



Pursuit of Excellence



Madhya Pradesh State-level Annual Stakeholders Consultation on the Protection of Children with Disabilities-2024

संवाद

Reflections on Progress, Challenges,
Opportunities, and Way Forward



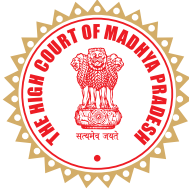
Madhya Pradesh State-level Annual Stakeholders Consultation on the Protection of Children with Disabilities-2024

मंवाद

3rd & 4th August, 2024

Venue : Madhya Pradesh State Judicial Academy, Jabalpur





FOREWORD

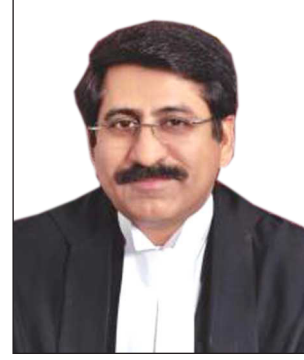
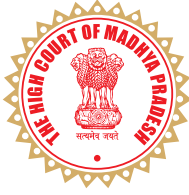
It is with immense pride and a deep sense of responsibility that I present the report of **Samvad**, the State-level Annual Stakeholders Consultation on the Protection of Children with Disabilities, held in Madhya Pradesh on 3-4 August 2024. This consultation was organized under the guidance of the Hon'ble Supreme Court of India, reflecting the judiciary's commitment to safeguarding the rights and dignity of children with disabilities (CwD).

The **Samvad** consultation brought together key stakeholders from various departments of the Madhya Pradesh government, civil society organizations, legal experts, and, most importantly, children with disabilities and their families. The consultation was a platform for meaningful dialogue, where we collectively identified best practices, deliberated on the challenges faced by CwD, and developed a comprehensive State-level action plan to address these issues. The participation of children with disabilities in the cultural program, where they showcased their talents through dance, singing and skits, was a testament to their resilience and potential.

This report captures the essence of the discussions, the challenges identified, and the actionable recommendations that emerged from **Samvad**. It is a roadmap for creating an inclusive society where every child, regardless of their abilities, can thrive and achieve their full potential. I commend the efforts of all stakeholders, especially the Juvenile Justice Committee of the High Court of Madhya Pradesh, UNICEF and the various government departments, for their dedication and collaboration in making this consultation a grand success.

As we move forward, it is imperative that we translate the recommendations of this report into concrete actions. Let us work together to ensure that no child is left behind and that every child with a disability is given the opportunity to live a life of dignity, respect and fulfillment.

Justice Suresh Kumar Kait
Chief Justice
High Court of Madhya Pradesh



MESSAGE

Children with Disabilities occupy a unique space in the justice dispensation system, one that requires not just recognition, but a deliberate reimagining of how we deliver protection, rehabilitation and empowerment. The '**Samvad Consultation**' 2024 brought to light the pressing need for us to collectively rethink and redesign our approach to child protection through the lens of inclusivity and dignity.

India's legal framework offers a comprehensive foundation through Juvenile Justice (Care and Protection of Children) Act, 2015 and the Rights of Persons with Disabilities Act 2016, however, the realization of its pious objects requires structural reforms, cross-sectoral coordination and sensitivity at all levels of implementation and this consultation is a step forward in this direction.

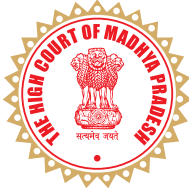
I appreciate the efforts made in this Consultation to prioritize accessibility through disabled friendly infrastructure, trained stakeholder and participatory dialogue. These are the important markers of change. Likewise, inclusive communication models with sign language interpretation, Braille material and assistive technologies must not remain an exception for special events, but become embedded features of our systems.

Our challenge going forward is to institutionalize these practices within Courts, Child Care Institutions (CCI), education systems, frontline service delivery and community spaces. Every stakeholder must carry this mandate forward, ensuring that children with disabilities are not left at the margins but are brought to the center of policy and protection frameworks.

It is my belief that this report will help crystallize the key issues facing multi-stakeholders for the Protection of rights of Children with Disabilities and State-level policymakers concerned about the future of such Children and help guide them in formulating future laws and policies in this important field.

Best Wishes,

(Justice Sanjeev Sachdeva)
Administrative Judge,
High Court of Madhya Pradesh, Jabalpur



MESSAGE

The Juvenile Justice Committee, High Court of Madhya Pradesh (MP-JJC), in collaboration with UNICEF-Madhya Pradesh Office, Madhya Pradesh State Judicial Academy (MPSJA) and Madhya Pradesh State Legal Services Authority (MPSLSA) organized a two-day State-level Multi-Stakeholder Consultation on Protection of Children with Disabilities, **“SAMVAD”** on 3-4 August 2024, at Madhya Pradesh State Judicial Academy, Jabalpur.

With immense pleasure and deep sense of satisfaction, I present the report of deliberations held in **“SAMVAD”**. The said State-level Multi-Stakeholder Consultation includes High Court Judges, officers of Women and Child Development and Social Justice Departments, Govt. of M.P., Juvenile Justice Boards (JJB), Child Welfare Committees (CWC), Children's Courts, District Legal Service Authority (DLSA), Special Juvenile Police Units (SJPU), District Child Protection Units (DCPU), Special Public Prosecutors (SPP) and Superintendents of Child Care Institutions (CCI). An online pre-consultation survey was designed with assistance of Enfold Proactive Health Trust, Bengaluru.

Multi-Stakeholder Conference **“SAMVAD”** was attended by 222 participants. Soul searching deliberations were carried out. Key note address was having emotional and cathartic effect when children with disability and their parents rose to the dias and explained their challenges faced in day to day life. This set the tone so profoundly that all participants immersed in the discussion with sensitivity. I am of the firm opinion that **“Every FILE with same alphabets contains LIFE”**. The deliberations affirmed this opinion. Juvenile Justice Committee invited academicians from National Forensic Sciences University, Gandhinagar and from other colleges to widen the spectrum. Children with disability, their teachers and their parents also got opportunity to get involved in the discussion.

Success of deliberations reflect from the circular dated 8th January 2025 issued by the Women and Child Development Department, Mantralaya, Vallabh Bhawan, Govt. of M.P., Bhopal, when concept of **Social Audit**, as discussed in the deliberations and propounded in MCC No.2498/2024 (Ram Kumar and others Vs. State of M.P. And others) is accepted and directions have been issued to all District Collectors in this regard. Concept of “**Shourya Didi**” and Statutory Grid is also taking shape. Dharmashastra National Law University, Jabalpur, M.P. (DNLU) established a Child Right Centre being inspired by such deliberations. Therefore, “**SAMVAD**” was a big leap in field of Juvenile Justice.

I hope and sincerely believe that recognition of this report would translate into results and in collaboration with the State Government we would try to ensure better future for our juveniles and would try to give wings to their aspirations.

Best Wishes,

(Justice Anand Pathak)

Administrative Judge, High Court of MP
Bench Gwalior & Chairperson, Juvenile
Justice Committee

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1.1. Background

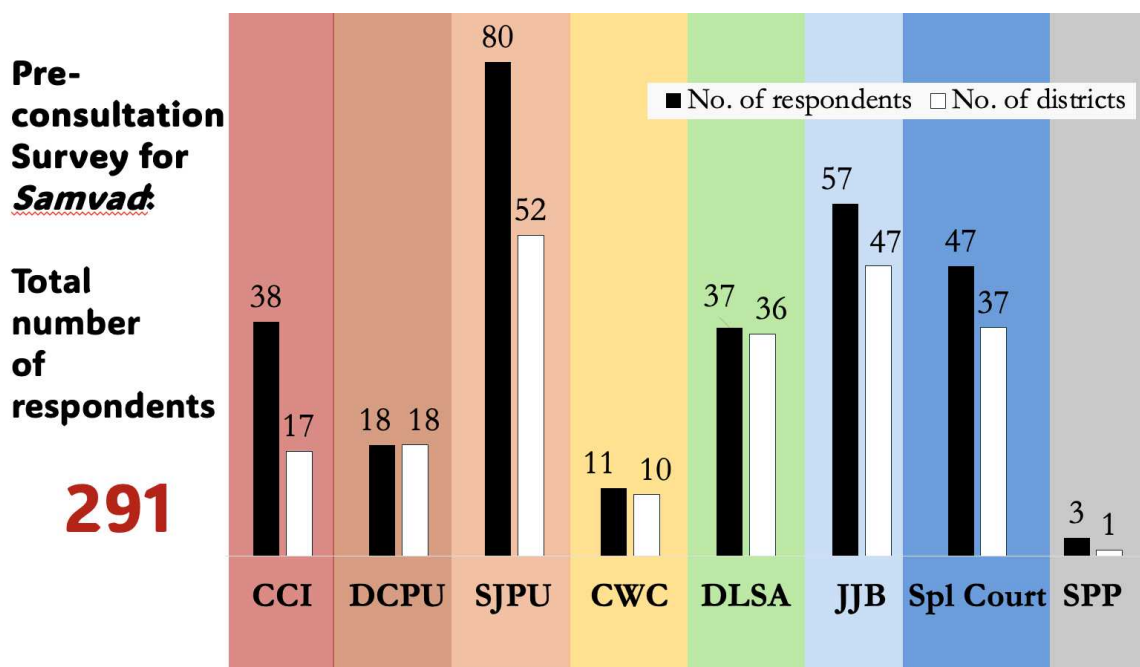
The Juvenile Justice Committee, High Court of Madhya Pradesh (MP-JJC), in collaboration with UNICEF-Madhya Pradesh Office, Madhya Pradesh State Judicial Academy (MPSJA) and Madhya Pradesh State Legal Services Authority (MPSLSA) organised a two-day State-level Multi-Stakeholder Consultation on Protection of Children with Disabilities, "*Samvad*", on 3-4 August 2024, at the Madhya Pradesh State Judicial Academy, Jabalpur. It was organised under the guidance of the Juvenile Justice Committee, Hon'ble Supreme Court of India (SC-JJC), in preparation for the Ninth Round of the National Stakeholders Consultation in September 2024.

The focus of the Consultation was on children with disabilities (CwD), their vulnerabilities and entitlements the roles and responsibilities of various agencies and departments and identification of actions to address the psycho-social vulnerabilities as well as ensuring effective service delivery for children with various forms of disabilities. The Consultation also entailed a joint review of the progress made since State-level Multi-Stakeholder Consultation on Child Protection "*Vimarsh*" held in 2023, towards improved services for Children in Conflict with Law (CICL) by key stakeholders.

To understand the challenges and document promising practices adopted by different functionaries, an online pre-consultation survey was designed with assistance from Enfold Proactive Health Trust, Bengaluru. With the approval from the MP-JJC, it was thereafter administered to the Juvenile Justice Boards (JJB), Child Welfare Committees (CWC), Children's Courts, District Legal Services Authority (DLSA), Special Juvenile Police Units (SJPU), District Child Protection Units (DCPU), Special Public Prosecutors (SPP) and Superintendents of Child Care Institutions (CCI). Responses were received from 291 functionaries. Combined with the discussions and group work during *Samvad*, the pre-consultation survey aided in the identification of issues, challenges, and potential solutions which have been documented in this report.

1.2. Profile of Participants

Samvad was attended by 222 participants, including the Hon'ble Administrative Judge & Hon'ble Judges of High Court of Madhya Pradesh, Registry Officers of High Court of Madhya Pradesh, Secretariat of the MP-JJC, representatives of Madhya Pradesh State Judicial Academy, Madhya Pradesh State Legal Services Authority (MPSLSA), Home Department (Police Headquarter Training, Crime Investigation Department, Crime Against Women, Cyber), Department of Women & Child Development (DWCD), Department of School Education, Department of Health, Department of Tribal Affairs, Social Justice and



Empowerment of Persons with Disabilities Department, Law and Legislative Affairs Department, Department of Technical Education and Skill Development, Panchayat & Rural Development Department, the Commissioner, Persons with Disabilities, State Commission for Protection of Child Rights, lawyers, prosecutors, academicians and Civil Society Organisations working on child rights and rights of persons with disability (PwD), organisations representing caregivers of CwD, and UNICEF. Samvad also witnessed the meaningful participation of CwD and their families, who shared their journey, as well as their recommendations on areas of intervention.

Further, district-level stakeholders attended the consultation including Judges of the Children Court, representatives of the DLSA, Principal Magistrate and Members of JJBs, Nodal Officers of School Education, Health, Department of Home, Tribal, Department of Technical Education, Panchayat Raj and Rural Development Department, Social Justice and Empowerment of Persons with Disabilities Department, and Department of Women and Child Development (DWCD), SJPU, Jabalpur, Commissioner of Nagar Nigam, District Collector Jabalpur, Inspector General, Deputy Inspector General and Superintendent of Police, Commissioner of Nagar Nigam, Jabalpur, SJPU, Child Welfare Police Officers (CWPO) and Shourya Didi, DCPU, Legal-cum-Probation Officers (LCPOs), Superintendents of CCIs including Special Homes (SH) and Places of Safety, Assistant District Public Prosecution Officers, Chairpersons and Members of CWCs, Counsellors, District Legal Aid Officers, Support Persons (SP), Public Prosecutors (PP), Panel Officers, District Legal Aid Officers, Interpreters, Special Educators, Mental Health Professionals, doctors and health experts working with CwD. The most notable participants were Children with Disabilities, five of whom shared their stories, challenges and solutions at the inaugural event and others participated in the sub-group deliberations and cultural evening.

1.3. Highlights of Samvad



In his Inaugural Address, Hon'ble Shri Justice Sanjeev Sachdeva, Administrative Judge, High Court of Madhya Pradesh citing UNICEF statistics that 15% of the global population, including nearly 240 million children have disabilities,¹ emphasised the need for provision of emotional, physical and financial support, essential services, such as medical support, interpreters, and special

education to CwDs. His Lordship added that the Consultation will focus on the Juvenile Justice (Care and Protection of Children) Act, 2015 (JJ Act) and the principles of the Rights of Persons with Disabilities Act, 2016 (RPwD Act 2016 Act 2016 Act), such as non-discrimination, full participation and respect for inherent dignity, autonomy to make one's own choices and acceptance of PwD as part of human diversity along with the principle of evolving capability of children while addressing the needs of children in need of care and protection (CNCP), children in conflict with the law (CICL), and child survivors of crime with disabilities. His Lordship encouraged the participants to take *Samvad* as an opportunity to introspect on existing measures and mechanisms, develop action plans and set targets for the future. His Lordship commended Hon'ble Shri Justice Anand Pathak, Chairperson, JJC for key initiatives, such as the *Shourya Didi* mentorship program to support survivors of sexual abuse in their rehabilitation and recommended the State to support and take such initiatives forward. His Lordship noted the presence of sign language interpreters and advocated for it to become a regular feature for all future programs, as well as braille copies of documents in all offices to advance accessibility. His Lordship underlined the importance of creating an inclusive society where no CwD is left invisible.

Hon'ble Shri Justice Sushrut Arvind Dharmadhikari, Judge High Court of Madhya Pradesh & Chairperson, POCSCO Committee spoke about the heightened vulnerability of PwD, especially women, to sexual abuse and the need for robust protection and support. Communication barriers, dependency on caregivers and social isolation are significant factors that contribute to this increased risk. In the context of trial processes involving CwD. His Lordship highlighted the need for specialised support, including counselling, interpreters, translators, sensitivity and care from judges, accessible courtrooms with ramps, elevators, accessible seating and information in braille. His Lordship advocated



¹ Children with disabilities, UNICEF, available at <https://www.unicef.org/disabilities#:~:text=Fifteen%20per%20cent%20of%20the,million%20of%20them%20are%20children.>

for a comprehensive, multi-disciplinary approach to the rehabilitation of CwDs, including vocational training and psychological support and training programs for lawyers, law officers and judges to enhance their sensitivity and care in coordination with NGOs. Recognising that inclusion of CwD is both a legal and moral duty, his Lordship called for making the legal system more inclusive, accessible, and responsive to ensure that PwD receive the justice and support they deserve.



In his Keynote Address, Hon'ble Shri Justice Anand Pathak, Judge High Court of Madhya Pradesh & Chairperson, Juvenile Justice Committee drew attention to the power of emotions in communication and the need for practical solutions. Lordship appreciated the voices of children to create an impactful start to the Consultation. In the context of child survivors of sexual violence with disabilities, Lordship emphasized the need for a dashboard of experts to ensure prompt investigations and statements. Discussing the RPwD Act 2016, Lordship explained its connection to artificial intelligence, climate change, and mental health. Lordship stressed the importance of supporting child victims beyond the justice process, through programs like *Shourya Didi*. Lordship highlighted the utility of social audits, involving

community volunteers, in addressing issues that are otherwise taken for granted or overlooked in government-run homes. In conclusion, Lordship emphasised the need for greater sensitivity, particularly regarding mental health and issues concerning CwD.

Ms Sufiyah Faruqi Wali, Commissioner, Department of Women & Child Development, Govt. of Madhya Pradesh emphasised the collective social responsibility to create a more inclusive society for CwD. She emphasised that every family with a CwD faces significant economic hardship and disability is not about charity but about addressing society's collective failure to meet humane standards. She drew attention to the inability of the health and education system to comprehensively address the diverse needs of CwD. Neglect, abuse, and indignities particularly at public places like railway stations and buses, often go unreported. She expressed concern that such exclusion leads to isolation, sometimes within the family, which can result in complex mental health issues and, in some cases, criminal behaviour. She urged that legal systems and social compliance must step in, where society lags. She concluded by sharing that the DWCD has started training Anganwadi workers to become the first level of screening for developmental delays or disabilities in children aged 0 to 6 years. Early identification could ensure better inclusion, monitoring, and support for the child within the system.





In his remarks, Mr Anil Gulati, In-charge-Officer, UNICEF, Bhopal shared that UNICEF India's first youth advocate, 16-year-old Gauranshi Sharma who won a Deaflympics medal in Brazil in 2022, is from Madhya Pradesh. He explained the need to prioritise CwD in government schemes, including education, health, social justice, and child protection systems. He stressed the importance of early detection, prompt referral, and treatment focusing on the 4 Ds: defects, disease, deficiency, and developmental delays, which is the core of the Rashtriya Bal Swasthya Karyakram (RBSK) program. He advocated for a rights-based approach, where children are seen not as beneficiaries but as stakeholders and highlighted the need for accessible disaggregated data and information systems for better planning, inter-department convergence and customised services in Schools, Anganwadis, Hospitals and Juvenile Justice structures.

In his Welcome Address, Mr Anil Kumar, Secretary, Juvenile Justice Committee, High Court of Madhya Pradesh emphasised the responsibility of the participants to prioritise the rights, welfare, and future of children in the discussions, highlighting that a just, compassionate, and inclusive society begins with individual action. He expressed gratitude to the Supreme Court for bringing the issues of CwD into focus and encouraged the participants to share their expertise and best practices and engage in constructive discussions to shape innovative solutions for the integration and rehabilitation of CwD, in accordance with the roadmap laid down by the Supreme Court.



Mr Krishnamurty Mishra, Director, Madhya Pradesh State Judicial Academy, Jabalpur delivered the Vote of Thanks, expressing gratitude to all the Hon'ble Judges who graced the occasion, judicial officers, officers from the MP SLA and District Court Jabalpur, UNICEF Bhopal, representatives from the various State Government Departments, guests, participants, and media representatives for their participation and support.

Experience Sharing by Children with Disabilities

Sonia Rakhia, a 21-year-old person with disability and a 9th standard student, expressed her determination to complete her education, become an officer and lead an independent life. She lost both her parents, and aspires to honour her parents' memory by achieving her goals. Her father was discouraged from sending her to school due to her advanced age, but he believed that, "*Sikhne ki umar kabhi nahi hoti*" [There is no age limit for learning]. She also highlighted the lack of facilities for wheelchair users in public spaces such as trains, hospitals, buses and shared her dreams of travelling internationally, riding in a helicopter and seeing the world. Sonia wished for these opportunities for all children and advocated for the establishment of a helpline for CwD. an increase in the quantum of disability pension.

1.4. Design of the Consultation

The Consultation was designed based on the guidance note shared by the Hon'ble Juvenile Justice Committee, Supreme court of India, with dedicated technical sessions on the entitlements of CwD, relevant legislative framework, and on the gaps, challenges and recommendations for strengthening the response to CwD in the Juvenile Justice System. The agenda of the Consultation is attached as Annexure-I.

Technical Session-1 was chaired by **Hon'ble Shri Justice Anand Pathak, Judge High Court of Madhya Pradesh & Chairperson, Juvenile Justice Committee**. His Lordship recommended creation of sensory parks in each district to sensitise children without disabilities about the experiences of CwD. His Lordship also suggested training of Shourya Didi in National Forensics Sciences University Gandhin Nagar. In this Session, Ms Radhika Alkazi, Founder & Managing Trustee, ASTHA, Delhi gave an overview of the types of disabilities recognised under the RPWD Act and a rights-based perspective rooted in addressing systemic barriers to the participation of CwD. She noted the challenge of lack of accurate data on CwD as the Census data, 2011 may not include a wide range of disabilities (RPWD Act, 2016 expanded the definition of disabilities), especially invisible disabilities. She shared data on school enrolment of CwD in Madhya Pradesh and challenges faced by CwD in access to education in government schools in India. She stressed upon issues such as causal linkages between disability and other health factors such as malnourishment and non-communicable diseases, research into higher school dropout rates amongst CwD, training of Anganwadi workers to detect early signs of disabilities and corrective actions and physical and behavioural accessibility for CwD in schools.

A status update of the services available to CwD in Madhya Pradesh was shared by Dr. Ram Rao Bhosle, Commissioner, Social Justice and Empowerment of Persons with Disabilities Department, Ms. Sufiyah Faruqui Wali, Commissioner, DWCD, Mr Harjinder Singh, Director, Rajya Shiksha Kendra, Madhya Pradesh Bhopal and Dr Pragya Tiwari, Sr. Joint Director, Department of Public Health and Medical Education. The representatives of the various departments also highlighted the key challenges and their suggestions for addressing the gaps.

Technical Session-2 was chaired by **Hon'ble Shri Justice Gural Singh Ahluwalia, Judge High Court of Madhya Pradesh & Member, Juvenile Justice Committee.** His Lordship stressed on the need to use appropriate and sensitive terms for CwD and addressing the needs of CwD from a rights approach, rather than sympathy. His Lordship suggested establishment of a sports facility for CwD to help them compete in various events including Paralympics. Mr Anant Kumar Asthana, Child Rights Advocate, presented *the key legal provisions for CwD in the POCSO Act, 2012, Bhartiya Nyaya Sanhita, 2023 (BNS), Bhartiya Nagrik Suraksha Sanhita, 2023 (BNSS), RPWD Act, and the Mental Healthcare Act, 2017 (MH Act)* and drew attention to the need for consideration of the interplay of laws.

Technical Session-3 on Children with Disability in the Juvenile Justice System was chaired by **Hon'ble Shri Justice Sushrut Arvind Dharmadhikari, Judge High Court of Madhya Pradesh & Chairperson POCSO Committee.** Prof. (Dr.) Priya Sepaha, Professor & Dean School of Law & Public Policy Avantika University, Ujjain spoke on *Addressing Child Psychopathy: Challenges and Solutions in the Indian Criminal Justice System.* She noted the lack of awareness amongst the stakeholders regarding CICL with mental health problems and emphasised the need to strengthen the mental health infrastructure and adopt a therapeutic approach for them. Dr. Shekhar Sheshadri, Advisor-SAMVAD & (Former) Senior Professor, Department of Child & Adolescent Psychiatry, Bengaluru and Mr Shubham Krishna Borah, Project Officer (Policy and Law), SAMVAD, NIMHANS spoke on *The Invisibilisation of Meta Minorities: Applying a vulnerabilities and Child Rights Lens to Children with Disability.* They provided an overview of mental health and psycho-social vulnerabilities of CwD and discussed the related legal framework in India. To address the legal and other gaps in this context, they suggested solutions such as dedicated legal aid services and training programs on CwD for all stakeholders, accessibility adaptations in all courtrooms, establishing fast-track courts and strengthening mechanisms for monitoring and enforcing implementation of laws. Ms Shubham Thukral, Sr. Scientific Officer, School Behavioural Forensics, National Forensic Sciences University, Gandhinagar (NFSU) spoke on *Psycho-social vulnerabilities of child survivors of violence and therapeutic recommendations for children with disabilities.* She shared her experiences of working with CICL and CNCP with disabilities and noted the challenge of independent living they often confront. With respect to CICL with disabilities, the stakeholders often assume or omit causal links between the crime and any medical or mental illness and tend to label the child. For child survivors of sexual violence with disabilities, there is a need to focus on repairing harm and their sense of sexuality. She suggested building community labs for addressing psycho-social factors which affect CwD to advance social science research and enable intensive psycho-social interventions for children and caregivers, with training of stakeholders on how to screen, manage and prevent mental illness amongst CwD.

This was followed by an open-house sharing session where participants raised questions and challenges faced by CwD, as well as shared practical solutions. Padlet, an interactive tool that enabled participants to share their suggestions, was also effectively used throughout the consultation.

The Consultation also featured a cultural program in the evening by CwD and college students. The event included dance performances and skits aimed at sensitising audiences about challenges faced by CwD.

On 4 August 2024, **Technical Session-IV** was chaired by **Hon'ble Shri Justice Anand Pathak, Judge High Court of Madhya Pradesh & Chairperson, Juvenile Justice Committee**. Data analysis on certain specific aspects concerning CwD and CICL, based on the template provided by the Juvenile Justice Committee, Hon'ble Supreme Court of India, as well as the pre-consultation survey was presented by Ms Swagata Raha, Director-Research and Co-Director, Restorative Practices, Bengaluru. She noted challenges such as lack of data on CwD, gaps in data interpretation and emphasised the need for an integrated data system to track and strengthening the implementation of child protection laws, visibilise concerns of marginalised groups of children, monitoring and accountability of functionaries and taking steps towards identification of areas for capacity building, resource allocation, and reform. She also suggested having *Shourya Bhaiyas*, on the lines of *Shourya Didi*, who can serve as role models and mentors for CICLs and creation of a resource for terminologies in Hindi for PwD and CwD.

Following this, Mr Anil Kumar, Secretary, MP-JJC presented on the availability of services, referrals, early diagnosis, linkages, and professional and skilled workforce, as well as convergence with specialised services and family based restoration and institutional rehabilitation services for CICL with disabilities. He informed that there are no CwD in Observation Homes, Special Homes and Place of Safety in Madhya Pradesh. However, he acknowledged that there is a need to verify this especially in relation to invisible disabilities. He shared that 38 JJBs and 33 POCSO Courts in the state have accessibility features for CwD and that the High Court of Madhya Pradesh had notified guidelines for the recording of evidence for vulnerable witnesses in 2023. He recommended accessibility assessment of CCLs, alternative vocabulary development for CwD, strengthening mental health services and amendment of Individual Care Plan (ICP) (Form 7 in JJ Act) to address the needs of CwD among other recommendations.

Mr Amitabh Awasthi, Joint Director, Mission Vatsalya, DWCD, Bhopal addressed the situation with respect to CNCP with disabilities and the availability of services, workforce, and rehabilitation for child survivors of violence. He acknowledged the need for information provision for CwD on the MIS portal to address the challenge of lack of data on CwD. He noted challenges such as misconceptions regarding bail in heinous offences by CICL, lack of adequate training of Probation Officers and shortage of staff such as Mental Health Professionals and other child protection workforce, and informed that the DWCD is taking active steps to address these.

Hon'ble Smt Justice Anuradha Shukla, Judge High Court of Madhya Pradesh & Member, Juvenile Justice Committee chaired the **Technical Session-V** and initiated by congratulating the children who participated in the cultural program. Further, her Ladyship shared her experience of working in POCSO courts and recounted the challenge of recording evidence of very young victims. Her Ladyship

also stressed on counselling parents of POCSO victims and the need to take assistance from DLSA for aiding CwD who are victims of sexual violence. Also her Ladyship drew attention to the continued references to the criminal antecedents of CICL, in violation of the safeguards in the JJ Act.

Mr Sandeep Rajak, Commissioner, Persons with Disabilities, Social Justice and Empowerment of Persons with Disabilities Department presented on *Key vulnerabilities that children with disabilities face and the State's Strategic Vision for CwD*. He provided an overview of the social and economic challenges faced by CwD and their unique vulnerabilities to violence, cruelty, criminal activities, and addiction, among others. He offered a range of solutions such as early screening and intervention for CwD, linkages with social security benefits, awareness and sensitization campaigns, capacity building of teachers for inclusive education, accessible infrastructure, and increasing the amount under social security pension and scholarships for CwD. He also shared that he had a meeting with Ms Sufiyah Faruqui Wali, Commissioner, DWCD where they decided to have coordinated meetings of their respective departments to address the issues that were raised in the Consultation.

This was followed by group work focused on the status, challenges, gaps and recommendations for the improved delivery of services to CICL, CNCP, and child survivors of violence. In order to ensure children's inputs and suggestions, the Consultation also had a group of CwD to share their challenges and provide recommendations. They were assisted by the interpreters and other facilitators.



Progress made on the Action Plan with 20 Key Action points pertaining to CICI that was arrived at during *Vimarsh 2023* was reviewed by the Juvenile Justice Committee, High Court of Madhya Pradesh, after an overview of the action plan by Mr. Samresh Singh, Registrar (IT), High Court of MP. He shared that many of the State's recommendations were commended at the National Consultation on CICI organised by the Hon'ble Juvenile Justice Committee Supreme court of India, such as conduct of social audits in CCIIs to identify gaps, challenges and offer recommendations and creation of community based centres to assist CNCP, establishment of child-friendly corners and the *Shourya Didi* program, and judicial orders passed by Hon'ble Shri Justice Anand Pathak's order on community service which includes visits to CCI,² and the masking of criminal antecedents in character certificates and ensuring that these do not affect the employment of former CICI.

Mr Amitabh Awasthi, Joint Director, Mission Vatsalya, DWCD, Bhopal gave a status update on the progress made on the Action Plan from *Vimarsh 2023*:

- ✦ Training programs have been conducted on preparation of ICPs and on ensuring regular follow-ups and more training will be provided.
- ✦ To address shortage of experts in the State, there is a need to strengthen the processes of empanelment and identification of experts by the DCPU.
- ✦ Directions have been issued for security and safety audits for children in CCIIs due to incidents of children running away.
- ✦ Sponsorship has been provided to 26,000 children in 2024 and was provided to 13,000 children in 2023. 8,000 children in Seoni district were provided sponsorship and this can be replicated in other districts.
- ✦ The discussion on composite infrastructure is in progress.
- ✦ Work on operational guidelines under the Madhya Pradesh Child Protection Policy, 2020 will be undertaken.
- ✦ The concern regarding salaries provided to contractual workers was addressed and hikes were introduced, but given that it is still inadequate, further steps will be taken to address the issue by the DWCD.

². ArunKugunurkar v SanjuAhrwar, MCRC No. 23880 of 2024, decided by the High Court of Madhya Pradesh on 03.07.2024:

"A suggestion has been given to counsel for the petitioner to invest one hour of community service while visiting Mercy Home behind Collectorate building Datia Road (Gwalior) with some food items/snacks and spend one hour with the children/inmates/families, who are of humble background and are being taken care of by the NGO/Society sponsored by State Government. **This community service of one hour would not only be satisfying to the soul but would also give a message to the differently abled children that society and its members care for them and that they are not considered as the children of the Lesser God.**"

Mr Durgesh Rathore, Assistant Inspector General, CID, PHQ Bhopal shared a status update by the Home Department on the progress made on the Action Plan in Vimarsh 2023:

- ✦ Police officers are being trained regarding the Madhya Pradesh Child Protection Policy, 2020 at the district-level.
- ✦ Nodal officers at the district level have been instructed to maintain contact with different departments to undertake diversion measures for CICL and have been informed about the related process.
- ✦ Directions have been issued to relevant departments regarding various issues such as masking of criminal antecedents of former CICL during the police verification process as per Section 74, JJ Act, ensuring compliance with Rule 8, JJ Model Rules, 2016 and provision of legal aid for CICL. These points have also been incorporated in police training.

However, it was noted that the problem of future employment of CICL being affected by the disclosure of the police about pending or disposed cases during the police verification process still persists and action needs to be taken to address this gap. It was also noted that the other key departments accountable for some of the actions had not provided updates, and also were not represented to share any progress. Further, it was noted that both DWCD and MP Police had not sufficiently taken up interventions in compliance with the action plan.

At the valedictory, Mr Amitabh Awasthi, Joint Director, Mission Vatsalya, DWCD, Bhopal thanked all the stakeholders for organising the Consultation and reiterated some of the action points that need to be worked upon by the DWCD and emphasised that sensitivity, learnt from this Consultation, should be used towards working for CwD.

Mr Lolichen P Joseph, Child Protection Specialist, UNICEF, Madhya Pradesh Office shared that initiatives taken in *Samvad* such as participation of CwD and provision of consultation related documents in braille, have helped Madhya Pradesh set an example for other States. He noted that many of the suggestions and recommendations in the Consultation have a national-level implication such as those with respect to issues concerning disability pension, Ayushman Card for CwD, and conflict between different child protection laws with respect to disability and these can be shared with the Supreme Court prior to the National Consultation by the MP-JJC, for national level policy consideration. He spoke about certain action points which UNICEF can assist with, such as assessment of accessibility (both physical and behavioural) of JJ structures like the JJB, CWC, SJPU, etc. which can help transform them into disability friendly structures in the next five years. Further, UNICEF can also support the imparting of life skills education to CwD in collaboration with the Education Department in all districts, including in CCIs in accessible formats. He also stressed on the need to integrate sessions on CwD in all training programmes for key stakeholders and functionaries.

Hon'ble Shri Justice Anand Pathak, Judge, High Court of Madhya Pradesh & Chairperson, - Juvenile Justice Committee thanked all the participants and persons involved in organising the Consultation. His Lordship shared that the Consultation helps drive the message of sensitivity, cooperation and contributing to society. His Lordship emphasised the need to ensure accountability at the panchayat, block, and district level, by ensuring that the office bearers of the Zilla Panchayat and Parishad are also sensitised on issues concerning CwD.

Mr Anil Kumar, Secretary, Juvenile Justice Committee, High Court of Madhya Pradesh thanked the Hon'ble Judges of the High Court, representatives of the DWCD, Department of Social Justice, UNICEF team, Enfold team, Directors and Officers of the MPSJA, MPSLSA, Registrar (IT), Indian Sign Language (ISL) interpreters, participants who performed in the cultural program and all the participants. He shared that the Consultation helped in networking amongst the child protection stakeholders which will lead to better coordination to address child protection concerns.

The progress, challenges, and potential solutions that emerged during the presentations made at the Consultation, as well as the pre-consultation surveys, and the data based on the template shared by the Hon'ble Juvenile Justice Committee, Supreme court of India is captured in the sections that follow.



Hon'ble Judges, Government representatives, expert resource persons, CwD, and participants offered perspectives on CwD that were sensitive and rights-based. Together, they created a frame within which the experiences and entitlements of CwD can be understood and can guide the future course of action. Significant aspects were as follows:

- ✦ **Building an inclusive perspective on CwD:** CwD are not defined by their disabilities. Disability should be recognized as part of human diversity. The aspirations of CwD are essentially the same as those of other children. The UN Convention on the Rights of Persons with Disability (UNCRPD) affirms that they enjoy all human rights and on an equal basis with other children and that in all actions concerning CwD, their best interest should be a primary consideration. Therefore it is important to take a rights-based approach for provision of services to CwD. They should not be pitied, condescended to, or infantilized, and the benefits provided to them should be seen not as charity, but as their right.
- ✦ **Recognising multiple disabilities:** Disability occurs in diverse forms, both physical and intellectual. The RPwD Act 2016 lists 21 categories of “specified disability”, occurring at various life stages. Some, like intellectual disabilities, specific learning disabilities, and autism, typically onset early and may be detectable in the prenatal stage. Others, such as leprosy, acid attack injuries, and chronic neurological diseases, usually affect adults. Mental illness often emerges in adolescence, while conditions like blindness and hearing impairment can occur at any age. Some disabilities, like haemophilia and sickle cell disease, are inherited, with the latter prevalent in certain tribal groups. Disabilities may coexist or be invisible, such as learning disorders and Attention Deficit Hyperactivity Disorder. Understanding the characteristics of each disability is crucial for developing effective interventions and implementing timely detection strategies.
- ✦ **Barriers to access:** India's ratification of the UNCRPD marks a shift in understanding disability. It emphasises that barriers to access are central to the experience of disability, in addition to the disability itself. The focus should not only be on the child's condition but also on the obstacles they face, such as the lack of disability-friendly infrastructure. Moving beyond a purely medical perspective, it is essential to address these barriers, considering the socio-economic context of CwDs, including factors like gender, community background, and financial status.
- ✦ **Social and educational barriers faced by CwD and their families:** Social exclusion and stigmatisation is experienced by most CwD and their families. Lack of accessible facilities, public transport, public spaces, government offices and courts, hinder the movement and

access of CwD to these spaces. Lack of accessibility in schools, including in teaching methods, learning material, specific areas of schools, school activities and modes of transport to school affect their access to education.³ CwD often do not receive travel allowance despite legal provisions in this regard⁴ or necessary support within the schools for navigation. According to Unified District Information System For Education Plus data, the percentage of CwD enrolled in school in Madhya Pradesh decreased from elementary level (1.06% in 2021-22) to secondary level (0.48% in 2021-22) and further reduced in higher secondary level (0.31% in 2021-22).⁵ Use of restraints for long periods of time and subjecting CwD to repeated assessments and therapies also affects their dignity and rights. Distance and difficulties of the families of CwD in navigating large hospitals in bigger cities for disability certificates and treatments without publicly available accessible information, impedes their access to health and to long term treatment on a regular basis.

- ✦ **CwD face numerous barriers in accessing education in regular schools, which results in children being deprived of education or being pushed out of school.** Mainstream schools deny admission to CwD owing to fear of risks, unwillingness to make accommodation and cite lack of infrastructure and trained staff necessary for children with different disabilities. There is a lack of special educators for CwD in mainstream schools and teachers with B.Ed. in Special Education. CwD face bullying and discrimination in school. Schools usually accept children till the age of 18 though certain PwD may require school education beyond this age. For CwD, independent living is difficult and extended support including late admissions are needed. There is a lack of assistive devices and specialised learning materials, which are crucial for the education and rehabilitation of CwD. Curriculum offered by the MP Board, CBSE, and ICSE are not designed to accommodate the specific needs of CwD. There are limited choices for study streams and subjects for CwD. Shortage of hostels for CwD, especially for girls and women, results in a gendered impact of disability. Writers for CwD in exams are not available at all times and CwD need more time to complete exams.
- ✦ **Increased vulnerability of CwD:** The overlap of social exclusion, stigmatisation, economic disadvantage and barriers in accessing care, compound the vulnerability of CwD. It also increases their susceptibility to abuse and neglect due to increased care-taking burden on the family. There are high rates of anxiety and depression and behavioural challenges amongst CwD as the stress on familial relationships weaken support systems.

³ Based on the findings presented by RadhikaAlkazi, founder and managing trustee of ASTHA, from “Present but Forgotten: CDS Report on Access to Education of Children with Disabilities in Government Schools in India”, a component of the report “Finding Sizes for All” by Centre for Disability Studies NALSAR, available at <https://tinyurl.com/Finding-Sizes-For-All>.

⁴ There is a dedicated component of Inclusive Education under SamagraShiksha for the education of CwSN. Through this component, CwSN are provided support via specific student oriented interventions such as provision of aids, appliances and assistive devices, transportation, scribe and escort allowance support, etc. in order to appropriately address their unique educational requirements in general schools. Source - Accessibility and inclusivity in education for Divyangs (PIB, 29 July, 2024), <https://pib.gov.in/PressReleaseDetailm.aspx?PRID=2038623>.

⁵ Source: This data has been taken from a presentation made by RadhikaAlkazi, founder and managing trustee of ASTHA, at the consultation

- ✦ **Right of CwD to participate in decisions affecting them:** CwD have the right to express their views on matters affecting them, as affirmed by Article 7(3), UNCRPD and their opinions should be considered according to their age and maturity. To uphold this right, health, education, and protection systems should make reasonable accommodations to incorporate the methods of communication used by CwD through braille, tactile communication, large print, accessible multimedia including written, audio, plain-language, human-reader and augmentative and alternative modes. For their effective participation in court processes, there is a need for specialised legal representation, awareness generation amongst legal service providers and adequate accommodations and accessibility in courts - a step beyond reasonable accommodation. As they develop, fostering their independence and recognizing their evolving capacities is essential.
- ✦ **Factors interconnected with disability:** There is a strong link between disability and poverty. CwD from lower economic backgrounds are less likely to get the care they need. Conversely, the economic burden of disability can push families into poverty. Similarly, there is a link between disability and disease. Healthcare systems are crucial for identifying and managing disabilities in children. However, communication gaps can lead to missed diagnoses. CwD face higher health risks with respect to diarrheal diseases, malaria, and respiratory tract infections and conversely, children may develop disabilities from malnutrition or diseases. Lack of proper guidance to parents can result in inadequate care practices, potentially exacerbating the severity of a child's disability. Policies like the National Policy for Rare Diseases, 2021 address conditions intersecting with disabilities. It is essential to understand how disability interacts with various socio-economic and health factors and use/uses relevant policies to provide comprehensive support for CwD and their families.
- ✦ **Support required for families of CwD:** The barriers faced by CwD significantly increase the care giving responsibilities of their families, often for a lifetime. Concerns about the child's care after the caregiver's passing contribute to stress. This can severely impact the mental health of caregivers, leading to burnout and at times, family separation. This issue is often overlooked, and there is a critical need for support systems for families of CwD.
- ✦ **CwDs within the criminal justice system:** CwD are vulnerable to coercion into illegal activities. Criminal justice system actors, including judges, lawyers, and police, should understand the goal of repairing harm and reclaiming the well-being of CwD beyond legal outcomes and allow for more comprehensive care based on established rapport with the CwD.
- ✦ **Institutionalisation of CwD:** CwD are more vulnerable to institutionalisation, with studies showing significant numbers in institutional care.⁶ The RPwD Act 2016 mandates that CwD should stay with their families and be institutionalised only in exceptional circumstances. This is supported by efforts like Community Based Inclusive Development Program on Rehabilitation

of Divyangjan “which aims to create a pool of grass-root rehabilitation workers at community level who can work alongside Asha and Anganwadi workers to handle cross disability issues and facilitate inclusion of persons with disabilities in the society.”⁷ Informed decisions regarding placement of CwD go beyond 'family vs. institution' debates, requiring assessments and social investigation that adequately cover the breadth and depth of the child's vulnerabilities.

- ✦ **Interplay of laws relevant in the context of CwD:** References to the special status and needs of CwD are seen in the JJ Act and the POCSO Act. Under Section 3, JJ Act, the principle of dignity and worth for CwD has implications in the individual, relational (relationships with family and friends), and social contexts. The principle of best interest and the principle of positive measures requires taking into account the multiple vulnerabilities CwDs face and taking steps to reduce them in decisions regarding CwD. The principle of equality and non-discrimination affirms that there shall be no discrimination against a child on the ground of disability and equality of access and opportunity and treatment shall be provided to every child. Procedural accommodations for child victims with disabilities such as requiring the assistance of special educators, interpreters, translators, and persons familiar with the manner of communication of CwD to be taken by the police, magistrate and courts, are steps towards creating an accessible environment for CwDs.

However, the interplay between disability-related legislations and child protection laws needs to be considered. The JJ Act does not refer to the RPwD Act 2016 but mentions its repealed predecessor, the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (1995 Act). Similarly, Section 93, JJ Act refers to the outdated Mental Health Act, 1987. Authorities, particularly the CWCs, need to factor provisions of the RPwD Act 2016 and the Mental Healthcare Act, 2017 (MH Act), that are relevant to their functioning. For instance, Section 9 of the RPwD Act 2016 Act states:

9. (1) No child with disability shall be separated from his or her parents on the ground of disability except on an order of competent court, if required, in the best interest of the child.

(2) Where the parents are unable to take care of a child with disability, the competent court shall place such child with his or her near relations, and failing that within the community in a family setting or in exceptional cases in shelter home run by the appropriate Government or non-governmental organisation, as may be required.

Section 2(14)(iv) states that a child “who is mentally ill or physically challenged or suffering from terminal or incurable disease, having no one to support or look after or having parents or guardians unfit to take care, if found so by the Board or the Committee” is a CNCP. Further Section 2(14)(v) also includes

⁶ Based on the presentation by Radhika Alkazi, founder and managing trustee of ASTHA, at SAMVAD on 3 August, 2024.

⁷ Based on the presentation by Radhika Alkazi, founder and managing trustee of ASTHA, at SAMVAD on 3 August, 2024.

within the ambit of a CNCP, a child “who has a parent or guardian and such parent or guardian is found to be unfit or incapacitated, by the Committee or the Board, to care for and protect the safety and well-being of the child.” The RPwD Act 2016 refers to a “court” but does not make a reference to the CWC under the JJ Act, whereas the JJ Act, even after it was amended in 2021, does not make any reference to the RPwD Act 2016. The CWC will have to bear in mind the provisions of the RPwD Act 2016 while determining whether a child with disabilities can be declared a CNCP. The term “mental illness” is defined in Section 2(s), MH Act to mean “a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognise reality or ability to meet the ordinary demands of life, **mental conditions associated with the abuse of alcohol and drugs**, but does not include mental retardation which is a condition of arrested or incomplete development of mind of a person, specially characterised by sub normality of intelligence.” Section 5(1), MH Act denies children under 18 the right to make an advance directive, while Section 5(4) grants this right to their legal guardian. It is important to determine who can serve as the legal guardian for CNCP and CICL. Section 104, MH Act provides for assessment and treatment of mental illness of persons residing in State run custodial institutions. However, it does not take into account that CCI are also run by NGOs. Further this provision should be read with Section 93, JJ Act pertaining to transfer of a child who is mentally ill or addicted to alcohol or other drugs.

Guidelines for Mission Vatsalya also refer to CwD and children affected by HIV/AIDs in the context of sponsorship and foster care, and also suggest setting up a Special Unit for Children with Special Needs (CwSN) who may receive training in braille, sign language etc and state that special provisions may be made in CCI for children who are unable to go to school due to physical/mental disabilities, like arrangement of Special Educators, therapists and nurses for occupational therapy, speech therapy, verbal therapy and other remedial classes.⁸ It also requires the establishment of “Vatsalya Sadan”, an Integrated Home Complex of CCI with JJB and CWC within the same premises, and states that the estimate for the complex may be made with a view to make it accessible to “special needs children.”⁹

- ✦ **Assessment of mental capacities in the context of preliminary assessments:** In *Barun Chandra Thakur vs Master Bholu* the Supreme Court made a reference to SAMVAD-NIMHANS' methodology for conducting preliminary assessment of CICL under Section 15, JJ Act. The methodology accounts for intellectual disability, mental health disorder, developmental disability, locomotor and sensory disability. According to this methodology, apart from proximal factors, distal factors from the time the mother of the CICL was pregnant are also considered to understand how mental health morbidities can result in disability which lead children to come in conflict with the law.

⁸ Guidelines for Mission Vatsalya, paras 4.1.2, 4.2.2, and 3.1(1).

⁹ Guidelines for Mission Vatsalya, para 3.1(3).

¹⁰ Criminal Appeal no. 950/2022 decided by the Supreme Court on 13.07.2022.

The following policy issues that concern CwD at large emerged during SAMVAD, and may require attention of both the Central Government and State Government:

1. Barriers in accessing schemes and services due to lack of Unique Disability ID (UDID) and Ayushman Bharat Scheme:

Access to Schemes under the Ministry of Social Justice and Empowerment, Department of Empowerment of Persons with Disabilities are possible only if a CwD possesses a UDID.¹¹ Securing Aadhaar Cards is complicated for CwD who cannot provide fingerprints or a retina scan. Section 5, Aadhaar (Targeted Delivery of Financial and Other Subsidies, Benefits and Services) Act, 2016 requires special measures to be taken to issue Aadhaar numbers to persons with disabilities. The Direct Benefit Transfer Mission has issued guidelines stating that if fingerprint authentication fails, alternatives like iris scans should be used wherever feasible, and offline options such as Quick Response (QR) codes or mobile-based one-time pins (OTPs) may be considered.¹² However, submissions by CwD and their families and stakeholders at *Samvad*, as well as other reports¹³ revealed that these alternatives are often not applied.

Further, barrier-free access to Aadhaar enrolment and authentication centres is often a challenge. Considering that the UDID Centres are located in urban locations or district headquarters, families residing in rural areas or remote locations have to incur a heavy cost and travel multiple times to be able to complete the formalities for the UDID. The lack of sign language interpreters at these Centres further impedes accessibility. In smaller districts, the absence of requisite experts for the disability assessment also delays the certification process.

Since an Aadhaar Card is an essential document for the UDID¹⁴, its absence affects the grant of a UDID, and in turn, deprives CwD their access to available schemes. **In light of the ground realities, making the UDID mandatory for accessing schemes needs to be revisited. Till such time as these barriers are addressed, provision should be made to make schemes available to those with disability certificates but without UDID.**

¹¹ Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice & Empowerment, Government of India, Office Memorandum (No. P-13013/23/2023-UDID/IT/STATISTICS), dated 13th February, 2024 amended on 29th March 2024 effective from 1st July 2024, available at

<https://depwd.gov.in/mandatory-requirement-of-udid-number-for-availing-benefits-under-the-schemes-programmes-and-services-regarding/>.

¹² Government of India, Cabinet Secretariat, DBT Mission, Office Memorandum No.D-26011/04/2017-DBT, dated 19th December, 2017, available at https://dbtbharat.gov.in/data/aadhaar-uidai/Aadhaar_Exception_Handling_OM_19122017.pdf.

¹³ Smriti Parsheera, IIT-Delhi, Participation of persons with disabilities in India's Aadhaar project (SSRN, 2020, available at https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3700984.

¹⁴ Government of India, Ministry of Social Justice & Empowerment, Department of Empowerment of Persons with Disabilities Notification dated. 8th August 2023, available at <https://swavlambancard.gov.in/uploads/news/171092399375202403191325681383.pdf>.

Pancham Lala 11th standard student who is visually impaired, started by sharing his love for games, chess and travelling. He dreams of visiting Vaishno Devi and becoming a collector. He shared that he can see with his mind, but society often makes him feel insignificant. Pancham described practical difficulties he encounters, such as navigating the streets and distinguishing monetary denominations while making payments. He pointed out the inadequacies in services, like Aadhaar card requirements for retina scans, which do not accommodate the needs of blind persons. He found the current pension of Rs. 600 per month insufficient and called for a shift in societal and governmental perspectives on CwD. Pancham emphasised that given the right opportunities, CwD are capable of making significant contributions and can make history.

2. Enhancing of Social Security Schemes:

- ✦ At Samvad, CwD and their families, as well as government representatives drew attention to the inadequacy of the Comprehensive Social Security Pension of Rs. 600 and financial assistance of Rs. 1200 per month to persons with intellectual disabilities, lack of transport allowances, and the huge economic burden that families of CwD face. Section 24(1), RPwD Act 2016 mandates that the quantum of assistance provided to PwDs should be 25% higher than similar schemes applicable to others. For instance, under the Chief Minister Ladli Bahna scheme, Madhya Pradesh, women receive Rs. 1250 per month, while PwD of all age groups receive only Rs. 600 per month. Hence, the pension amount should be revised accordingly.
- ✦ The certification process for individuals with High Support Needs should be simplified to facilitate access to benefits under various schemes. The caregiver allowance, as stipulated in Section 24(3)(I), RPwD Act 2016, should be provided to children with High Support Needs.
- ✦ The State Government should consider covering the premium for the Niramaya Health Insurance Scheme, which is managed by the National Trust for persons with Autism, Cerebral Palsy, Intellectual Disability, and Multiple Disabilities. This Scheme is more comprehensive than Aayushman Bharat, particularly in covering outpatient and therapy expenses.
- ✦ All government departments and local bodies are mandated to allocate 5% of their poverty alleviation budgets to PwDs, as per Section 37(b), RPwD Act 2016, this needs to be implemented.

3. Ensuring Education:

- ✦ With respect to educational support, the need for textbooks, assistive devices, and transport allowance was flagged by CwD, their families, and several stakeholders.

Several initiatives of the government exist such as online textbooks in ISL or in text to speech format, NCERT books in braille,¹⁵ and flexibility in choice of subjects. However, the awareness, operationalisation, and availability of these services remain a challenge.

- ✦ Under Samagra Shiksha, in Madhya Pradesh, monthly allowance for 10 months in the form of transport allowance of Rs. 300, escort allowance of Rs. 300, reader allowance of Rs. 250 and stipend of Rs. 200¹⁶ are provided to students with special needs with 40% or more disability, but this is inadequate to meet the basic costs involved in ensuring the retention of CwD in schools. The disability pension and allowances provided to CwD need to be revised to factor inflation and rising costs of living.
- ✦ Section 17(a), RPwD Act 2016, mandates the State Government and local authorities to conduct a survey every five years to identify school-going CwD. These surveys should be carried out promptly to ensure all such children are identified and supported.
- ✦ Special schools run by NGOs are not currently included under the POSHAN Aahaar Scheme. As there is a necessity for therapeutic intervention for CwD, which is not possible at Anganwadis, the DWCD should extend the POSHAN Aahaar scheme to all special schools registered with the Department of Social Justice and Empowerment, under Section 50, RPwD Act 2016.
- ✦ Section 31(1), RPwD Act 2016 mandates free education and admission to schools of choice for CwD. However, many private schools refuse to comply. The Education Department should create a dedicated portal to facilitate such admissions under the RPwD Act 2016, distinct from the Right to Education Act, 2009 as the RPwD Act 2016 allows for admission up to the age of 18, in a school of choice and applies to minority institutions as well.

4. Need for early intervention and schemes for 0-6 years:

- ✦ At present, there is a lack of schemes on early intervention available for CwD between 0-6 years.¹⁷ Early detection and early intervention can avoid the precipitation of several disabilities and reduce their impact. Although prevention, early identification and

15 NCERT Initiatives for Inclusive and Accessible Education, National Council of Educational Research and Training, available at <https://ncert.nic.in/accessibility.php>.

16 Presentation by Mr Harjinder Singh, Director, Rajya Shiksha Kendra, Department of School Education, Bhopal (M.P.) at Samvad. However, transport allowance has been enhanced to Rs. 350 as per month as per the following: Inclusive Education for Children with Special Needs, Samagra Shiksha, Department of School Education and Literacy, Ministry of Education, Government of India, available at <https://samagra.education.gov.in/inclusive.html>.

17 One policy in this regard is Disha - Early Intervention and School Readiness Scheme, by the Department of Empowerment of Persons with Disabilities, Ministry of Social Justice and Empowerment, Government of India. This scheme aims at setting up Disha Centres for early intervention for CwD (aged 0-10 years) covered under the National Trust Act. It provides for day-care facilities, therapies, training and support to family members, counselling to parents or guardians of PwD, transport facilities, etc. This scheme is limited to CwD disabilities covered under the National Trust Act, 1999, which are Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities. Available at <https://www.myscheme.gov.in/schemes/deirs>.

18 Government of India, Ministry of Social Justice and Empowerment, National Policy for Persons with Disabilities, para 43 (10 February 2006) No. 3-1/1993-DD.III, available at <https://cdnbbsr.s3waas.gov.in/s3e58aea67b01fa747687f038dfde066f6/uploads/2023/10/20231013248779923.pdf>.

intervention features in the National Policy for Persons with Disabilities, 2006¹⁸, Draft National Policy for Persons with Disabilities,¹⁹ and Scheme for Implementation of the Rights of Persons with Disabilities Act, 2016 (SIPDA),²⁰ more dedicated and widespread interventions are required in all districts, urban, and rural locations, to enhance access to early interventions. Furthermore, the disability pension is limited to a particular age group. For instance, in Madhya Pradesh, it is only applicable to PwD above the age of six years. Early intervention is crucial in preventing the progression and reducing the impact of disabilities. Therefore, **social security pensions should be provided to all PwDs, irrespective of age**, in accordance with Section 4(1), RPwD Act 2016, that emphasises that measures should be taken to ensure that CwD enjoy their rights equally with others.

Voice of a Mother of a CwD:

Need for Early Intervention and Long-term Support

Priti Dubey, shared aspects of her journey of raising her son, Mayank, a child with autism and drew attention to the impact of delayed detection of disability on the development of a child. The family received conflicting advice from doctors when Mayank's milestones were delayed, and faced difficulty in finding a school willing to accept him. Mayank is now enrolled in a school for children with intellectual disability, where he receives therapy, and participates in different activities. Early intervention, however, would have made a significant difference in his development.

Priti expressed deep concern about Mayank's future when his caregivers may be no more. Raising the issue of the lack of continuity in support for CwD when they turn 18, she said that learning should continue as long as the child is willing and able. She also highlighted the lifelong caregiving responsibilities of families and expressed concern for her daughter, who may eventually have to balance her own family responsibilities while caring for Mayank. She highlighted the need for better vocational training programs tailored to children like Mayank, which would help them get employment, accessible loan options, and increased social pensions, which would help them secure financial independence.

19 Department of Empowerment of Persons with Disabilities (Divyangjan), Draft National Policy for Persons with Disabilities, Chapter 3, 2021 (Ministry of Social Justice and Empowerment), Available at <https://socwelfare.py.gov.in/sites/default/files/ministry-social-justice-and-empowerment.pdf>.

20 Government of India, Ministry of Social Justice & Empowerment, Department of Empowerment of Persons with Disabilities, Scheme for Implementation of Rights of Persons with Disabilities Act (SIPDA), available at <https://cdnbbsr.s3waas.gov.in/s3e58aea67b01fa747687f038dfde066f6/uploads/2023/12/202405092093940198.pdf>. With an aim to provide occupational therapy and physiotherapy, speech therapy, early educational intervention and preparatory classes for school readiness for children in age group 0-6 years who are at risk or with disability and/or development delay, the government has set up 22 Cross-Disability Early Intervention Centres for Children with Disabilities (CDEIC). Department of Empowerment of Persons with Disabilities, Cross-Disability Early Intervention Centres, available at <https://depwd.gov.in/cross-disability-early-intervention-centres/>.

She highlighted the social stigma faced by the family, including neighbours calling Mayank “*pagal*”, which has led to their isolation. She shared that Mayank needed full-time support for his daily needs and routines. The family find it difficult to visit relatives or work, leaving Mayank unattended. She urged for improved safety and transportation facilities for CwD. Mayank enjoys singing, playing mobile games, watching TV, and travelling, and is skilful with digital devices.

5. **Consideration of Interplay of Laws:** Authorities, particularly the CWCs needs to factor provisions of the RPwD Act 2016 and the MH Act, that are relevant to the separation of a child from a parent on the ground of disability,²¹ admission of a minor to a mental health establishment,²² and the separation of a child from the mother receiving care, treatment or rehabilitation at a mental health establishment.²³ This can be addressed through amendments to the principal legislations i.e., the JJ Act, RPwD Act 2016 and the MH Act. Amendments must also be made to the JJ Model Rules, 2016 so as to ensure that relevant provisions concerning CwD are incorporated. Further, legal terminology used to refer to persons with disabilities in different legislations also need to be reconciled.
6. **Data on CwD in the Justice System:** There is negligible data on child victims, CICL and CNCP with disabilities. Reliable data cannot be populated unless systematic data collection protocols are in place that enable such disaggregation. An integrated data management system should be designed to comprehensively record the status of all children, including CwD in the justice system.
7. **Accessibility of courts, police stations, and authorities:** Police stations, Courts, JJBs, CWCs, and CCLs lack appropriate infrastructure, including ramps, accessible toilets, braille materials, and are not in line with “Harmonised Guidelines and Standards for Universal Accessibility for India, 2021” issued by the Ministry of Housing and Urban Affairs.²⁴ While ramps may have been created, these often do not meet basic accessibility standards. All new constructions should mandatorily adhere to these guidelines and existing construction should be audited for their accessibility. All public buildings should be made accessible to CwD. The Department of Urban Development needs to issue a notification requiring accessibility compliance as a condition for the approval of building plans.

21 RPWD Act, 2016, Section 9.

22 MH Act, 2017, Section 87.

23 MH, 2017, Section 21(2).

24 Department of Empowerment of Persons with Disabilities, RPwD (Amendment) Rules, 2023-Harmonised Guidelines and Space Standards for Universal Accessibility in India by 2021- By MoHUA (28 November 2023), available at <https://depwd.gov.in/rpwd-amendment-rules2023-harmonised-guidelines-and-space-standards-for-universal-accessibility-in-india-by-2021-by-mohua/>.

8. Travel-Related Concessions and Accessibility:

- ✦ **Railway Concessions:** The Railway Department provides concessions to a limited number of PwDs and uses outdated and offensive terminology to describe certain disabilities such as “MansikVikruti” and “deaf and dumb”. The department should revise this language to reflect the appropriate terms as specified in the RPWD Act. Additionally, children with autism, who are among the most vulnerable, should be included in the list of eligible categories for railway concessions, as they were previously under the “Mental Retardation” category under the PWD Act 1995. Furthermore, the Railway Department requires a separate concession certificate and card for PwDs, which should be integrated with the UDID card system to eliminate the need for multiple documents.
- ✦ **Concessions in Private Buses:** CwD and their caregivers should be granted concessions in private buses, with specific seats reserved for them.
- ✦ **Accessible Tourist Places:** Government-operated tourist sites should be made fully accessible to CwD, with no charges imposed on them. Assistive devices, such as wheelchairs, should be made available upon request.



5.1. Progress specific to children in conflict with law, children in need of care and protection, child victims including survivors of sexual violence, and children with disabilities in Child Care Institutions

1. **Guidelines for Vulnerable Witnesses:** The High Court of Madhya Pradesh has notified Guidelines for Recording Evidence of Vulnerable Witnesses in Criminal Matters, 2022 on 23 January 2023.²⁵ CwD are covered under the ambit of vulnerable witnesses.
2. **Database of Special Educators, Experts and Support Persons**
 - ✦ 15 DCPUs (Anuppur, Bhind, Bhopal, Datia, Dhar, Guna, Jhabua, Khargone, Sagar, Shahdol, Sidhi, Singrauli, Shivpuri, Tikamgarh, Vidisha) have created a database of mental health experts, translators, interpreters, special educators, counsellors, psychologists or psycho-social workers.²⁶
 - ✦ 19 DLSAs have notified a panel of Support Persons to assist child victims with disability.²⁷
3. **Coverage of CwD in institutional and non-institutional care:**²⁸
 - ✦ In the 137 CCLs in MP, of the 2801 children housed therein, 424 are CwD, of which 410 are placed in Children's Homes, 13 are in Specialised Adoption Agencies and only one was in an OH.
 - ✦ All these CwD benefit from various schemes, and have Aadhaar and Ayushman cards. ICPs for each child have also been prepared.
 - ✦ Five CCLs are specifically designated for CwD. These are SOS, Balgram in Bhopal, Missionary of Charity in Jabalpur, Sewa Dham Ashram in Ujjain, Yug Purush Dham in Indore and Lifeline Society in Sagar.
 - ✦ In 2023-24, out of 14,215 children who benefited from non-institutional care, 85 were CwD. Of these, 18 CwD were placed in adoption, 47 were provided sponsorship, one was placed in foster care, and 18 were provided after-care.

25 Available at

[https://mphc.gov.in/PDF/web_pdf/CJ/B-553%20Dt%2023-01-2023%20\(Relating%20Vulnerable%20Witnesses%20Committee\).pdf](https://mphc.gov.in/PDF/web_pdf/CJ/B-553%20Dt%2023-01-2023%20(Relating%20Vulnerable%20Witnesses%20Committee).pdf).

26 Please note that this is based on the information provided in the responses to the Pre-Consultation Survey by DCPU representatives and has not been independently verified by Enfold Proactive Health Trust.

27. Based on the data provided in Sheet 5-Disability Info of the template provided by the SC-JJC.

28. Data is drawn from the presentation by Ms Sufiyah Faruqui Wali, Commissioner, Department of Women and Child Development, Madhya Pradesh made at Samvad on 3 August 2024.

4. **Provision of Legal Support:** 89 CwD were supported through legal services or assistance by DLSAs.

5.2. General Progress with respect to CwD

1. Facilitation of UDID & Disability Certificates

- ✦ 8.61 lakh UDID cards have been generated in Madhya Pradesh with 93,761 UDID cards issued for the 0 to 18 age group.²⁹
- ✦ In 2023-2024, 19,642 disability certificates were issued to CwDs.³⁰
- ✦ 13 DLSAs (Barwani, Betul, Bhind, Bhopal, Chhatarpur, Harda, Khandwa, Mandsaur, Mandleshwar, Raisen, Ratlam, Sheopur, Ujjain) coordinated with district-level officers to obtain disability certificates for 182 CwD under Legal Services for Differently Abled Children Scheme, 2021 by the National Legal Services Authority (NALSA).³¹
- ✦ 22 DLSAs (Balaghat, Barwani, Betul, Bhind, Bhopal, Chhatarpur, Chhindwara, Damoh, Dhar, Harda, Jabalpur, Khandwa, Mandsaur, Mandleshwar, Rajgarh, Raisen, Ratlam, Sehore, Sheopur, Tikamgarh, Ujjain, Vidisha) organised awareness programmes on disability certificates which benefited over 288 children.³²

2. Coverage under social security schemes in 2023-2024:

- ✦ 92,000 CwD were registered in Anganwadi Centres (AWCs) out of a total of 74.16 lakh children.³³ However, disaggregated data on CwD who have received vaccinations in AWCs, Aadhaar Cards, and services under the Adolescent Empowerment Programme is not available.
- ✦ 21,504 AWC buildings have disability friendly infrastructure.
- ✦ 75,853 CwD were linked with the Social Protection Scheme of the Social Justice and Special Assistance Department between 1 July 2022 to 30 June 2024.³⁴
- ✦ Under the National Trust, various schemes such as Niraayam, Gharaunda, Disha, Vikaas, Sahaayogee, Gyaanaprabha, Samarth, Sambhav, Prerana, and Badhate Kadam are being implemented in Madhya Pradesh.

29. Data is drawn from the presentation by Dr Ram RaoBhosle Commissioner, Department of Social Justice & Empowerment of Persons with Disabilities, Madhya Pradesh made at Samvad on 3 August 2024.

30. Data is drawn from the presentation of Mr VivekPorwal, Principal Secretary, Department of Public Health & Medical Education, Madhya Pradesh made at Samvad on 3 August 2024.

31. Please note that this number is based on the information provided in the responses to the Pre-Consultation Survey by DLSA representatives and has not been independently verified.

32. Please note that this number is based on the information provided in the responses to the Pre-Consultation Survey by DLSA representatives and has not been independently verified.

33. Data is drawn from the presentation by Ms SufiyahFaruquiWali, Commissioner, Department of Women and Child Development, Madhya Pradesh made at Samvad on 3 August 2024.

34. Based on the data provided in Sheet 5-Disability Info of the template provided by the SC-JJC.

3. Access to education:³⁵

- ✦ 1,18,020 CwSN were identified and enrolled in schools. Among them, 41,455 CwSN at the elementary level and 9,550 at the secondary level were identified with benchmark disabilities.
- ✦ Transport allowances was provided to 41,455 CwSN (40% disability, Class 1 to 8), escort allowances to 11,162 CwSN (70% disability, Class 1 to 8), reader allowances to 775 CwSN (80% blind, Class 6th to 8th), stipends to 18,045 girls with CwSN (40% disability, Class 1 to 8), braille books to 1,302 CwSN (totally blind, Class 1 to 8), and aids and appliances to 8,181 CwSN (40% disability, Class 1 to 8).
- ✦ To support CwSN students, 61 hostels for ages 6 to 14 are operational, with one 50-seater hostel in each district and one girls' hostel at divisional headquarters.
- ✦ 66,759 prosthetic limbs/assistive devices such as callipers, braille kits, etc. were distributed to 33,996 beneficiaries, amounting to Rs. 43.8 crores by the Department of Social Justice and Empowerment of PwD Disabilities through the Elmiko Institute.³⁶
- ✦ Under the Chief Minister Disabled Education Promotion scheme, Madhya Pradesh, 537 beneficiaries received laptops, amounting to Rs. 187.95 crores, and 604 beneficiaries received motor tricycles, amounting to Rs. 253.68 crores.³⁷
- ✦ 3,120 teachers were trained in sign language and braille at the elementary level, and approximately 8,500 high school and higher secondary school teachers were oriented in inclusive education concepts to cater to CwSN students.³⁸
- ✦ Examination accommodations have been introduced at elementary and secondary level, including for board exams. These include extra time for writing exams, open book exams, grace marks, provision for a writer for students with blindness and locomotor disabilities, and the option for students with visual impairments to take music instead of mathematics. Additionally, children with visual impairments, hearing impairments, autism, speech and language disability, intellectual disabilities, and locomotor disabilities have the option to select only one language. For board exams, students with visual impairments are provided with several accommodations, such as using their own data-less computer or typewriter for writing answers and selecting a reader to read the question paper if they do not wish to have a writer. Practical

35. Data is drawn from the presentation by Mr Harjinder Singh, Director, RajyaShiksha Kendra, Department of School Education, Madhya Pradesh made at Samvad on 3 August 2024.

36. Data is drawn from the presentation by Dr Ram RaoBhosle Commissioner, Department of Social Justice & Empowerment of Persons with Disabilities, Madhya Pradesh made at Samvad on 3 August 2024.

37. Data is drawn from the presentation by Dr Ram RaoBhosle Commissioner, Department of Social Justice & Empowerment of Persons with Disabilities, Madhya Pradesh made at Samvad on 3 August 2024.

38. Data is drawn from the presentation by Mr Harjinder Singh, Director, RajyaShiksha Kendra, Department of School Education, Madhya Pradesh made at Samvad on 3 August 2024.

examinations are evaluated based on multiple-choice questions, and these students are allowed to use sketch pens, an abacus, geometry instruments, calculators, or talking calculators during examinations.

- ✦ 52 District Assistant Project Coordinators, IED (APC-IED) were assigned duties to mediate and solve grievances and to support and create awareness to ensure inclusion. 375 mobile resource consultants are working at the block level, to assist CwD.
- ✦ Under Integrated Education, there is a provision for 5% special reservation for students with disabilities in both school and higher education.

4. Availability of Infrastructure, Rehabilitation Centres and programmes:

- ✦ District Disabled Rehabilitation Centres (DDRC), which are one-stop centres providing therapeutic, counselling services, and prosthetic aids to PwD have been established in all districts. 24 DDRCs have separate buildings, and plans are in place to provide buildings for the remaining centres. Facilities are also being created for the repair of assistive devices in DDRCs including audiologists and other specialists. Under the DeenDayal Disabled Rehabilitation Scheme (DDRS), grants are provided for the education, training, and rehabilitation of PwD.
- ✦ The SIPDA, under the Accessible India Campaign (AIC), has made 27 buildings in Bhopal and 42 buildings in Indore accessible, along with 911 government buildings across the State being made barrier-free. Aarushi in Bhopal, an NGO, will conduct accessibility audits in phases across cities, including railway and bus stations.
- ✦ The Atal Bihari Vajpayee Training Centre for Disability Sports, Gwalior, offers sports training and was recognised with the Atal Bihari Vajpayee Disabled Award by the Government of India.
- ✦ The National Mental Health Rehabilitation Institute (NIMHR) has been established in Sehore by the Government of India to provide mental health rehabilitation services.
- ✦ An ITI training scheme for visually and hearing impaired persons has benefited 60 vision-impaired and 76 hearing-impaired individuals, totalling 136 beneficiaries.
- ✦ In Madhya Pradesh, 20 government institutions support training, rehabilitation, employment and overall development of 1574 CwD, and 36 state-aided non-government institutions similarly support 1836 CwD, totalling 3410 beneficiaries.³⁹
- ✦ A sensory park is being created in Chhatarpur, with plans to establish similar parks in other locations.

39. Data is drawn from the presentation by Dr Ram RaoBhosle Commissioner, Department of Social Justice & Empowerment of Persons with Disabilities, Madhya Pradesh made at Samvad on 3 August 2024.

5. **Sign Language Interpreters:** The Indore Deaf Bilingual Academy, Indore teaches sign language and has 50 graduates working all over the country.

6. **Provision of Health Services:**⁴⁰

- ✦ Under the RBSK, in 2023-2024, 110 children with neuro-motor impairments, received free physiotherapy, occupational therapy, sensory integration, and psychosocial counselling at District Early Intervention Centers (DEICs). 17,538 children with developmental delays received free Developmental Quotient and Intelligence Quotient assessments, and 17,483 received free therapy and special education. 164 children with autism spectrum disorders and cerebral palsy were offered free occupational therapy, physiotherapy, and sensory integration services. Among children with clubfoot, 1,315 received free Congenital TalipesEquinoVarus (CTEV) correction by casting, 173 by tenotomy, 326 by bracing, and 57 by the Ponseti method. 16 children suffering from developmental dysplasia of the hip (DDH) received free open reduction with femoral osteotomy surgery. 191 children suffering from congenital deafness received Cochlear Implant Surgery and 163 children suffering from congenital deafness received Auditory Verbal (AV) therapy.
- ✦ Under the National Program for Control of Blindness (NPCB), in 2023-2024, 266 children with congenital cataracts received free cataract surgeries, 75,187 children with visual impairment were provided with free spectacles, and 19 children suffering from Retinopathy of Prematurity (ROP) received free treatment and follow-up care.
- ✦ Under the National Leprosy Eradication Program (NLEP), in 2023-2024, two children with locomotor deformities and disabilities due to paediatric leprosy received free corrective surgeries.
- ✦ Under the National Mental Health Program, in 2023-2024, 11,574 children with intellectual disabilities, anxiety, depression, psychosis, Obsessive Compulsive Disorder, and Manic Depressive Psychosis received free counselling services through “**Mankaksh**” at district hospitals across the state.
- ✦ The National Trust offers a medical insurance scheme that includes an Outpatient component, and Madhya Pradesh is expanding this coverage.
- ✦ A State policy for CwD is being developed in collaboration with the Atal Bihari Vajpayee School of Good Governance, Bhopal.

40. Data is drawn from the presentation of Mr VivekPorwal, Principal Secretary, Department of Public Health & Medical Education, Madhya Pradesh made at Samvad on 3 August 2024.

Disability Prevention Services by

Department of Public Health & Medical Education, Madhya Pradesh

- ✦ Regular screening for defects, deformities, and disabilities is conducted at the village level by RBSK teams.⁴¹
- ✦ Screening at birth for visible defects is done at delivery points, and community screening of newborns is conducted by ASHA and Auxiliary Nursing and Midwifery workers during Home-Based Newborn Care (HBPNC) and Home Based Care For Young Children (HBYC).
- ✦ Anganwadi centres and school-based screenings are carried out by dedicated Mobile Health Teams.
- ✦ Free treatment is available at all Government Medical Colleges, District Hospitals/DEICs, and empanelled hospitals under Ayushman Bharat “Niramayam”.
- ✦ The Vitamin A prophylaxis programme is implemented to prevent visual disability due to Vitamin A deficiency in children aged six to 59 months.
- ✦ Polio immunisation is carried out under the Universal Immunization Program and Pulse Polio Campaigns to prevent locomotor disability in children under five years. Efforts are made to identify hearing-impaired children to prevent the progression of hearing loss.
- ✦ An ASHA-based field survey is conducted for paediatric leprosy suspects.



41. The RashtriyaBalSwasthyaKaryakram features a screening programme for the early identification and intervention of children from birth up to 18 years for any disability, deformity, disease, or birth defect.

6.1. Challenges faced by CwD in the Justice System

1. **Lack of capacities to identify and respond to CwD:** JJBs, CWC, PPs, Special Courts, police, DCPU, and CCI staff and counsellors lack special training and guidance on recognising disabilities and lack skills to communicate and work with CwD. As a result, referrals to specialist services, including health systems are not made. According to the pre-consultation survey, **one in four functionaries had received a case involving a CwD**, and the majority of respondents stated that they were **ill-equipped to understand the needs and behaviours of CwD** and lacked awareness about best practices that can be adopted while working with them. The lack of awareness and sensitization among stakeholders about the unique needs of CwD, can lead to unintended neglect, inappropriate handling of such cases, and fuel stigma and discrimination.

**Respondents who
reported having
dealt with a CwD:**

75/291

25.8%



**Respondents who took
the assistance of a
special expert,
interpreter, or translator:**

31/63

(excluding CCI & DCPU)

49.2%



Source: Stakeholder Pre-Consultation Survey for *Samvad*

2. **Lack of comprehensive data and absence of systematic screening:** Existing MIS portals do not seek information about disability. In the absence of a proper data management system, data on CwD is either unavailable or unreliable. Although limited, existing data underlines the lack of proper screening and assessments of CICI, CNCP, child victims and children in CCIs to ascertain disability, particularly intellectual disabilities, which are “invisible”.
3. **Unavailability of Special Educators, Translators, and Interpreters:** Lack of experts at the district level, and in tehsils or small towns, causes significant delays in recording of statements by the police and Magistrates and evidence by JJBs and Special Courts. It also affects the creation of the directory of experts by the DCPU. Further, the honorarium

prescribed for these experts are below market standards, affecting their engagement and availability. Where the DCPU has a list of special educators/interpreters, they may not be available when needed, causing considerable delay in proceedings. For instance, due to unavailability of psychologists and psycho-social workers in a district, experts from other districts have been appointed to the panel. In another district, experts based in Indore or Bhopal are contacted for assistance. No staff or experts are available to translate documents into braille. At times, the accused tries to get their own interpreters which victims are not comfortable with.

As per the pre-consultation survey, only 35.3% respondents from among JJBs, Special Courts, CWCs, and DLSAs had access to a directory of experts. This also emerged from the responses of DCPUs who shared that the databases created had been primarily shared with CWCs, SJPU, DWCD, Department of Medical Health and Family Welfare, and the Department of Social Justice and Empowerment of Persons with Disabilities and not with JJBs, DLSAs and Special Courts.

Respondents who have access to a directory of experts:

83/235 (excluding CCI & DCPU)

35.3%



Source: Stakeholder Pre-Consultation Survey for *Samvad*

Section 85(1)(xix), JJ Act 2015 requires the DCPU to maintain a database of medical and counselling centres, hospitals, vocational training centres, residential facilities, educational facilities and facilities specially for CwD, but only 5 out of 18 DCPUs shared this had been done.⁴²

42. Please note that this number is based on the information provided in the responses to the Pre-Consultation Survey by DCPU representatives and has not been independently verified by Enfold Proactive Health Trust.

4. **Lack of funds to engage experts:** JJBs are at times aware of experts who they can contact directly but often funds are not available to hire such experts. The payment prescribed for interpreters is Rs. 1000,⁴³ but private translators typically charge Rs. 2500-3000 and it is difficult to engage them.
5. **Lack of CCLs, health and rehabilitation programmes tailored to the specific needs of CwD:** There are only five **CCLs equipped to deal with CwD** in Madhya Pradesh,⁴⁴ which is **inadequate**. Existing CCLs lack necessary equipment and trained staff with expertise in dealing with children with different disabilities. In the absence of classification of CwD in CCLs, their rehabilitation cannot be planned effectively. Rehabilitation is also challenging due to the lack of vocational and technical courses tailored to the needs of children with different disabilities. Lack of health facilities in the district makes access to regular care and therapy difficult for CwD in CCLs.
6. Efforts need to be amplified to **build an inclusive perspective on PwD and take measures to address the physical, human resource, infrastructural, and attitudinal barriers that impede the enjoyment of rights of CwD equally with others.**
7. **Infrastructural gaps impede barrier-free access of CwD** to offices and institutions such as OH, Special Homes, PoS, JJBs, CWCs, CCLs, courts, police stations, and SJPU. Public transport systems, public toilets, sports facilities and other public places are inaccessible for CwD. Although ramps may have been installed, these are poorly designed and pose risks.
8. Coordination between DWCD, Education and the Social Justice Department is often inadequate, leading to fragmented services and support for CwD in the JJ System.

6.2. Challenges specific to CICL

1. **Flawed Assumptions in SIR and Preliminary Assessments about CICL:** SIRs do not adequately reflect the disabilities of CICL, and also overlook strengths and resources of CwD, focusing only on maladaptive behaviours. CICLs are being labelled “criminal-minded” without any basis.
2. CwD in conflict with the law lack access to lawyers adequately trained to understand and advocate for their specific needs.

6.3. Challenges specific to CNCP and children in CCLs with disabilities

1. **Difficulties** are encountered in **tracing families and gathering information** due to challenges in **communicating with CwD**.

43. As per page 39 of the Directorate's document dated 15.04.2022.

44. Drawn from the presentation by Ms Sufiyah Faruqui Wali, Commissioner, Department of Women and Child Development, Madhya Pradesh made at Samvad on 3 August 2024.

2. **Non-institutional care and family reintegration is a challenge** as many CwD in CCLs are orphaned, abandoned, or families are unable to take care of children with severe disabilities. CwD are not formally “surrendered” by parents who are unable to care for their children and this impacts their rehabilitation.
3. There is a gap in the availability of after-care and residential facilities for CwD after they attain 18 years and have to be released from CCLs.
4. Existing CCLs lack necessary equipment and trained staff with expertise in dealing with children with different disabilities. There is also a dichotomy between inclusion and differentiation of children which needs to be deliberated upon while examining the proposition for separate CCLs.
5. In Children's Homes, there is a need for daily interaction with CwD and this cannot be practically met through engagement of external special educators or experts. The staff, therefore, need training on basic skills to interact and work with CwD.
6. The **environment within CCLs is confined** and CwD need to step out and access different spaces, activities and events.
7. There is hesitancy to adopt CwD within India and hence these children are preferred for inter-country adoption.
8. The Government Schools for CwD have dilapidated infrastructures and the residential facilities for CwD are uninhabitable. The hostels do not meet the basic needs of food and water fit for consumption, hygiene standards and running water in washrooms. The school receives an inadequate budget for providing shelter and care to children in the hostels.

Experience sharing by a child disabilities

A 9th standard student living in a Children's Home, is hearing impaired and although he had learned some sign language, it was not enough to be fully understood by those around him, including his fellow residents at the Home. He sometimes wonders what it would be like to be like others. He reminisced about vague memories of a railway station, likely because he was brought to the Home from there. He has aspirations to work in the defence sector, but he feels that **the education system is not designed for children like him**. He emphasised that while he is grouped with other children, he faces unique challenges that are often overlooked, causing him to fall behind in his studies. He expressed a passion for sports like cricket, volleyball, tennis, and questioned if children like him can be provided with sports equipment. He also mentioned his skills in cooking and repairing machines, noting that with proper training, he could earn a living from these abilities. While concluding, he shared a humorous and poignant observation: “Don't be fooled by my innocent face, I'm naughty sometimes. When I'm naughty, the Children's Home calls a counsellor, but the counsellor also does not understand what I'm saying!” He concluded with a request to the government for **counsellors**

6.4. Challenges specific to Child Survivors of Violence with disabilities

1. Disability status of child victims is **not ascertained during the investigation or reflected in the chargesheet** and comes to light only during the recording of evidence. No disability certificate is obtained from a Medical Board by the police although the chargesheet contains references to statements of witnesses indicating that the child victim has a disability. Pre-consultation survey responses of Judges of Special Courts, Principal Magistrates and Members of JJBs, CWCs, and DLSAs, indicated reliance predominantly on the appearance of and interaction with the child victims and their family to identify disability. Disability certificates or express references to disability in the FIR, chargesheet, case files, or court orders were available only in a few cases. Disability certificates and list of experts and translators whose services were used are not included in the chargesheet. This affects the establishment of the child victim's disability status and also makes it difficult for the prosecution to call the expert as a witness.
2. **Unavailability of support persons with the capacity to engage with children survivors of violence with disabilities:** The present pool of nominated support persons cannot communicate and engage with CwD.
3. **Gaps in recording statements and evidence of child victims with disability: Disability status** of child victims is **not ascertained during the investigation or reflected in the chargesheet** and comes to light only during the recording of evidence. Prosecutors do not take the initiative in advance to identify suitable experts or arrange for them on the date on which the child's evidence is scheduled and this results in delays and repeated visits of the child to court. Statements of child victims with disabilities are not videographed and Section 164(5A)(b), Cr.PC/Section 183(6)(b), BNSS are not adhered to.
4. **Confusion about MTP:** Timely abortion of pregnancy of a child with intellectual disabilities is affected by delays due to lack of clarity on roles and the legal provisions. Delays at the stage where the case is referred to the Medical Board leaves one with no option except to approach the High Court for immediate relief if the pregnancy exceeds 24 weeks.
5. **Determining compensation, and ensuring timely disbursal** in cases of child victims under the POCSO Act remains a challenge. The lack of funds affects the payment of the compensation.
6. Other challenges pertaining to child victims under POCSO Act including CwD were the shortage of staff in the hospitals for the conduct of medico-legal cases, leading to delays. Lack of sensitivity in conducting the medical examination by doctors is a recurring concern. The victims are also not provided any travel allowances to come to the court and child victims, including those with disabilities find it arduous to make repeated visits to the court.

7.1. Structural Measures

1. **Guidelines and SOPs will be issued to** outline the protocol for ascertaining disability of child victims, CICL, CNCP, and children in CCLs, and enable their access to disability certificates/UDID. Guidelines for Recording Evidence of Vulnerable Witnesses in Criminal Matters, 2022, notified by the Madhya Pradesh High Court may serve as a foundation for developing specific guidelines for recording of statements and evidence of CwD. An SOP may be issued by Police Headquarters on investigation in cases of child victims with disability, with specific guidance on ascertaining disability, recording of statements and preparation of chargesheet. SOP may also be issued with respect to the protocols to be followed for timely medical termination of pregnancies.
2. The MPSLSA, jointly with the Secretariat of the MP-JJC and other stakeholders, will conduct assessments **on the accessibility for children and PwD of all CCLs and structures and institutions such as JJB, CWC, Special Courts, SJPU, DCPU and the like.** DWCD with the Department of Social Justice and Disabled Welfare, Tribal Welfare Development, other nodal Departments should act upon the assessment to make all the JJ structures accessible for CwDs in a phased manner within five years. Independent social audits must also be carried out to ascertain the requirement of specialist teachers and doctors per CCL and statutory bodies, assess special education, training, and rehabilitation plans for CwD in CCLs.
3. **Posts or panels of interpreters, special educators, translators, and experts should be** created at the district and taluka level, and within CCLs. DWCD in collaboration with the Department of Social Justice & Health Department should map and develop such panels. **Directories of experts need to be made widely available to all stakeholders.** Assistance of experts through video-conferencing (eg., Deaf Can Foundation) should be explored while ensuring that it is trauma-informed and the child's needs are prioritised.
4. Budgetary provisions for adequate remuneration to experts, aligned with market rates shall be made. Rajya Shiksha Kendra Department of School Education, Bhopal (Madhya Pradesh) has proposed the creation of 3,200 regular posts for Special Educators and this is under consideration at the State Government level.
5. The Department of Law with technical support of a leading law school or research organisation may undertake a study to **highlight the gaps and contradictory provisions** in the JJ Act, POCSO Act, RPWD Act and MH Act. This exercise could conclude with the

solutions to bring these above-mentioned statutes in consonance with each other, through the Model/State JJ Rules, or other necessary amendments. .

6. Clinical labs at par with the labs of the School of Behavioural Sciences NFSU, Gandhinagar may be established in the State of Madhya Pradesh.

7.2. Monitoring and Accountability

7. **A robust MIS should be developed with adequate and skilled human resources** to systematise collect data on CICL, CNCP, and child victims, including those with disabilities as this can form the basis for planning of investments and interventions to advance the care and protection of children in the JJ System.
8. PwD, parents of CwD, representatives of organisations of CwD, and experts in child protection should be involved to examine the accessibility of child protection systems and alternative care for CwD and issue suitable guidelines pertaining to their rehabilitation.
9. Independent **social audits** should be carried out to ascertain the requirement of specialist teachers and doctors per CCI and statutory bodies, assess special education, training, and rehabilitation plans for CwD in CCIs.
10. Regular assessments should be conducted on the effectiveness of government policies, schemes, and services for CwD.

7.3. Capacity Building

11. **A comprehensive training module on CwD in the Juvenile Justice System** needs to be developed and integrated into the training programs for all stakeholders involved. Perspectives of police/SJPU, Magistrates, judges, JJBs, CWC, prosecutors, CCI staff, DCPU, DLSA, and Support Persons should be built on different types of disabilities, legal rights and procedures, and skills must be imparted on appropriate and trauma-informed ways of interacting with CwD, and the use of technological tools for communication with CwD. Elected Members and functionaries of Urban and Rural Local Bodies such as ZillaPanchayats, Gram Panchayats, Nagar Nigams and Corporations should also be sensitised on matters concerning CwD and CICL. This should facilitate detection of CwD in the JJ system and their referrals to the health system for services.
 - a. For police and prosecutors, the training should also address the manner of investigation and rectification of deficiencies in the chargesheet in cases of child victims with disabilities.
 - b. JJBs and Judges of Special Courts should be imparted special training on assessing the competency of CICL and child victims with intellectual disability and recording evidence of child victims with disabilities.

- c. Special educators, interpreters, translators and experts should be imparted training on how courts and JJBs function, dealing in a child-friendly manner with CwD in difficult situations, framing of questions and on providing assistance to CwD during legal proceedings.
 - d. Select police officers, prosecutors, judges, DLSA staff, Legal Aid Lawyers, CCI and DCPU staff may be imparted training in sign language so as to equip them with necessary skills to interact with CwD.
 - e. CCI staff need additional training on caring for CwD, understanding their emotions and behaviour, and communicating with them.
- 12. MPSLSA should integrate the needs and rights of CwD into all their training programmes for empaneled legal aid lawyers to provide legal support to CwD,** ensuring they prioritise the needs of CwD in their legal representation. They should also develop and conduct special training and sensitisation programmes for PLVs to equip them with the skills to support CwD in remote areas.
13. Regular workshops and conferences should be organised on the theme of CwD and a platform be provided to exchange good practices and learnings.
14. The MP Police in collaboration with UNICEF and others could review the process and capacity of the Tukoganj police station to address the needs of P/CwD, and strengthen their capacities, as well as document the model, based on its efficacy, for learning and training purposes. Further it is recommended that MP Police has a resource pool of sign language experts across all districts, for supporting P/CwD as and when required.

7.4. Enhancing Effective Participation in Legal Proceedings

- 15. Child victims with disability should be provided counselling services, medical assistance, Support Persons, and rehabilitation support, well before the recording of testimony to enable their effective participation during trial.
- 16. Travel costs of CwD should be covered so as to enable them to participate in proceedings.
- 17. JJBs and Special Courts should give time to interpreters, translators, special educators, and experts to build rapport with CwD prior to the recording of the statement and evidence. Prosecutors should interact with the CwD before recording evidence to understand their specific needs and take steps to seek the timely assistance of relevant experts.

7.5. Enhancing Rehabilitation

- 18. Benefits of disability welfare schemes should be made available to eligible CICL, CNCP, child victims, and children in CCIs by registering every child with disability in UIDAI through the Department of Social Justice and Disabled Persons and DLSA.

19. The Government of Madhya Pradesh should amend the template of the ICP (Form 7) to address the needs of different categories of CwDs.
20. The Departments of Social Justice, WCD, Sports and Youth Welfare along with the Department of Higher Education may organize district-level competitions to promote sports and art forms among children with disabilities and connect children with institutes like Atal Bihari Vajpayee Training Centre for disability sports, Gwalior. Raja Mansingh Tomar Music and Arts University, Gwalior.
21. Community Labs should be set up in districts for addressing psychosocial factors which affect CwD to facilitate intensive psychosocial interventions.
22. CCLs and residential facilities that can effectively rehabilitate CwDs should be identified/established and regularly monitored. Separate rehabilitation centres offering skill development, occupational therapy, physical rehabilitation and recreation activities should be set up in every district for CwD and District Magistrates should inspect them.
23. The DWCD in collaboration with the Department of Technical Education, Skill Development & Employment shall **strengthen vocational skilling programmes for CwD, particularly for those within the JJ systems.** Towards this the Department would influence skill development institutions and agencies to design modern skilling programmes that suit the capacities and needs of CwD and link CwD to appropriate skilling programmes.
24. Bail should be granted immediately to CICL with disability and JJBs should ensure provision of legal aid and connect them to DLSA for disability-sensitive legal aid.

7.6. Improving Convergence

25. A nodal officer for CwD from the Social Justice Department should be designated for every district and a list of these officers should be maintained and made available to all JJBs, CWCs, Special Courts, DCPUs and CCLs.

7.7. Integrating appropriate references to disabilities

26. A set of alternate vocabulary in Hindi can be developed to appropriately address children and persons with disabilities, ensuring respectful and inclusive communication, while also ensuring that it is culturally appropriate and understood. Assistance of the Madhya Pradesh Hindi Granth Academy, Bhopal may be taken.

7.8. Preventive Measures

27. Building on the model of Shourya Didis, Shourya Bhaiyas will be identified and trained to support vulnerable adolescent boys, CICL and boys with disabilities.

28. Life Skills training for children in schools and CCLs shall be undertaken/scaled up in collaboration with the Department of Education/CBSE/NCERT and UNICEF. Such education will have a preventive and rehabilitative impact.
29. DLSAs should organise programmes in special schools for CwD in collaboration with DWCD on government schemes available and widely publicise schemes and benefits provided by NALSA and other government bodies, to ensure all stakeholders are informed.



1. **Social audits** are being encouraged and through these, gaps identified in the functioning of CCI are being brought to the attention of the JJC and suitable instructions are being issued to ensure they are rectified.
2. **27 Shourya Didis** - female officers Mentoring Vulnerable Children, Survivors of Sexual Offences to Ensure Welfare - underwent a training at the National Forensic Science University, Gandhinagar from 24th-28th June 2024. They were trained on issues of sensitive policing for women and children, equipping all participants with skills to deal with vulnerable women and children in distress; understand them through legal and rehabilitative lens; and provide first level responses to survivors of violence and abuse.
3. Individual prosecutors, CWCs, and Special Courts have made efforts to facilitate screening and securing of a disability certificate of children when the disability has come to light.
4. Several **community policing** initiatives have been undertaken by the Madhya Pradesh Police for PwD and CwD. Some of these include:
 - ✦ Tukoganj police station, Indore established a help desk with sign language interpreters for PwD, becoming India's First hearing impaired friendly Police station.
 - ✦ Indore Police, supported by Anand Service Society, operates a video call helpline for PwD, offering nationwide sign language interpretation services. The helpline also assists PwD in complaint registration, recording of statements in the court, reintegration of missing PwDs with family, provides counselling services and rehabilitation support to PwD.
 - ✦ The Indore Police organises self-defence training sessions in sign language for CwD as part of its community outreach programs.
5. Assistance of Anand Service Society, Indore was taken through video-call to communicate with a hearing impaired child who had left her home (SJPU Barwani).
6. A CwD was connected to government schemes and scholarships available (DLSA, Bhind, Children's Home for Boys, Morena).
7. A sign language interpreter or special educator who can assist in communicating with a CwD is arranged before summoning the CwD so as to avoid delays and repeated visits to the court (JJBs in Rewa and Indore).
8. The expert aiding with communication is given at least 30 minutes to interact with the CwD before evidence is recorded. Fewer hearings are scheduled on the date the CwD's evidence is scheduled

so that the JJB has ample time to record it. Evidence of CwD witnesses is recorded on the scheduled date without adjournments and is completed in a timely manner (JJB Rewa).

9. CwD is made comfortable by recording the testimony in the judge's chamber or by letting the child sit next to the judge and offering snacks (Special Court, Shivpuri) and/or by recording the evidence in the presence of the family (Special Court, JJB Rewa), and giving regular breaks (Special Court, Balaghat).
10. Para-legal volunteers (PLVs) are appointed to assist during the recording of evidence of CwD by spending time with them and their family members to boost their confidence (DLSA, Raisen).
11. Legal aid camps (DLSAs, Betul, Chhatarpur, Dhar) and programmes were conducted to counsel CwD on education and career opportunities, and inform them about NALSA and SLISA schemes (DLSA, Betul and Bhind)
12. The Aadhaar Card of a child with speech and language disability was retrieved and she was restored to her family thereafter (Children's Home for Girls, Katni).
13. Assistance was provided in obtaining prosthetic limbs and other necessary aids (DLSA, Dhar).
14. Open-heart surgery and treatment of a CNCP was facilitated after which inter-country adoption took place (SAA, Indore).



On 17 November 2024, a special felicitation program was organized at the Madhya Pradesh State Judicial Academy (MPSJA) in Jabalpur to honor the children with disabilities who participated in the cultural program and experience-sharing sessions during the *Samvad* consultation. The event was graced by the Hon'ble Shri Justice Suresh Kumar Kait, Hon'ble the Chief Justice, High Court of Madhya Pradesh, along with the Juvenile Justice Committee, High Court of Madhya Pradesh.



The children, who participated in experience sharing and cultural programmes hailed from various institutions such as the *Children's Home* in Jabalpur, *Mangalayatan University*, Jabalpur and government schools for the visually impaired, hearing impaired, and intellectually disabled, Jabalpur, *Justice Tankha memorial Rotary Institute for Special Children*, Jabalpur and *Government High School Pachpedi*, Jabalpur were felicitated with gifts tailored to their needs and interests. These included sports equipment, musical instruments, school bags, and stationery.

Further, Hon'ble The Chief Justice expressed His Lordship's heartfelt wish to provide 5,000 to all 56 children who had contributed to the success of *Samvad*, recognizing children's efforts, Hon'ble Shri Justice Binod Kumar Dwivedi awarded every child with additional reward of 1000 for their performance in the cultural program of *Samvad*.

During the program, The Hon'ble Chief Justice shared an inspiring story of his childhood friend, a person with disabilities who was a class topper and excelled in academics. He motivated the children by emphasizing that nothing is impossible and that success can be achieved through passion and determination. The event was a celebration of the children's talents and a reminder of the importance of inclusivity and empowerment.



During the inaugural session of *Samvad*, one of the participating children with disabilities expressed her heartfelt wish to "fly high in the sky". Taking note of this, the Juvenile Justice Committee, High Court of Madhya Pradesh, coordinated with the Department of Social Justice to organize a special joy ride experience for all five children who participated in the experience-sharing session.



In this heartwarming initiative, the children were seen off by Hon'ble Shri Justice Suresh Kumar Kait, the Chief Justice of the High Court of Madhya Pradesh, who personally felicitated and handed over the flight tickets to the children with disabilities. The Hon'ble Chief Justice wished the children luck and encouraged them to live every moment of the trip to the fullest. He also requested them to share their experiences upon their return, ensuring that this journey would remain a cherished memory for years to come.

On 7 January 2025, the children boarded a flight from Jabalpur to Indore, marking the beginning of their memorable journey. Over the next two days, they visited iconic landmarks such as the Khajrana Temple, Chappan Bhog Market, Lal Bagh Palace, Kamla Nehru Zoological Park, and Rajwada Palace. The trip concluded on 9 January 2025, with the children returning to Jabalpur by flight.

This initiative not only fulfilled the dreams of these children but also highlighted the importance of creating opportunities for children with disabilities to explore, experience, and enjoy life to its fullest.



Annexure - 1 Agenda for "Samvad Consultation"

"Samvad"

"Consultation on the Protection of Children with Disabilities, 2024"


Dated : 3rd to 4th August, 2024


Venue : Madhya Pradesh State Judicial Academy, Jabalpur



Strategic Objectives:


The annual consultation jointly organised by Juvenile Justice Committee, High Court of Madhya Pradesh, MP State Legal Services Authority, MP State Judicial Academy, Jabalpur, Government of Madhya Pradesh and UNICEF Bhopal Office has the following objectives:-

1. Participants and stakeholders gain an in-depth of understanding children with disability, and their vulnerabilities and entitlements;
2. Participants and stakeholders understand the roles and responsibilities of various agencies and departments, and identify and commit to actions in addressing the psycho-social vulnerabilities as well as ensuring effective service delivery for children with various forms disabilities;
3. Key stakeholders jointly review the progress made towards improved services for children in conflict with law (Vimarsh 2023).


| Time | Thematic Area | Facilitation |
|---|---|--|
| Day 1st : 3rd August, 2024 | | |
| 09.00 a.m.- 10.00 a.m. | Arrival of Participants and Registration | |
| 10.00 a.m.- 10.30 a.m. | Inaugural Session | |
| | <i>Scan QR to Watch Video of Inaugural Ceremony</i> |  |
| | Welcoming Dignitaries on the dais Presentation of Saplings | |
| | Introduction & setting the context of the consultation | Mr. Anil Kumar Secretary, Juvenile Justice Committee, High Court of Madhya Pradesh (4 mins) |
| | Keynote Address | Hon'ble Shri Justice Anand Pathak Judge, High Court of Madhya Pradesh, & Chairperson, Juvenile Justice Committee |
| | Inaugural Address | Hon'ble Shri Justice Sanjeev Sachdeva Hon'ble The Acting Chief Justice, High Court of Madhya Pradesh |

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| 10.30 a.m.- 11.30 a.m. | Curtain Raiser to Samvad | |
| | Experience Sharing | Children with Disability (15 mins) |
| | Remarks by: | Shri Anil Gulati, Incharge Officer, UNICEF (7 mins) Shri Sanjay Kumar Shukla Principal Secretary, Women & Child Development Department, Govt. of M.P. (7 mins) Hon'ble Shri Justice Sushrut Arvind Dharmadhikari Judge, High Court of Madhya Pradesh, & Chairperson, POCSO Committee, (7 mins) |
| | Vote of Thanks | Shri Krishnamurty Mishra Director, Madhya Pradesh State Judicial Academy, Jabalpur |
| | National Anthem | |
| 11.30 a.m.- 12.00 Noon | High Tea | |
| 12.00 Noon - 01.30 p.m. | Technical Session-I | |
| | <i>Scan QR to Watch Video of Technical Session-I</i> |  |
| | Introductory Remarks | Chair: Hon'ble Shri Justice Anand Pathak Chairperson, Juvenile Justice Committee High Court of M.P. (5 mins) |
| | Children with Disability – Entitlements and their Reality <i>(Session to include a broad understanding of children with disability, various forms of biases and discrimination they face, intersectionality with gender and socio-economic status; various central and state schemes and policies across departments (Social Justice, education, DWCD, Health, PRD and others) for children with disability, their reach, ground reality of the impact of these schemes and policies, challenges, gaps and strategic recommendations. The session should also help to understand govt's approach towards children with disabilities, including early identification, support services, etc.)</i> | Ms. Radhika Alkazi, Founder & Managing Trustee, ASTHA (35 mins) |





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| | Service Delivery for Children with Disability in MP (status, challenges, way forward) <ul style="list-style-type: none"> - Status update by Dept of Social Justice - Status update by Dept of Women and Child Development - Status update by Dept of Education (RSK, School Education) - Status update by Health Dept (including status of services provided by RBSK) | Dr Ram Rao Bhosle Commissioner, Department of Social Justice & Empowerment of Persons with Disabilities, Govt. of M.P. (6 mins) Ms Sufiyah Faruqui Wali Commissioner, Department of Women and Child Development, Govt. of M.P. (6 mins) Mr Harjinder Singh Director, Rajya Shiksha Kendra, Madhya Pradesh Bhopal (6 mins) Dr. Pragya Tiwari Sr. Joint Director, Department of Public Health & Medical Education, Govt. of M.P. (6 mins) |
| 01.30 p.m.- 02.30 p.m. | LUNCH | |
| 02.30 p.m.- 03.30 p.m. | Technical Session-II | |
| | <i>Scan QR to Watch Video of Technical Session-II</i> |  |
| | Introductory Remarks | Chair: Hon'ble Shri Justice Gural Singh Ahluwalia Member, Juvenile Justice Committee (5 mins) |
| | Key legal provisions for children with disability across key child-specific legislations and its operationalization (special focus on Mental Healthcare Act 2017, RPWD Act, JJ Act and POCSO Act) | Mr. Anant Asthana, Child Rights Advocate (45 mins) |
| 03.30 p.m.- 04.30 p.m. | Technical Session-III Children with Disability in the Juvenile Justice System | |
| | <i>Scan QR to Watch Video of Technical Session-III</i> |  |
| | Introductory Remarks | Chair: Hon'ble Shri Justice S.A. Dharmadhikari, Chairperson, POCSO Committee (5 mins) |

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| | Addressing Child Psychopathy: Challenges and Solutions in the Indian Criminal Justice System | Prof (Dr) Priya Sepaha, Professor & Dean, School of Law & Public Policy Avantika University, Ujjain (7 mins) |
| | The Invisibilisation of Meta Minorities: Applying a vulnerabilities and Child Rights Lens to Children with Disability | Dr Shekhar Sheshadri, Advisor-SAMVAD & (Former) Senior Professor, Department of Child & Adolescent Psychiatry, NIMHANS (40 mins) |
| | Psycho-social vulnerabilities of child survivors of violence and therapeutic recommendations for children with disabilities | Ms. Shubham Thukral, Sr. Scientific Officer, School Behavioural Forensics, NFSU Gandhinagar (7 mins) |
| 04.30 p.m.- 05.00 p.m. | TEA BREAK | |
| | Technical Session-IV | |
| | <i>Scan QR to Watch Video of Technical Session-IV</i> |  |
| | Introductory Remarks | Chair: Hon'ble Shri Justice Anand Pathak Chairperson, Juvenile Justice Committee High Court of M.P. (5 mins) |
| 05.00 p.m.- 05.45 p.m. | 1. Evidence Speak: Analysis of data on children in Juvenile Justice System, gaps, challenges and recommendations | Ms Swagata Raha, Director, Research and Co-Director Restorative Practices, Enfold Proactive Health Trust (20 mins) |
| | 2. Children in Conflict with Law: <ul style="list-style-type: none"> ● Availability of services to inform judicial as well as services including early diagnoses, referrals, linkages with require medical/support services including entitlements: gaps, challenges and recommendations ● Availability of professional functionaries/ specialised and skilled workforce: gaps, challenges and recommendations ● Convergence with specialised services including with child development experts, fit facilities and mental health professionals - interpreters, sign language experts, and counsellors etc for children with disabilities across ● Family based restoration or institutionalised rehabilitation services including case management/ follow up practices for CCL | Mr Anil Kumar Secretary, Juvenile Justice Committee, High Court of M.P. (6 mins) |

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| | <p>3. Children in Need of Care and Protection:</p> <ul style="list-style-type: none"> ● Availability of services to inform judicial as well as services including early diagnoses, referrals, linkages with require medical/support services including entitlements: gaps, challenges and recommendations ● Availability of professional functionaries/ specialised and skilled workforce: gaps, challenges and recommendations ● Convergence with specialised services including with child development experts, fit facilities and mental health professionals - interpreters, sign language experts, and counsellors etc for children with disabilities across ● Family based restoration or institutionalised rehabilitation services including case management/ follow up practices for CNCP | <p>Mr. Amitabh Awasthi Joint Director, Mission Vatsalya Department of Women and Child Development, Govt. of M.P. (6 mins)</p> |
| | <p>4. Child Survivors of Violence:</p> <ul style="list-style-type: none"> ● Availability of services to inform judicial as well as services including early diagnoses, referrals, linkages with require medical/support services including entitlements: gaps, challenges and recommendations ● Availability of professional functionaries/ specialised and skilled workforce: gaps, challenges and recommendations ● Convergence with specialised services including with child development experts, fit facilities and mental health professionals - interpreters, sign language experts, and counsellors etc for children with disabilities across ● Family based restoration or institutionalised rehabilitation services including case management/ follow up practices for Child Survivors of Violence. | <p>Ms Sufiyah Faruqui Wali Commissioner, Department of Women and Child Development, Govt. of M.P. (6 mins)</p> |

| DAY 2, 4 th August 2024 | | |
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| 10.00 a.m.- 10.15 a.m. | Reflections from Day-1 | |
| 10.15 a.m.- 11.30 a.m. | Technical Session-V | |
| | Scan QR to Watch Video of Technical Session-V |  |
| | Introductory Remarks | Chair: Hon'ble Smt Justice Anuradha Shukla , Member, Juvenile Justice Committee High Court of M.P. (5 mins) |
| | Key vulnerabilities that children with disabilities face, and state's strategic vision for them | Mr Sandeep Rajak Commissioner, Persons with Disabilities Madhya Pradesh (7 mins) |
| | Group I: Children in Conflict with Law: <ul style="list-style-type: none"> ● Availability of services to inform judicial as well as services including early diagnoses, referrals, linkages with require medical/support services including entitlements: gaps, challenges and recommendations ● Availability of professional functionaries/ specialised and skilled workforce: gaps, challenges and recommendations ● Convergence with specialised services including with child development experts, fit facilities and mental health professionals - interpreters, sign language experts, and counsellors etc for children with disabilities across ● Family based restoration or institutionalised rehabilitation services including case management/ follow up practices for CCL | Facilitator: Mr. Anant Asthana Child Rights Advocate Documenter: Ms Ranu Tiwari Legal Researcher, Enfold Trust (45 mins) |
| | 2. Group II: Children in Need of Care and Protection: <ul style="list-style-type: none"> ● Availability of services to inform judicial as well as services including early diagnoses, referrals, linkages with require medical/support services including entitlements: gaps, challenges and recommendations | Facilitator: Ms Swagata Raha Director, Research and Co-Director Restorative Practices, Enfold Proactive Health Trust |

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|---------------------------|--|--|
| | <ul style="list-style-type: none"> ● Availability of professional functionaries/ specialised and skilled workforce: gaps, challenges and recommendations ● Convergence with specialised services including with child development experts, fit facilities and mental health professionals - interpreters, sign language experts, and counsellors etc for children with disabilities across ● Family based restoration or institutionalised rehabilitation services including case management/ follow up practices for CNCP | Documenter: Ms Anindita Pattanayak Legal Research Associate, Enfold Trust (45 mins) |
| | <p>3. Group III: Child Survivors of Violence:</p> <ul style="list-style-type: none"> ● Availability of services to inform judicial as well as services including early diagnoses, referrals, linkages with require medical/support services including entitlements: gaps, challenges and recommendations ● Availability of professional functionaries/ specialised and skilled workforce: gaps, challenges and recommendations ● Convergence with specialised services including with child development experts, fit facilities and mental health professionals - interpreters, sign language experts, and counsellors etc for children with disabilities across ● Family based restoration or institutionalised rehabilitation services including case management/ follow up practices for Child Survivors of Violence <p>(Each sub-group will discuss the status, challenges & gaps, and recommendation for improved delivery of the services for the specified category of children)</p> | Facilitator: Mr. Samresh Singh Registrar (IT) High Court of Madhya Pradesh Documenter: Ms. Gopika Nangia Legal Research Associate, Enfold Trust. (45 mins) |
| 11.30 a.m.- 11.45 a.m. | TEA BREAK | |
| | Group Work Presentation | |
| 11.45 a.m. 12.30 p.m. | Group I: Children in Conflict with Law: Group II: Children in Need of Care and Protection: Group III: Child Survivors of Violence: | Chair: Hon'ble Smt Justice Anuradha Shukla, Member, Juvenile Justice Committee High Court of M.P. |

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|---------------------------|---|---|
| 12.30 p.m.- 01.30 p.m. | Technical Session-VI | |
| | <i>Scan QR to Watch Video of Technical Session-VI</i> |  |
| | <p>Review of the progress of the Action Plan on CCL from Vimarsh 2023 (Department-wise update)</p> <ul style="list-style-type: none"> - An overview - Progress update on Vimarsh Action Plan-2023 | <p>Hon'ble Juvenile Justice Committee High Court of M.P.</p> <p>Mr Samresh Singh, Registrar (IT), High Court of M.P. (5 mins)</p> <p>Concerned Departments</p> |
| 01.30 p.m.- 02.00 p.m. | Valedictory Session | |
| | Reflections | Mr Lolichen P Joseph UNICEF, Madhya Pradesh |
| | Closing Remarks | Ms Sufiyah Faruqui Wali Commissioner, Department of Women & Child Development, Bhopal |
| | Way Forward | Hon'ble Shri Justice Anand Pathak Chairperson, Juvenile Justice Committee High Court of M.P. |
| | Vote of Thanks | Anil Kumar Secretary, Juvenile Justice Committee High Court of M.P. |
| 02.00 p.m. Onwards | LUNCH AND DEPARTURE | |
| | <i>Scan QR to Watch Video of Cultural Programme</i> |  |
| | <i>Scan QR to Watch Video of Valedictory Session</i> |  |
| | <i>Scan QR to Watch Video of Felicitation Program for Children with disabilities</i> |  |



Annexure - II

SAMVAD : Action Plan (to be enforced from May, 2025)

| Sl No | Key Action to be taken | Lead Responsibility | Department for Coordination | Timeline |
|----------------------------|---|---|---|---|
| Structural Measures | | | | |
| 1. | Statutory Grid | | | |
| 1.1 | The Law and Legislative Affairs Department with technical support of a leading law school or research organization to undertake a study to highlight the gaps and contradictory provisions in the JJ Act, POCSO Act, RPWD Act and MH Act. This exercise could conclude with the solutions to bring these above-mentioned statutes in consonance with each other, through the Model/State JJ Rules, or other necessary amendments. | Juvenile Justice Committee, High Court of Madhya Pradesh (HC-JJC) & Law and Legislative Affairs Department (Law Dept) | Department of Women and Child Development (DWCD), Social Justice and Empowerment of Persons with Disabilities Department (DoSJ) & Technical Support: UNICEF | July 2025 |
| 2. | Guidelines and SOPs | | | |
| 2.1 | Guidelines and SOPs will be issued to outline the protocol for ascertaining disability of child victims, CICL, CNCP and children in CCIs, and enable their access to disability certificates/UDID. | DWCD | Department of Public Health and Family Welfare (Dept of Health) & DoSJ | July 2025 |
| 2.2 | SOP to be issued by Police Headquarters on investigation in cases of child victims with disability, with specific guidance on ascertaining disability, recording of statements and preparation of chargesheet. | Home Department/CID-PHQ | | July 2025 |
| 2.3 | Guidelines for recording the statements and evidence of CwD and award of compensation to child victims with disabilities shall be developed. It may be based on 'Recording Evidence of Vulnerable Witnesses in Criminal Matters, 2022, notified by the Madhya Pradesh High Court. | Madhya Pradesh State Legal Service Authority (MPSLSA) | HC-JJC | July 2025 |
| 2.4 | SOP to be issued with respect to the protocols to be followed for timely medical termination of pregnancies in cases involving survivors of sexual abuse who are CwD. | Dept of Health | Law Dept | July 2025 |
| 3. | Disability Assessment | | | |
| 3.1 | Carry out assessments of the accessibility for children and PwD of select CCIs, and Government Schools and Hostels for CwD, Tribal children and structures, institutions such as JJB, CWC, Special Courts, SJPU, DCPU and the like and develop a blueprint to make the institutions and structures accessible for C/PwD. | MPSLSA, HC-JJC, & CSO | DoSJ, Tribal Welfare Department (Tribal), Department of School Education (DoSE) & DWCD | October 2025 |
| 3.2 | DWCD with the Depts of Social Justice and Empowerment of Persons with Disabilities Department, Tribal Welfare Development, Education and other nodal Departments should make all the JJ structures, schools and hostels, accessible for CwDs, based on the assessment and blueprint. | DoSJ, Depts of Tribal Welfare, DoSE, RSK (School Education) & DWCD | MPSLSA, HC-JJC | 20% institutions and structures, annually from 2025, to achieve 100% compliance by 2029 |
| 3.3 | Independent social audits must be carried out from time to time, to ascertain the accessibility status and other services for CwD, including requirement of specialist teachers and doctors per CCI and statutory JJ structures Further the social audits may also assess the ICPs of CwD for their special needs integration. | DoSJ, | HC-JJC, DoSE & DWCD | Annual basis, from 2025 |

SAMVAD: Action Plan (to be enforced from May, 2025)

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|-----|--|---|---|-----------------------|
| 4. | Pool of Interpreters, Special Educators, translators and experts | | | |
| 4.1 | Pool or panels of interpreters, special educators, translators, and experts should be created at the district and taluka level, and within CCIs, to address the needs of CwD. | DoSJ, | DWCD | August 2025 |
| 4.2 | Directory of panel of interpreters, special educators, translators and experts for dealing with C/PwD should be trained and made widely available to all stakeholders. Assistance of experts through video-conferencing (eg., Deaf Can Foundation) may be made available while ensuring that it is trauma-informed and the child's needs are prioritised. | DoSJ | DWCD | July 2025 |
| 4.3 | Adequate Budgetary provisions and remuneration commensurate to market rate shall be made to experts, interpreters and support persons in addressing the needs of C/PwD | DoSJ | DWCD, Health & DoSE | July 2025 |
| 4.4 | Create over 3,200 regular posts for Special Educators in primary schools | School Education (Rajya Shiksha Kendra) | | October 2025 |
| 5. | Capacity Building | | | |
| 5.1 | A comprehensive training module on CwD shall be developed and integrated into the training programs for all key stakeholders by various departments, including DWCD, Education, Tribal, Health, RDPR, as well as in the training of new recruits at Noronha Academy, Judicial Academy, Police training schools and academies and SIRD. The module should be customized based on departments' role and functions for the children concerned. Such training sessions/ refresher should be done annually. | DoSJ Technical Support: UNICEF | Depts of Education, Tribal welfare, Education, Health, Police, RDPR, Noronha Academy, MP Police & SJA | To Begin by May 2025 |
| 5.2 | Capacity building of JJ structures and law enforcement (police/SJPU, Magistrates, POCSO judges, JJBs, CWC, prosecutors, CCI staff, DCPU, DLSA and Support Persons) on rehabilitation of CwD should be carried out regularly, with well designed modules. The concerned functionary/stakeholder should be equipped to identify and make early referral of children with any form of disability. | DWCD, MPSJA, MPSLSA & Home Department | DoSJ & Health Dept. | To Begin by June 2025 |
| 5.3 | Elected Members and functionaries of Urban and Rural Local Bodies such as Zilla Panchayats, Gram Panchayats, Nagar Nigams and Corporations should also be sensitised on matters concerning CwD and CICL. This should facilitate detection of CwD in communities and their referrals to the health system for services. | Panchayat & Rural Development Department & Urban and Housing Development Department. Technical Support: UNICEF | DWCD, DoSJ & Health Dept. | To Begin by June 2025 |
| 5.4 | MPSLSA should integrate the needs and rights of CwD into all their training programmes for empanelled legal aid lawyers to provide legal support to CwD, ensuring they prioritize the needs of CwD in their legal representation. They should also develop and conduct special training and sensitization programmes for PLVs to equip them with the skills to support CwD in remote areas. | MPSLSA | | To Begin by May 2025 |
| 6. | Enhancing Effective Participation in Legal Proceedings | | | |
| 6.1 | CwD survivors of violence, should be provided counselling services, medical assistance, interpreters, Support Persons and rehabilitation support, well before the recording of testimony to enable their effective participation during trial. Additionally those from economically weaker sections should be supported with travel and other incidental costs. | MPSLSA & DWCD | Health | To begin by June 2025 |

SAMVAD: Action Plan (to be enforced from May, 2025)

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| 6.2 | JJBs and Special Courts should give time to interpreters, translators, special educators, and experts to build rapport with CwD prior to the recording of the statement and evidence. Prosecutors should interact with the CwD before recording evidence to understand their specific needs and take steps to seek the timely assistance of relevant experts. Towards this MPSSLA may issue a guideline to all the concerned stakeholders. | HC-JJC, MPSSLA & Directorate of Public Prosecution. | | By June 2025 |
| 7. | Enhancing Rehabilitation | | | |
| 7.1 | Benefits of disability welfare schemes should be made available to eligible CICL, CNCP, child victims and children in CCIs by registering every child with disability in UDID through the Social Justice and Empowerment of Persons with Disabilities Department. | DoSJ & DWCD | MPSSLA | |
| 7.2 | The template of the ICP (Form 7) shall be amended to address the needs of different categories of CwD, and it shall be ensured that rehabilitative plans for CwD shall take care of their special needs. | DWCD | UNICEF | By July 2025 |
| 7.3 | District-level competitions to promote sports and art forms among CwDs shall be organised regularly and such children shall be connected with institutes like Atal Bihari Vajpayee Training Centre for disability sports, Gwalior, Raja Mansingh Tomar Music and Arts University, Gwalior for their enhanced coaching and training. | DoSJ, Sports and Youth Welfare Department & DWCD | Department of Higher Education | From July 2025 |
| 7.4 | Separate rehabilitation centres offering skill development, occupational therapy, physical rehabilitation and recreation activities should be set up in every district for CwD and District Magistrates should oversee their effective functioning | DoSJ | Health, Department of Technical and Skill Development & DWCD | By August 2025 |
| 7.5 | The DWCD in collaboration with the Department of Technical Education, Skill Development & Employment shall strengthen vocational skilling programmes for CwD, particularly for those within the JJ systems. Towards this the DWCD would influence skill development institutions and agencies to design modern skilling programmes that suit the capacities and needs of CwD, and link CwD to appropriate skilling programmes. | Department of Technical Skill Development and Employment & DWCD | Technical Support: UNICEF | By August 2025 |
| 8. | Improving Convergence | | | |
| 8.1 | A nodal officer for CwD from the Social Justice and Empowerment of Persons with Disabilities Department should be designated for every district, to support with preventive and rehabilitative measures for CwD and a list of these officers should be maintained and made available to all JJBs, CWCs, Special Courts, DCPUs, and CCIs. | DoSJ | | By June 2025 |
| 9. | Integrating appropriate references to disabilities | | | |
| 9.1 | A compendium of alternate vocabulary in Hindi can be developed to appropriately address children and persons with disabilities, ensuring respectful, inclusive and culturally sensitive communication. Assistance of the Madhya Pradesh Hindi Granth Academy, Bhopal may be taken. | HC-JJC | DWCD | By June 2025 |

SAMVAD: Action Plan (to be enforced from May, 2025)

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| 10. | Preventive Measures | | | |
| 10.1 | Building on the model of <i>Shourya Didis</i> , <i>Shourya Bhaiyas</i> (officers of DWCD, Police and others) will be identified and trained, who will support vulnerable adolescent boys, CICL and boys with disabilities for their rehabilitative and family strengthening measures. This shall be initiated through a concept note by DWCD. | DWCD & Home Department | HC-JJC | By July 2025 |
| 10.2 | Life Skills training for children including CwD, within the framework of School Health and Wellness programme in schools and CCIs shall be undertaken/scaled up in collaboration with the Department of Education/CBSE/NCERT and UNICEF. Such education will have a preventive and rehabilitative impact. | Departments of School Education, Health, WCD & DoSJ | Technical Support: UNICEF | By July 2024 |
| 10.3 | DLSAs should organize programmes in special schools for CwD in collaboration with DWCD on government schemes available, and widely publicise schemes and benefits provided by NALSA and other government bodies, to ensure all stakeholders are informed. | MPSLSA & DoSJ | DWCD | By July 2025 |
| 10.4 | Modules for protection of children (within the framework of Juvenile Justice, POCSO and Child Marriage legislations) shall be introduced into the all the training staff training academies, institutions and schools, including Noronha Academy, Police Academies and Schools, Panchayati Raj Training Institutions and others. The modules shall include aspects of CwD. | Depts of Education, WCD, RDPR, MP Police, Noronha Academy | Technical Support: UNICEF | By October 2025 |



Photo Gallery

SAMVAD - CONSULTATION ON THE PROTECTION OF CHILDREN WITH DISABILITIES - 2024



INAUGURAL SESSION



INAUGURAL SESSION



TECHNICAL SESSION - I



TECHNICAL SESSION - II



TECHNICAL SESSION - III



TECHNICAL SESSION - IV



TECHNICAL SESSION - V



REVIEW OF ACTION PLAN FROM VIMARSH 2023



GROUP DISCUSSION DURING SAMVAD



GROUP DISCUSSION DURING SAMVAD



PLENARY SESSION



PLENARY SESSION



CULTURAL PROGRAMME DURING SAMVAD 2024



CULTURAL PROGRAMME DURING SAMVAD 2024



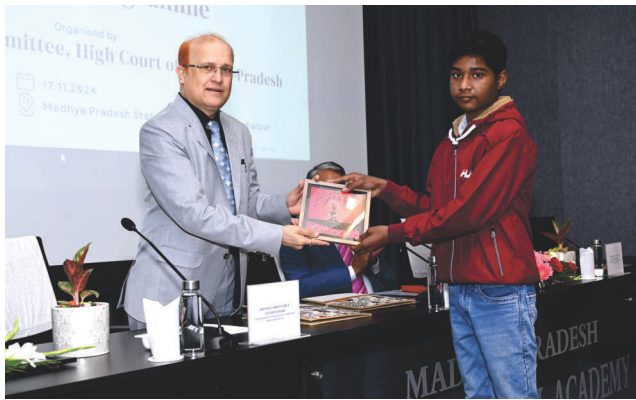
VALEDICTORY SESSION



FELICITATION PROGRAMME FOR CHILDREN WITH DISABILITIES



FELICITATION PROGRAMME FOR CHILDREN WITH DISABILITIES



FELICITATION PROGRAMME FOR CHILDREN WITH DISABILITIES



GROUP PHOTO DURING FELICITATION PROGRAMME



JOY RIDE - SAPNO KI UDAAN (JABALPUR TO INDORE)



JOY RIDE - SAPNO KI UDAAN (JABALPUR TO INDORE)



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