

WHO'S LOOKING AFTER THE KIDS?

Proposing Disaster-Management Recommendations at ChildCare Institutions in Assam

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SUBJECT: Proposing Disaster-Management Upgrades at ChildCare Institutions in Assam

Introduction

The confluence of unique geological and geographical features in the state of Assam makes it one of the more disaster-prone places in India. Comprising three distinct physiographic domains—the Brahmaputra riverbed, the Barak valley and the Central Assam Hills—it has been described as a multi-hazard state that is very susceptible to floods, earthquake, storms, erosion and landslides besides man-made disasters.

Therefore, a multi-dimensional, hyper-alert disaster response strategy is a vital coefficient to the effective administration in Assam. In order to be impactful, such a response strategy must cover institutional mechanisms, disaster prevention strategy, early warning system, disaster mitigation, preparedness and response and human resource development at every level of administration. This is particularly true in the case of Child Care Institutions (CCIs), where it is the primary duty of the State, in its *parens patriae* role to ensure that safe, preventive and protective care is afforded to children that have to fend for themselves owing to various factors and circumstances. CCIs under the Juvenile Justice (Care and Protection of Children) Act, 2015 (JJ Act, 2015) already offer these children the much-needed care and protection they deserve. Assam presently has 106 CCIs which host 1985 children in its care and protection. A consistent, comprehensive disaster mitigation and management protocols of the CCIs will certainly enhance the system and boost the wellbeing and welfare of all these children.

Considering Recommendations at ChildCare Institutions in Assam

Assam presently has 106 CCIs which host 2985 children in its care and protection.¹ The state administration has a constitutional mandate to promulgate and propagate such a response to ensure the safety and protection of its most vulnerable constituents from the unprecedented damage of disasters.

Given that the immunologic response among children is markedly lower than that of average individuals in the community, they are admittedly more at risk of being affected by effects of a disaster than others. Especially in a crisis, vulnerability among children is heightened. Throughout this pandemic, children have been falling under the radar. Constrained socialisation due to restricted access to open spaces, shutting down of schools, fear and uncertainty surrounding the risks of infection have adversely affected the mental wellness among children, especially in CCIs.

Purported to be the ‘last resort’ of alternative care available with the state, CCIs are still the most under-acknowledged and over-exploited component of our Juvenile Justice system. In a recent interview with TQIC, Mirza Mahammad Irshad the Project Manager (Response and Recovery), ASDMA stated: *“After accepting the mandate of the Disaster Management Act, 2005 the government of Assam created the ASDMA to carry out an effective and efficient hazard-mitigation protocols. The ASDMA had consistently worked to improve the preparedness measures available across the state and minimized a vast multitude of challenges they turned into a crisis. However, the authorities are still seeking support and assistance in designing effective strategies, specific to the safety and protection of children in state care.”*²

¹ ASDMA. (2019, June). *The Role of Administration in Improving Status of CCIs*. ASDMA Annual Conference 2019.

² CENTRE FOR NATURAL DISASTER MANAGEMENT ASSAM ADMINISTRATIVE STAFF COLLEGE. (2017). Notes of Past Disasters in Assam. *Compendium on Emergency Response in Assam*, 56–83.

Cognizant of this, the Together for Quality Institutional Care (TQIC) alliance has outlined a framework of reference for the CCIs, entailing guidelines, directives and other considerations that can prove useful towards the formulation of a policy predicated on the belief that investments in mitigation are far more cost-effective and resource-efficient than the alternative of expenditure on relief and rehabilitation.

Categorizing the Various Crises and Challenges at CCIs

While designing such Disaster Management protocols and programs, it is essential to consider the environment in which the CCIs function and the collective experience of the children they must cater to.

1. Natural Disasters

Assam is situated in a subduction zone created by the conflicting Indian and Eurasian tectonic plates, making it very prone to earthquakes. The Brahmaputra and Barak river-systems have exposed the topography to extreme geostatic pressures causing severe erosion and frequent flooding in the region. The approach of the South West Tropical Monsoon in the region is often marked by strong winds, occasional thundershowers, hailstorms and at times by cyclones. Deforestation and demand for more and more agricultural land in Assam has also led to the destabilization of hill slopes which during the monsoons come down as landslides.

The aforementioned disasters devastate natural life and property to a violent degree. While the damages to development gains and the natural fabric are admittedly vast, the damages sustained by individuals are not insignificant either. Particularly for the CCIs, the onset of natural disasters can mean sudden effects on supply linkages, temporary strain on resources, unplanned admissions of children separated from their families, problems in PwDs/CWSNs, disruptions to healthcare-related service delivery, in addition to loss of life and property.

1. Man-Made Conflicts

The nature of man-made conflicts and challenges is too volatile to predict accurately, as is the damage they can cause to society. Riots, terror attacks, civil strife can derail the functioning and well-being of an entire state, destroy communal integrity and harmony,

leaving most of its constituents vulnerable to further attack and weak from its impact. With state systems in disrepair, the CCIs in these affected regions may experience unexpected challenges in terms of connectivity to support systems and relevant authorities, access to resources, and harsh social conditions that add to the psycho-social stress among staff and children alike and threaten their safety and security.

In addition, challenges have previously arisen due to the collapse of structures. Given the precarious topography, structural mitigation measures are central to preparedness efforts in Assam. The costs borne by CCIs reflect the larger challenges faced by the state, during such crises.

1. Epidemics and Contagious Outbreaks

The current COVID-19 pandemic has served to remind us of the many systemic and structural challenges faced by the CCIs in service-delivery, including but not limited to closure of schools, confinement and quarantine protocols, management of over-crowded institutions, reductions in food security, lack of access to adequate healthcare among others.

The outbreaks of contagious diseases like malaria, dengue, cholera put overwhelming strain on the healthcare systems in the region. The spread of these diseases in CCIs can prove chaotic, with several children in distress and the staff struggling to offer due care. The CCIs must formulate preventive protocols and measures to confront the damages from lack of access to healthcare resources and services and safeguard the health of children and staff.

1. CCI-Specific Emergency Crises

In addition to health-related challenges, the CCIs can also be a theatre for several other interpersonal, physical and psycho-social violence. These are often a reflection of the discord between the institutional control and the individual discipline among its occupants. These incidents have a detrimental impact on the morale at CCIs, inspire feelings of

insecurity and stress among children and can retard the developmental gains made by caretakers in establishing trust and harmony.

Close monitoring of the children's social interactions, early identification and mitigation of disruptions, reporting problematic behaviour through the appropriate communication channels, provision of necessary counselling and moral support become vital then, to the effective redress of these challenges.

Every year, several cases of sexual misbehaviour, extreme disobedience, self-harm and violence towards others, run-away attempts are reported across CCIs in the country.³ It is important to consider the extreme potentialities among these crisis-situations and to prepare effective action-plans in their prevalence.

³ Gough, J. (2018, June). *Humanitarian Action for Children*. UNICEF. <https://www.unicef.org/media/80856/file/2019-HAC-South-Asia.pdf>

Proposing Three-Level Action Plan for Emergency Preparedness

TQIC has conducted extensive surveys and training with state, district and CCI-level functionaries to design these recommendations. An effective administrative response during emergency situations must follow a uniform, circumspect framework at every level. TQIC proposes the following framework to enhance the nature of its Disaster Response among Child Protection functionaries at state, district and CCI-level.

State-Level Action Plan

As the chief administrative authority tasked with Disaster Management, the state department must work to equip the districts, CCIs and relevant departments with important resources and training towards enforcing an effective Emergency Response, in the following ways:

- To monitor the collection and formation of Emergency Contact Information Lists and Release Protocols at CCI-level.
- To support institutions in maintaining provisions for emergency medical care, treatment of illnesses and accidents.
- To supervise evacuation plans during extreme crises, and ensure procedures for notifying the parents of the relocation site are strictly followed.
- To set aside emergency funds/budget to be used by CCI/ DCPU in case of crisis to support victims, infrastructure, to procure medical aids/ support, to hire vehicle for emergency evacuation, to buy daily essential supplies

District-Level Action Plan

At district level, the District Child Protection Units (DCPUs) are expected to actively engage, regularly monitor and support the CCI's efforts towards preparedness and prevention. The DCPUs must coordinate with the state level and communicate the needs

and demands of CCIs, support the emergency committee to identify early signs and establish crisis-planning measures. The DCPUs are also a conduit of state-level guidance and support for the CCIs, and must follow these responsibilities:

- To conduct vulnerability mapping of the CCIs to evaluate their susceptibility to risk and damage. This helps identify various potential vulnerabilities among children in CCIs, determining provisions for their adequate care and safety, building effective linkages with healthcare instruments and systems etc.
- To monitor efficient provision of food and other essential resources. The DCPUs can provide much-needed guidance in locating resource-centres and establishing positive, collaborative linkages.

CCI-Level Action Plan

As the direct and first in line of action, CCIs must have in place following protocols and practices to minimize risk and damage to the children and the infrastructural systems involved:

- Awareness: To develop Emergency Prevention Protocols and share with the staff, administration and with children to ensure awareness. Training to its staff in identifying and monitoring early signs of conflicts, calamities and other challenges is also vital. To have resource mapping directory and mobilisation strategies in order to mitigate damage. To conduct regular drills to evaluate the preparedness at the institutional level and to familiarize children and staff with Disaster Management protocols.
- Preparedness: For crises involving unpredictable threats to life/property, CCIs must identify and equip safe spaces and shelters for the children. To check cash-flows and other financial resources, to devise arrangements for adequate access. The financial

fortitude of a CCI will contribute significantly towards its ability to act efficiently in the mitigation of any crisis.

Strategic Recommendations

1. **Emergency Response Committees:** TQIC believes in the constitution of a CCI-level Emergency Response Committee (ECR) as the first and foremost step towards envisioning effective hazard mitigation in these institutions.

Composition of ECR: In order to be truly effective, such a committee will require the participation of both ex-officio and administrative staff, as well as the input of relevant experts and collaborators such as the Owner/Governing Board Member/CCI Trustees, Superintendents, Deputy Superintendents/ POs, House Fathers/ House Mothers, Counsellors/ Mental Health Experts etc.

Role and Responsibilities of the ECR:

- To assess if children/staff need to be referred directly to a health facility for medical attention or sent home, after obtaining the necessary orders and legal considerations from the Child Welfare Committee or Juvenile Justice Board, or Children's Court. To maintain information about such procedures during a crisis with the staff, parents and children ahead of time. To appoint one designated person to manage the necessary communications.
- To coordinate between all stakeholders like the state department, public health and local hospitals, police as required. To assign due responsibilities for the staff as well as the children, to conduct drills and ensure preparedness and awareness in the CCI in order to minimize harm. To conduct Spot Check-Ups (Hygiene Inspection Committee, Children Committee should participate in these. To maintain hygiene and to conduct daily disinfection and sanitization of public High Touch spaces in the CCIs.

- To account for food and other general provisions, checking availability and procurement. To arrange for medical equipment, maintenance of well-equipped first-aid supplies and training of staff regarding basic support practices.
 - To maintain an effective mechanism to check if the children are physically harmed/ punished/beaten/abused/humiliated/sexually assaulted by other children, any staff member or visitor to the home and ensure immediate safety for them. To support children if they show early signs of mental or physical unrest or illness by taking immediate action.
2. **Digital Self-Assessment Application:** TQIC is prepared to design a digital application, to enable continuous assessment of the current status of services available with the CCIs among factors like nutrition, health, vocation, safety, daily routine, administration(admission/discharge), meeting CWCs and others. This application will enable the state and district-level administrators to monitor specific interventions and strategize effectively for High Priority Areas based on steady inputs from the CCIs. The streamlining of such state-wide specific data will make analysis efficient, inspection comprehensive and interventions impactful. TQIC intends to model this application after the extensive guidelines included in the Juvenile Justice (Care and Protection of Children) Act, 2015 legislation.

This recommendation is a high-cost solution to a problem that may find more effective redress in labour-intensive, low-cost action plans. The monitoring and maintenance of the application, the supervision of digital infrastructure is an efficient alternative, and also an expensive one.

3. **Inspection Tools and Protocols for District Administrators:** In addition to ongoing monitoring and assessment of children's health at CCIs, maintenance of other isolation-based protocols, effective case-management and allocation of children in CCIs, TQIC is prepared to offer comprehensive training and materials to conduct regular evaluations of the available resources. Once trained, the child protection functionaries must be trusted to utilise these tools and protocols effectively to their benefit. This alternative requires the least amount of commitment and interventions from the state administration and its collaborators. This particular suggestion is akin to the provisions within the current legislation governing emergency preparedness at CCI-level.

Considering the Outcomes Matrix for aforementioned Propositions

No.	Proposed Recommendation	Proposed Costs	Proposed Time-Period	Rank
1	Emergency Response Committee at CCI-Level	Initial Cost Pertaining to Training, Recurring Costs on Monitoring, Upskilling etc.	(6 months) TQIC Training Webinars spread over 3 months, at district and state-level, 3 months of Review Period	1
2	Self-Assessment Tool at State-Level	Cost Pertaining to Development of Application, Training of Functionaries, Related to Monitoring and Evaluation of Data	(1 YEAR) 3 months for Establishment of the Digital Infrastructure, 3 months for Collection of Data, 3 months of CCI-specific Training at all Levels, 3 months of Review Period	2
3	Inspection Protocols at District-Level	Recurring Cost Pertaining to Training, Recurring Cost of Third-Party Evaluation	(3 months) 3 months of Training Webinars conducted by TQIC in collaboration with state and district-level administrations.	3

Conclusion

To an untrained eye, characterization of the COVID-19 pandemic as the worst child's rights crisis in history may seem hyperbolic. But never before have children across the world, faced the kind of challenges they are now facing, both at once and at an unprecedented level. The pandemic has indeed put an entire generation of children indelibly at risk, some way more than others.

While children are not yet considered to be most at risk of contracting Covid-19, they remain extremely vulnerable to its 'secondary' social and economic impacts. The devastating socio-economic crisis has in turn, aggravated some of the biggest threats to child survival and well-being such as hunger, reduced access to health, education, social services among others.

In India, these adverse effects include but are not limited to: closure of schools, confinement and quarantine protocols, reductions in food security, lack of access to adequate healthcare, exposure to violence, exploitation, abuse, family separation and harmful family coping mechanisms.

TQIC strongly believes that this pandemic must be recognized for the opportunity it has afforded child-care systems in India: to invest in strengthening the hazard mitigation and disaster management protocols in the country for all children, but perhaps especially those in the direct care and protection of the state. The effects and imperatives emerging from this investment of effort and resources will shape the course of our future.

All our children deserve to be well-looked after, to be cared for, to be protected from harm and hardships, to be allowed to learn and grow in nurturing, nourishing environments. Whether we are able to effectively deliver duties to care to all our children will determine the course of our deliverance through this pandemic.

