



Hello Childline

CHILDLINE is a project of the Ministry of Social Justice and Empowerment (GOI) in partnership with State Governments, NGOs, Plan, the Corporate Sector, Concerned Individuals and Children.

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Dear Readers!

We are pleased to bring to you, the October edition of Hello CHILDLINE!

We realise that we have taken a lot time in getting this edition to you. But we have a well-justified reason for that. We've been busy working on revamping the newsletter. So here we offer you a new looking 'Hello CHILDLINE' where we have attempted to present the data that you send us in a different manner! Sharing the process with you, we sifted through the case interventions and saw certain issue-based themes emerging. We thus decided to present the work done by CHILDLINES under a framework of child related issues. We have covered 'child labour', 'health' and 'emotional support and guidance' as the three themes for this edition. We hope you appreciate our effort in trying to utilise the rich information coming in from all the cities. We welcome your suggestions and comments.

City Level Children's Meets or Bal Manch were initiated in June 2005 with 6 meets completed in June. Through July and August a total of 28 meets were conducted. The cities of Baroda, Nagpur, Kota, Varanasi, Puri, Cuttack, Magalore and Salem in addition to the others, worked tirelessly in enabling children from various disadvantaged categories to come face to face with CHILDLINE Advisory Board members and allied system members. The children shared their issues and concerns, brainstormed on child related problems and child rights. It has been encouraging to see how the children have voiced their opinions before senior officers and administrators. CHILDLINES have prepared follow-up action plans and shall address the issues raised.

There are 3 more children's meets planned for the month of September. Further, the National Partnership (Coordinator's) Meet to be held in Delhi on the 23rd to 25th September shall also focus on capacity building on child participation and documentation.

We're also excited to share with you that we have been able to translate two CHILDLINE manuals namely 'Child Trafficking' and 'Child Rights and Law' into Hindi and shall be sharing them with you shortly. It is our aim to share information with you in the most acceptable and comprehensible manner. We are constantly trying to re-invent and improve our documentation and information dissemination techniques. We'd like to acknowledge that we cannot do any of this without your timely support.

As we approach the end of 2006 we wish you peace and happiness for the year ahead. We'd like to take this opportunity to request you to please send in your suggestions to r_d@childlineindia.org.in. Hope you enjoy reading this issue of *Hello CHILDLINE*...

What is CHILDLINE?

CHILDLINE is a national, 24-hour, free, emergency telephone helpline and outreach service for children in need of care and protection. The **CHILDLINE** number 1098 is a toll free number that is common in all the cities of India. Initially started in Mumbai in June 1996, **CHILDLINE** is currently operational in 66 cities. **CHILDLINE** aims to reach out to the most marginalised children between the age group of 0-18 years, and provides interventions of shelter, medical, repatriation, rescue, death related, sponsorships and, emotional support and guidance.

So if YOU see a child in distress, call 1098 !

CHILDLINE is ringing in 66 cities of India :

Agartala, Ahmedabad, Ahmednagar, Akola, Allahabad, Alwar, Amaravati, Aurangabad, Baroda, Bangalore, Bhopal, Bhubaneshwar, Chandigarh, Chennai, Coimbatore, Cuttack, Cuddalore, Delhi, District South 24 Parganas, East Medinipur, Goa, Guwahati, Hyderabad, Imphal, Indore, Jaipur, Jalpaiguri, Kalyan, Kanchipuram, Kanyakumari, Karaikkal, Kochi, Kolkata, Kollam, Kota, Kozhikode, Kutch, Lucknow, Madurai, Mangalore, Mumbai, Murshidabad, Nadia, Nagapattinam, Nagpur, Nasik, Patna, Port Blair, Pune, Puri, Ranchi, Rourkela, Salem, Shillong, Sholapur, Thrissur, Thirunelveli, Thiruvananthapuram, Trichy, Udaipur, Ujjain, Varanasi, Vijaywada, Vishakapatnam, Wayanad, West Medinipur.





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City Highlights and Happenings!

CHILDLINE Agartala spread awareness about CHILDLINE and 1098 service by reaching out to more than a thousand government officials and NGO workers through various state, district, block and panchayat level workshops organised by the Voluntary Health Association, Tripura. The workshops focussed on prevention of trafficking in humans and violence against children and women.

During Open House on 6th August 2005, 25 students of the St. Paul School volunteering for **CHILDLINE Bhopal** formed a core group called "Young Brigades". They collected old books, toys, clothes, shoes, soap etc. in the name of street children and distributed them on 10th September through CHILDLINE.

On 23rd August 2005, 30 first year B. Sc. students from St. Mary College came to the **CHILDLINE Shillong** centre to understand how CHILDLINE functions. The children were enthused by the work done by CHILDLINE and offered to be CHILDLINE volunteers.

In July 2005, students pursuing their post-graduation studies in social work at Vimala College and volunteering for **CHILDLINE Thrissur** raised funds for a half-day medical camp for street and migrant children with the support of The Lions Club of Chalakkudy. 51 children and their parents attended the camp. 3 paediatricians working as volunteers attended to the children and answered queries raised by parents. Medicines provided to children were sponsored by the Co-operative hospital. The camp helped raise awareness about CHILDLINE among an estimated 1000 individuals!

CHILDLINE Ahmednagar arranged health camps for children in July. Medicines for

minor health problems such as fever, cold, skin infections etc. were distributed. In attempting to address issues related to health raised during the children's meet held in the city earlier, CHILDLINE Ahmednagar is working towards creating a platform where children and their parents from slum areas can interact with well-known doctors. CHILDLINE Ahmednagar has also set up free regular health clinics in the slum areas of Sanjaynagar and Laltaki.

Post the city level children's meet, **CHILDLINE Ahmednagar** met with the police superintendent of the city to find solutions to issues, which came out during the children's meet. The Superintendent of Police issued a circular to all the police stations of the city directing them to cooperate and consult CHILDLINE in cases related to children.

CHILDLINE Nashik conducted an open house programme with slum children where the R.M.O. Mr. D. R. Nampurkar of the civil hospital was invited to give a guest lecture to the children covering the topics of health, education and cleanliness. The children appreciated the session.

CHILDLINE Nagapattinam faced problems with the functioning of the 1098 service. Across Tamil Nadu 1098 (CHILDLINE) and 1091 (Women's Helpline) numbers were introduced and placed at all the Women Police Stations. CHILDLINE wanted that the lines be separated so that CHILDLINE staff attend to calls on 1098 and other phones be manned by the police station staff. They also wanted the 1098 service be brought out of the police station to an independent location. But this was not possible due to rigid control of the State government. In Nagapattinam, the local police

station resisted the presence of CHILDLINE in the police station. Initially, they did not allow male members to sit there which made it difficult for the CHILDLINE to keep it running round the clock. Later, they complained and finally managed to throw the CHILDLINE team out of the police station. The CIF consultant and members of Avvai Village Welfare Society (who run CHILDLINE in Nagapattinam) then had to make a number of visits and proposals to the police and telecom officials at the district and state levels. Simultaneously they also had to convince the District Collector to understand their work and support their cause. Finally on August 8th 2005 the group managed to get the 1098 service out of the police station and function independently!

The Women and Child Development Department, State Government has agreed to integrate CHILDLINE's Anti Child Marriage Campaign into their regular programs such as the balwadi, anganwadi and adolescent programme. **CHILDLINE Pune** is to provide the training inputs for the above.

Despite the fact that the number 1098 at **CHILDLINE Rourkela** has been disconnected since June 2005, the team members have been proactive in dealing with cases, which have needed their intervention.

The collaborative organization, **CHILDLINE Jaipur** is currently doing special outreach at schools, hospitals, fairs, festival gatherings and traffic junctures.

On the 5th and 6th of August this year, at Hariyali Amavsaya Mela, **CHILDLINE Udaipur** put up two stalls. Both the stalls were sponsored, one by Rainbow Telelink and the other by Hero Honda. On the first day of the mela itself 38 children who lost their way and got

separated from their parents were handed over to their parents and approximately 3000 people were given information on CHILDLINE.

The Child Labour (Regulation and Prohibition) Act 1986 is applicable to children working in the hazardous sector and does not cover children working in so-called 'non-hazardous' occupations. The Act is contradictory to the Constitutional provision of free and compulsory education to all children. In this context, organizations working for children and for the promotion of child rights formed a network for the elimination of child labour. Regarding this a workshop was organized on 21st July 2005, to sensitize different sections of the society and members of parliament. The workshop took place at the **CHILDLINE Vijayawada** centre where 250 members participated and all were told about the CHILDLINE service as well.

At Kalyan the CHILDLINE team rescued children from the heavy floods in July 2005 and volunteer groups were formed to help in the rescue and relief operations. **CHILDLINE Kalyan** has also been networking with Smile foundation for sponsorship for flood-affected children. Uniforms for 284 children were procured.

The city level children's meet organised by **CHILDLINE Madurai** on 27th August 2005, attended by children from different categories like orphaned children, street children and children living with their parents, provided the children with the opportunity to meet other children and share ideas. In addition many important people of the society like lawyers, teachers and social workers participated in the meet.



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Innovations at CHILDLINE !!

CHILDLINE Agartala organised puppet shows on the CHILDLINE theme at the week long Karchi Mela on 19th July '05 thus creating awareness about 1098 among hundreds of people who thronged the mela.

Responding to the request made by Anganwadi teachers of the Kadangode area, **CHILDLINE Thrissur** conducted a workshop with adolescence girls wherein issues related to adolescence were discussed.

CHILDLINE Wayanad after persistent lobbying with the district administration and discussions with local television channels has been successful in securing a written request from the District collector to air a short film informing viewers about the CHILDLINE service.

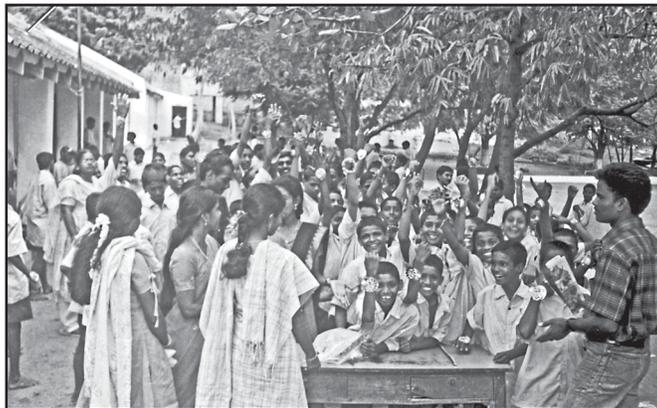
CHILDLINE Kolkata organized a CHILDLINE mela on 1st August 2005. More than 120 children from all over the city attended the same. The children enacted a play on child labour, which was followed by a play performed by a professional drama group called Group Development. CHILDLINE team members along with the children discussed issues and difficulties faced by children.

Acting on complaints received from many callers about being charged by PCO booth for calls made to 1098, **CHILDLINE Jalpaiguri** got the District PCO Booth Owner's Association to issue a circular to all the telephone booth owners in the city to allow the people to dial 1098 free of cost.

Programme on 'human rights of institutionalized children' was held on 9th July 2005 at the MSS College of Social Work, Nagpur. The Centre co-ordinator and two social workers attended the same from **CHILDLINE Nagpur**.

resource organisation). Important issues such as child sexual abuse and paedophilia were discussed and information about CHILDLINE was shared. Further CHILDLINE Goa collaborated with Jan Ugahi in carrying out an enrollment

talked about CHILDLINE and received feedback from the children about CHILDLINE and the city level children's meet that had taken place. Interactive games were also conducted with the children. Almost 150 children participated in the programme and expressed their opinions, experiences, and problems and also talked about how the CHILDLINE service has helped them to get through difficult times. At the end CHILDLINE female team members and volunteers tied *rakhies* on the wrists of children and distributed sweets. Another warm gesture done was that the team visited roadside hotels and tied *rakhies* to working children in the hotels.



Children from the Government Juvenile Home show-off their Rakhis! (CHILDLINE Visakhapatnam)

CHILDLINE Nagpur conducted three night rounds at Nagpur railway station. The team members spoke with children on the platform and informed them that you could call 1098 when they needed someone. The children shared that they are afraid of the police as the police does not allow the children to stay at the railway station and try to drive them away.

CHILDLINE Bhubaneswar initiated 2 non-formal education centers for children in one of the oldest slums of Bhubaneswar where 150 families reside in disadvantaged circumstances.

CHILDLINE Goa conducted a session on child sexual abuse in the various schools. These sessions are part of an awareness campaign in high /higher secondary schools organized by Jan Ugahi (a

drive of children of migrant labour.

CHILDLINE Visakhapatnam spread awareness about CHILDLINE among 75 ICDS trainees. Since the ICDS trainees are appointed within communities as social agents of change it is important that they know about CHILDLINE and work in association with it. Further the coordinators of CHILDLINE were also invited as resource persons to talk about CHILDLINE by the NGO namely World Vision, where they spoke about issues pertaining to children, ChildNET, networking and NICP trainings.

CHILDLINE Visakhapatnam organized an open house cum Raksha Bandan celebrations with children at the railway station. At the open house a team member

CHILDLINE Tirunelveli conducted a Carrier Guidance Programme for corporation school children as it was noticed that many calls are received on 1098 wherein children inquire about education, employment opportunities and related studies.

An open house with a difference was conducted by **CHILDLINE Visakhapatnam** on August 19, 2005. Children from railway stations, street children and children from shelter homes celebrated Rakshabandhan by tying Rakhis to each other, to CHILDLINE volunteers and team members. Later the children went to the RTC bus complex where they tied Rakhis to children working in hotels in that locality. After this the whole group visited the Government Juvenile Home for boys where Rakhis were tied and sweets were distributed. And estimated 450 children were thus covered.



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Health

Health care for children begins even before the child is born. Nutritional intake of an expectant mother has an all-encompassing impact on the child's health. Adequate nutrition is essential for the development of a child's intellectual capacity and meeting the nutrition and dietary needs during childhood and early adolescence, the prime developmental years, can mean the difference between health and infirmity in later years.

The World Health Organisation's preamble states that, "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being".

Achieving good health for any population is dependant on factors such as quality of health care services, food security and nutrition, safe water supply, sanitation, healthy housing, safe occupational and environmental conditions etc. Therefore the right to health is intrinsically linked with the right to life!

Referring to Article 6 of the Convention on the Rights of the Child (CRC), it addresses the right to life, survival and development of a child as inherent to every child. It also states that State Parties must act in a way that will ensure and respect the right to health.

People living in poverty, form a large part of the Indian. This is despite the fact that Article 21, the Indian Constitution guarantees the 'Right to Life' as the basic human right to every citizen of India.

Furthermore, Article 47 of the Directive Principles of the Indian Constitution lays down the Government's responsibility concerning public health. However the fact remains that primary health care services are becoming increasingly



Health officials at an open house at THAU Ground, Imphal, 2nd August 2005

difficult to obtain for people living in urban slums, villages or remote tribal regions. Government hospitals are inadequately staffed; the supply of medicines insufficient and the infrastructure is often unable to cope with the need.

8.21% of the total number of intervention calls received by CHILDLINE between 2004-05 were for medical aid and intervention. Everyday CHILDLINE's across the country receives calls from concerned adults, members of the allied system like the railway police, from poor parents and street children, seeking medical aid. CHILDLINE intervention in some cases includes minor first aid to ensuring that the

child gets the required medical attention at a public hospital. In some cases CHILDLINE is approached for help wherein a child needs to undergo a major surgery, which the child's parents or caretakers cannot afford. In such a scenario, CHILDLINE

children are continuously exposed to a polluted environment, substance abuse, suffer from infectious diseases and are vulnerable to sexually transmitted diseases such as AIDS. Added to this, are the hazards of their occupations. Many street children travel by train selling goods or sell newspapers and flowers at traffic signals due to which they are prone to accidents. Children working as rag pickers, work in extremely hazardous conditions. They scourge for any material they can sell like plastic and metal, and as they sift through garbage, they sometimes cut themselves with broken glass. The previous issue of 'Hello CHILDLINE' carried a story of how a child working as a rag picker was severely burnt when the bottle of acid he had found in the garbage broke. A concerned adult called CHILDLINE, which managed to treat the child by hospitalising him in time. Similarly CHILDLINE Agartala provided medical aid to a child working as a rag picker. On 30th August 2005, CHILDLINE Agartala received a call from Shayam a street child seeking help for his friend Somesh. Somesh

team members try their best to find sponsors for the child's treatment. For instance, a caller sought help for his 15-year-old mentally challenged son who was suffering from paralysis. The father informed CHILDLINE Nagpur that the child needed an artificial leg. The caller was asked to bring the necessary documents to the CHILDLINE centre. Once the documents were verified CHILDLINE team members convinced the owner of the shop where artificial limbs were made, to make an artificial leg for the child free of cost!

It is believed that the most vulnerable group of children are street children. Street life is extremely hazardous and dangerous for children. Street

"States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services."

Article 24, CRC



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had open sores on both legs and was suffering from very high fever. Soon after receiving the call, a CHILDLINE team member rushed to the spot and found the child. The child was taken to GB Panth Hospital for treatment. The doctor diagnosed the child as suffering from malnutrition and being anaemic. The doctor added that the sores would heal soon with proper medication. After dressing the child's wounds he prescribed some medicines. All the medical expenses were borne by CHILDLINE. The child is still undergoing treatment and his condition has improved a lot.

It has been noted by CHILDLINE teams across the country that workshops and sensitisation programmes with allied systems especially hospital staff of public hospitals go a long way in ensuring their co-operation and assistance during case interventions.

Sharing an experience in this respect, **CHILDLINE Allahabad** received a call from a concerned citizen informing them about a boy admitted in the government hospital who had been abandoned by his parents. The caller claimed that the hospital staff was reluctant to take care of the

child. CHILDLINE team members immediately went to the hospital and met the child and the doctor. The doctor informed the team members that the child's right arm would have to be amputated and needed the father's consent. But the parents were not in contact with the child. After regular counselling the boy gave the team members some addresses and telephone numbers and through consistent efforts the CHILDLINE team was successful in tracing the child's father and elder brother. On questioning the man about his negligence towards his son, he said that the doctors had asked him to arrange some money for the operation, but being unable to do so due to poverty, he left the child in the care of the doctors. CHILDLINE team members then raised funds for the child's operation through donations. And the doctors started attending to the child after CHILDLINE's intervention. The child was operated upon and the doctor's were able to save the child's arm through a major surgery. Presently the child is recuperating and his father and brother are taking care of him at the hospital. CHILDLINE team members conduct regular follow-up visits.

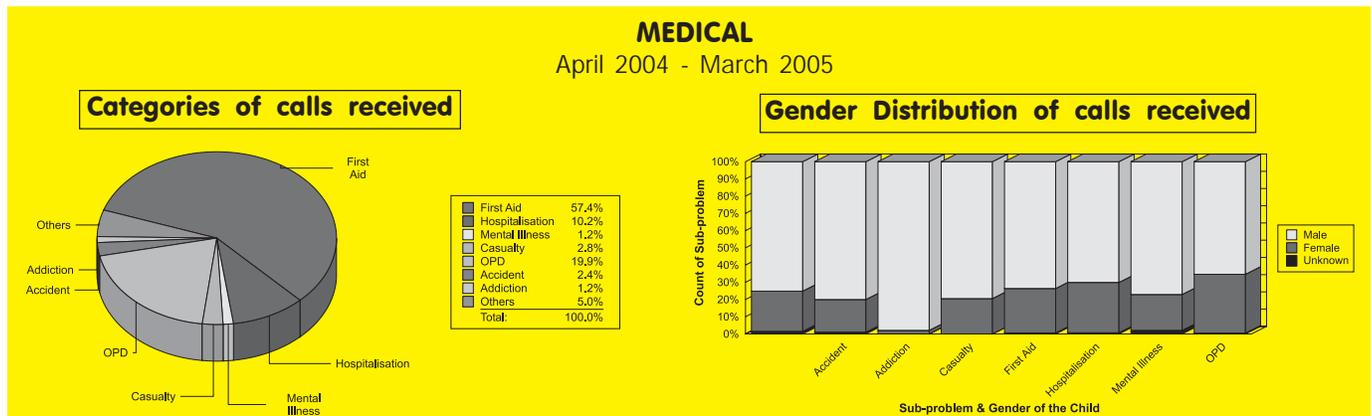
During outreach, CHILDLINE team members spread awareness about the CHILDLINE service among various groups of children including street children, children living in slums, institutionalised children etc. Citing a CHILDLINE case, on 13th August 2005 Vinay, called **CHILDLINE Vijayawada** seeking help for his friend who had met with an accident and needed medical assistance. A CHILDLINE team member went to the railway station and brought the boys to the CHILDLINE centre. The boys were taken to a support organisation's shelter home for treatment. The team members learned that the injured boy named Atul was an orphan and lived in Don Bosco shelter, Chennai. The boys were on their way to Hyderabad but as they reached Vijayawada Atul met with a small accident. Knowing of CHILDLINE Vinay called 1098 for help. Atul had lost a lot of blood and received eight stitches. The nurse advised him a lot of rest. CHILDLINE planned to provide shelter to the boys but Vinay left without informing anyone. Atul was provided shelter and medical assistance after which he was repatriated to Don Bosco, Chennai.

Outreach and awareness enables CHILDLINE to be there for children in their most needy hour.

On 16th July 2005, Pankaj, who lives in a Juvenile Home, came to **CHILDLINE Bhopal** seeking help since he had high fever and was feeling very weak. A CHILDLINE team member took the child to a dispensary and got his check-up done. The doctor said that the boy had fever due to a cold and there was nothing to worry. He added that the child would feel better after taking the given tablets. The next day the team checked on Pankaj and he seemed to be doing better.

In addition to attending to children seeking medical aid through the 1098 number, CHILDLINE also conducts sensitisation workshops under the National Initiative For Child Protection (NICP) program to sensitise personnel of the health care system i.e. doctors, nurses, deans of medical colleges, Regional Medical Officers, hospital attendants etc. on child rights and their role in protecting and providing for children in need. Thus CHILDLINE works consistently towards ensuring treatment for all children and creating a child-friendly health care system in India.

* All original names of children have been changed





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Emotional Support and Guidance

Childhood is perhaps the most impressionable phase in the human life span. The child is continuously exploring and understanding the world around him/her and alongside develops, not just skills, but a personality as well. This includes a self-image, concepts, coping mechanisms etc.

Children are influenced by a large variety of conditions including inherited temperamental biases, social class, ethnicity, quality of peer relationships and the socio-political environment. However the most primary influence on a child is that of parents or caretakers in whose guardianship the child spends the initial formative years of her or his life. Caretakers play an important role in influencing the personality formation and development of a child. The socialization process of growing up within a family and siblings influences children. The family unit is the primary group that caters to the child's emotional needs of love, security, understanding and acceptance. It is also the most trusted source of guidance and support while the child is growing up.

Growth and development during childhood is rapid. As depicted in the table given below children pass through many stages of social and emotional development. And the caretaker plays an important role in ensuring smooth transition from one stage to another. Just as proper nutrition is essential for the physical well being of a child, gratification of

emotional and psychological needs of a child for development of a strong, secure, mature and confident individual is equally important.

Many a times, due to various reasons, such as time constraint among working parents, ignorance about the importance of tending to the

child's emotional needs or absence of one or more caretakers, the child's needs are not met or are met inadequately, thus creating a gap that the child seeks to fill in some way or the other. This may lead the child to feel depressed and lonely, thus affecting his self-esteem and self-image. Situations such as this need to be looked into and the child needs to be helped and encouraged to overcome such situations while simultaneously addressing the issues that affect him/her.

Calls received on 1098 for Emotional support and guidance refer to needs of children seeking emotional support ranging from help to cope with exam stress to suicidal calls. A considerable number of children call just to talk and be heard. These are called 'chat calls'. Very often children need someone to call upon and share their thoughts, dreams and daily routines. CHILDLINE team members patiently listen to children and become their friends.

Another category of calls documented by CHILDLINE are 'silent calls'. Silent calls are calls where the caller does not speak. Children calling for the first time may feel inhibited or shy to voice their problems and concerns, they remain silent and prefer to listen. CHILDLINE team members listen to the noise in the background to gauge where the child is calling from while simultaneously encouraging the child to speak. If the child remains silent, CHILDLINE team

Developmental Stages during Childhood

Infancy (0- 1-1/2 years)	Children need parents or caregivers who are affectionate, consistent, predictable, and help children trust and bond with family and friends.
Toddler hood (1-1/2 to 3years)	Children need to be taught to care for themselves, e.g., feeding themselves, toilet behaviors, dressing. During this stage children are just beginning to get a sense of personal identity and belongings and enjoy physical affection , Parents should act as mentors who give children choices within limitations.
Early Childhood (3 to 5 years)	Children in this age group try to fathom the world around them by asking a lot of questions. They are learning to do more things for themselves. This helps them feel independent. Children want to please their parents, particularly from around age three. Sibling rivalry is frequent and children may feel guilty about contemplated aggressiveness.
Pre-teen (6 to 11 years)	Children need: <ul style="list-style-type: none"> - Experiences in building, creating, and accomplishing to gain a feeling of adequacy; - Encouragement and deserved praise to achieve competence; need academic, physical, social, and work skills for healthy self esteem; - Teachers, parents, and caretakers who are nurturing and help children discover and develop special talents and abilities.
Adolescence (12 to 18 years)	Children need: <ul style="list-style-type: none"> - Experiences in developing ego identity, including moral, social, and vocational identity; needs parents, teachers, and caretakers who appreciate the adolescent as a unique and worthwhile individual; - Parents who recognize the adolescent's learning style and are supportive of the child.



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members inform the child about CHILDLINE, that the number 1098 is a national toll free emergency number for children in distress and that the child should talk to the 'didi' or 'bahiya' manning the phone if something is troubling him/her. If the child continues to be silent, the team members tell the child that she/he should call again when she/he feels like talking as there may be other children who are trying to call CHILDLINE who need help more urgently and thus they cannot keep the phone engaged for too long.

During 2004-05, of the total number of calls received by CHILDLINE requiring intervention, 16.07% were calls categorized under 'emotional support and guidance'.

Cases where CHILDLINE team members have provided emotional support and guidance to children can be cited. The cases differ in the nature of circumstances that the children seeking help find themselves in. This is to also emphasize that the role of CHILDLINE team members requires that they use different approaches while dealing with the children's emotional needs. They listen, give advice, provide alternatives and influence attitudes and behaviour of the children.

As often happens when economic conditions in the family unit are pressing, children are expected to work to make ends meet. The emotional and psychological impact of the crisis on the child is overlooked and goes un-addressed. In such a

scenario, the child is in need of his/her emotional needs be attended to. For instance, **CHILDLINE Bhopal** received a case of a 17-year-old girl named Shreya who was pressurized by her parents to discontinue her education and take-up a job as a telephone operator to support the family. When the financial pressure at home became unbearable, she began to oblige her 'friends' with sexual favors in exchange for money. Shreya soon slipped into depression and called CHILDLINE Bhopal for help. She was counseled by a CHILDLINE team member and advised not to entertain her 'friends' anymore. Shreya wanted to finish her graduation and asked if CHILDLINE could help her. A CHILDLINE team member then conducted a home visit and spoke to her family about the importance of higher education. It was suggested that she do a correspondence degree course. The parents agreed and CHILDLINE helped the girl enroll for a course. Now Shreya calls regularly to talk to the CHILDLINE team members and she seems to be settled.

Among the primary needs of children are those of acceptance and identification. When these needs are not met at home children turn to peer groups for their satisfaction. It is known that lack of guidance; sense of adventure and challenge leads pre-adolescents and adolescents to engage in anti-social activities and is often used as a tool to gain respect and acceptance among members of the peer group. Similarly, juvenile delinquency stems from

various things having gone wrong along the process of socialization of the child. While it is important to specify that not all children take to delinquency to deal with inadequacies in their lives. Studies point out a pattern of denial, neglect, ineffective supervision, inconsistent discipline, familial discord and disharmony, and weak parent-child relationships as conditions for juvenile delinquency.

Handling a case of delinquency involving three boys Shakti, Nivesh and Gaurav aged 13, 11 and 8 respectively; **CHILDLINE Nadia** intervened successfully and worked with the boys over a period of time to ensure their reintegration into social life. Shakti, Nivesh and Gaurav were friends and lived in a village that came under the jurisdiction of Nakasipara police station. The three boys had been involved in various petty crimes like stealing vegetables, fruits etc. However, they soon graduated to more serious anti-social activities like taking drugs, stealing utensils, clothes etc. On one such occasion the police managed to catch them red handed. The Sub-inspector of Nakasipara police station, requested CHILDLINE Nadia to intervene. He did not want to punish the children as he thought they needed to be counseled and rehabilitated at some good shelter home so that they stay away from their current environment. CHILDLINE arranged for their shelter in Anand Ashram Shelter home in Behrampore. Nivesh and Gaurav were admitted as well but Shakti started crying inconsolably so

CHILDLINE brought him back and arranged for a temporary shelter in a collaborative organization's shelter home. CHILDLINE counseled the three children regularly. CHILDLINE also pooled in professional help from Mano Vikas Kendra, a renowned mental health therapeutic and research institution for the same. Meanwhile Shakti was doing well in school and expressed the desire to return to his parents. He also promised not to be involved in any anti social activities in future. Thus his parents were contacted and he was repatriated to his family. He is now enrolled in a local school. On the other hand, Nivesh ran away from the shelter home and went back to his family. CHILDLINE conducted a home visit but the boy was reluctant to go to school. Gaurav is still staying at the Anand Ashram and seems to be coping well. CHILDLINE is in touch with all three.

Speaking of calls within the category of emotional support, one of the most difficult call categories to handle are suicidal calls.

The team member must keep it in mind that s/he can only try their best to dissuade the child from going ahead with a decision of committing suicide, and that sometimes it might not be possible to prevent death without seeking professional help for the child. Reasons for suicidal feelings include family conflicts, domestic violence, academic failures, unfulfilled romantic ideals and mental illness. Citing one such case, **CHILDLINE Pune** got a call from 16-year-old Sarika who was lonely after breaking up



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Emotional Support and Guidance (Contd...)

with her boyfriend. She admitted to having suicidal thoughts and was very depressed. She also said she had tried to commit suicide earlier. CHILDLINE team carried out intensive counselling sessions to help her overcome her

unhappiness and move ahead.

CHILDLINE being an emergency service may not always be equipped with adequate skills to deal with cases that require intensive intervention such as professional counselling. In

such cases, CHILDLINE acts as a facilitator linking the child to the required service provider through CHILDLINE's network and support groups. CHILDLINE also links children to long-term rehabilitative care.

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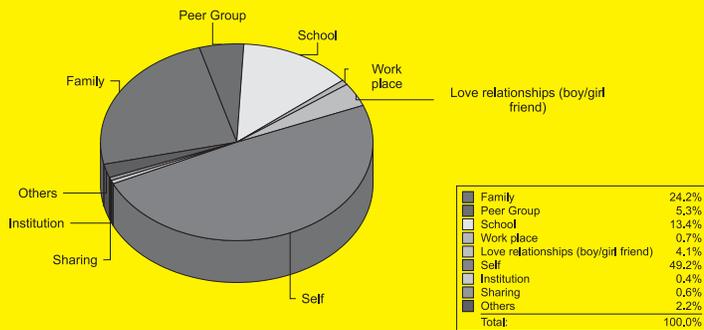
**The Role of Parents in Children's Psychological Development: PEDIATRICS Vol. 104No. 1 Supplement July 1999, pp. 164-167*

** All original names of children have been changed*

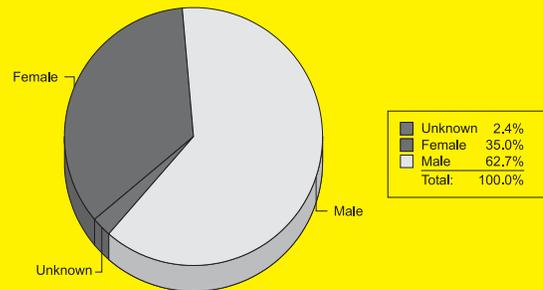
EMOTIONAL SUPPORT AND GUIDANCE

April 2004 - March 2005

Categories of calls received



Gender Distribution of calls received



Children celebrate Independence Day with CHLDLINE team members at Andaman

CHILDLINE - 1098

आजो भाइयो आजो बहनों
 Childline की फोन करी
 बातें करी तुम बजरो घंटे
 इस नम्बर को Dial करी
 खुली है ये तुम लोगों के लिए
 बजरो घंटे तुम बात करी
 1098 तुम फोन करी
 सारे बातें share करी
 आजो भाइयो आजो बहनों
 Childline की फोन करी

Reetu, 13 yrs - Andaman



Hello Childline



Child Labour

Children in India start to work at a very young age. According to Human Rights Watch 1996 an estimated 60 to 115 million children in India work. Children are found working in agricultural farms, as domestic help, factories, mines, hotels, restaurants. In all of these situations children are often victims of physical abuse and are extremely vulnerable to sexual abuse. To add to this, UNICEF estimates that 500,000 children work as child sex workers in India.

Child labour is linked with poverty, illiteracy, discrimination and neglect. According to the Center for Environment and Food Securities (CEFS) more than 320 million Indians go to bed without food every night. In such a scenario, the easiest and most dispensable entity in the family unit becomes the child. In many parts of the country poor or bonded labourers sell their children to agents/ middlemen who promise jobs for them in the cities and the children end up at brothels, hotels or as domestic servants working at the risk of their health, education and individual and social development. Millions of children work because adults in their family are either unemployed or inadequately employed. Children also work because there is demand for cheap labour or simply because they have no other alternative for survival.

In attempting to define child labour, according to the Child

Labour (Prohibition and Regulation) Act, 1986, "Child" means a person who has not completed fourteen years of age. The International Labour Organization (ILO) has defined child labour as "work that is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling". According to the ILO, an estimated 250 million children between the ages of five and fourteen work in developing countries. Sixty-one percent of these are in Asia.

India became a signatory to the Convention on the Rights of a Child (CRC) an international convention setting out the civil, political, economic, social and cultural rights of children in 1992. The CRC defines child as "every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier".

"State Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development."

Article 32, CRC

The denial of childhood that results from shouldering economic and social responsibilities of adults needs to be dealt with at

different levels of intervention processes, such as rescue, repatriation, rehabilitation and awareness. Cases of child labour differ in terms of the nature of work the child is involved in and ways in which one can intervene in a given situation. The type of intervention used while dealing with child labour cases also differs from case to case depending on factors like place of employment and type of labour the child is involved in. One of the effective strategies CHILDLINE teams across India have been using for greater impact during intervention is networking among various stakeholders i.e. allied systems, NGO's and citizen's groups. For instance, when **CHILDLINE Allahabad** received information that some children were employed in a carpet loom in Badohi, Allahabad on 12th July 2005 the CHILDLINE team members along with representatives of the Labour Department, Police and members of Bal Vikas Ashram raided the loom. Ten children were rescued and brought to the CHILDLINE office. After verifying their age, the children were provided temporary shelter at the Bal Vikas Ashram. Currently, efforts are on to locate their parents. Networking also goes a long way in facilitating long-term rehabilitation of the rescued child.

One of the most casual and unrecognized forms of child labour is domestic child

The ILO report, Invisible Children, June 2004 states that, "Child Domestic Labour refers to situations where children perform domestic tasks, not in their own home, but in the home of a third party or 'employer' under exploitative conditions".

labour. The ILO estimates that a higher number of girl-children under 16 years work as child domestic labour than in any other category of work.

The invisibility of children involved in domestic labour further compounds the vulnerability of children and the severity of abuse faced by them. Since children employed as domestic help come from poor families the employers feel they are doing the child some good by providing them with a roof and two square meals. What they do not realize is that it is not shelter, food and clothing but also education, family and the right to a stress free life that is due to each child.

Intervention in child domestic labour cases by CHILDLINE usually involves some homework on the part of the team members where they talk to the neighbors of the employer and then the employer. If the employer is not forthcoming, help from the police is sought to rescue the child. Citing here the case of Rani who dropped out of school after her 2nd standard was brought to Kochi by her uncle to earn a living. Part of her salary went to the agent who helped find a job for her



Hello Childline



Child Labour (Contd...)

and the rest was sent home to her family. **CHILDLINE Kochi** received a call from a concerned adult seeking help for Rani. A CHILDLINE team member conducted a home visit and spoke to the employer who agreed to hand over the child to CHILDLINE. The child was produced before the Chief Juvenile Magistrate (CJM) who directed the child to be sheltered at Vatsalya Bhavan. Some days later CHILDLINE was approached by the child's parents, they wanted to take Rani home. The CJM however refused to give permission since it had to be verified if there was a threat to the child's safety.

Child labour is also linked to the crime of child trafficking.

The United Nations defines human trafficking as, "The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation."

Family, relatives, friends, community leaders, brokers, the pimps and owners of brothels, the police, the political connections and the criminal nexus, are found to be involved in the process of child trafficking. Children are

trafficked for many reasons. These include, prostitution, labour, entertainment and sports, pornography and sex tourism, organ trade and for begging. On 27th July 2005, **CHILDLINE Ahmednagar** got a call from a concerned adult about a handful of children who were being forced to beg by two women at the D.S.P. Chowk signal, Ahmednagar. CHILDLINE team members accompanied by two lady police constables rescued the seven children and tracked down the two women who had coerced the children to beg. The children were brought to CHILDLINE office and given something to eat. They were then provided shelter at the Observation Home. The next day parents of some of the children came to claim them. The children were produced before the Child Welfare Committee (CWC), which decided to give the parents a chance, and thus handed over the children to their parents. CHILDLINE has been asked to conduct regular follow-ups.

According to ILO estimates, 15 percent of the India's estimated 2.3 million prostitutes are children and the U.N. reports that an estimated 40 percent of prostitutes in India are below 18 years of age. (Us Department of State, Country Reports on Human Rights Practices- 2004)

While parents push children into dark formidable black holes of child labour due to poverty or sheer ignorance a

considerable number of children simply fall prey to traffickers who either kidnap or lure children with promises of an easier life. Such happened with Sunita, a brilliant student, who had to drop out of school (or was rather pushed-out) after completing her 6th grade to beg on the streets so that her younger siblings would not starve. Sunita's father was a Beedi worker and belonged to a backward class. He was an alcoholic and her mother was ill. As fate had its way, 12-year-old Sunita met Laxmibai, a brothel owner who soon forced young Sunita into the flesh trade. When Sunita's parents confronted Laxmibai she threatened that their other children would face the same fate if they interfered. Sunita's parents fled to Solapur. After each unsuccessful attempt at escape, Sunita was kept hungry for days together, her clothes were stripped off and she was made to stand on a public platform in the area and even she had chili powder rubbed into her genitals and on at least three occasions she was beaten till she lost consciousness.

Fortunately, Sunita managed to escape one day and made it to **CHILDLINE Ahmednagar** office. She had high fever and seemed very weak. She was taken to the doctor who confirmed that Sunita has tuberculosis, harpies and a sexually transmitted disease. The child's right hand was fractured and she had some wounds on her head. Sunita

The Campaign Against Child Trafficking states that "Across the world trading in children is on the increase. According to UN estimates, almost 4 million people every year are procured, sold and purchased, or trafficked into labour, begging or prostitution. Many of these are children as young as 5 or 6 years of age. Amongst the various forms that child trafficking assumes, the most visible and hence the most documented form is trafficking for prostitution."

told the team members that Laxmibai was forcing her to have sex with customers and begged for her life to be saved. Meanwhile Laxmibai and her accomplices came to the CHILDLINE office and threatened the team members asking them to hand over Sunita to them. The team however managed to ward them off and immediately contacted the police. The police were busy with preparations for the Panchayat Elections and thus the team members had to wait till the elections get over to be able to bring the brothel owner to the book. Presently the child is being sheltered at a support organisation and her medical expenses are being borne by CHILDLINE.

Responding to the above life situations of children and planning work towards addressing children's issues, during outreach and awareness drives, as well as during many case interventions when children



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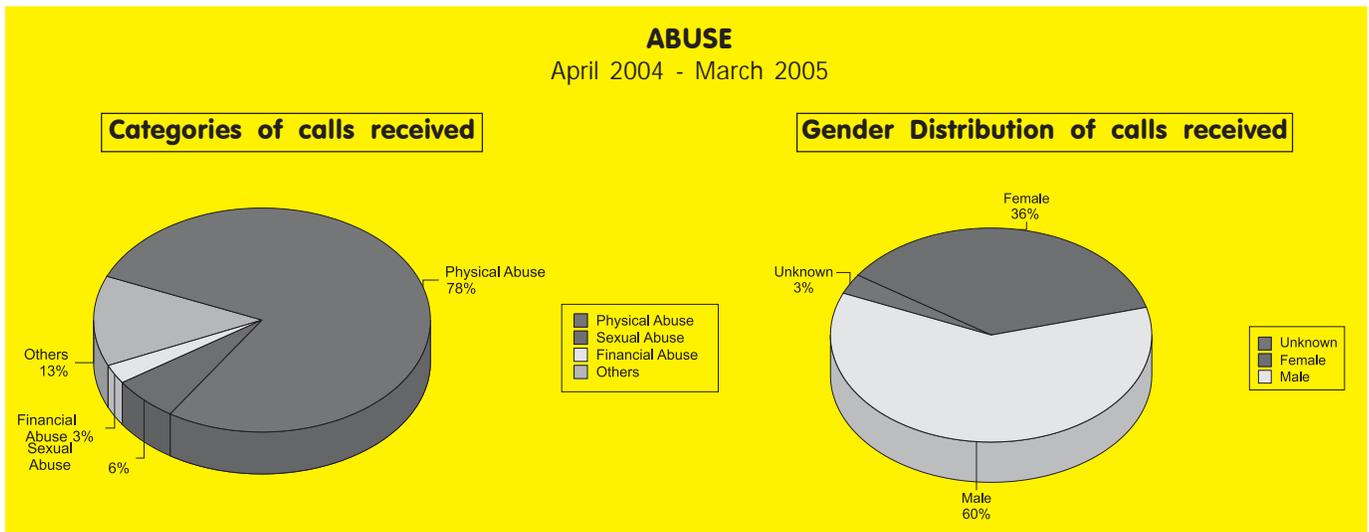
are rescued from hotels, households, or even streets and repatriated to her/his home, CHILDLINE team members counsel the child's parents. Team members talk to parents about the importance of education in ensuring a brighter future for

the child and sometimes, they even talk to panchayat members to address community issues as a whole. At the city, district and state level CHILDLINEs across the country network extensively with stakeholders i.e. Allied systems (police, various levels

of functionaries in the labour department etc.), NGOs and citizen groups, sensitizing them and ensuring their support in the rescue and long-term rehabilitation of children. Indeed it is true that child labour is endemic and interlinked with many social

ills, which are not exclusive to children, we believe that sustained efforts at various levels can protect children.

** All original names of children have been changed*



CHILDLINE stall at Navratri Mela !



CHILDLINE Nashik organised an emergency service booth at Kalika Temple, Old Bombay Naka on Nashik Highway from 4th to 11th October 2005, during the Navaratra Festival. CHILDLINE reached out to 71 children aged one and a half years to 16 years. With permission from the police commissioner CHILDLINE set up the stall next to the police booth. Identification details of children who had been found and description of missing children were announced on the mike by CHILDLINE team members. In this way, 61 children were reunited with their families. The remaining 7 children were repatriated to their respective homes since their parents could not be found at the venue. This was a rich experience. The police expressed their pleasure and gratitude to CHILDLINE and promised to help CHILDLINE whenever the need arose.



Hello Childline



Making a Difference - CHILDLINE Intervention

Helping a lost young girl...

On 19th July 2005 at 8:00 pm, **CHILDLINE Kolkata** found 17 year old Radha crying in front of CHILDLINE office. The child was brought to the CHILDLINE centre, comforted and provided with temporary shelter. During the counselling session, the child revealed that she was from Vizianagaram, Andhra Pradesh. She also said that she was a student of B. Tech. The girl was very disturbed because she kept hallucinating that a child is constantly crying and moving around her. CHILDLINE Kolkata contacted **CHILDLINE Visakhapatnam** and provided details about Radha. CHILDLINE Visakhapatnam successfully traced Radha's father who was a railway employee. Her parents immediately went to CHILDLINE Kolkata. Radha's parents informed the CHILDLINE team members that this was the second time Radha had left home. They claimed that Radha suffered from memory loss and had previously sought psychiatric help. After proper verification, Radha was handed over to her parents.

A girl child receives free education...

Rekha called **CHILDLINE Nashik** simply to chat with the 'didi' behind the phone! She also wanted to find out more about CHILDLINE. During the course of the conversation the CHILDLINE team member asked the girl whether she went to school. The girl replied that she does not go to school because her mother is very poor and frequently ill and could not afford to send her to school. The team members spoke to

the child's mother about the importance of educating the child. Team members also spoke to the principal of a Government school who not only agreed to waive Rekha's school fees but also offered to provide the child with schoolbooks and uniform.

Finding a safe haven...

CHILDLINE Agartala received a call from a concerned adult seeking help for an 8-year-old girl child. The caller informed the CHILDLINE team member that the child's mother was a commercial sex worker and was anxious for the safety of her child. The girl was vulnerable to sexual abuse since they did not have a house and lived on the streets. CHILDLINE team members met the child's mother and brought the child to the CHILDLINE centre. In an attempt to address the lack of shelter homes for children in Agartala, and to deal with such emergency cases in the future, CHILDLINE Agartala set up a Child Guidance Centre of their own. This is run and maintained by CHILDLINE members to provide a temporary shelter.

Finding shelter for a mentally challenged girl

CHILDLINE Murshidabad received a call from the Jiagunj Block Primary Health Centre, Murshidabad District regarding a 14 year old mentally disturbed child named Roshni. Roshni had been found sitting alone on the health center campus. A CHILDLINE team member brought the child to the CHILDLINE centre and through consequent interactions with the child, it was found that after her mother's death her father

had abandoned the child leaving her in the care of her maternal uncle (her only relative). However, the uncle was not willing to take care of Roshni and so she left the house. The child was presented before the Child Welfare Committee (CWC). As per the CWC's order, the child was placed in a shelter home for girls in Berhampore, Murshidabad. Roshni was examined by a doctor, who suggested that the child would be better cared for at a shelter for mentally challenged children. With the intervention of the District Social Welfare Officer, Murshidabad Roshni was admitted to a shelter for mentally ill children in Murshidabad. CHILDLINE Murshidabad conducts follow up on Roshni at regular intervals.

Ensuring her right to respect and dignity...

A concerned adult called **CHILDLINE Impal** seeking help for a mentally retarded 15-year-old girl who was being harassed by the villagers in a village 50 kms away from Shillong. CHILDLINE team members requested the caller to take the child to the near by police station and wait with the child until the CHILDLINE team members arrived. The police handed over the child to CHILDLINE team members after taking a written statement of responsibility from them.

At the CHILDLINE centre the team members found that the girl could not talk, her left hand was paralysed, she could not walk properly and seemed to be mentally challenged. Her clothes were caked with mud and her hair was infected with lice. The girl was given a bath

by a lady team member and was made to wear a fresh set of clothes.

Since the child could not hear, CHILDLINE team members took her to a local Speech and Hearing Centre. On seeing the child the in-charge of the Speech and Hearing Centre refused to help the child saying that the child looked like a refugee from Bangladesh. The in-charge directed the team members to approach Missionaries of Charity and presently the child has been provided temporary shelter at the Missionaries of Charity.

A baby's life is lost...

On 17th July 2005, two concerned adults brought a six-month-old baby to **CHILDLINE Jalpaiguri** centre. They claimed that they had found the child lying uncared for at the Jalpaiguri railway station. CHILDLINE team members lodged a missing person's diary at the local police station and took the infant to the public hospital. The child was suffering from severe malnutrition and had to be admitted to a hospital. One of the women who had rescued the child, volunteered to look after the child in the hospital. Meanwhile the team members went to the railway station to trace the parents of the child. However despite CHILDLINE team member's best efforts there was no news about the child's parents. The next day when a CHILDLINE team member went to the hospital for follow-up, the child had succumbed to her illness and died due to severe malnutrition.

Immediately the Police were informed. An investigating officer was appointed to look into the case. The police



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Making a Difference - CHILDLINE Intervention

decided to preserve the dead body of the child for 3 days and requested CHILDLINE to assist in finding the whereabouts of her parents. CHILDLINE left no stone unturned and contacted almost all the Police Stations, flashed the news in local cable channels but the parents could not be found. Ultimately on the 21st July 2005, police in the presence of the CHILDLINE team conducted the last rites of the abandoned baby.

Asserting her right to live...

CHILDLINE Bhubaneswar received a call regarding a baby, who the caller claimed was being left to die at a local private dispensary. CHILDLINE team members immediately rushed to the clinic and found a baby lying under the washbasin. The Nursing Home authorities were requested to hand over the baby to the CHILDLINE team members so that the baby's life could be saved. However, the authorities refused saying that the doctor wanted the baby to die. To add to this the dispensary staff began to kick the baby in front of the CHILDLINE team members. CHILDLINE team members managed to stop the dispensary staff and requested to meet the concerned doctor. They asked the doctor to hand over the baby to CHILDLINE so that the child could be put in the care of a recognized adoption centre. The doctor informed CHILDLINE team members that the baby had abdominal problems and had been abandoned by the mother as soon as the child was born. The doctor refused all requests made by the CHILDLINE team members to save the baby at first but later said that the baby could be handed over only if the parents

agreed. The parents lived in Madhupatna, Nuagan of Puri District. It was 10.30 p.m. at that time and the baby's condition was fast deteriorating. The team then threatened to call the police. To this the doctor handed over the baby to the CHILDLINE team members without any further delay. The child was immediately taken to Cuttack and saved. Some action shall be taken against the doctor and his staff.

Killing of a girl child...

CHILDLINE Allahabad received a call from the police control room informing CHILDLINE about a newborn girl child who had been found abandoned in a drain. CHILDLINE team members immediately conducted a spot visit and found that a family had rescued the infant. The child had been wrapped in cloth, put in a plastic bag and thrown in the drain. Apparently, the girl child had not even been washed after birth. Her rescuers took her to the hospital where she was provided first aid. CHILDLINE team members took the child and the police station where a case was lodged. The family that had rescued the child came to the CHILDLINE centre along with the team members and expressed their desire to adopt the child. They convinced the police to keep the matter closed and tried to convince CHILDLINE team members as well, they even offered to pay for the same, as they did not want to go through the long tedious process that a formal adoption entails.

The CHILDLINE team members explained the importance of adopting the child legally specially in cases where the

child's parents were not available. CHILDLINE team members produced the child before the CWC and introduced the family that had saved her. CWC agreed to let the family adopt the child after all formalities had been completed. The child is presently in a government shelter home under CWC's supervision. The family visits the child occasionally. CHILDLINE team members conduct regular follow up.

Incest...

16-year-old Pooja was being sexually abused by her foster father. Pooja failed her 10th standard exam. She also underwent two abortions. When Pooja's mother found out, she lodged a complaint at the police station against her husband. On 25th August 2005, the Sub Inspector of the local police station called **CHILDLINE Visakhapatnam** seeking help for Pooja. CHILDLINE team members rescued the child and brought her to the CHILDLINE center where she was counselled. The child is presently sheltered at a short stay home for women and girl children in distress.

CHILDLINE has also brought Pooja books to prepare for her 10th standard exam that she plans to re-appear for. The exam fees will be paid by CHILDLINE. Pooja has also joined an embroidery course at a vocational training centre. The Sub-Inspector has offered that Pooja could join the home guard service when she turns 18 years if she wants.

Nursing a child back to health...

CHILDLINE Ahmedabad received a call from a concerned adult seeking urgent medical attention for a 14-year-old boy. The caller claimed to have found the child lying unconscious in front of his house. CHILDLINE team members immediately conducted a visit and got the boy admitted to a public hospital. The boy remained unconscious for three days. Doctors informed that the boy was suffering from brain fever and needed 24 hours care and attention. After three days when the boy regained consciousness, he told CHILDLINE team members that his name was Amar and that he is originally from Uttar



Children inaugurate a child participation meet – CHILDLINE Sholapur, 26th July, 2005



Hello Childline



Making a Difference - CHILDLINE Intervention

Pradesh. Amar said he came to Ahmedabad with his elder brother in search of work and added that he worked for a tea vendor.

Amar said that he had not been keeping very well. He had gone to purchase some medicines when he lost consciousness. CHILDLINE team members traced the owner of the tea stall for whom Amar had been working and obtained the child's parent's contact details from him. Amar's father was contacted and he came to the CHILDLINE centre with all the necessary documents. After proper verification, the team members handed over Amar to his father.

A victim of terrorism...

9-year-old Pavan and his mother had gone to the nearby forest to collect dry firewood. While they were doing so Pavan's mother came across an abandoned packet. Just out of curiosity, she poked the

packet with a stick. The packet contained a bomb and killed her and severely injured Pavan. Innumerable glass, iron pellets and splinters penetrated his body. He underwent a major operation with doctors trying their best to pick out the pellets and splinters. Although the operation saved Pavan's life, he would have to undergo another operation so that all the alien particles could be removed from his body. Pavan's father was a chronic alcoholic and could not take care of his son. It is about Pavan that **CHILDLINE Agartala** received a call on 20th July '05 from a concerned adult seeking help for Pavan. CHILDLINE team members immediately conducted a home visit and took down all the details of the incident. Insurgency and terrorism is a very common problem in some of the areas of Agartala with children being most affected and vulnerable.

CHILDLINE team members consulted the doctors and

surgeons who assured the team members their help. CHILDLINE team members have arranged for the child to be sheltered at the Child Guidance Clinic at Agartala.

Helping a child get his dues...

Speaking to a **CHILDLINE Allahabad** team member a child said that he belongs to a very poor family and had come from Madhya Pradesh to Allahabad to earn money for his sister's marriage. The child said that he had been working in a *dhaba* (a road side restaurant) in Bhadoi near Banaras for the past 5 months. However, the *dhaba* owner had fired him without giving him his pay that was due to him. CHILDLINE team members went to Bhadoi along with the child and got the *dhaba* owner to pay the stipulated amount of Rs. 2500 to the child. CHILDLINE team members also took a written statement from the *dhaba* owner that he would never again exploit any child.

The child was repatriated to his family. After a few days, the child called CHILDLINE again seeking shelter at a hostel in Allahabad to continue his education as the financial conditions at his home were not suitable. CHILDLINE Allahabad is presently trying to find a shelter for the child.

Sheltering an orphaned child...

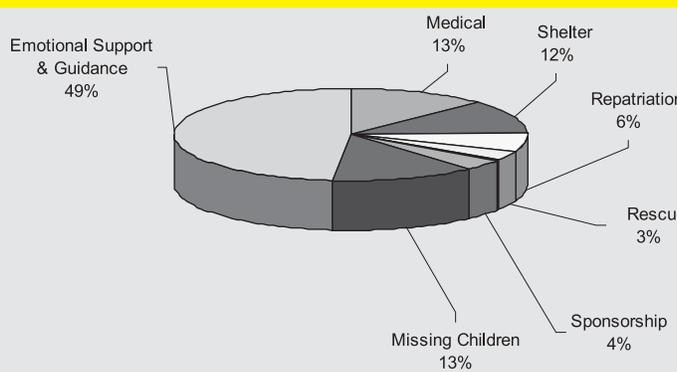
14-year-old Asif lost his parents to AIDS in 2004. His sister was staying in a shelter home for girls while he was staying with his uncle. However, his uncle did not want to take care of him anymore and told him to go stay at a hostel in Vijayawada. After many harsh experiences, Asif found himself on Vijayawada railway station not knowing what to do next. A railway police constable directed him to **CHILDLINE Vijayawada**. After counselling, he was placed at a boy's shelter home in Vijayawada.

* All original names of children have been changed

Percentage of Intervention* Calls from inception to August 2005

The following call statistics covers 66 cities

Medical	41406
Shelter	38308
Repatriation	20463
Rescue	10778
Death Related	546
Sponsorship	13038
Missing Children	42595
Emotional Support & Guidance	157157
Total	324291



* Of the total number of calls received on 1098 the above mentioned categories comprise intervention calls



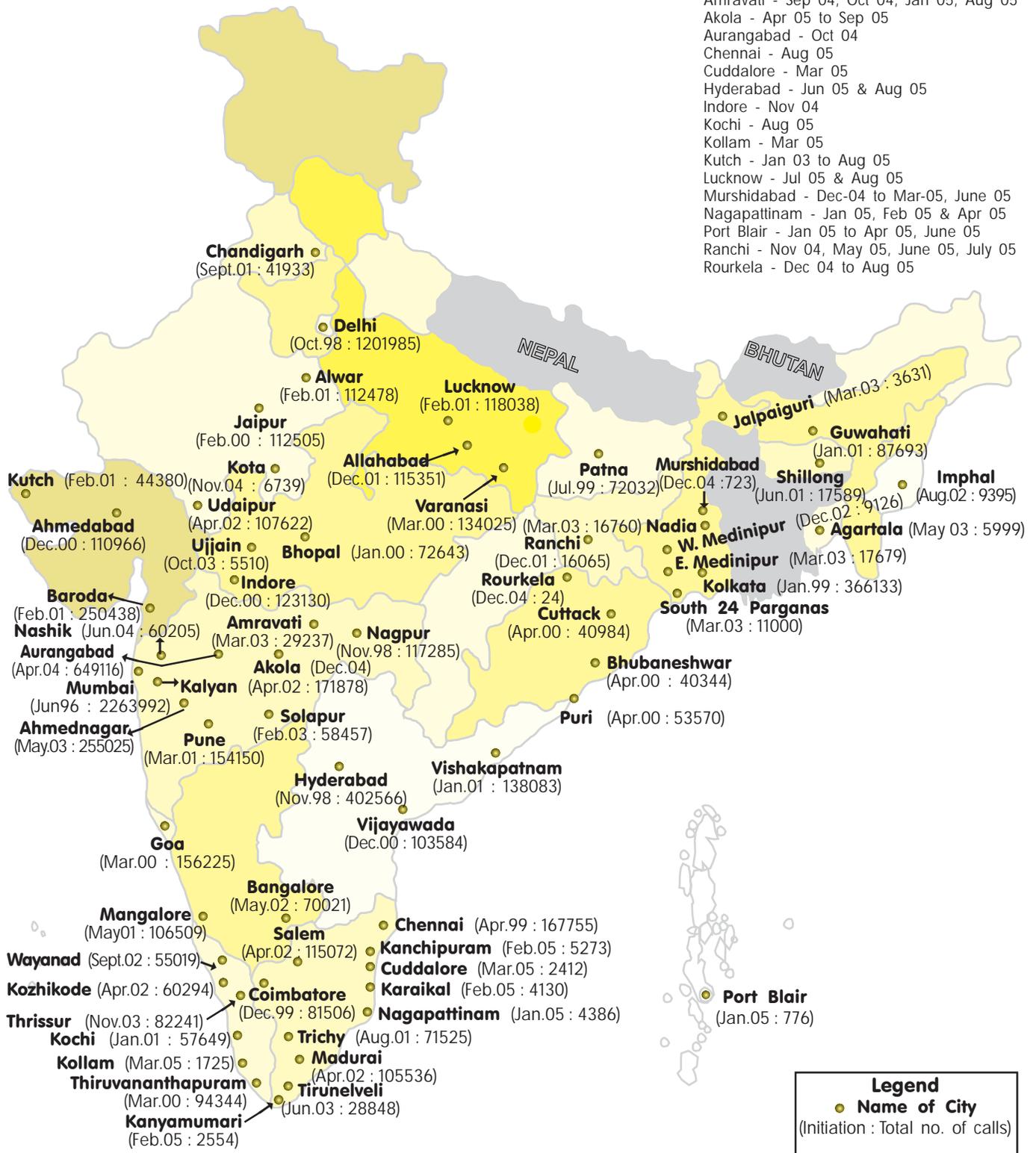
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CHILDLINE has recorded a total number of **83,98,388** calls from inception till August 2005

Statistics not available :

- Amravati - Sep 04, Oct 04, Jan 05, Aug 05
- Akola - Apr 05 to Sep 05
- Aurangabad - Oct 04
- Chennai - Aug 05
- Cuddalore - Mar 05
- Hyderabad - Jun 05 & Aug 05
- Indore - Nov 04
- Kochi - Aug 05
- Kollam - Mar 05
- Kutch - Jan 03 to Aug 05
- Lucknow - Jul 05 & Aug 05
- Murshidabad - Dec-04 to Mar-05, June 05
- Nagapattinam - Jan 05, Feb 05 & Apr 05
- Port Blair - Jan 05 to Apr 05, June 05
- Ranchi - Nov 04, May 05, June 05, July 05
- Rourkela - Dec 04 to Aug 05



Legend
 ● Name of City
 (Initiation : Total no. of calls)



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The CHILDLINE Family

GOVERNMENT PARTNERS

Ministry of Social Justice and Empowerment, Department of Telecommunications, Ministry of Health, Railway Ministry, Department of Women and Child Development, Department of Social Defence / Social Welfare.

NGO PARTNERS

Agartala (Voluntary Health Association of Tripura), **Ahmedabad** (Ahmedabad Study Action Group, Gujarat Vidyapith), **Ahmednagar** (Snehalaya Project), **Akola** (Jaibajrang Mandal), **Allahabad** (Diocesan Development and Welfare Society), **Alwar** (Nirvanavan Foundation), **Amaravati** (College of Social work, Shree Hanuman Vyayam Prasarak Mandal), **Aurangabad** (Sahyog India Foundation, Aapulki Samaj Seva Sanstha), **Baroda** (Baroda Citizens Council, Dept. of Social Work, MS University), **Bangalore** (APSA, Don Bosco, Makkala Sahay Vani, NIMHANS), **Bhopal** (AARAMBH, Bhopal School of Social Sciences, Arushi), **Bhubhaneshwar** (Ruchika Social Service Organisation, SIET), **Chandigarh** (Pediatric Centre - PGIMER, YTTS), **Chennai** (Don Bosco, Indian Council for Child Welfare, Department of Social Defence, Asian Youth Centre, New Hope Area Development Programme, NESAKKARAM-SEEDS, Samajam Boy's Home), **Coimbatore** (Don Bosco, Families for Children), **Cuttack** (Basundhara, Open Learning System), **Cuddalore** (Indian Council for Child Welfare), **District South 24 Parganas** (School of Women's Studies, CINI - Diamond Harbour Unit, Sabuj Sangha), **Delhi** (Butterflies, Delhi Brotherhood Society, Don Bosco Ashalayam, Prayas, Salaam Balaak Trust), **East Medinipur** (Vivekananda Lok Siksha Niketan), **Goa** (Don Bosco School, Nirmala Institute of Education, Vikalp), **Guwahati** (NIPCCD, Indian Council for Child Welfare), **Hyderabad** (Divya Disha, SIDUR, Confederation of Voluntary Associations-COVA, St. Francis College for Women), **Imphal** (Dept. of Anth-Manipur University, Manipur Voluntary Health Association, Manipur Mahila Kalyan Samiti), **Indore** (Lok Biradari Trust, Indore School of Social Work), **Jaipur** (Institute of Development Studies, Jan Kala Sahitya Manch Sanstha, I-India, Vihaan), **Jalpaiguri** (Dept. of Economics - Ananda Chandra College, Jalpaiguri Welfare Organisation, Universal Progressive Study and Cultural Forum), **Kalyan** (Aasara, Media Matters), **Kanchipuram** (Asian Youth Centre), **Kanyakumari** (Kottar Social Service Society), **Karaikkal** (Society for Rural Development), **Kochi** (DonBosco Sneha Bhavan, Rajagiri College of Social Sciences), **Kolkata** (Bustee Local Committee, Cini Asha, CLPOA, Don Bosco Ashalayam, IPER, Loreto Day School, SEED), **Kollam** (Nehru Yuva Kendra),

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