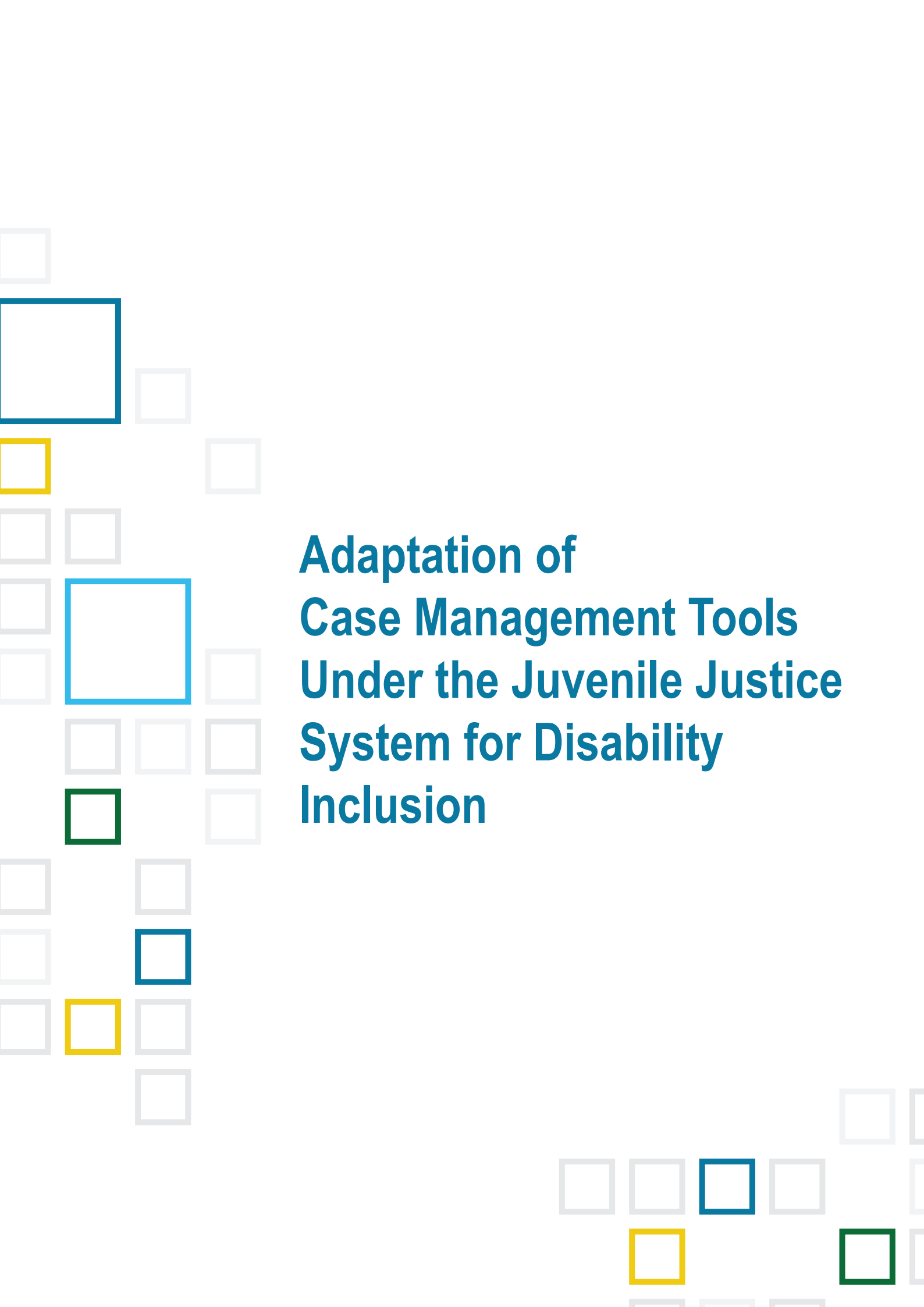


# Adaptation of Case Management Tools Under the Juvenile Justice System for Disability Inclusion





A decorative graphic consisting of a grid of squares of various sizes and colors (blue, yellow, green, and grey) arranged in a pattern that tapers off to the right, framing the title text.

# **Adaptation of Case Management Tools Under the Juvenile Justice System for Disability Inclusion**





# ACKNOWLEDGEMENTS

The Juvenile Justice (Care and Protection of Children) Act, 2015 (JJ Act) provides the legal framework that guides child protection in India. It includes tools to guide case work to support children in need of care and protection. However, the JJ Act and the processes emerging from it are not completely aligned with the Rights of Persons with Disabilities (RPwD) Act, 2016 – the umbrella legislation ensuring the rights of all persons with disabilities. The lack of consonance between case management tools with the RPwD Act in particular, has contributed to the invisibility of children with disabilities within the child protection system. This was one of the issues that the Children and Families Together – India (CAFT-India) program prioritized in 2024 a few months before it came to an abrupt close with the shutting down of USAID. CAFT -India was a consortium led by Keystone Human Services International (KHSI) with Hope and Homes for Children, Child in Need Institute (CINI), and Keystone Human Services India Association as partners, supported by USAID with match funding from the Rural India Supporting Trust (RIST). As part of the focus to create a repository of tools for case work that were adapted to include disability, CAFT-India looked at three case management tools under the JJ Act – Form 22 (Social Investigation Report), Form 7 (Individual Care Plan) and Form 43 (Case History Form). This report documents the process that CAFT-India undertook and recommendations emerging from it for adaption of these tools for disability inclusion. The intention behind this work was to start a discussion on the importance of ensuring that work at the field level includes children with disabilities. Additionally, these adaptations can contribute towards creating tools that support child protection functionaries to collect holistic, intersectional data on children at risk of family separation, including children with disabilities, and prevent them from ending up in institutions; and to ensure that children already in institutions have sustainable pathways out of them back to families.

The compilation work was undertaken between March and December of 2024. As CAFT-India ended in February of 2025, this work could not be taken to completion. However, recognizing the importance of the conversation that these adapted tools can catalyze, KHSI and KHSIA decided to finalize and publish this work. We recognize that these adaptations are limited in their scope, but they have been finalized through a participatory process acknowledging the unique realities of India. The intention of this exercise was not to have these adaptations as the end point, rather as the starting point for all of us to keep asking – how are we including ALL children in our child protection work. Most importantly, the intent of this exercise is to draw greater attention to creating and adapting tools that help the child protection system to move towards supporting children – all children, including children with disabilities, to grow up in families, and not in institutions.

We are grateful to Radhika Alkazi from ASTHA for leading the in-depth review process, Dorodi Sharma, Sangita Bhatia, Sachin Kumar, Subhadeep Adhikary, Tessa Boudrie, Mark Riley and Joseph Sebastian for their technical expertise, and the overall guidance of the team at KHSI, HHC and CINI.

We especially thank Sangita Bhatia who consolidated the adapted tools and authored this report.

We thank all experts and organizations who have supported this work by being generous with their time to provide their inputs and comments to the adaptations.

We owe immense gratitude to RIST for their continued support, without which this report would not have been possible.

We continue to be indebted to the leadership of KHS, in particular Chuck Sweeder and Genevieve Fitzgibbon, for ensuring that this valuable work was not lost and was made available to the larger public.

We hope that actors working in child protection, particularly those involved in case work, would benefit from these adaptations. Above all, we hope that this document inspires more conversation around how case work in the country can become inclusive of all children and that the recommendations in this report are critiqued, reviewed and improved upon.

# BACKGROUND

All children deserve to grow up in safe, secure and nurturing environments in their families and communities. Across the world, including in India, there is now an evident shift towards deinstitutionalization and family based alternative care. As more children at risk of family separation are supported to live with their families, and those already in institutions are reintegrated back to their families, the question that remains is how children with disabilities are being included in this transition. Available evidence shows that children with disabilities are invisible within the child protection system<sup>1</sup>. The invisibility ranges from legislative frameworks – with inconsistencies between the JJ Act and the Rights of Persons with Disabilities (RPWD) Act 2016, to operational issues where tools are not inclusive of children with disabilities.

The Supreme Court's Juvenile Justice Committee, during its ninth round of national consultations held in September 2024, had a special focus on children with disabilities. Hon'ble Justice B. V. Nagarathna, Chairperson, Juvenile Justice Committee (JJC), highlighted several aspects in her closing remarks that would go a long way in ensuring that children with disabilities would be included in the mainstream and that the child protection system would be more responsive to their needs. One of the key aspects that was highlighted was the inclusion of children with disabilities in the family-based alternative care and deinstitutionalization processes, and the importance of thorough social investigations before any decisions on placement of children with disabilities.

While significant progress has been made in promoting protection of children with strong legal and operational frameworks in place, inclusion of children with disabilities has remained a less talked about area. Part of the disconnect arises from the neglect of disability in mainstream child rights discourse, and partly from multiple government agencies and civil society actors operating in silos with very few cross-sectoral engagements.

When CAFT-India program was launched in 2023, it recognized these challenges and decided to undertake a mapping of existing tools and start a process through which these can be adapted for disability inclusion.

CAFT-India was an ambitious system change initiative that sought to contribute towards strengthening local capacity, build on the care reform momentum already underway in India, with a key focus on children with disabilities as a priority.

The program's overriding objective was that children at risk of separation from their families and communities, benefit from a supportive, protective, and nurturing family environment that helps them develop to their full potential; and that there are pathways developed for children already in residential care to be reunified with families. The consortium aimed to draw from existing care reform networks, ongoing interventions, and complement successful strategies and national programs such as Mission

<sup>1</sup> Keystone Human Services, Hope and Homes for Children, Child in Need Institute (2025, June). Rapid assessment of care reform in India with focus on Jharkhand <https://www.khs.org/wp-content/uploads/2025/05/Rapid-Assessment-India.pdf>

Vatsalya<sup>2</sup>. Meaningful partnerships with representative organizations and those with lived experience were at the core of this program and the consortium took proactive steps to include care reform networks, and civil society organizations working in child protection, including Organizations of Persons with Disabilities (OPDs), networks of young people with care experience and associations of families and parents, in decision-making processes. CAFT-India was the first intervention at this scale to bring together both the child protection and care reform, and the disability movement together.

## CAFT INDIA OBJECTIVES

**OBJECTIVE 1: Strengthening Collective Will:** Up to 11 states are supported with strengthening disability inclusive care reform strategies, with children with disabilities as a priority. CAFT- India will work collaboratively to create an ecosystem that supports Disability Inclusive Care Reform. Through these learnings, CAFT-India will support States to create momentum to strengthen national Disability Inclusive Care Reform strategy and action plan.

**OBJECTIVE 2: Technical Know-how:** Children, including children with disabilities as a priority, from Jharkhand benefit from integrated systems that support family care and disability inclusive community-based support to children and families. Learnings from Jharkhand as a model state informs broader disability inclusive care reform strategies across the country.

**OBJECTIVE 3: Capacity, knowledge (sharing and learning), and inclusion:** CSO networks, care leavers networks, association of parents/families, OPDs and academic networks are strengthened to participate in and sustain disability inclusive care reform. CAFT-India will facilitate sharing of learning and expertise to ensure disability inclusive care reform best practices are captured and the learnings influence scaling across different States as well as inform global best practices.

<sup>2</sup> Mission Vatsalya is a child protection and development scheme launched by the Ministry of Women and Child Development (MWCD) that aims to create a healthy and happy childhood for all Indian children by strengthening the child protection system and promoting non-institutional care.

# APPROACH AND METHODOLOGY

The CAFT-India team undertook the following process in its work to adapt the tools for disability inclusion:

**Creation of a tool matrix:** A repository of all tools related to the care reform process and disability inclusion were created and categorized according to purpose, target audience, the organization and year of publication, and specifically applicability to the CAFT-India project.

**Selection of tools:** The CAFT-India team, based on the consortium's extensive experience on the ground, internally selected the tools that would be required by the project immediately in the first year. Accordingly, the following three tools from the Juvenile Justice Act (JJA) were taken up for adaptation.

- a. **Form 22 - Social Investigation Report (SIR):** The SIR is a detailed assessment of a child's background and circumstances, prepared by a social worker to provide a comprehensive understanding of a child's economic, social, and psychological situation. The purpose of an SIR is to help the Child Welfare Committees (CWCs) make informed decisions regarding the best interests of the child, such as appropriate placements, family reunification, or the need for support services.
- b. **Form 7 - Individual Care Plan (ICP):** The ICP is prepared for every child in a Child Care Institution (CCI) with the aim of rehabilitation and reintegration, based on the circumstances and individual needs of the child.
- c. **Form 43 - Case History Form:** The case history form is used when a child in need of care and protection (CNCP) enters a CCI on the directions of the CWC.

**Review and adaptation of the tools:** Radhika Alkazi, a renowned disability inclusion and child rights expert with more than three decades of experience, was engaged as a consultant to review these tools and suggest adaptations to them from a disability inclusion perspective. At this stage, the existing disability aspects in the forms were identified and the aspects that would be required to be incorporated to gain a more comprehensive understanding of the child, their family, their environment, and their needs were included.

**Stakeholder review:** The CAFT-India program aimed to build consensus on the adapted tools by sharing them with child protection and disability experts, practitioners, persons with lived experience, organizations of and for persons with disabilities and others.

The SIR was shared with stakeholders at the National Learning Exchange in December 2024 organized by CAFT-India and feedback gathered in person and over email. The other two tools were shared with the stakeholders over email and feedback sought. The tools were also presented to experts at an in-person consultation in Delhi on October 28, 2025.

**Compilation of feedback:** The feedback received during the National Learning Event and later over emails, and at the consultation in October 2025 was compiled, and the adapted tools are annexed to this report.

# KEY ISSUES IN ADAPTATION AND DISABILITY INCLUSION

For child protection to be responsive to the needs of children with disabilities, it is important for the workforce to have the right case management tools. Therefore, adaptation of these tools to be disability inclusive is a significant first step in making the child protection system responsive to the needs of all children. At present the tools have a minimal recognition of disability amongst children, which reflects the disconnect between the JJ Act and the RPWD Act 2016 and other disability laws. The dissonance starts from the fact that while the RPWD Act aims to bring in a social and human rights approach to disability as enshrined in the UN Convention on the Rights of Persons with Disabilities (CRPD), the JJ Act is rooted in a medicalized approach that focusses on the impairment rather than creating overall enabling conditions that support children with disabilities to be able to access all opportunities irrespective of their impairment status. This disconnect then creates fundamental divergence in how the two legislations define disability, remove barriers within the juvenile justice system, as well as approaches to cater to the needs of children with disabilities.

These three ‘adapted’ tools reflect technical suggestions from practitioners, experts, and organizations specializing in disability inclusion and child protection, and persons with lived experience. They are by no means final or complete and are being shared with a wider audience to generate debate, discussion and eventually consensus on disability inclusion in the child protection system.

The process of making the tools inclusive raised some questions and issues on the challenges and the preparedness that may be required to fully operationalize inclusive care reform. These are presented below:

- **Deinstitutionalization as the goal:** All children, including children with disabilities, deserve to grow up in their families and in their communities. The primary goal, and the shift that is required within the child protection movement particularly when it comes to disability, is to prevent family separation. For children with disabilities, institutions are often seen as the only place where the child can get the required support and services. Therefore, there needs to be greater focus on investing in community-based support services. With strengthened communities, children who are at risk of family separation can be supported to continue living with their families; and those children who are in institutions can be supported to find safe and sustainable reintegration pathways.
- **How will disability be identified:** This is the most pertinent question in making space for children with disabilities within the child protection system. What will be the process to identify whether a child has a disability? Not all disabilities are visible and many not easily identified even by trained specialists. Even with training, frontline child protection workers are not likely to be able to identify disabilities.

Will the initial social worker visit (during the SIR process, for example) be followed up by specialist visits or referrals to government hospitals for assessment? Will a disability certificate be necessary

to provide the child with support, aids and appliances, rehabilitation, etc. at home, or during their stay in the CCI or after reintegration?

- **Terminology:** The tools use multiple terms for disabilities and children with disabilities - children with special needs, special needs children, suffering from disabilities, mental handicap, physical handicap etc. The language needs to be aligned with Rights of Persons with Disabilities Act (RPWD) 2016 to ensure consistency, reduce stigma, strengthen inter-departmental coordination and ensure full inclusion of children with disabilities.
- **Approach to disability:** All three tools include some questions on disability; however, it is from a very medicalized lens. The conditions listed include a few impairments and do not reflect the current broader understanding of disability. These questions, therefore, are too limited in scope to provide comprehensive information on making the right choices for children. Additionally, many of the disability-related questions are not aligned with the conditions listed in the Schedule of the RPWD Act. The tools need more detailed questions which delve into the circumstances of the child with disability that helps the child protection functionaries to understand the needs of the child and the support required for their rehabilitation.
- **Scope of adaptations required:** Another key area that would require further work is how much to adapt and how detailed the tools and their annexes should be. Suggestions from the group that was consulted included adapting questions from the Child Functioning Module (CFM) developed by UNICEF and the Washington Group<sup>3</sup>. Should these questions be part of the main tool or be used as a follow-up questionnaire once disability is suspected? Some were of the opinion that inclusion of these questions would benefit all children and hence should be part of the main tool, while others felt that more discussion needs to go into that decision given that people collecting the data are neither data nor disability experts. For this adaptation, therefore, we have not included the CFM but rather aligned it to the existing disability categorization as enshrined in the Indian RPWD Act.
- **Human resources:** Making the child protection system inclusive will require strengthening human resources and building capacities at various levels. All child protection functionaries will need to be trained on the policy, legal, and operational aspects of disability inclusion. Along with an orientation on disability, frontline child protection functionaries will need specific guidance ensuring that they are skilled to provide clear, justified, and rationalized inputs in the best interest of the child with disability.
- **Technical support:** Every District Child Protection Units (DCPU) should be linked to a referral team of specialists comprising rehabilitation professionals, mental health experts, sign language experts, among others to provide technical support to the DCPU, CWC, CCI staff and management, and field staff to enable identification, engagement, and support to children with disabilities at various stages of the case management process.
- **Individualized support:** For effective rehabilitation (and prevention of separation) of children with disabilities, a cadre of support persons along the lines of those in the Protection of Children from Sexual Offences (POCSO) Act would be essential to enable children and families to avail their rights and entitlements, gain access to services, and ultimately participate and engage with the system.

---

3 UNICEF. (2022, May). Module on Child Functioning: Questionnaires. UNICEF Data. <https://data.unicef.org/resources/module-child-functioning/Module>

# HOW TO READ THE TOOLS

The adapted versions of the three tools are enclosed with this report.

- a. Form 22 - Social Investigation Form (SIR)
- b. Form 7 - Individual Care Plan (ICP)
- c. Form 43 - Case History Form

**Highlighted:** The parts of the tools highlighted in yellow are the disability related questions that pre-existed in the original tools.

**Red Font:** The suggested inclusions to the tools to make them disability inclusive are included in red font. Also in red font are the explanation and rationale for the suggested inclusions. In some places these also include references to relevant parts of the JJ Act or JJ Rules to strengthen the justification.



## **Organizations and individuals who participated in our consultations:**

1. AADI
2. Action for Autism
3. Aide et Action
4. ASTHA
5. Bapu Trust
6. Butterflies
7. Care Leavers Advocacy Network (CLAN)
8. Catalysts for Social Action
9. Catholic Relief Services/Changing the Way We Care (CTWWC)
10. Deepshikha
11. India Alternative Care Network (IACN)
12. Jharkhand Viklang Manch
13. Make a Difference
14. Miracle Foundation
15. Muskaan – PAEPID
16. National Association of the Deaf (NAD)
17. National Care Leavers Network (NCLAN)
18. National Centre for Promotion of Employment for Disabled People (NCPEDP)
19. Network of Persons with Disabilities Organizations (NPdO)
20. Positive Yuva Network
21. Railway Children India
22. Saksham
23. Sense India
24. Society for the Empowerment of the Deafblind
25. Swabhiman
26. Udayan Care
27. UNICEF India
28. Vidya Sagar
29. Voluntary Services Overseas (VSO)
30. Ya\_All
31. Amba Salelkar
32. Anchal Kayat
33. Rakesh Guha
34. Shreyansh Dubey
35. Tulika Das
36. Vaidehi Subramani
37. Shabnam Agarwal

## FORM 7

[Rules 11(3), 13(7)(vi), 13(8)(iii), 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.....

Date of preparing the Individual Care Plan.....

Case/Profile No.....of 20.....

FIR No.....

Under Sections (Type of offence), applicable in case of Children in Conflict with Law.....

Police Station.....

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

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

Date of Admission (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) **Disability of the child**.....

(j) 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)**

Sl. No.	Category	Areas of concern	Proposed Interventions
1	Child's expectation from care and protection		
2	Health and nutrition needs		
3	Emotional and psychological support needed		
4	Educational and training needs		
5	Leisure, creativity and play		
6	Attachments and inter-personal relationships		
7	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment		

Sl. No.	Category	Areas of concern	Proposed Interventions
8	Independent living skills/daily 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)		
10	Mobility skills? If yes, attach assessment report of orthopedic surgeon or pediatrician		
11	Speech and/or communication skills? If yes, attach assessment report of Speech therapist		
12	Does the child have any specific accessibility needs based on his disability conditions? For example; <ul style="list-style-type: none"> <li>a) Accessible toilets</li> <li>b) Accessibility to all places in the institution in a wheelchair (wide doors, ramps, lifts)</li> <li>c) Guiding blocks for children with vision impairment</li> <li>d) Pictorial signages for benchmark disabilities</li> </ul>		
13	Assistive devices individual specific or environment specific?		
14	Is any 'Reasonable Accommodation' required by the child?		
15	Participation and inclusion in all age-appropriate activities in the institution.		

**Explanation:** Reasonable Accommodation means necessary and appropriate modification and adjustments, without imposing a disproportionate or undue burden in a particular case, to ensure to persons with disabilities the enjoyment or exercise of rights equally with others. These are small changes

that can be made, such as to furniture/equipment, etc. for eating independently (for example, adapted glass or mug or plate or small changes in clothing like the use of Velcro instead of buttons etc.)

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 has a **is suffering from disability** been provided with disability certificate/**UDID card**. Yes/No. If yes, please state the disability certificate no .....
- (ii) Whether such child has been provided with **medical equipment/assistive devices 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 has been victim of child labour/child trafficking/drug peddling/or is a children in street situation provided with counselling? Yes/No
- (vi) 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 interview .....Dates.....
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/ any accommodations needed	Progress of the Child
1.	Child's expectation from care and protection		
2.	Health and nutrition needs		
3.	Emotional and psychological support needed		
4.	Educational and training needs		
5.	Leisure, creativity and play		
6.	Attachments and inter-personal relationships		
7.	Self-care and life skill training for protection from all kinds of abuse, neglect and maltreatment		

S. No.	Category	Proposed Interventions/ any accommodations needed	Progress of the Child
8.	Independent living skills/Daily 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)		
9 a.	Mobility skills		
9 b.	Speech and/or communication skills		
9 c.	Does the child have any specific accessibility needs? For example: <ul style="list-style-type: none"> <li>• Accessible toilets</li> <li>• Accessibility to all places in the institution in a wheelchair (example wide doors, ramps, lifts)</li> <li>• Guiding blocks for children with vision impairment</li> <li>• Furniture to suit the needs of the child</li> </ul>		
9 d.	Assistive devices		
9 e.	Participation and inclusion in all age-appropriate activities in the institution		

10. Any proceeding held before the committee or Board or Children's Court, details:
  11. Variation of conditions of bond: .....
  12. Change of residence of the child: .....
  13. Other matters, if any: .....
  14. Period of supervision completed. Details: .....
  15. Result of supervision with remarks (if any): .....
  16. Name and Addresses of the parent or guardian or fit person under whose care the 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 :.....
3. Training undergone and skills acquired :.....
4. Last progress report of the child (to be attached, refer Part B): .....
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
1.	Child's expectation from care and protection	
2.	Health and nutrition	
3.	Emotional and psychological	
4.	Educational and Training	
5.	Leisure, creativity and play	
6.	Attachments and Inter-personal Relationships	
8.	Self-care and life skill training for Protection from all kinds of abuse, neglect and maltreatment	
9.	Independent living skills/daily living skills	
10.	Any other	

**Note:** The rehabilitation and restoration plan needs to include the family, and actions that are being taken to support the family to take the child back to her home.

6. Date of release/transfer/repatriation: .....
7. Requisition for escort if required: .....
8. Identification Proof of escort such as driving license, Aadhaar Card, etc: .....
9. Recommended rehabilitation plan including possible placements/sponsorships.....
10. Details of Probation Officer/Non-Governmental Organization for post release follow up: .....
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. 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
3. First interaction report of the Probation Officer/Child Welfare Officer/Case Worker/social worker/Non-Governmental Organisation 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: .....
6. Social milieu of the child, particularly 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

Identity Cards	Present status (Please tick whichever Applicable)		
	Yes	No	Action taken
Birth Certificate			
School Certificate			
Caste Certificate			
Below Poverty Line Card			
Disability Certificate/ UDID			
Immunization Card			
Ration Card			
Aadhaar Card			
Received compensation from Government			

[Instruction: Please verify with the physical document]

## 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)

1. Guardian's name (if applicable).....
2. Parents/Guardian's Nationality.....
3. Parents/Guardian's Religion.....
4. Child's nationality .....
5. Details of Aadhaar card/voter Identity Card/pan card of the child.....
6. Details of Aadhaar card/voter Identity Card/pan card of the child's parents.....
7. Caste.....
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 Right 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/No
  - (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 .....

c) Other entitlements due to the child with disability?

(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. 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.....

(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.  
If 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, Aadhaar 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 is applicable)		
	Yes	No	Action taken
Birth Certificate			
School certificate			
Caste certificate			
Below Poverty Line Card			
Disability Certificate/ <b>UDID</b>			
Immunization card			
Ration Card			
Aadhaar 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**

## Form 22

### SOCIAL INVESTIGATION REPORT FOR CHILD IN NEED OF CARE AND PROTECTION (Tick whichever is applicable)

1. **Sl. No.**.....
2. **Produced before the Child Welfare Committee**.....
3. **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.....
  - (ii) Age..... DD/MM/YY .....
  - (iii) Gender.....
  - (iv) Caste: (tick as applicable)

<input type="checkbox"/> General	<input type="checkbox"/> Scheduled Caste
<input type="checkbox"/> Scheduled Tribe	<input type="checkbox"/> Other Backward Class
<input type="checkbox"/> Others, specify.....	<input type="checkbox"/> Not Known .....
  - (v) Religion.....
  - (vi) Father's Name.....
  - (vii) Mother's Name .....
  - (viii) Guardian's Name.....
  - (ix) Permanent Address.....
  - (x) Landmark of the address.....
  - (xi) Address of last residence .....
  - (xii) Contact information father/mother/family member/guardian.....
  - (xiii) Whether the child needs an interpreter/translator: Yes/No
  - (xiv) Whether the child is- Orphan/Abandoned/Surrendered/Others
  - (xv) Does the child have a disability? Yes/No
  - (xvi) Previous institutional/case history and individual care plan, if any.....
  - (xvii) Family Details: (Yes/No) If yes, then:

S. No.	Name and Relationship	Age	Sex	Education	Occupation	Income	Health Status	History of Mental Illness	Addiction
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

#### ADD - Is there another child or adult with disability in the family?

**Rationale:** This question will alert the person to the possibility of genetic conditions leading to disability in the family. A family with two or more persons with disabilities (whether genetic or unrelated conditions) is more vulnerable. This information may help in identifying sponsorship etc for the family and child. For example, in Jharkhand if we meet a child with sickle cell anaemia, it is likely that there are more people/ children in the family with the condition.

(xviii) 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

#### ADD - Parents/Caregiver

- Do the parents caregiver have the knowledge of the condition of the child and how she can be helped to her build her abilities?
- Has the parent/caregiver been linked to any nearby rehabilitation facility? District disability rehabilitation centres/Rashtriya Bal Swasthya Karyakram, District Early Intervention unit (DEIC)/ Hospital/Civil Society Organisation/Organization of Persons with Disabilities (OPD or DPO)?
- Does the parent/caregiver have the support of the family/neighbours/community?
- Has the family faced discrimination in the community because of their child's disability?
- Does the parent/caregiver know about the schemes that will benefit their child, about the rights of their child and the different bodies that can support them? Are they connected to them?
- What are the major difficulties that the parent/caregiver is facing in supporting the child?
- Previous records if any.....



**Rationale:** Children with disabilities are often still hidden in their homes and families may not have had any contact with any organization or authorities. They may have gone in the early years to hospitals or other medical personnel to understand the condition of their child but have had no sustained support.

**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? .....
- (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
- ☐ Inter- country repatriation

**9. Whether child is eligible for the benefit of sponsorship: Yes/No (children with disabilities are eligible for sponsorship)**

**10. Whether the child is eligible for any scheme or entitlement. Yes/No (If yes, please specify) (A list of schemes for children with disabilities could be appended with the form as there are also state specific schemes.)**

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.....

**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) For children with disabilities add special school/home-based education
- (vii) Whether the child has been enrolled in special training centre. Yes/No. If yes specify duration of enrolment of child in Special Training center.....
- (viii) Whether the Special Training Center was Residential/Non- Residential
- (ix) 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).....
- (x) Attitude of classmates towards the child (If applicable) .....
- (xi) Attitude of teachers and classmates towards the child (If Applicable) .....

**ADD: For Children with disabilities additional questions suggested are regarding:**

1. Whether the child faced difficulties in getting to school.
2. Whether the child was asked not to attend school regularly.
3. Whether the parents were asked to sit with the child in school to take care of her needs.
4. Whether all parts of the school including the toilets were physically accessible for the child.
5. Whether the school said that there was no special teacher to teach the child.
6. Whether the school was able to provide for the individual requirements of the child? (for example, a special seating arrangement for the child or adapted learning material so that they could continue with their studies.)
7. Whether the child was getting all the entitlements due to them in government schools such as escort allowance, allowance for girls with disabilities, free educational material, or any other.

**If the child was in Home Based Education?**

- Was the teacher coming on a regular basis to teach the child?
- Were the parents satisfied with the arrangement and how their child was learning?
- Was the child included in school activities in any way?

**Rationale:** Children with disabilities have a fundamental right to education as per the Right to Education (RTE) Act. The Rights of Persons with Disabilities Act (RPWD Act) 2016 for the first time defines inclusive education and details the rights and requirements of children with disabilities in education. The RTE Act added the category of home-based education for children with severe and multiple disabilities. This is an option where the student is enrolled in school but does not go to school. Instead, a teacher is supposed to visit the child at home and teach her. The RPWD Act also gives the child the option of special school. It would be important to check whether the child was in any of these settings. Accessibility and lack of supports in schools are often big reasons for low enrolments and dropouts of children with disabilities from the education system. The other questions dealing with attitudes are already part of the form.

- (xii) Vocational Training (if any).....

**15. Other factors of importance if any.....**

**16. Habits of the child: (tick as applicable)**

- ☐ Watching TV/movies

- |  |   |
|--|---|
| <input type="checkbox"/> Playing indoor/outdoor games    | <input type="checkbox"/> Reading books        |
| <input type="checkbox"/> Drawing/painting/acting/singing | <input type="checkbox"/> Religious activities |
| <input type="checkbox"/> Begging                         | <input type="checkbox"/> Gambling             |
| <input type="checkbox"/> Alcohol consumption             | <input type="checkbox"/> Smoking              |
| <input type="checkbox"/> Drug use, if yes, specify.....  |   |
| <input type="checkbox"/> Any other, please specify.....  |   |

**17. Extra-curricular interests.....**

**18. Outstanding characteristics and personality traits.....**

**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

**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 (including pressure sores) -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).....

- Does the child fall ill very often? Yes/No/Not known
- Does the child suffer from malnourishment? Present/Not Known/Absent
- Does the child seem to be having fits? Present/Not Known/Absent
  - If yes, has the child been taking medication regularly? Yes/No/Not known
- Does the child have loss of sensation in any part of body - Present/Not Known/Absent
- Has the child had any operations? Yes/No/Not known
- Does the child require regular blood transfusions/or any other regular intervention - Yes/No/Not known Are the parents/caregiver going to the hospital/health facility for any other medical condition that the child has? Yes/No/Not known
  - If yes, give details -

If the child is on long term medication: are the parents able to afford it and is the child being able to take medication on a regular basis?

**Rationale:** Children with disabilities are more prone to illness, and to a lack of access to easily available medical intervention. They are also less likely to be vaccinated and more susceptible to malnourishment. Children with developmental disabilities sometimes may have other coexisting conditions like epilepsy which require long term medication. The catastrophic expenditure on health and medication can make the family more vulnerable both economically as well as emotionally.

**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).....

Questions 25 (A) and (B) are supposed to identify the child with disability and the impairment group she falls under. However, it would be more appropriate if they used the language of the RPWD Act 2016 as it will be easier to follow up later for the child's entitlements.

**The placing of the questions needs to be looked at. It might be better to check if the child has a disability right at the beginning of the form at Q 5.**

At present both sections are using the words 'handicap' and 'differently abled' and this can cause a lot of confusion in the worker who is filling the form. It is important that child protection workers get used to the terms that are used in the RPWD Act 2016 so that there can be a follow-up for the rights and entitlements of the child at a later stage. It is also more respectful for the child if she is not labelled in different ways.

**The schedule of the RPWD Act 2016 lists 21 disabilities and gives a brief description of all of them.**

1. **Physical disability**

- a) Locomotor impairment (cerebral palsy, dwarfism, muscular dystrophy, acid attack victims)
- b) Visual impairment (low vision, blindness)
- c) Hearing impairment (hard of hearing, deaf)
- d) Speech and language impairment

2. **Intellectual disability** (specific learning disabilities, autism spectrum disorder)

3. **Mental behaviour** (Mental illness)

4. **Disabilities caused due to**

**Neurological conditions:** multiple sclerosis, Parkinsons disease

**Blood disorders:** haemophilia, Thalassemia, Sickle cell disease

5. **Multiple Disability** (two or more of the above disabilities including deaf blindness)

Most of these specific terms are not widely known or understood by the general population. What is commonly understood are the broad categories of locomotor disability, visual impairment, hearing impairment, mental disability. There is always a confusion between the different conditions of mental illness and intellectual disability, and there is always a danger of children with intellectual disability being labelled wrongly as a child with mental illness and the other way round.

Putting in two separate categories of intellectual disability and mental illness will indicate that they are two separate conditions. Protection workers would over time and with training be able to make a distinction based on their observation.

The category of neurological conditions includes Multiple Sclerosis and Parkinsons disease. These are not largely child related conditions and need not be put in initially when the protection worker meets the family. These will come out later as and when the child is assessed for the disability certificate.

Conditions such as blood disorders are often known better in the areas where they are more endemic, by different names. For example, sickle cell disease is commonly referred to as ‘*Siklin*’ in the Chhattisgarh area. These are genetic conditions and children will be born with the condition.

Multiple disability refers to the child who may have two or more of the conditions that have been listed in the law.

Since the Social Investigation Report is done with the family or extended family of the child it is better to get a description of what they know to be the barriers faced by the child and put a tick in the broad categories rather than specific conditions. As the family describes the condition of the child, a broad picture will emerge and that can be put down and the category ticked. This is the most valuable way of understanding initially, the impairment group that the child belongs to.

The family may have a disability certificate and a protection worker who is familiar with the Schedule of the RPWD Act could put in the appropriate impairment group.

There should be scope within the ‘any other’ category for the worker to put in descriptions that do not fit any category or where the person is unclear.

### ADD: Put in disability groups according to the RPWD Act 2016

1. **Physical/Locomotor disability** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
2. **Visual impairment** (based on observation/medical examination/disability certificate, UDID card)
3. **Hearing impairment** (based on parent disclosure/observation/parent disclosure/disability certificate, UDID card)
4. **Speech and language disability** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
5. **Intellectual disability** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
6. **Mental illness** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
7. **Disability due to blood disorders (Haemophilia, Thalassemia, Sickle Cell Anemia)** (based on parent disclosure/parent disclosure/observation/medical examination/disability certificate/UDID card)
8. **Multiple disability (two or more conditions together)** (based on parent disclosure/observation/medical examination/disability certificate, UDID card)

C. Whether the child has a valid disability certificate/UDID card. (If yes, provide details)

**Rationale:** Unique disability identity cards (UDID) are slowly replacing the disability certificates in the country. However, this change is happening at a different pace in different states of the country. At present it would be advisable to give the option of both the cards.

D. Mental condition of the child: (Present and past).....

E. Physical condition of the child: (Present and past).....

### ADD: Support Required by the child

How does the child move?

Does the child need some support to help them use their hands or move?

How does the child communicate?

- Talking
- Gesture
- Eye pointing
- Sign language
- Any other
- Does the child indicate preferences, likes and dislikes in food, activities conducted in the day?

Does the child need any support in activities of daily living such as?

- Eating
- Toileting,
- Dressing

- Bathing
- Menstrual hygiene
- Any other

Has the child been given any assistive devices?

- Wheelchair
- Crutches
- Hearing aid
- Spectacles
- An adapted chair
- Any other?

Has the child been using them?

Does the family know how they are to be used and repaired and changed when needed?

Does the child need any changes such as personal support, physical accessibility, curriculum changes to be able to continue their education? (instead of the question on special education)

#### Questions on Accessibility and Inclusion

##### Understanding and knowledge of the child

- What does the child know about their surroundings and their family?
- What kind of games does the child choose to play?
- Is the child isolated and at home or does the child go out to play with other children?
- Does the child go with the family to events in the community and homes of relatives?
- Is the child included in all activities and services for all children in the community? For example, Anganwadi/children's clubs/any other?
- Does the child have any challenging behavior that the family is finding difficult?

#### Accessibility Requirements: In the Home and Community of the Child

- Are all areas of the home accessible to the child?
- Is the child able to go out of house and access outside spaces in the community
- Does the child access these spaces?

F. Whether the child needs special education- Yes/No. If yes, 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/Assistive devices. (If yes, please specify) .....

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)



**(Note: It is important for child protection personnel to know the amount and age at which disability pension is given as it varies from State to State.)**

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

**a. In case the child belongs to Children in Street Situations/Trafficked/Involved in Drug Peddling/  
Child Labour:**

**(Note: Disability is cross cutting and the child with disability could be part of any of the categories)**

A. Whether the child belongs to any of the category 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)/stepparents(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
  - (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/observation.....
- b. In case the child has faced any kind of abuse, including sexual abuse, or has been a victim of any offence:**

**(Note: children with disabilities are more susceptible to abuse including sexual abuse)**

- A. Whether the child is a victim of any offence: 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
    - ☐ 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:
- (i) Denial of food– parents/siblings employers/other (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:
- (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.....

H. Any other remark/observations.....

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

**c. 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 taken, details thereof.....

J. Any other remarks/observation.....

**d. 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**

e. Emotional factors.....

f. Physical condition.....

- g. Social and economic factors.....
- h. Suggestive causes of the problems.....
- i. Analysis of the case, including reasons/contributing factors for the offence.....
- j. Reasons for child's need for care and protection.....
- k. Opinion of experts consulted.....
- l. Mental Health Expert assessment.....
- m. Risk analysis for the child to be restored to the surviving parent/relatives/  
guardian.....
- n. Previous institutional/case history and individual care plan, if any.....
- o. Recommendation of District Child Protection Unit/Case Worker/Social Worker regarding  
psychological support, rehabilitation and reintegration of the child and suggested plan.....  
.....

## FORM 43

[Rule 69 (H) (3)]

### CASE HISTORY OF THE CHILD (FOR CHILD CARE INSTITUTION)

*This form needs to be filled within 14 days of child's arrival in CCI*

Affix a latest  
photograph here

Case/Profile No.....

Date & Time.....

#### A. PERSONAL DATA

1. Name.....
2. Male/Female (tick the appropriate category) .....
3. Age at the time of admission.....
4. Present age.....
5. Category (tick as applicable):
  - (i) Separated from family
  - (ii) Abandoned/deserted
  - (iii) Victim of exploitation and violence (give detail)
  - (iv) Run-away
  - (v) Any other

**ADD: Bring question 19 here.**

*Does the child have a disability?*

*Is there any other child or person with disability in the child's family?*

*Has the child been assessed by the Medical Board or any other authority since admission to the CCI?  
(Yes/No)*

*If yes, please put details as per the assessment*

*If no, please put details based on observation or information received from family:*

- 1. Physical/Locomotor disability** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
- 2. Visual impairment** (based on observation/medical examination/disability certificate, UDID card)
- 3. Hearing impairment** (based on parent disclosure/observation/parent disclosure/disability certificate, UDID card)

4. **Speech and language disability** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
5. **Intellectual disability** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
6. **Mental illness** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
7. **Disability due to blood disorders (Haemophilia, Thalassemia, Sickle Cell Anemia)** (based on parent disclosure/observation/medical examination/disability certificate/UDID card)
8. **Multiple Disability** (two or more conditions together) (based on parent disclosure/observation/medical examination/disability certificate, UDID card)

**Rationale:** All the other questions till question 19 are relevant to the child with disability. It is better that recognition of a child with disability is done right at the beginning. It is likely that there has been a further assessment since the child has come into the CCI.

6. Religion
  - (i) Hindu (OC/BC/SC/ST)
  - (ii) Muslim/Christian/Other(pl. specify)
7. Native District & State:
8. Description of the Housing:
  - (i) Concrete building/Kuchha
  - (ii) Three bedroom/two bedroom/one bedroom/no separate bedroom
  - (iii) Owned/rental
9. By whom the child was brought before the Child Welfare Committee/Juvenile Justice Board (tick as applicable):
  - (i) Police-Local Police/Special Juvenile Police Unit/designated Child Welfare Police Officer/Railway Police/Women Police
  - (ii) Probation Officers
  - (iii) Social Welfare Organization
  - (iv) Social Worker
  - (v) Parent(s)/Guardian/Sibling(s) (please Specify the relationship)
  - (vi) Any public servant
  - (vii) Any public spirited citizen
  - (viii) Child himself/herself
10. Reasons for leaving the family

- (i) Abuse by parent(s)/guardian(s)/stepparents(s)/sibling(s)
- (ii) In search of employment
- (iii) Peer group influence
- (iv) Incapacitation of Parents
- (v) Criminal behaviour of Parents
- (vi) Separation of Parents
- (vii) Demise of Parents
- (viii) Poverty
- (ix) Others (please specify)

11. Types of abuse met by the child

(i)	Verbal abuse	parents/siblings/employers/others (pl. specify)
(ii)	Physical abuse	parents/siblings/employers/others (pl. specify)
(iii)	Sexual abuse	parents/siblings/employers/others (pl. specify)
(iv)	Others	parents/siblings/employers/others (pl. specify)

12. Types of ill-treatment met by the child

(i)	Denial of food	parents/siblings employers/other (pl. specify)
(ii)	Beaten mercilessly	parents/siblings employers/other (pl. specify)
(iii)	Causing injury	parents/siblings employers/other (pl. specify)
(iv)	Detention	parents/siblings employers/other (pl. specify)
(v)	Other (please Specify)	

13. Exploitation faced by the child

- (i) Extracted work without payment
- (ii) Little (low) wages with longer duration of work
- (iii) Others (pl. specify)

14. Health status of the child before admission

(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 (pl. specify)	present/not known/absent
(xiii)	Frequent Illness	present/not known/absent
(xiv)	Malnourishment	present/not known/absent
(xv)	Does the child seem to have fits? Has the child been taking medication regularly?	present/not known/absent
(xvi)	Loss of sensation	present/not known/absent
(xvii)	Any surgeries/operations	present/not known/absent
(xviii)	Requires regular blood transfusions/or any other regular intervention	present/not known/absent

- Have the parents/caregiver going to the hospital/health facility for any other medical condition that the child has? (give details)
- If the child is on long term medication, is the child being able to take medication on a regular basis?

15. With whom the child was staying prior to admission

- (i) Parent(s) – Mother/Father/Both
- (ii) Siblings/Blood relative
- (iii) Guardian(s) – Relationship
- (iv) Friends
- (v) On the street
- (vi) Night shelter
- (vii) Orphanages/Hostels/Similar Homes
- (viii) Other (pl. specify)

16. Visit of the parents to meet the child

Prior to institutionalization – Frequently/Occasionally/Rarely/Never After institutionalization – Frequently/Occasionally/Rarely/Never

17. Visit of the Child to his parents

Prior to institutionalization – Frequently/Occasionally/Rarely/During festival times/During summer holidays/Whenever fallen sick/Never

After institutionalization – Frequently/Occasionally/Rarely/During festival times/During summer holidays/Whenever fallen sick/Never

18. Correspondence with parents

Prior to institutionalization – Frequently/Occasionally/Rarely/During festival times/During summer holidays/Whenever fallen sick/Never

After institutionalization – Frequently/Occasionally/Rarely/During festival times/During summer holidays/Whenever fallen sick/Never

19. **Details of disability** This should be moved up to the beginning of the form after Q no. 5.

20. Type Family: Family/joint family/broken family/single parent

21. Relationship among the family members:

(i)	Father & mother	Cordial/Non-cordial/Not known
(ii)	Father & child	Cordial/Non-cordial/Not known
(iii)	Mother & child	Cordial/Non-cordial/Not known
(iv)	Father & siblings	Cordial/Non-cordial/Not known
(v)	Mother & siblings	Cordial/Non-cordial/Not known
(vi)	Child & siblings	Cordial/Non-cordial/Not known
(vii)	Child & relative	Cordial/Non-cordial/Not known

22. History of crime committed by family members, if any:

S. No.	Relationship	Nature of Crime	Legal status of the case	Arrest if any Made	Period of confinement	Punishment Awarded
1.	Father					
2.	Step father					
3.	Mother					
4.	Step mother					
5.	Brother (a) (b) (c) (d)					
6.	Sister (a) (b) (c) (d)					
7.	Child					
8.	Others (uncle/aunty/ grandparents)					

23. Properties owned by the family:
- (i) Landed properties (pl. specify the area)
  - (ii) Household articles- Cows/Cattle/Bull
  - (iii) Vehicles- two wheeler/three wheeler/four wheeler (lorry/bus/car/tractor/jeep)
  - (iv) Others (please specify)
24. Marriage details of family members:
- (i) Parents        Arranged/Special Marriage/**Consanguineous Marriage**
  - (ii) Brothers      Arranged/Special Marriage/**Consanguineous Marriage**
  - (iii) Sisters        Arranged/Special Marriage/**Consanguineous Marriage**
25. Social activities of family members:
- (i) Participate in social and religious functions
  - (ii) Participate in cultural activities
  - (iii) Does not participate in social and religious functions
  - (iv) Not known
26. Parental care towards child before admission:
- (i) Over protection
  - (ii) Affectionate
  - (iii) Attentive
  - (iv) Not affectionate
  - (v) Not attentive
  - (vi) Rejection

**ADD:**

- Do the parents/major caregiver have knowledge of the condition of the child and how she can be helped to build her abilities?
- Have they been connected to any rehabilitation facility/organisation? If yes, please provide details.
- Does the parent/major caregiver have the support of the family/neighbours/community?
- Is there an extended family that can support the mother/caregiver and the child?
- Has the family faced discrimination in the community because of their child's disability? If yes, then have there been attempts to address this?
- Has the parent been provided with information on the schemes that will benefit their child, on the rights of their child and the different bodies that can support them? Are they connected to them?
- What are the major difficulties that the parent/caregiver is facing in supporting the child? Have any of these difficulties been addressed?

**Explanation:** Children with disabilities are often still hidden in their homes and families may not have had any contact with any organization or authorities. They may have gone in the early years to hospitals or other medical personnel to understand the condition of their child but have not had sustained support. If the child does have parents and some of the concerns of the family are addressed, may they be able to bring their child back home from the CCI?

**B. ADOLESCENCE HISTORY** (Between 12 and 18 years)

27. At what age did the child attain puberty?

28. Details of delinquent behaviour if any

- (i) Stealing
- (ii) Pick pocketing
- (iii) Arrack selling
- (iv) Drug pedaling
- (v) Petty offences
- (vi) Violent crime
- (vii) Rape
- (viii) None of the above
- (ix) Others (please specify)

29. Reason for delinquent behaviour

- (i) Parental neglect
- (ii) Parental overprotection
- (iii) Parents criminal behavior
- (iv) Parents influence (negative)
- (v) Peer group influence - To buy drugs/alcohol
- (vi) Others (pl. specify)

30. Habits

**A**

- (i) Smoking
- (ii) Alcohol consumption
- (iii) Drug use (specify)
- (iv) Gambling
- (v) Begging
- (vi) Any other

**B**

- (i) Watching TV/movies
- (ii) Playing indoor/outdoor games
- (iii) Reading books
- (iv) Religious activities
- (v) Drawing/painting/acting/singing
- (vi) Any other

## EMPLOYMENT DETAILS

31. Employment details of the child prior to entry into the Home:

S. No.	Details of employment	Timing and Duration	Wages Earned
(i)	Cooly		
(ii)	Rag picking		
(iii)	Mechanic		
(iv)	Hotel work		
(v)	Tea shop work		
(vi)	Shoe polish		
(vii)	Household works		
(viii)	Others (please specify)		

### Details of income utilization:

32. Sent to family to meet family need

- (i) For dress materials
- (ii) For gambling
- (iii) For prostitution
- (iv) For alcohol
- (v) For drug
- (vi) For smoking
- (vii) Savings

33. Details of savings

- (i) With employers
- (ii) With friends
- (iii) Bank/Post Office
- (iv) Others (pl. specify)

34. Duration of working hours

- (i) Less than six hours
- (ii) Between six and eight hours
- (iii) More than eight hours

## EDUCATIONAL DETAILS

35. The details of education of the child prior to the admission to Children's Home

- (i) Illiterate

- (ii) Studied up to V Standard
  - (iii) Studied above V Std but below VIII Standard
  - (iv) Studied above VIII Std but below X Standard
  - (v) Studied above X Standard
36. The reason for leaving the School
- (a) Failure in the class last studied
  - (b) Lack of interest in the school activities
  - (c) Indifferent attitude of the teachers
  - (d) Peer group influence
  - (e) To earn and support the family
  - (f) Sudden demise of parents
  - (g) Rigid school atmosphere
  - (h) Absenteeism followed by running away from school
  - (i) There is no age appropriate school nearby
  - (j) Others (please specify)

**ADD: For children with disabilities additional questions suggested are:**

1. Did the child face difficulties in getting to school?
2. Was the child asked not to attend school regularly?
3. Were the parents asked to sit with the child in school to take care of her needs?
4. Were all parts of the school, including the toilets, physically accessible for the child?
5. Did the school say that there was no special teacher to teach the child?
6. Was the school able to provide for the individual requirements of the child? (for example, a special seating arrangement for the child or adapted learning material so that she could continue with her studies)

**If the child was in Home Based Education:**

- Was the teacher coming on a regular basis to teach the child?
- Were the parents satisfied with the arrangement and how their child was learning?
- Was the child included in school activities in any way?
- Have any of these difficulties been addressed?

**Explanation:** These questions are also asked in the social investigation report. If the child has been now in the CCI for some time and the focus is on reintegration, it is important to ask whether any of these difficulties have been addressed.

37. The details of the school in which studied last:
- (i) Corporation/Municipal/Panchayat
  - (ii) Government/SC Welfare School/BC Welfare School
  - (iii) Private management/Convents

**ADD: Special School/Home Based Education**

38. Medium instruction: Hindi/English/Urdu/Tamil/Malayalam/Kannada/Telugu/Marathi/Gujarati/Bengali/Other language (please specify)
39. After admission to Children's Home, the educational attainment from the date of admission till date;

**ADD for Child with disability:**

- Has the child with disability been admitted to a school outside the CCI?
- What kind of school? General school/General school with inclusive provisions/special school?
- Has the child been provided with accommodation in curriculum and learning materials if she needs it, by the school?
- Is the full school accessible to the child with disability?
- Does the CCI have a teacher who can teach the child with disability?

**Explanation:** The overall understanding is that most children with disabilities in the CCI do not go to inclusive schools. Sometimes they are also not part of any classes that take place in the CCI. It is important to check and to see that the education of the child is not stopped because they are in a CCI. Continuing education will also help them to be reintegrated back in their own setting.

- |   | No. of years | Class studied | Promoted/detained |
|---|--------------|---------------|-------------------|
| 40. Vocational training undergone from the date of admission into Children's Home till date.            |              |               |                   |
| (i) No. of years  |              |               |                   |
| (ii) Name of Vocational Trade   |              |               |                   |
| (iii) Proficiency Attained  |              |               |                   |
| (iv) Details of certification?  |              |               |                   |
| 41. Extra-curricular activities developed from the date of admission into the Children's Home till date |              |               |                   |
| (i) Scout   |              |               |                   |
| (ii) Sports (please specify)  |              |               |                   |
| (iii) Athletics (please specify)  |              |               |                   |
| (iv) Drawing  |              |               |                   |
| (v) Painting  |              |               |                   |

(vi) Music

(vii) Dance

(viii) Others (pl. specify)

## MEDICAL HISTORY

42. Height and weight at the time of admission:

43. Physical/emotional condition:

44. Medical history of child (gist):

45. Medical history of parent/guardian (gist):

46. Present health status of the child:

Sl. No.	Annual Observation	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
1.	Date of Review				
2.	Height				
3.	Weight				
4.	Nutritious diet given				
5.	Stress				
6.	Dental				
7.	ENT				
8.	Eye				

47. Height and Weight Chart

Date, Month and Year	Height	Admissible Weight	Actual Weight

## ADD:

Review of any specific health condition that the child has.

Review of developing abilities of the child in the areas of:

1. Movement/Physical
2. Communication
3. Independence and support in activities of daily living
4. Provision and use of assistive devices

## SOCIAL HISTORY

48. Details of friendship prior to admission into Children's Home:

(i) Co-workers

(ii) School/Classmate



- (iii) Neighbours
  - (iv) Others (pl. specify)
49. Majority of the friends are
- (i) Educated
  - (ii) Illiterate
  - (iii) The same age group
  - (iv) Older in age
  - (v) Younger in age
  - (vi) Same sex
  - (vii) Opposite sex
50. Details of membership in group (please specify details)
- (i) Associated with cine fans association
  - (ii) Association with religious group
  - (iii) Associated with arts and sports club
  - (iv) Associated with gangs
  - (v) Associated with voluntary social service league
  - (vi) Others (please specify)
51. The position of the child in the groups/league
- (i) Leader
  - (ii) Second level leader
  - (iii) Middle level functionary
  - (iv) Ordinary member
52. Purpose of taking membership in the group:
- (i) For social service activities
  - (ii) For leisure time spending
  - (iii) For pleasure seeking activities
  - (iv) For social security
  - (v) For deviant activities
  - (vi) Others (please specify)

53. Attitude of the group/league
  - (i) Respect the social norms and follow the rules
  - (ii) Interested in violating the norms
  - (iii) Impulsive in violating the rules
54. The location/meeting point of the groups
  - (i) Usually at fixed place
  - (ii) Places are changed frequently
  - (iii) No specific places
  - (iv) Meeting point is fixed conveniently
55. The reaction of the society when the child first came out of the family
  - (i) Supportive
  - (ii) Rejection
  - (iii) Abuse
  - (iv) Ill-treatment
  - (v) Exploitation
56. The reaction of the police towards children
  - (i) Compassionate
  - (ii) Harsh
  - (iii) Aggressive and abusive
  - (iv) Exploitative
  - (v) Ill-treated
  - (vi) Unaware of the disability
57. The response of the general public towards the child .....

#### HISTORY OF THE CHILD (Brief)

- (i) Education
- (ii) Health
- (iii) Vocational training
- (iv) Extra curricular activities
- (v) Others

Suggestion of Child Welfare Officer/Probation Officer after orientation to child and the response towards orientation.

Follow up by Child Welfare Officer/Probation Officer/Case Worker/Social Worker Quarterly Review of Case History by Management Committee

**PERSON IN CHARGE/SUPERINTENDENT/  
CHILD WELFARE OFFICER/PROBATION OFFICER**

**Note:** The case history form is filled in when the child has already entered the CCI and has been there for some time. It is important to know what kind of facilities are available in the CCI for children with disabilities.

1. Section 53 of the JJ Act Specifies the services that must be present in childcare institutions. These include among others:
  - (i) Equipment such as wheelchairs, prosthetic devices, hearing aids, braille kits, or any other suitable aids and appliances as may be required, for children with special needs.
  - (ii) Appropriate education, including supplementary education, special education, and appropriate education for children with special needs.
2. The law invokes the RTE Act 2009, for children between the ages of 6 to 14 and underlines that the provisions of this Act apply to children between 6-14 in the home.
3. In the JJ Rules 2016, under section 5 (21) iv, arrangements of safety, security, transportation and support and access for differently abled children; details of other support services run by the organization; are mentioned as requirements for organizations who want to run such facilities.
4. In the JJ Rules 2016, Rule 29 on Physical Infrastructure, section (9) mentions “accessible gender and age appropriate and disabled friendly toilets”, and section (11) about special infrastructural facilities and equipment for differently abled children. “Such facilities and equipment shall be designed under the guidance of specialists or experts.”

**Other important questions that need to be asked -**

- If the child has a disability, have they been placed in a special unit of the CCI?
- Are they included in the activities and with other children in the CCI?
- What is the rehabilitation plan for child with disability after attaining the age of 18 years?

## NOTES

[illegible]

## NOTES

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## NOTES

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.





Participants of the Consultation on Adaptation of Case Management Tools, October 28, 2025



Participants of the National Learning Event on Inclusive Care Reform and Ensuring Community Inclusion for ALL Children, December 10, 2024