



# IACN QUARTERLY

Issue 18 / March 2025

## Hello,

Dear All,

We are excited to bring you the 18th edition of IACN Quarterly. The issue includes knowledge resources on Policy Environment and Rehabilitation of care leavers, Delhi High Court guidelines on protecting the property of orphan children, and tools related to case management for the child protection workforce.

The Updates from the field section highlights success stories on foster care, sponsorship, and initiatives on family strengthening. The article on support through sponsorship also delves into the role of the community in preventing family separation. The innovative practices such as Child Fund Account and Child Protection Groups, are discussed in detail with a focus on their outcome benefits.

This issue also features an interview with a young adult who shares his experiences of unplanned and abrupt transition from a CCI to a family setting and the challenges he faced due to his HIV status. Please check the Events and Announcements section for information on conferences held during the period, which focused on aftercare, family strengthening, and issues of children with different sexual identities.

We would like to express our gratitude to everyone who contributed to this issue of the IACN Quarterly. If you wish to share any resources, information, or articles for the IACN website or Quarterly newsletter, please write to us at iacnsecretariat@iacn.in.

Sincerely,  
IACN Secretariat

## Knowledge Resources

### Information and Knowledge Resources on Alternative Care

Policy Environment around Rehabilitation of Care Leavers: A Study Note - **By Aide et Action**  
<https://iacn.in/wp-content/uploads/2025/04/Policy-environment-study-note.pdf>

Family Strengthening Approach towards ensuring Reintegration of Children Restored back to their Families from Institutional Care setting in India - **By Udayan Care**  
[https://www.celcis.org/application/files/3717/1509/5072/SJRC\\_2024\\_Vol\\_23\\_No\\_1\\_Mod\\_K\\_Kalra\\_G\\_Family\\_strengthening\\_approach.pdf](https://www.celcis.org/application/files/3717/1509/5072/SJRC_2024_Vol_23_No_1_Mod_K_Kalra_G_Family_strengthening_approach.pdf)

Case Management Handbook for Child Protection Workforce for Supporting Children with vulnerabilities - **By Miracle Foundation India**  
<https://miraclefoundationindia.in/case-management-tool-kit/>

Institutionalised Children Explorations and Beyond - March 2025 Issue - **By Udayan Care**  
<https://journals.sagepub.com/toc/ICB/current>

Guidelines to Safeguard Property Rights of Orphan Children in Delhi - **Delhi High Court**  
Link - [https://iacn.in/wp-content/uploads/2025/05/SMP02042025CW143612023\\_172400.pdf](https://iacn.in/wp-content/uploads/2025/05/SMP02042025CW143612023_172400.pdf)

## Updates from the Field

### Learnings and experiences shared by our Fellow members

A Journey of Hope: The Story of Kamakhi Kalita - **By Mr. Kalita Patgiri, Lecturer, Pathsala Mahavidyalaya, Bajali and Foster Father and Ms. Lukee Patgiri, Foster Mother Edited by Ms. Archana Santi, Programme Manager, SARA, Assam**

Preventative Sponsorship and Family Strengthening: Are We Missing Community Ownership? - **Ian Forber - Pratt, Deputy Executive Director, Children's Emergency Relief International (CERI)**

Empowering Communities: A Narrative of Child Protection Groups Across the Intervention Villages of HWVO - **By Aadil Farooq, Project Manager & Feroze Ahmad, Chief Functionary Officer, Human Welfare Voluntary Organization**

Empowering Child Protection Committees: A Pathway to Family Strengthening - **By Kunal Patel, Manager MEL, Miracle Foundation India**

The Shadow of Unprotected Childhood - **By Ms. Asoni Grace, Documentation Officer & Ms. Alveera, Case Manager, Fit Families Together, Udayan Care**

Empowering Families to Support Children: Strengthening the Family-Based Care Model - **By Family Service Centre**

## Events

### Learning Events

Navigating Gender and Sexual Identities in the context of Family-Based Care - **By IACN & Enfold Trust**

Ahvaan: National Conference on Aftercare Services - **By Catalyst for Social Action**

Re-Affirming Family-Based Care - **By UNICEF India & UBS Optimus Foundation**

1st National Family Summit, 2025: Supporting, Nurturing & Enabling Happy Families - **By Miracle Foundation India**

## First-Person

### Interview with Children, Young Adults and Care Leavers in different Care Settings

Interview with Mr. S

For Every Child, A Family



## Knowledge Resource

### Policy Environment around Rehabilitation of Care Leavers: A Study Note

<https://iacn.in/wp-content/uploads/2025/04/Policy-environment-study-note.pdf>

#### By Aide et Action

India, home to the largest child population globally, faces significant challenges in supporting children living in institutional care. With over 370,000 children in approximately 9,500 Child Care Institutions (CCIs), the transition from care to independent adulthood remains a critical concern. The study explores the complex landscape of aftercare services for "care leavers" — a group currently undefined in Indian legislation but recognized as youth

exiting institutional systems, typically between the ages of 18 and 23.

Drawing on data from national and international sources, the study conducted by Aide et Action in partnership with UNICEF, highlights glaring gaps in policy implementation, service delivery, and institutional preparedness. A significant proportion of CCIs remain unregistered and under-resourced, and many youth leave care without access to housing, education, or employment support. The absence of coordinated aftercare planning

exacerbates their vulnerability, increasing risks of poverty, homelessness, and social exclusion.

Through this desk study, we examine the current policy environment, legal frameworks, and existing government schemes, including Mission Vatsalya, to assess their efficacy in supporting care leavers. This work aims to advocate for a more integrated, rights-based approach and calls for inclusive, evidence-driven policies that ensure all care leavers are supported in their journey toward self-reliance and social integration.

## Family Strengthening Approach towards ensuring Reintegration of Children Restored back to their Families from Institutional Care setting in India

[https://www.celcis.org/application/files/3717/1509/5072/SJRCC\\_2024\\_Vol\\_23\\_No\\_1\\_Mod\\_K\\_Kalra\\_G\\_Family\\_strengthening\\_approach.pdf](https://www.celcis.org/application/files/3717/1509/5072/SJRCC_2024_Vol_23_No_1_Mod_K_Kalra_G_Family_strengthening_approach.pdf)

### By Udayan Care

A paper titled, "Family strengthening approach towards ensuring reintegration of children restored back to their families from institutional care settings in India" authored by Ms. Kiran Modi and Ms. Gurneet Kaur Kalra,

Udayan Care, was published in Scottish Journal of Residential Child Care: An international journal of group and family care experience. This paper analyses a family-strengthening project, Families Together (FiT), an initiative of Udayan Care, which ensures smooth

reintegration of restored children into their families through appropriate and systematic interventions. In addition, by closely working with children and their families, the project also acts as a gatekeeping mechanism to prevent the possibility of re- separation.

## Case Management Handbook for Child Protection Workforce for Supporting Children with vulnerabilities

<https://miraclefoundationindia.in/case-management-tool-kit/>

### By Miracle Foundation India

The handbook developed by Miracle Foundation India, is designed for Master Trainers (Family Based Care Champions) in Case Management to guide district child protection functionaries—including social workers, case managers, CCI staff, and statutory bodies—in handling

individual child protection cases. It covers all stages of case management: assessment, care planning, monitoring, and follow-up, with a focus on both community and institutional contexts. The handbook also serves as a valuable resource for stakeholders such as NGOs, police, Child Helpline, and others involved in child protection.

It consists of 10 chapters covering core concepts, practical tools, and guidance on delivering effective training.

We extend our heartfelt gratitude to all contributors to this Case Management Handbook. Special thanks to UNICEF India for their vision, technical inputs, and support in conceptualizing this important initiative.

## Institutionalised Children Explorations and Beyond - March 2025 Issue

<https://journals.sagepub.com/toc/ICB/current>

### By Udayan Care

The latest issue of the international, academic, double anonymized peer reviewed journal, 'Institutionalised Children Explorations and Beyond' (ICB), Vol. 12, No. 1, March 2025, has been published. This edition reflects on the evolving landscapes of child

protection and care systems across diverse socio-political contexts. It serves as both a reflection and a call to action for all stakeholders in child protection and welfare.

The next issue of the Journal will be published in partnership with "Martin James Foundation (MJF) Partnership,

who will be serving as the Guest editor for the upcoming September 2025 issue which will be a special issue on "Family Strengthening". MJF's experience will enhance our focus on Family Strengthening, bringing valuable insights to research and practice in alternative care.



# Updates from the Field

## A Journey of Hope: The Story of Kamakhi Kalita

**By Mr. Kalita Patgiri,**  
*Lecturer, Pathsala Mahavidyalaya,  
Bajali and Foster Father and  
Ms. Lukee Patgiri, Foster Mother*  
*Edited by Ms. Archana Santi,  
Programme Manager, SARA, Assam*

### ✿ A Child Found in Silence

On a quiet morning of 23rd June 2012, a little girl, barely 4 years old, was found alone and helpless at the Kamakhya Temple, Guwahati. She could not speak much and showed signs of physical challenges. The Guwahati CHILDLINE team, under the directive of the Child Welfare Committee, handed her over to the Specialized Adoption Agency—Indian Council for Child Welfare.

Diagnosed with spastic cerebral palsy, she also had a mild squint and delayed speech. She was given the name Kamakhi, inspired by the sacred place where she was found.

### ✿ A New Home, A New Hope

In August 2012, Kamakhi was transferred to the Students Welfare Mission, Barpeta, a special home for children with disabilities. There, she received better medical care and the nurturing environment she deserved.



Despite her challenges, Kamakhi began to show signs of improvement. Her name became a symbol of her strength—Kamakhi, the resilient one.

### ✿ A Twist of Fate

In 2013, during a group outing to Barpeta Road market, something unexpected happened. A street vendor recognized Kamakhi. 'I know this child,' he exclaimed, and ran to inform her biological parents.

Her mother arrived, fell to her knees before the President of the Child Care Institution (CCI), and pleaded, 'Please don't call the police. Let her stay with you. We cannot take her back.'

Amid the public chaos, a small yet powerful moment occurred—Kamakhi looked away from her mother and reached out in gesture toward the CCI vehicle. She had already chosen her family.

### ✿ A Family is Born

The next day, the CCI President, Mr. Kumud Kalita, and the vendor visited her original home. Her real name was revealed to be Rupa Chakraborty. Only an immunization card remained—her Past nearly erased. Kamakhi continued to stay in a CCI and was showing constant improvement.



However, in 2023, the special home where Kamakhi was residing decided to transition out. Worried about Kamakhi's future and deeply moved by the bond she had formed, Mr. Kalita and his wife Mrs. Lukee Patgiri, the in-charge of the CCI,

decided to take Kamakhi as their foster child. In February 2023, they legally became foster parents to Kamakhi under provisions of the Juvenile Justice Act. And in 2024 they filed an application for the adoption of Kamakhi. Adoption procedures are currently underway.

### A The Spirit of Kamakhi

Today, Kamakhi is 17 years old. Though she struggles to manage her daily life activities, she surprises everyone with her joy, energy, and love. She lovingly calls out "Papa" and "Mama," dances with enthusiasm, and enjoys flipping through books.

She also visits CCIs and SAAs across Assam—bringing hope to other

children with special needs. She has become a symbol of resilience and inspiration.

Rehabilitation of children with disabilities continues to challenge our collective conscience. The lack of resources, combined with families' reluctance or inability to take responsibility for children with special needs, often creates significant obstacles for stakeholders working in this area. Many children with disabilities are abandoned—left in hospitals, temples, on the streets, or surrendered before the Child Welfare Committees (CWCs) by parents who cite financial or emotional limitations.

Unfortunately, no amount of support ever seems enough. It is difficult to

blame the parents entirely, as the authorities themselves face numerous challenges, including a shortage of professionals, limited human resources, low levels of awareness, and a lack of sensitization among key stakeholders such as policymakers, educators, healthcare providers, and communities.

Despite these challenges, the story of Kamakhi offers a glimmer of hope. Her journey proves that nothing is impossible. The courage and dedication of her foster parents demonstrate that what it truly takes to rehabilitate a child with special needs is not just resources, but the willingness to make a difference in a child's life—and the openness to offer love and support where it is most needed.

*"I love my parents, Papa and Mama, more than words can say. They gave me a reason to live. I want to tell everyone across India: Don't pity children like me. Treat us with love and normalcy. We are not weak. We are just different—with strong hearts."*

- Kamakshi

The original names of the child and her parents have been published on the request of the parents and in compliance with our child safeguarding policy.

## Preventative Sponsorship and Family Strengthening: Are We Missing Community Ownership?

**By Ian Forber - Pratt**

*Deputy Executive Director, Children's Emergency Relief International (CERI)*

I've had great successes and made massive mistakes in my child protection career; I'm grateful to share these. For years, my focus was on individual-centered programs: ensuring each child was fed, clothed, loved, and prepared for the future. As we all probably know, experience soon revealed that a child's well-being is inextricably linked to their family environment. Children often return to their families, making it imperative to

support not just the individual but the entire family unit.

This realization led me to embrace family strengthening programs. Organizations like Miracle Foundation, Udayan Care, and CINI have been instrumental in this shift, emphasizing the importance of bolstering families to create nurturing environments for children. Yet, as I delved deeper, another layer unfolded: the family's success is profoundly influenced by their surrounding community.

### The Community's Role in Family Success

Families do not exist in isolation. They are part of a broader ecosystem that encompasses social networks, economic opportunities, educational institutions, and cultural norms. A supportive community can provide resources, social connections, and a sense of belonging, all of which are crucial for a family's resilience and a child's development.

Resource mapping and other forms of community-based care have long been

happening across India, demonstrating strong models of local support. However, what's often missing is a clear journey that ensures families receive the right kind of assistance at the right time. In essence, families should move along a pathway where community is the first and primary layer of support. If needs exceed what the community can provide, systems (government and civil society) must step in with targeted interventions—only as a bridge—until the family can once again be supported within the community.

## A New Journey: The Community as the Pillar of Support

The journey any family should traverse follows a tiered approach:

- Community as the First Line of Support**—The community should be the natural safety net for families, providing resources, peer support, and a sense of belonging. Local solutions, including community resource centers, self-help groups, and neighborhood networks, should be the first response to challenges.
- Targeted Systems Support When Necessary**—If a family requires more than the community can provide, temporary support from government and civil society should be activated. The goal should be clear: stabilization and a return to community support as soon as possible.
- Strengthening Community Capacity Concurrently**—While families receive temporary support, investments should be made in strengthening community capacity, ensuring that over time, fewer families require external intervention. This includes economic development, skills training, and social cohesion initiatives.
- Temporary Alternative Support Only When Essential**—If neither

the community nor immediate systems support can provide care, temporary mechanisms (such as short-term foster care or safe spaces) should be in place—but designed explicitly not to create dependence. Instead, they must work toward reintegration into community-based care.

## A Fundamental Shift: The Community is the “Client”

This approach represents a fundamental shift in how we think about support structures.

- We once saw the child as the primary client, leading to investments in institutions.
- Then, we realized that wasn't the way to go, so we strengthened the family so they could care for the child.
- Now, the next evolution is clear: the community must be our focus.

It cannot be solely the “system” or the government—governments change directions frequently, making them unreliable long-term anchors. Instead, the community remains the longitudinal pillar, the one structure that persists across policy shifts and leadership transitions.

## A Theory of Change for Community-Owned Family Strengthening Programs

To bridge this gap, I propose a Theory of Change that positions community ownership at the heart of family strengthening efforts:

- Engage the Community**—Initiate open dialogues with community members to understand their strengths, challenges, and aspirations. Foster trust and ensure that programs are locally relevant.
- Build Local Capacity**—Invest in training and resources that

empower community leaders to drive and sustain solutions. This includes developing skills in program design, resource allocation, and governance.

- Foster Collaborative Networks**—Encourage partnerships among families, local organizations, schools, and businesses to create a shared ecosystem of care.
- Implement Community-Driven Initiatives**—Support locally-led programs instead of externally imposed interventions. Community-generated solutions foster ownership and long-term success.
- Evaluate and Iterate**—Establish feedback loops where the community assesses its own progress, adjusting programs accordingly to strengthen resilience.

My journey has been one of evolving understanding. First, I focused on children, then families, and now I see that the true foundation is the community.

If we want to create sustainable, lasting change, we must stop seeing the child or family as the sole focus of interventions. Instead, the community itself must be strengthened, supported, and empowered. This is not just a shift in programming—it is a shift in mindset. The shift, let's be honest, starts with the money to pay for it.

## Funding the Community: The Hardest Sell with the Biggest Impact

One of the biggest barriers to scaling community-centered programs is funding. Traditionally, donors and government schemes like Mission Vatsalya focus on individuals—sponsoring children's education, meals, and healthcare—or, in some cases, strengthening families. When community-level funding does exist, it is

often limited to awareness campaigns, not deep structural investments.

Why? Because it is much easier to sell an individual success story than to fund systemic change. A donor feels good about buying a backpack for a child. They can picture the impact. But ask them to invest in a community-driven support network? That's harder. The same is true of an individual and a government mindset.

The problem is compounded by perceptions of responsibility. Many supporters believe families should "figure it out for themselves" and are hesitant to invest in strengthening a community they assume is at fault for its struggles. Yet, the irony is that community investment offers the highest return on investment (ROI)—reducing long-term dependency on aid and creating lasting, self-sustaining change.

### Changing the Narrative: Community Success Stories as a Strategy

To shift this mindset, we need visible proof of what works. A handful of communities that have been

fundamentally transformed through strategic, community-led investments must become the face of this movement.

### These communities must be:

1. Demographically relatable to decision-makers – Whether we like it or not, proximity matters. Decision-makers are more likely to invest when they see success in communities they identify with or understand.
2. Well-documented and shareable – Success stories need to be captured in a way that resonates. This is not just research and impact evaluation—it's branding and marketing.
3. Showcasing measurable impact – We need hard numbers and compelling human stories that demonstrate the cost-effectiveness of community-level support over repeated individual aid.

### A Call to Action: Rethinking Investment Priorities

If we want true, sustainable family strengthening, we need to:

- Advocate for new funding structures that prioritize community investments alongside individual support.
- Work with donors to reframe success, highlighting that a strong community reduces long-term costs for families, NGOs, and governments.
- Bring corporate and philanthropic partners into the conversation, showing them the data on community-wide ROI—better education, employment, and resilience.
- Develop marketing campaigns that make "community-first" initiatives as tangible and inspiring as direct child sponsorship.

This shift will not happen overnight. But if we want lasting change, we must move beyond child-first and family-first models and recognize that the community is the real client.

This is the next evolution of family strengthening. Are we ready to make the leap?

## Empowering Communities: A Narrative of Child Protection Groups Across the Intervention Villages of HWVO

**By Aadil Farooq,**  
*Project Manager &*

**Feroze Ahmad,**  
*Chief Functionary Officer, Human Welfare Voluntary Organization*

Communities play a crucial role in child protection by creating a supportive and safe environment for children. They serve as the first line of defense against potential risks, such as abuse, neglect, and exploitation. Through active involvement, communities can raise awareness about child protection issues, offer support for at-risk families, and facilitate early interventions.

Community-based Child Protection (CP) structures can collaborate with Local organizations, schools, and healthcare services to identify children in need of care and protection and provide essential services. Communities can also help in fostering a protective environment by promoting positive parenting, educating caregivers, and encouraging healthy social norms. They create spaces where children can thrive, build resilience, and develop life skills. By being vigilant, reporting concerns, and offering a sense of belonging, communities empower children to feel

safe, valued, and heard. Ultimately, a strong community foundation is essential in ensuring the overall well-being and development of children. This is a narrative journey of the evolution of community-based structures in Kashmir.



Recognizing the challenges faced by children at risk of family separation and other protection concerns, Human Welfare Voluntary Organization (HWVO) with support from UNICEF India embarked on a transformative journey across 70 villages in Kashmir region of Jammu and Kashmir.

This is the narrative of how these villages underwent a remarkable transformation, emerging as a beacon of community-based child protection & welfare through creation of effective community-based structures that are capable to address the needs of vulnerable children.

HWVO initiated its mission by extensively engaging with the local communities. This engagement was a crucial first step in understanding the needs of the village's children and the concerns of their families. HWVO worked closely with local leaders, active field workers, Auqaf members<sup>1</sup>, and Bait-ul-maal<sup>2</sup> members to shed light on the need for establishing community-based child protection mechanisms. The initial dialogue focused on rapport building, which further led to the creation of Child Protection Groups (CPG) in each intervention village. These CPG members consisted of minimum 10 individuals (five males and five females) who were dedicated individuals committed to safeguarding the children.

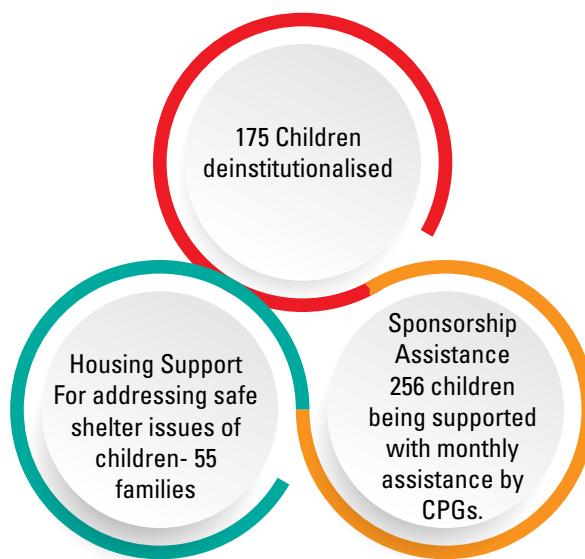
The foundation for community-based child welfare was built on knowledge sharing, engagement and awareness. Each CPG needed to understand the importance of child protection, child rights, and alternatives to institutional care. At each village level, the community members needed to comprehend the intricacies of

the Juvenile Justice (JJ) Act and the government schemes available to support the at-risk children. Furthermore, the engagement sought to address the often-neglected issue of children's mental health. This emphasis on knowledge sharing, engagement, community ownership and awareness were a critical building block in the transformation of these communities.

The CPG also initiated the process of framing village-level plans that prioritized child protection and highlighted key protection concerns, besides devising the strategies to address those concerns. Among the numerous strategies, the creation of a Child Fund Account<sup>3</sup> (CFA) - community-generated safety nets supporting children's education, health, and nutrition. Over 43 villages have adopted the sponsorship model through local contributions, reducing reliance on institutional care. The concept progressed steadily, and the communities began to see and recognize need for such a mechanism. With growing awareness and

understanding, the CPG members embraced the concept and took it upon themselves to create a mechanism that would safeguard the future of vulnerable children in their respective villages. Mobilizing funds became a collective endeavor. The CPG members assumed the responsibility of raising awareness, even within the local mosques, to garner support for the cause.

Initially, the response was modest, but the community's perception began to shift as they recognized the importance of such a financial mechanism with a '*lens of child protection*'. At the village level, each village began to understand the profound impact their contributions could have on the lives of vulnerable children. A pivotal outcome of the CFA's establishment was the sponsorship of vulnerable children. The CPG members, having observed the community's growing acceptance of the endeavor, decided to sponsor an identified vulnerable child. This sponsorship varied from village to village and included a monthly contribution ranging from Rs 1000 to 4000 INR.



<sup>1</sup> Auqaf members here means the local management of mosque, which usually consists of key community members that manage the affairs of the mosque and its subsequent jurisdiction.

<sup>2</sup> Bait-ul-Maal," meaning "House of Wealth" or "House of Money" in Arabic, is a historical Islamic institution, functioning as a public treasury responsible for collecting and distributing funds for the welfare of the community, particularly the poor, needy, and vulnerable.

<sup>3</sup> This community-based financial mechanism aimed to gather contributions from the fellow community members, with funds set aside specifically for the welfare of the village's children.

Monetary support ensures that the child's education, health, and nutrition needs are met. As the concept of community-based care mechanisms gained further traction, more vulnerable children began to benefit through linkages and referral support.

However, the story doesn't end here. The CPG in these intervention villages went beyond sponsoring children. Their capacities were significantly enhanced through monthly technical sessions focused on child rights, alternative care, the Juvenile Justice Act, and POCSO Act and so on. These sessions not only deepened their understanding of the rules, laws, child rights, and issues but also empowered them to actively monitor the issues of children within their respective communities. They've been transformed into vigilant guardians of child protection & welfare, ensuring that child protection issues

## THE SHIFT

### SURVIVE

#### Living day-to-day.

- Pre-contemplative - may not know they need help.
- Child at higher risk of family separation.
- Responding to crisis.

### THRIVE

- Future oriented.
- Able to set goals & plan for the future.
- Sustained safety and security.
- Contemplative - know their needs and how to address those needs themselves or within the family.
- If needed can access support for areas they cannot change themselves.
- Dignified independence and risk covered through larger ambit of community engagement.

are not neglected, but rather identified, reported, and addressed.

The narrative of these community-based child protection mechanisms is a story of hope, collaboration, and empowerment. It underscores the significance of community-driven initiatives in protecting and nurturing children, ensuring that institutional care remains the last resort. So far, 43 such community-based structures are providing regular sponsorship support to vulnerable children. This narrative serves as a testament to the power of community-based solutions in addressing the pressing needs of children in vulnerable situations. This community transformation demonstrates the incredible potential of communities working together for the greater good of children, bringing to life the adage that "it takes a village" to ensure child welfare & protection.

## Empowering Child Protection Committees: A Pathway to Family Strengthening

By Kunal Patel,  
Manager MEL,  
Miracle Foundation India

### Addressing the Challenges of Vulnerable Populations in India

India is home to the world's largest child population, with over 39% of its population under the age of 18. While this represents immense potential for the nation's future, a significant proportion of these children face vulnerabilities, including poverty, neglect, abuse, and limited access to education and healthcare. It is estimated that millions of children in India are at risk of separation from their families due to socioeconomic challenges, migration, or lack of adequate support systems.

Recognizing the critical role of family in a child's holistic development, India has been making strides toward strengthening child protection systems and empowering local Child Protection Committees (CPCs) to ensure every child grows up in a safe, nurturing, and permanent family environment. This shift marks a significant step in safeguarding children's rights and fostering a stronger foundation for family strengthening in the country.

### The Family Strengthening Project

The Family Strengthening Project, in collaboration with UNICEF and the Miracle Foundation India, addresses these challenges by reducing the risk of family separation through preventive

measures. Partnering with the Deepak Foundation, the project implemented a gatekeeping mechanism to strengthen families and ensure children's overall development. This initiative promotes quality family-based and alternative care in Gujarat and Maharashtra, aligning with the Juvenile Justice (Care & Protection) of Children Act, 2015. Pilot areas were identified in Ramnagar, Maharashtra, and Dumali Juth Panchayat, Gujarat, covering villages such as Nani Dumali, Moti Dumali, Gungawada, and Jaloda. By empowering families and protecting children, the project establishes a robust framework for care and support, offering a scalable and replicable model for family strengthening and social reintegration.

## Process and Implementation

The project began with a situational analysis conducted by the Deepak Foundation to assess socio-economic conditions and child protection issues. In Gujarat, challenges included child labor, migration, school dropouts, malnutrition, and domestic violence. In Maharashtra, issues such as non-functional Ward Child Protection Committees (WCPCs) and child rights vulnerabilities were prevalent. Using community mapping, informant interviews, Focus Group Discussions (FGDs), and Participatory Rural Appraisals (PRAs), at-risk families were identified. Needs assessments in targeted areas like Chhotauddepur (Gujarat) and Pune (Maharashtra) guided community engagement activities during the COVID-19 pandemic.

Local volunteers played a critical role, with 22 active in Gujarat and 20 in Maharashtra. Efforts focused on reactivating Village/Ward Child Protection Committees (VCPC/WCPC). Three VCPCs were formed in Gujarat and one WCPC in Maharashtra. Additionally, Bal Panchayats were established—five in Gujarat and one in Maharashtra—to empower children and address child protection needs. Training sessions built the capacity of committee members, enhancing collaboration with stakeholders like school authorities, PRI members, and local leaders to advocate for child rights and protection.

## Role of Ward/Village Child Protection Committees and Bal Panchayats

The VCPC/WCPCs and Bal Panchayats were instrumental in strengthening gatekeeping mechanisms across villages. Members actively identified community issues such as child marriage, school dropouts, child labor, and substance abuse. Regular meetings improved coordination and rapport with government officials and stakeholders. Visits to vulnerable families were conducted, and cases were presented in meetings to discuss potential support provisions. Members also addressed challenges posed by the COVID-19 pandemic, using community advisory networks to provide support to affected families and ensure child protection.

To enhance their functionality, W/VCPCs in both states implemented a self-assessment tool provided by the Leher Foundation. This tool evaluated parameters such as awareness, capacity building, and meeting effectiveness. Based on identified gaps, action plans were developed to strengthen committee operations. Training sessions on life skills, child rights, psychosocial support, and leadership further built the capacity of W/VCPCs, Bal Panchayats, and volunteers.

Bal Panchayat meetings were regularly organized on a monthly basis in the project areas. Throughout the project period, they effectively identified

child protection and child rights issues, playing an instrumental role in addressing challenges such as child marriage, school dropout, and addiction in the community. Additionally, they created awareness regarding child protection and child rights in their respective community areas.

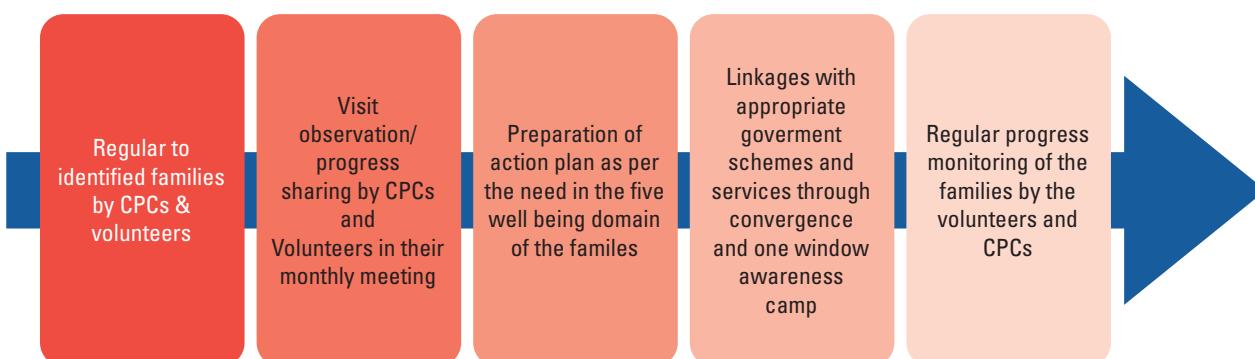
## Key Initiatives of W/VCPC & Bal Panchayats in Gujarat and Maharashtra

In Gujarat, VCPCs facilitated health check-ups, prevented child marriages, provided livestock to families, and supported child rescue operations. In Maharashtra, WCPCs partnered with the Pune Municipal Corporation to establish Balwadis, re-enrolled dropouts through free coaching, and coordinated with police to address child protection issues.

Bal Panchayats undertook 29 initiatives, including re-enrollment of school dropouts, counseling children on issues like tobacco addiction, rescuing children from labor, and organizing awareness campaigns. Activities included street plays, rallies, and distributing sanitary napkins to promote health and child rights.

## Progress Visits

As a measure of family strengthening and mitigation of red flags, continuous monitoring of children was done through progress assessment visits. The volunteers along with the CPCs made regular visits to the vulnerable families



to identify the need of the families as per the five well-being domain of livelihood, living conditions, social and family relationships, health and mental health, and education. Based on these visits the cases of the families are discussed in the CPC meetings and based on the discussions intervention plan were prepared. Further to address these issues the CPCs and volunteers, along with the Deepak Foundation, designed and finalized intervention plans for each child and their family. Based on these plans, families were linked with appropriate schemes and services.

In Gujarat, families faced several challenges, including poverty, lack of sustainable livelihood options, poor living conditions, school dropouts, and addiction. To address these issues, case-specific intervention plans were developed. Families living in inadequate housing were linked with the Pradhan Mantri Awas Yojana, while single parents and orphaned children benefited from the Palak Mata Pita Yojana. School dropouts received counseling alongside their parents, resulting in the children resuming their education. For families without sustainable livelihoods, connections were established with schemes such as the E-Shram Yojana and Sadhan Sahay Yojana. Differently-abled children were supported through the Sant Surdas Yojana, and families struggling with addiction received continuous counseling. To further secure the future of these families, they were enrolled in the Pradhan Mantri Jeevan Bima Yojana. Altogether, 72 families in Gujarat were successfully linked with various government schemes.

In Maharashtra, targeted interventions were implemented to address the needs of vulnerable families, linking a total of 49 households with various government schemes. Families without sustainable livelihoods were connected to the E-Shram Yojana, ensuring access to social security benefits. Girls

from eligible families were supported through the Sukanya Samruddhi Yojana, promoting their education and future financial security. Those living in inadequate housing conditions were linked with the Pradhan Mantri Awas Yojana, while families were further safeguarded through enrollment in the Pradhan Mantri Jeevan Bima Yojana. Additionally, ABHA Cards were provided to improve access to health services and facilitate medical records management. These efforts aimed to enhance the overall well-being and security of the families involved.

To analyze the progress of the identified vulnerable children and their families during the project cycle, a total of 16 progress visits (10 in Gujarat and 6 in Maharashtra) were conducted by the Deepak Foundation. The Thrive Well tool was used to assess progress across five well-being domains: education, living conditions, livelihoods, health and mental health, and family and social relationships. Based on these assessments, feasible interventions were developed by volunteers in

consultation with the identified families and children.

At the time of project closure, follow-up assessments were completed using the Thrive Scale™ for 108 children in Gujarat and 130 in Maharashtra. Significant efforts were made to enhance linkages and address identified red flags among vulnerable families to support their well-being.

## Outcomes

The illustration showcases the Thrive Scale™ scores across two project regions over a reporting period. In both Gujarat and Maharashtra, there is a consistent improvement in the Thrive scale scores over time, suggesting that the interventions are becoming more effective and that families are gradually enhancing their conditions.

A total of 92 vulnerable families across Gujarat and Maharashtra successfully thrived. In Gujarat, out of 89 identified families, 56 remained active, 11 migrated, and 22 completed their intervention requirements, leading to

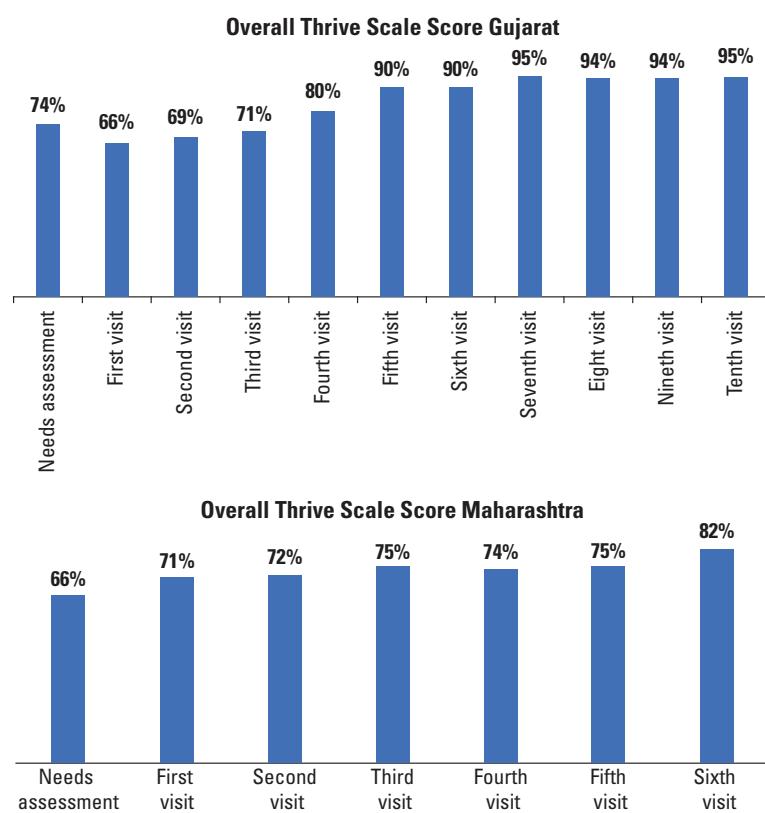


Figure1: Thrive-scale scores from Gujarat and Maharashtra

case closures. Consequently, 61 out of 89 families in Gujarat are thriving. In Maharashtra, among the 64 identified families, 51 are still active, 11 have migrated, and 2 cases have been closed, with 31 out of 64 families thriving.

The Thrive Scale™ scores over the reporting period indicate consistent improvement in both project locations. In Gujarat, the score increased from 74% to 95%, whereas in Maharashtra,

the score rose from 64% to 82%, highlighting the effectiveness of the interventions and the gradual enhancement of family conditions.

### Conclusion

The Family Strengthening Project, through its collaboration with community-based child protection mechanisms such as VCPCs and Bal Panchayats, has demonstrated the transformative impact of localized,

participatory approaches. By addressing key issues like child marriage, school dropouts, and substance abuse, and by linking families to essential government schemes, the project has significantly strengthened the safety net for vulnerable children and their families. The consistent rise in Thrive Scale™ scores underscores the sustainability and replicability of this model, paving the way for broader adoption across India.

## The Shadow of Unprotected Childhood

*"Protecting children's rights within the family is not just a legal obligation; it is a moral imperative that defines our humanity."*

- Nelson Mandela, Anti-Apartheid Leader and Former President of South Africa

**By Ms. Asoni Grace,**  
Documentation Officer &

**Ms. Alveera,**  
Case Manager, FiT Families Together,  
Udayan Care

Protecting children's rights within the family is paramount for their overall well-being and development. The family serves as the primary environment where children learn, grow, and form relationships, making it essential to ensure their rights are respected and upheld. Parents and caregivers play a crucial role in modelling appropriate behaviour and attitudes, teaching children about their rights, and empowering them to assert themselves. Additionally, protecting children's rights within the family involves meeting their basic needs, including access to education, healthcare, nutrition, and shelter. It also entails providing opportunities for children to express themselves, participate in decision-making processes that affect their lives, and pursue their interests and aspirations.

However, Udayan Care's work through the Families Together Project, at the

ground level has revealed a stark gap in protecting children's rights. Not only are their rights violated, but communities and children themselves are often unaware of their basic rights. This raises critical questions about the root causes of this ignorance. Is it due to widespread illiteracy? How long has this issue persisted, and what systemic factors perpetuate it?

### Case story

One heart-wrenching case illustrates the dire consequences of failing to protect children's rights within the family. Meet Sheetal, a 10-year-old girl whose fundamental rights have been systematically violated by none other than her own family. Every child has the right to live free from harm, abuse, neglect, and exploitation, yet Sheetal's reality paints a different picture. Instead of experiencing the warmth of parental love and support, she finds herself begging in a nearby temple, deprived of the basic necessities of childhood. Her safety and well-being hang in the balance as she navigates a world fraught with dangers, forced to seek affection

from teenage boys in the absence of guidance and protection from her family. It's often said that fathers serve as protectors, shielding their children from external threats. However, in Sheetal's case, her father plays a very different role. Instead of safeguarding her, he becomes the source of harm, acting more like a weapon that inflicts pain upon her physically and sexually which is so despondent. He imposes strict limitations on Sheetal, preventing her from participating in life skills activities and depriving her of access to education.

The role of FiT Families Together Project in addressing Sheetal's case exemplifies the project's dedication to protecting children's rights within the family and ensuring their well-being. Here's a review of the project's interventions and contributions:

- Education support:** FiT Project ensured that Sheetal was enrolled in school, recognizing education as a fundamental right that empowers children and breaks the cycle of poverty. Additionally, the project provided all necessary school essentials, ensuring access

to education, a crucial aspect of children's rights.

- Mental health support:** Sheetal and her family received frequent counselling sessions, addressing the emotional toll of their experiences and equipping them with coping mechanisms. This intervention fosters emotional well-being within the family, acknowledging children's right to mental health support.
- Legal assistance and advocacy:** FiT Project swiftly assisted Sheetal in reporting the case of abuse, providing emotional support throughout the daunting processes of engaging with the police station and court proceedings. This advocacy ensures that Sheetal's voice is heard and her rights, including the right to safety and protection, are upheld within the justice system.
- Financial aid:** Understanding the economic challenges faced by the family, the project provided financial assistance, addressing systemic barriers to child well-being. By transferring a significant sum to Sheetal's account for a fixed deposit, the project empowers her to pursue her aspirations, addressing her right to financial security and future opportunities.
- Exploration of alternative care options:** Recognizing the limitations of the immediate family environment, the project explored alternative options for family-based care by engaging with Sheetal's maternal grandparents. This initiative showcases the project's dedication to finding the best possible solution for the children's safety and well-being, acknowledging their right to a nurturing and supportive environment.
- Engagement with child welfare authorities:** FiT Project played a pivotal role in presenting Sheetal's case before the Child Welfare Committee (CWC), ensuring timely intervention and safeguarding the children's safety and security. This action aligns with children's rights to protection and participation in decisions affecting their lives.

FiT Families Together Project's multifaceted interventions in Sheetal's case exemplify a holistic approach to protecting children's rights within the family. By addressing educational, mental health, legal, financial, and caregiving needs, the project empowers children and families to thrive in a supportive and nurturing environment, embodying the organization's commitment to promoting child well-being and ensuring every child's right to a safe and fulfilling childhood.

## Empowering Families to Support Children: Strengthening the Family-Based Care Model

### By Family Service Centre

In the heart of Mumbai's bustling communities, stories of resilience and transformation unfold every day. At the center of many of these stories is the role of family, and the powerful impact that consistent support, counseling, and opportunity can have on families struggling with economic, emotional, and social instability.

Two such stories—of Rani and Pallavi<sup>1</sup>—highlight how empowering families is key to empowering children.

### Rani: From Timid Beginnings to Confident Independence

When Rani joined Family Service Centre's (FSC) sponsorship program in

2013, her family was in a precarious situation. Her parents struggled to maintain steady employment, creating an atmosphere of financial instability. With ongoing support and guidance from FSC, both parents secured more reliable jobs—her mother as a domestic worker and her father as a courier. This stability at home laid the foundation for Rani's personal development.

Despite her shy nature and initial reluctance to pursue higher education, Rani found encouragement and mentorship from FSC social workers who helped her recognize the importance of education and self-reliance. Through vocational training in beauty services alongside her academic pursuits, she not only gained

new skills but also built the confidence to enter the workforce.

Today, Rani works as an accountant in a private firm and supplements her income with freelance work as a beautician. She credits her ability to speak English, her leadership skills, and her self-belief to the continued encouragement and opportunities provided by FSC. Her story is a powerful reminder that when families are supported and stabilized, children can thrive and reach their potential.

### Pallavi: Breaking the Cycle of Violence and Pursuing Dreams

In Colaba's dense slum community, Pallavi's childhood was overshadowed

<sup>1</sup> Names changed to protect the identity of the children

by her father's alcoholism and the domestic violence it fueled. The stress of home life affected not only her academic focus but also her younger brother's developmental health. Recognizing the urgent need for intervention, FSC offered therapeutic support for her brother and consistent counseling for the family.

While her father initially resisted rehabilitation efforts, the persistent involvement of FSC social workers helped the family confront the issue head-on. When her mother finally took the bold step of reporting the abuse, it acted as a turning point. Her father, faced with real consequences, began to make significant improvements.

Pallavi, a bright and determined student, received educational sponsorship and was motivated to pursue a career in healthcare. With the help of FSC and additional fundraising efforts, she enrolled in a Bachelor of Occupational Therapy program at one of Mumbai's prestigious institutions. Now in her fourth year, Pallavi is not only thriving academically but also mentoring other youth through her involvement in the youth organization 'Pehchan'.

## The Power of Family-Based Care

Rani and Pallavi's stories underscore the transformative power of investing in families—not just individuals. Family-

based care goes beyond temporary fixes; it addresses root causes such as unemployment, addiction, and domestic conflict, providing families with the tools and support to create stable, nurturing environments. This model ensures that children remain within the care of their families while being empowered to grow emotionally, socially, and intellectually.

## Our approach

The natural environment for a child to grow up in is a nurturing family. Experience and research have shown that growing up away from parents and family, in a residential facility can leave behind a long-lasting trauma, pain, grief, and irreparable scars. While institutional care is the most common type of alternative care provided by the State, this approach, worldwide, is gradually being replaced because of a strong conviction that the **Right to Family** is one of the most basic rights of a child.

The **Family Service Centre (FSC)**, firmly grounded in the belief in **non-institutional alternative care**, champions initiatives focused on family strengthening. Its goal is to unite families and communities, ensuring children can grow and thrive in stable, loving homes.

For the past 69 years, Family Service Centre (FSC) has empowered families

by creating an enabling and supportive environment and offering a wide range of non-institutional services such as scholarship, foster care, Adoption and community outreach through strengthening the youth group, ANC, PNC, RCH programs with women, balwadi and support classes for children, and various other initiatives of community development at Colaba and Uttan. The organisation has been a trailblazer in promoting the family-centered approach to child protection and rights.

FSC's approach reflects a deep understanding that families are the first line of defense in a child's well-being. When caregivers are guided, supported, and empowered, they become capable advocates for their children's future. Programs that combine counseling, education sponsorship, skill-building, and health interventions offer a holistic safety net—one that lifts not just individuals, but entire families.

## Moving Forward

As we look ahead, it is critical to invest in initiatives that strengthen family systems. Community-based interventions, consistent mentorship, and flexible financial support must remain central to child welfare efforts. The success of Rani and Pallavi offers hope: when we empower families, we empower the next generation.



## Events

### Navigating Gender and Sexual Identities in the context of Family-Based Care

By IACN & Enfold Trust

In an effort to highlight and address the often-neglected issues faced by children, the IACN, in collaboration with the Enfold Trust, organized a webinar to explore the challenges and opportunities in supporting transgender, intersex, and gender-diverse children within family-based care systems. Led by speakers Dr. Sangeeta Saksena (Enfold Trust), Rajkumar Sharma (care-experienced youth), and Dit Thoudam

(Superintendent, Aura Children's Home, Manipur), the session emphasized the urgent need for inclusive care practices, safe spaces, and policy reforms. The webinar was attended by 94 participants.

#### Understanding the Foundations: Sex, Gender, and Sexuality

Dr. Sangeeta began the session by laying the groundwork for understanding diversity. She

emphasized that *sex* is assigned at birth based on physical traits, while *gender identity* is a deeply internal sense of self that evolves over time. She reminded participants that neither sexual orientation nor gender identity is a choice—both are natural, valid, and should be respected.

She called for a shift away from rigid gender norms, highlighting that diversity exists not only among humans but across the natural world. Accepting this diversity is not just a legal or institutional obligation—it's a human one.

Dr. Sangeeta called for gender diversity to be taught in schools and colleges, citing international examples like South Africa's mandatory diversity education modules. Similarly, medical professionals were urged to begin conversations about intersex variations with expectant parents as part of antenatal care, helping to reduce stigma and promote acceptance from birth.



## The Realities in Care Institutions

Rajkumar's personal account illustrated the emotional and psychological toll of being forced into a gendered space that did not align with her identity. Placed in a boys' CCI, she experienced bullying, isolation, and a lack of support from staff, which led to severe distress and a suicide attempt. Her story underscored the urgent need for child care institutions to receive gender sensitivity training and offer personalized counseling to better support transgender youth.

## A Pilot for Change: Gender Non-Conforming Children's Home

Dit Thoudam, highlighting a promising development, the Social Welfare Department of Manipur has piloted a separate home for gender non-conforming children. Prompted by concerns around discomfort with binary facilities and potential misuse of laws like POCSO, this initiative reflects a growing recognition that the one-size-fits-all model in care institutions does not serve every child equally. Dit Thoudam emphasized that while institutional care should remain a last resort, it currently serves as an essential safe space for some transgender and intersex youth in the absence of broader societal acceptance.

A thought-provoking part of the discussion addressed how CCIs can



practically support trans children. One recommendation was the creation of segregated areas within existing girls' homes for transgender girls, ensuring safety while still promoting social integration. Both Rajkumar and Dr. Sangeeta stressed that this approach must be handled with care—balancing the need for security with the goal of fostering understanding and acceptance.

## Moving Forward: Key Recommendations

The webinar concluded with a comprehensive set of next steps for various stakeholders:

- **Self-education** on LGBTQIA+ issues by all participants.

- **Creation of safe spaces** in CCIs for gender-diverse children.
- **Capacity building** for childcare staff, CWCs, and DCPUs on gender sensitivity.
- **Educational reforms**, including gender diversity in curricula.
- **Medical outreach** during prenatal care to raise awareness of intersex variations.
- **Aftercare programs** for transgender and intersex youth once they age out of institutional care.
- **Family support initiatives** aimed at keeping children with diverse identities in their homes whenever safe and possible.

Click here to listen to the full discussion - <https://youtu.be/rQ04Dd6XNY4>

## Ahvaan: National Conference on Aftercare Services

### By Catalyst for Social Action

Ahvaan - A Call to Action: National Conference on Aftercare Services, organized on 29th January, 2025 by Catalysts for Social Action (CSA), in partnership with A Future for Every Child (AFEC) and UNICEF, brought together 130+ stakeholders including care leavers, government agencies, NGOs, corporates, and experts from 14 states to deliberate on strengthening aftercare services for care leavers in India.

The conference highlighted good practices followed by different states and organisations, discussed critical challenges faced by care leavers, and underscored the need for a robust

policy framework. Key takeaways and recommendations that emerged from the conference are as follows:

- For the Central Government, recommendations included the need for establishing a body under Mission Vatsalya to coordinate aftercare efforts across states, and developing a technology platform connecting care leavers with organisations and support networks.
- State governments were urged to implement robust Management Information Systems to track youth leaving care, enhance financial assistance programs, develop schemes for addressing gaps in skilling and employment of Care Leavers, and increase investment in Aftercare Homes for transitional housing.
- Child Care Institutions were called upon to prepare children for independent living starting at ages 15-16, ensure all children have necessary identification documents, and develop individualized aftercare support plans before children leave care.

- The conference emphasized the need for CSOs to collaborate by sharing program models, data and inferences and resources. Corporate partners were encouraged to offer specialized services to cater to the unique needs of CLs and increase CSR investment in aftercare initiatives.
- Care leaver networks were recognized as crucial advocates for policy change and awareness, and were encouraged to provide peer support and to identify gaps and raise awareness among CLs on the different schemes and opportunities available.

The conference represented a significant step toward creating a more comprehensive and coordinated ecosystem of support for young people transitioning from care to independent living across India. It concluded with a general consensus on the need for better support for all care leavers through collaboration among stakeholders.

Knowledge resources shared at the event, detailed report, and the 'Call to Action' can be accessed here: <https://drive.google.com/drive/folders/1MfehwddTL7hx---8Ra8dUtmLLnpVWHB7>.



## Re-Affirming Family-Base Care

### By UNICEF India & UBS Optimus Foundation

On February 27th and 28th, 2025, UNICEF, in partnership with UBS Optimus Foundation, hosted a National Consultation titled "Re-affirming Family-Based Care" in Pune, Maharashtra. The Transform Neev Collective and India Alternative

Care Network were the technical collaborators for the consultation.

The key objectives of the consultation were to foster an enabling ecosystem where prevention of family separation and family care is prioritized over institutionalization and to create a platform for knowledge sharing and evidence on family strengthening

and family-based care. Additionally, it aimed at identifying progress made, practices across states, emerging issues, challenges, and opportunities for upscaling family-based care in India.

The consultation brought together over 100 participants, including Honourable Minister WCD, Government of Maharashtra, government

representatives from MWCD and 17 states of India, child protection experts, and NGOs, thought leaders, practitioners, academicians, donors, UNICEF, and global experts.

The consultation, spread over two days discussed various thematic areas of family-based care, pointing to the fact that child protection needs to be universal and inclusive. The discussion and deliberations acknowledged that there have been paradigm shifts and significant achievements in the global and national journey of bringing in care reforms. The discussion highlighted the country's efforts in promoting family-based care and pointed out that the number of children placed in family-based care, including adoption, sponsorship, and foster care has risen from 62,675 in 2022-23 to 1,70,895 in 2024-25.

The consultations also discussed several state-led initiatives and community-led initiatives to prevent harm, and innovations in community gatekeeping and mobilization from across the country as effective

practices of helping children thrive and live in the safety of their families.

While providing entitlement-based social protection and financial assistance to vulnerable and at-risk families was recognized as essential, additional cash-plus support, including mental health and emotional support, building parental skills and resilience, life skills, vocational training, and livelihood support, were considered essential for strengthening family resilience. A multi-sectoral approach is identified as the key to creating an integrated ecosystem to support and strengthen families, bringing together child protection, social security, education, and health sectors.

## Recommendations

The two-day deliberations identified the following key policy recommendations:

- Put in place State Specific Plan of Action for Family Based Care, with critical milestones and indicators that are monitored periodically at the highest level of governance.

- Create operational mechanisms to ensure inter-ministerial/departmental convergence for services and social protection for vulnerable families
- Build synergy and synchronization between different sectoral data systems to inform programmes and policies (Eg: Health, Education, Nutrition, Child Protection Management Information System)
- Knowledge Management and Documentation of best practices and innovations for evidence generation, replication and scale up
- Financial Assistance (Social Protection) should be augmented with Plus components such as MHPSS, Parenting sessions, building parental resilience, Life Skills, Vocational Skilling, Livelihood opportunities, and others
- Further investment in the Child Protection Workforce, with independent cadre till the block level/ enhancing the role of existing Field Level Workers for better delivery of CP services, prevention and effective monitoring; and incentivize community-based child protection workforce.
- Create Social innovation hubs, providing opportunities for Corporate investments to promote innovation in family strengthening, prevent unnecessary separation and promoting non institutional care

Click here to read the detailed executive summary -<https://iacn.in/wp-content/uploads/2025/04/Highlights-Re-affirming-Family-Based-Care-27-28-Feb-2025.pdf>

# 1<sup>st</sup> National Family Summit, 2025: Supporting, Nurturing & Enabling Happy Families

By Miracle Foundation India

The 1<sup>st</sup> National Family Summit, anchored by Miracle Foundation India on 13th and 14th February, 2025, celebrated the achievements and progress made in the realm of Family-Based and Family-Based Alternative Care in the country. It showcased how India is pioneering solutions that inspire global best practices. The Summit, themed 'Supporting, Nurturing and Enabling Happy Families', brought together government leaders, child protection experts, NGOs, funders, researchers, and youth advocates to deliberate on advancing family-centered care models and strengthening child protection systems.

Over the past year, through a series of Leadership Dialogues, Miracle Foundation India has facilitated critical discussions among government officials, child protection experts, civil society organizations (CSOs), funders, researchers, and youth advocates. This summit, attended by 143 participants, consolidated those experiences, providing a platform for states to highlight their accomplishments, share impactful models, and celebrate the transformative efforts of various organizations. Youth with lived experiences played a pivotal role, sharing personal narratives that underscored the importance of a supportive family environment, reinforcing the urgency of strengthening family-centered child welfare policies.

## The summit aimed at

- Celebrating success stories
- Encouraging collaborative actions



- Empower youth voices

The government's presence at the summit was not just symbolic—it was substantive and deeply inspiring, reflecting strong ownership of care reform.

## Key Takeaways:

### 1. Government leadership in Family Strengthening & Alternative Care

- The commitment of NCPCR, Central and state governments to family-based care is inspiring, underscoring the need for more platforms to exchange learning and scale successful models.

### 2. Strengthening multi-stakeholder dialogue for impact

- Ongoing collaboration between government, youth, CSOs, communities, and philanthropy is critical to:
  - Bridge the gap between policy and implementation.
  - Amplify the voices of children and youth to shape better narratives and interventions.
  - Increase accessibility to social protection schemes and allocate

more resources toward family strengthening.

- Leverage data, storytelling, and technology for informed decision-making and stronger family outcomes.
- Recognize and reward the social service workforce, who play a key role in driving this transformation.
- Strengthen community-based child protection mechanisms, empowering Panchayati Raj Institutions (PRIs) and Urban Local Bodies (ULBs) to lead convergence efforts across departments.

### 3. Fostering collaboration, inclusivity & innovation

- To maximize impact and avoid duplication, stronger partnerships and knowledge-sharing are essential.
- Prioritizing children with disabilities by ensuring inclusive policies, programs, and cross-sector collaboration is crucial for addressing the unique needs of children and families.

**Access the full report here:** [National Family Summit 2025 - Miracle Foundation India.](#)



# First-Person

## Interview with Mr. S

To understand the transition process from Child Care Institutions (CCIs) to family-based care, the IACN reached out to Mr. S to capture his experiences and challenges during this critical shift. Mr. S spent 15 years in various CCIs before being restored to his family. As a young person living with HIV, Mr. S stayed in a CCI for children affected/infected by HIV/AIDS.

The aim of this interview is to highlight the specific challenges faced by children with special needs—both while living in CCIs and after being restored to their families. It also explores the additional services and support required to help these children adjust smoothly in either setting. The following interview snippets have been shared with Dr. Kavita Mangnani, National Coordinator, IACN.

**Disclaimer:** The purpose of these interviews is to shed light on the practices and challenges involved in supporting children with special needs. The intention is not to criticize any individual, authority, or institution. The experiences shared

are personal accounts and should not be considered representative of all children and youth.

We thank Mr. S for his openness and Udayan Care for connecting us with him and facilitating this interview.

### **1. Thank you, S, for agreeing to be part of this interview. Could you tell us about yourself and your journey from the CCI and back to your home?**

Thank you, Kavita. I'm 22 years old and currently live in Delhi with my uncle, aunt, and their children. I work as an outreach worker in the health sector with an NGO based in New Delhi. My grandmother, to whom I am close, lives in our native village. My grandfather passed away in 2022. I have three sisters, all of whom are married and settled.

I lost my parents when I was around 5 years old, although I still don't know the exact cause of their death. My grandparents were elderly and financially dependent on my uncle,

so they couldn't care for me. My grandfather made the decision to send me to a hostel. In fact, I was just 3 when I was first sent away.

Initially, things were fine—I was attending regular school and had adjusted to the hostel life. But everything changed when the hostel authorities discovered I was HIV positive. I was about 5 years old at the time, and they immediately called my grandfather and asked him to take me back. I didn't understand what was happening or why I was being sent home. (At this point in the interview, S felt uncomfortable talking about this, so there wasn't much probing.)

After returning home, my grandfather started looking for another residential facility. In 2012, I was admitted to a CCI in Meerut. Life there was extremely difficult. There was no routine, no education, no skill-building—just eating, sleeping, and watching TV. Sometimes, we were even beaten for not following orders.

In 2018, my grandfather found a CCI in Delhi and had me transferred there.

This change brought stability. I was enrolled in a regular school, received proper medical care, and was given counselling and career guidance. I wanted to stay in the CCI and finish my education, but the COVID-19 pandemic disrupted everything. In 2021, I was restored to my family, against my wishes. The decision was abrupt and unplanned, caused by a misunderstanding with the CCI staff.

There was no preparation for my return home. With schools going online, I didn't have a smartphone to attend classes. Though the CCI had promised to provide one, they never did. I managed to find an old phone, but it didn't last long. As a result, I had to drop out of school. My extended family was unprepared for my return and has never truly accepted me, especially because of my HIV status. I also feel distanced from most of my former friends, although I stay in touch with some of them.

## 2. What challenges did you face after leaving the CCI, and how did you overcome them?

When I returned home, I was studying in 8th grade. But due to the COVID-19 pandemic, school shifted to online classes. I had no access to a smartphone, laptop, or internet connection, so I couldn't continue and had to drop out.

Another major challenge was the lack of emotional support. Having lost my parents, I came back to a family that provided shelter but not acceptance. I was constantly taunted and emotionally neglected.

Initially, my grandfather bought me a phone using his small pension, but it didn't last long. He suggested that I enroll in NIOS, but I was adamant about continuing in regular school. He did his best, and I managed to complete my 8th grade, but later had to drop out due

to financial issues and no access to online learning.

In 2021, an organization working with children reached out to me through their project "**FiT - Families Together**." I agreed to meet with their social worker and counsellor. Their team supported my further education by enrolling me in NIOS for class 10, providing a laptop, and financial help for internet access. They also offered counselling, career guidance, and connected me to an organization working on education for tuition and a 3-month basic computer course.

They helped with updating my documents—PAN card, bank account, income certificate—and eventually helped me access the government pension I'm entitled to. That first pension cheque felt like a big milestone.

They also assisted with my hospital visits and ensured I stayed on track with my health. After my grandfather passed away, I felt ready to become financially independent. With help from FiT stakeholders, I got connected to the various organizations for job and nutrition needs.

Thanks to this collective support, I was able to slowly rebuild my life. Though challenges remain, I now know there are people I can turn to for help.

## 3. How did your CCI support your transition? What steps were taken to prepare you for life at home?

When I was in the CCI, they provided for all my basic needs—food, shelter, education, and healthcare. They ensured regular visits with my grandfather and supported my medication and schooling.

But unfortunately, there was **no transition planning**. My move home was abrupt and unplanned. Apart from a three-month supply of medication, there

was no other support. They did call a couple of times after I left, but those were more like routine follow-ups.

I felt confused, distressed, and full of resentment. After 15 years in a system where everything was structured, I was suddenly expected to adapt to an unfamiliar and unsupportive environment.

## 4. Did the authorities (CWC, DCPU, or CCI staff) seek your opinion before restoring you to your home?

No, my opinion was never asked or considered—by the CCI or the CWC. The decision was entirely theirs. I had wanted to stay in the CCI and complete my education, at least till class 10.

Although I knew that legally I had to leave the CCI after turning 18, I strongly felt I should have been allowed to stay longer, especially given my circumstances. No authorities followed up with me post-restoration except for a few courtesy calls from the CCI. The staff came once to deliver my personal belongings.

## 5. How has your life changed since returning home?

The only positive part was being able to spend some time with my grandparents and sisters.

But the negatives outweighed the positives. I continue to face stigma due to my HIV status. My extended family keeps their distance, and even a relative who is a physiotherapist contributed to further isolation—especially from my younger sister, who now barely speaks to me.

Socially, I feel very alone. At the CCI, I had a few friends to talk to and share daily life with. The lack of meaningful relationships and the negative attitudes at home have affected my mental health.

After receiving support, I was able to take charge of my life, and when I started working, I made a few friends and reconnected with some friends from the CCIs as well. However, the daily challenges and constant negative attitudes are exhausting for me.

## 6. What was your family's reaction to your restoration?

My grandfather was not in favor of my return. He knew he couldn't support me and understood that my uncle and aunt would not accept me. They were already responsible for my sisters, and I would have been an added burden.

## 7. How is your life now?

Since 2024, I've been working with an NGO in Delhi. My role is to connect people like me to ART (Antiretroviral Therapy) at hospitals. I'm also continuing my education, and I believe completing my degree will help me secure better job opportunities and achieve my goals.

At home, things have become more difficult since my grandfather passed. The nagging and disrespectful behavior from my relatives makes me feel unwelcome. I usually stay out late, spending time with friends after work just to avoid being home.

When I am with my friends I feel better.

## 8. What are your goals in life?

My first goal is to complete my education. I plan to enroll in Class 12 through NIOS and later pursue a college degree. I hope to find better job opportunities that can bring financial stability and personal growth.

## 9. Do you have any suggestions for authorities to consider before restoring children to their families?

Yes. Authorities should provide continued support for children being restored, including:

- Educational or vocational training

- Temporary financial assistance to the family
- Counselling for both the child and family to ease the adjustment
- Support with documentation—creating or correcting official IDs
- Career guidance and connections with job agencies or institutions
- Medical support, especially for children with conditions like HIV
- Income generation options for the family
- Regular follow-ups from CCIs, CWC, and DCPU as part of the restoration plan

Restoration should be planned with a **comprehensive needs assessment** and **sustained post-restoration support** until the child and family are fully adjusted.

*"FiT – Families Together Project is a community led family strengthening initiative of Udayan Care in Delhi since 2021 that works towards strengthening family support and gatekeeping. The project has spearheaded a stakeholders convergence group which has led to the formation of a Delhi FS network and currently, the group comprises 40 NGOs, independent practitioners, and academicians. It was initiated by Udayan Care and is now part of the Working Group of the India Alternative Care Network (IACN)."*