equal to their misbehavior

## 10. Handout 10: Attachment:

Attachment occurs when the child's physical, psychological and emotional needs are met. Attachment is the word for a strong kind of love that is predictable and consistent. People who are well loved as a child are able to love others.

This attachment is extremely influential on:

\*how the child views him/herself

\*how the child relates to others

What has been already learnt in earlier part on child preparation is that one of the key activities which can be taught to the parents to ensure they are able to help their children navigate big feelings is modeling healthy coping skills

The trainer will discuss some tools & techniques which can be taught to the parents to revive the strained relationship with children, referred as tools & techniques for reviving relationships'.

Strengthen bonding and attachment through play, family activities and appropriate touch and affirmation, as bonding and attachment are the foundations of a healthy adult/child relationship.

- Validate and help to manage your child's feelings: For example, teaching your child that
  anger in itself is not a problem, but we do need to learn how to acknowledge and
  manage it in a healthy way. Staying with an upset child and guiding them in managing
  their emotions will help them learn how to do that on their own and will strengthen
  attachment
- Listen with full attention; help them give a name to their feelings; tell them: "Give me words because I am listening to what you need."
- Be available: Being mindful of schedules so that the parent is regularly available to talk and spend time with his children. We need to make space for daily play and interaction, away from our phone or other devices.
- Focus on the positives: Create positive ways to celebrate their accomplishments. Giving them constant reinforcement will help build relationships of trust and overcome the daily life challenges



- Communicate care & love: Respond sensitively, appropriately, and consistently to the child's needs. Show smiling eyes and a calm voice. Tell the child something special about themselves every day
- Spend Time: Spend quality time. learn about and get involved in what interests them.

Note: Share handout with participants on Attachment at the end of the session for self-reading and reference (refer handout on attachment in chapter 5 reference document)

## **Practice Session for Attachment**

The trainer will share some activities which parents and child can do together to strengthen their attachment as explained below:

Activity to be conducted with the participants (20 min):

**10.2: The Bouncy Balloon Game:** To build self-esteem, respect, and positive self-talk of each family member. It enhances relationships with each member and improves communication and Allows family members to see each other outside their current roles. (for description refer 6.3 The Bouncy Balloon Game described in previous pages of this chapter)

**10.3: Tangled Up In Knots**: To demonstrate that there are anxious family systems where everyone feels tangled. A secure and healthy family is connected but also maintains autonomy. (for description refer 6.4 Tangled up in Knots described in previous pages of this chapter)

## 10.4: Dealing with Self Stress

Also, the case manager must reinforce to the parents that It is important to find ways to relieve your stress and manage if they are feeling upset or angry. Lots of things, not only children's behavior, can make them feel stressed – from family relationships to managing a work-life balance, health, housing, poverty, unemployment and much more. They want to be the best parent they can, but being stressed is stressful! The trainer can share some of the recommendations that include:

- Making time for self-care
- Do not overlook success: If you have coped well with something difficult, be proud of what you've achieved. Celebrate your children's successes too
- Accept support/ getting help: This may be from your family, a friend or neighbor. Or seek some outside support/ professional help
- Be as prepared as possible. Parenting can of course be stressful at certain times, so consider ways of dealing with this in advance

## 11. Handout Case studies for Practice post training

Case story of Rama For Practice session)



Rama (11) lives with her father – Mohan and step-mother Sarita along with her step brothers Mahesh (2) and Suresh (twins).

Mohan remarried Sarita after the demise of Rama's mother due to terminal illness. Rama still misses her mother and feels neglected by her step mother Sarita and often feels she isn't loved by her father since the birth of her step-brothers. Mohan keeps very busy with his tea stall and in the evenings when he comes back, he is often very tired and likes to play with Mahesh & Suresh. Rama feels that her step-mother is too occupied working as house help during the day and asks Rama to help out with household work and caring for young siblings or study due to which she is unable to play with friends as much as she would want. Rama's school grades have dropped in the past year and she has lost interest in studies. She often has arguments with Sarita who feels Rama has become rebellious, doesn't listen to her and is often comparing herself to her toddler brothers and how they get all the attention. She has twice attempted to run-away from her home. Once she was brought back home by the teacher in the area who saw Rama loitering around.

In a recent argument Rama informed the caseworker that Sarita told her that she was fed up with her & would get her married as soon as she turned 18. She ran away and was found unattended at a bus station by the Child-line worker who presented the case to CWC.

Saddened by the situation Mohan expressed that he loves Rama and would want her to stay with the family. However, he is very concerned about Rama's safety and was having second thoughts if it would be better for Rama to stay in an institution. Sarita feels guilty about what she has said which led to Rama running away and stated that she only said this as Rama wasn't listening to her and was loitering around with friends. Rama shared that she misses the time when her father and step mom would spend quality time with the family. They would go out for picnics, she would get presents and a lot of attention. Rama said that she loves her brothers but since their arrival the parents do not pay attention to her. Her step mother would help with school work which stopped as she started working and when she was home she was with the siblings.

After speaking to child and family and reviewing the SIR, the Childline worker suggested:

- 1. Relationship work between Rama and her parents which included parenting support
- 2. Educational tuition support for Rama.
- 3. Connecting family to PM Awaas yojna to address the living condition as the space was very cramped.
- 4. Exploring community support for family parent groups, CPC support to deal with any CP matters.

CWC ordered the child to stay in the family home with planned supervision and intervention by Childline caseworker to strengthen family ties, ensuring Rama's safety is paramount.

## Parenting Skills: the Activity/tool card

Instructions: This activity/tool card to be provided to the participants at the beginning of the case discussion. The participants can take reference of this card and practice either any skill/



activity mentioned in this card during role-play or another parenting skill/activity which they use in their work with children/families. During the activity focus on HOW to use the selected skills.

Self-care	Celebrating success	Story-telling	Time in, not Time out
Empathetic Listening	Reinforce & Reward	Role-Modeling	Time-out
Managing own reactions (for caregivers)	Validating child's feeling	Be Available	Deep Breathing technique
Play Together/ Family-time (Create rituals)	Focus on positives	Positive disciplining - Create structure & boundaries	Communicating care & love

The trainer will share the importance of working with the family to ensure sustainability. Case managers should refer to the Assessments (ICP, SIR & Thrive Scale) for planned interventions and ensuring the needs identified are met. Case managers would need to Co-Construct (co-construct: you work in alliance with family) this involves:

- 1) Broad-Based Support network: Create a web of support for parents in the form of extended family members, informal networks, and community representatives (VCPC, CPC) that promotes safety, increases permanency options, and provides links to needed services. Ensure that the family feels supported and not overwhelmed.
- 2) Addressing on-going issues The Trainer can ask questions such as:
  - a. How can you help Mahesh and Sarita build that connection with extended family, friends and neighbors?
  - b. Who can help with the daily schedule if child care is needed for younger kids?
  - c. Who can Rama talk to if she is overwhelmed and starts having thoughts of absconding?
- 3). **Visits & Follow Up Support**: Creating a structured followup schedule in consensus with family focusing guided support to overcome challenges which might occur in the initial phase while ensuring family is taking active steps by practicing the skills learnt to revive the bond.

The trainer will talk about how to prepare the family to support the child's: (Note: This holds for transition cases as well)

- Educate parents on the behaviors they might expect from Rama in case of crisis, why it occurs, and how to manage it.
- Outward behavior is an indication of something going on inside Rama communicates what she is feeling through her behavior and actions - listen to her behavior and be curious. Be clear, consistent, and firm, avoid an angry and irritated response.



• Family & Child Preparation Checklist. It will be good practice for the Case-worker to prepare a checklist of steps to follow while preparing a child and family (Refer to Handout 6.1 from training aid doc).

The Tainer can share that case managers need to focus on the positive side of the caregivers:

- How will you guide parents to look at their strengths?
- How will you teach them about mindfulness and positive thinking
- Help them brainstorm how to celebrate the little things.

Routine follow-up, feedback, and support can enhance the preparation of the caregivers: Follow-up is a critical factor that, when provided on a consistent basis, greatly enhances the sustainability of the whole process. The visits should target direct support for household strengthening including guidance on parenting skills and child rights.

Further to that, follow Ups will also provide the opportunity for parents, child, and case-worker to identify and resolve problems which have occurred. They should be friendly, informal, supportive, and non-threatening. Remember, the case worker is part of the team focusing on the family's strengths and building on them.

Let us recall that we have already learnt in earlier part of this chapter on child preparation that transition is a process, referring to the 'Additional points for Transition Case'. Hence the preparation work in cases of transition is initiated before the placement, and it is only when the family is found READY on the basis of regular assessments (SIR, TS) and NO red flags at the time of child's reintegration (refer to family strengthening session). Additional factors that can be consider includes:

The trainer can ask the participants to read out,

- 1) Supervised/ Unsupervised visits: Plan for frequent visitation to ensure familiarity and bond is developed. These visits also provide insight to the casework on how parents would be able to manage an issue. Weekend visits/ short stays are EXCELLENT means to get a feel of the actual placement.
- 2) **Honeymoon period early in the placement:** During early weeks, the child and family will likely be on "honeymoon," where behavioral issues are minimized, so you may not hear about them at this time. If the adult or child does talk about major problems this early in the placement, it is a serious indication that you must intervene and help them.
  - Helping the caregivers to adjust expectations.
  - Remind parents to be patient and focus on building good memories
  - Review positive discipline techniques.
  - Refer to community resources as needed.
- **3). Positive parenting and guidance for child specific needs**: Families need information to help them understand the kinds of behaviors they may see once the child comes home, and practical skills for helping manage the child's behavior, (eg, learning issues, anger, bedwetting, etc.)



4). Children may compare their (new) parents to their caregiver in the CCI: This is a very common situation. Work on building attachment & trusting relationships in the initial adjustment phase. Help children maintain their identity: cultivate new habits, hobbies, interests while spending time doing what is important to them.

Work closely with the family to address the cause of original separation, ensuring answers to these questions: Why was the child placed in the CCI, and what can change so the child can return to their family home? Ensure adequate support network

- 6). Provide "What if" Plan with child & family (discussed in previous session of child preparation)
- 7). Create a child & family Preparation checklist (refer Handout Child and family preparation checklist for reintegration/F-BAC options in the Reference Document) which helps case managers to prepare both the child and the family to smoothly adjust to their new environment and living arrangements.



## Chapter 6

## Monitoring, & Followup

## **Handout 1: Case Studies**

## 1.1 Case Study of Rama for discussion:

Rama was on the verge of separation from her family when she absconded from her home as she felt neglected & unloved by her father and stepmother since the birth of her twin step-brothers. After addressing the key issues through intensive intervention and preparation process targeting on reviving the familial bond. Rama is finally settled in her family. She is happy as her parents are able to spend quality time with her. However, sometimes, the parents find it difficult to discipline her.

Rama's step-mother is waiting to hear from the daycare program regarding enrollment of her twin toddlers for child care support. At school, Rama's teacher provides guidance and support with Rama's studies as she lacks concentration and also manages her behavioral issues. Rama is also enrolled for an after-school program (extra-curricular activities) however it hasn't started yet.

The caseworker plans follow-up on Rama's & family's needs, safety & wellbeing.

- Divide the participants in small groups
- Participants will now draw inferences from the learnings so far from the session and answer questions that follow the case scenario
- Case Scenario: Distribute Handout 1.1:Case Scenario for discussion for reading. Alternatively, trainer can read out the case for the participants
- Questions for discussion:
  - What will be the mode of follow-up?
  - What background work/preparation caseworker do before conducting the follow-up?
  - Taking reference from the Key points shared in previous slide (11.8):
    - What are some key areas the caseworker would like to observe at the follow-up?
    - What questions the caseworker should be asking the child & family?
    - How can the caseworker offer guidance and support to the family to overcome identified challenges?
- All groups to share their responses in the larger group

Once, all responses are received, trainer can add-in any missed out point from responses below:

- What will be the mode of follow-up? *In-person visit with family*
- What background work/preparation caseworker do before conducting the follow-up?



- case worker will contact the daycare to enquire about the status of enrollment
- Case worker also speaks to the school teacher to enquire about Rama's educational progress, her behavior issues and support provided. Also enquire about the status of the after-school program
- o Post which the family should be updated during the visit

Taking reference from the Key points shared in previous slide (11.8):

- What are some key areas the caseworker would like to observe at the follow-up?
  - o Family's overall interaction, possibly visit during meal time or family time
  - o Parenting techniques used to manage Rama's behavior
- What questions/the caseworker should be asking the child & family?
  - o Rama:
    - How does she feel about placement, how are things going for her? Communicate Care
    - How does she spend her time with family (what activities do they engage in as a family)? What does she most like to do?
    - How is school going for her?
    - Check on any Safety Concerns? Active listening
    - What support does she require? Ensuring Child Participation

## Parents:

- How do they feel about the placement? Empathize with the caregiver
- Share 3 things which are going well and 3 things which are not going so-well (can ask follow up questions in between)
- How do they ensure Rama doesn't feel neglected and feels inclusive?
- Have there been any situations where Rama has attempted to abscond or has expressed the desire? If so, how did they handle it?
- What support do they require?
- How can the caseworker offer guidance and support to the family to overcome identified challenges?
  - Case Worker spends individual time with Rama practice behavior management techniques
  - Case worker teaches Positive discipline technique to the parents

Follow up and review should be conducted routinely with the child, family and other stakeholders to review progress, confirm service provision, identify gaps, assess whether the care plan continues to meet the needs of the child, and where necessary review and modify agreed actions.

## 1.2 Case Study for Role Play Activity:

Araadhya (14) was reintegrated with her Maternal Uncle's family 1 month ago from CCI where she lived for 4 years after the death of both her parents in an accident.



When in CCI, Araadhya always desired to stay in a family, she is a good student but is very reserved. She also held trauma of the death of her parents for which was provided counseling. She is also anemic and is provided iron supplements & nutritional support.

Maternal uncle lives with his wife (homemaker) & 2 children (Age: 2 & 7). Maternal uncle (works as operator in a factory) was linked to financial schemes to ensure financial stability.

Currently, Araadhya is settling well, she is happy to be part of the family and enjoys her time with her young cousins, however she doesn't have friends in the neighborhood. Araadhyaa also attends near-by school and is receiving a scholarship for her education. Child was referred to the nutrition program at the nearby Anganwadi - however it had not been initiated.

In a recent phone call with Maternal Uncle, he informed the caseworker that the family was doing well but they haven't received the BPL card yet. He informed Araadhya is a quiet & sensitive child and sometimes gets upset and cries at small things. Also, she is a picky eater and doesn't touch food if she doesn't like it. He also shared that as the Child marriage is prevalent in their community – the family is getting proposals for Araadhya, however he rejected the proposals and wants Araadhya to study.

Caseworker visits the family for a follow-up visit.

## **Role Play Activity Description**

- Role Play Activity (20 minutes).
  - o Divide the participants into group of 4 participants each
  - Characters for Role Play:
    - Aaradhya
    - Maternal Uncle
    - Case Worker
    - Facilitator/observer (1 group can have 2 facilitators if required): To facilitate the role play & sharing observations with the larger group
  - o Case Scenario: Distribute Handout 1.2 Case Scenario for Role Play Practice
  - o The group has to enact the visit of the caseworker to the family home
  - Trainer to complete *Handout 2 Facilitators checklist* ensuring that the group is able address all the key points.
    - Trainer can quickly review the checklist with just the facilitators before beginning the activity going through all key points
    - Trainer to provide direction to the group if the discussion goes off the track (give casework cues on points to be covered ) ex. If the case worker forgets about fixing the next followup date or conducting quick followup with service providers, the trainer can guide them
  - Trainer and Co-trainer to observe the role-play activity and can share the feedback
  - At the end of the activity, the trainer shares the checklist with group's performance on each key area with larger group (what was great, what went wrong, what was missed-out)



## Handout 2: Facilitator's Follow-up Checklist for Role Play activity practice <u>Facilitator's Checklist</u>

Key areas for followup visit	Done (✔)	Misse d (×)	Remark/Comment (How did the caseworker address each key area - share key points)
Talk to all the members of the household to understand their feelings around placement (ex. Including talking to child separately, include questions around their daily routine, their likes, dislikes, their hobbies friends, school)			
Explained the purpose of the visit to child & family (ex. Ensure child's needs addressed, Understand how family is able to cope as a unit (Review adjustments) Review access to family support services and address needs by Offer guidance and support)			
The caseworker able to adapt their communication to the age, developmental stage and abilities of the child (ex. Using child friendly language, listening skills, empathy, asking open-ended questions, while also communicating care - Ensure Child's SAFETY)			
Address any hesitation the child might have regarding the placement			
Discuss with the family, and get an update on the care plan for critical care needs of the child and how they are being addressed at home (ex. Schooling, health needs, relationship with other family members, etc.)			
Reassess safety of the child - review any Red-flags and need for change in intervention plan (ex. Understanding family's intervention on Red flags like risk of child marriage)			
Ask questions/ observe family adjustment & review family interactions (How family interacts as a unit, are there any adjustment issues notices)			
Track progress of interventions provided in All five Well being domains(Health & Mental health, Education, Living			



Conditions, Household Economy, Family & Social relationships (ex. Specific needs like health & nutrition, counseling for trauma issues, financial assistance for family, education, living condition & social and family relationship)	
Addressing any question child & family might have & Provide guidance and support to caregiver and child (ex. Positive Parenting Skills, sensitising maternal uncle on the impact of child marriage on her well-being and future, emotion & behavior regulation for child)	
Provides suggestive follow-up Action Plan to be done jointly with family (ex. devising intervention plans of the domains which require more support and plan what should be frequency of the upcoming follow-up - considering red flag)	
Discuss with child & family the process to reach out for support in case they need it	
Follow-up with service providers to ensure service delivery (ex. Follow-up with Anganwadi, PDS for BPL ration card, community leaders/CPC for risk of Child marriage)	
Documentation Conduct SIR/ICP/TS as per the schedule	
Other Remarks:	



## **Chapter 7**

## **Building Trusting Relationship with Children & Families**

## 1. Survey Activity referring to the handout 1 below:

**Activity**: Trainer will ask participants to sit in pairs, and let them ask each other how they respond to the situations mentioned in the handout 'self-assessment exercise', and then summarize the discussion from the group. (Tip- Do not overthink this; answer quickly with your first impression).

Allow a few minutes for participants to complete the exercise, then briefly review the responses together. This quick survey can be quite revealing. What are we doing right, and where are we falling short? The trainer can lead a discussion around the results.

## Handout 1 - Self Assessment Exercise

## While someone is talking, I,

SNo	Statements	Usually	Sometimes	Rarely
1	Plan how I'm going to respond			
2	Keep eye contact with the speaker			
3	Takes notes as appropriate			
4	Notice the feeling behind the word			
5	Find myself thinking about other things while the person is talking			
6	Face the person who is talking			
7	Watch for significant body language (expressions, gestures)			
8	Control fidgeting or other distracting habits			
9	Interrupt the speaker to make a point			
10	Am distracted by other demands on my time			
11	Listen to the message without immediately judging or evaluating it			
12	Ask questions to get more information and encourage the			



	speaker to continue		
13	Repeat in my own words what I've just heard to ensure understanding		

## 2. Active Listening Activity

Divide participants in pairs of two and instruct them to assign themselves as 1 (speaker) and 2 (listeners). Take all assigned with 1st (speaker) in another room and give them instruction to think of one situation or challenge that they have (personal or professional space) and talk to another person.

At the same time, the instructor will give the instruction to other group 2 (listener) to not use any of the listening skills while speakers talk to them. Tell them to cautiously use poor listening skills. Give them 2-3 minutes to talk in pairs, then follow with the sharing of experiences from both speakers and listeners. Gather responses while discussing active listening skills. The trainer will then reverse the situation in the same pairs. The trainer will instruct all listeners to practice these skills as the speaker talks to them. This helps them to identify the skills and empathize with the speaker on why it is important to use active listening skills while someone shares anything with us.

## 3. Role play to practice skills while referring to a few situations

Trainer will prepare a list of scenarios for practice sessions before the session and will use these during the activity to demonstrate the practice of active and passive listening in the 1st scenario, and open and closed questions in the second scenario, to see how these apply and impact the conversations.

Situations for role play:

- Family visit by SW Father is alcoholic: Scenario 1 The social worker visits a family where the Father is an alcoholic. The mother is finding it hard to meet the needs of the family. The father verbally abuses the mother in front of the children.
- Family visit by SW with mother, conversation about why child is not going to school: The social worker visits a family and has a conversation with the mother about why the child is not going to school.

Let's give you a chance to practice your listening skills. You are going to break into small groups and for each role play, one of you will play the speaker, one the listener, and the others will observe and give feedback.

Please allow no more than 5 people per group, and each group should have a facilitator. The small size of the group will allow for more practice time for each person. Those playing the role of observer should give honest feedback to the listener.

Ask the Participants to observe

What kind of active listening skills are used in the role plays done



