

International Journal of Social Science and Education Research



ISSN Print: 2664-9845
ISSN Online: 2664-9853
Impact Factor: RJIF 8.42
IJSSER 2025; 7(2): 540-546
www.socialsciencejournals.net
Received: 17-07-2025
Accepted: 19-08-2025

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Roles of Child Care Functionaries in Child Care Institutions in Odisha: An assessment under the context of the Juvenile Justice Act, 2015

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DOI: <https://doi.org/10.33545/26649845.2025.v7.i2g.400>

Abstract

This paper examines the Juvenile Justice (Care and Protection of Children) Act, 2015 and its relevant regulations, which mention duties, operational procedures, and administrative issues in managing child care institutions (CCIs) in the Odisha context. This paper looks into the role of the staff of the CCI towards the institutionalised children through the child welfare committee. The methodology of the study was based on empirical work, based on an explorative research design and qualitative in nature; the field study was conducted in the Balangir district of Odisha, where the researcher selected three child care institutions (CCIs). All CCIs are children's homes. Out of the 6 child care institutions, 3 child care institutions were selected from the six childcare institutions. Thirty children were selected for this study, ten from each of the three childcare institutions. The purposive sampling method was undertaken to select the children from the CCIs who have completed 9th class up to ITI because they are mature enough to explain the role of the staff under the Juvenile Justice Act, 2015. The findings of the paper were that the staff of the child care institution did not address the emotional and psychological issues of the children. The children of the CCIs reveal that the CCI's rule and regulation guided the future plan of their. The study highlights that staff training is vital in discharging their duties as per the Juvenile Justice Act, 2015.

Keywords: Child Care Institution, staff, care, emotional, Children, Juvenile Justice Act

Introduction

Child Care Institution (CCI) work as the foundation of the state's child protection system, providing both children in conflict with the law (CCL) and children in need of care and protection (CNCP) with shelter, protection, care, rehabilitation and social integration. Despite their vital function, inequalities in service delivery, procedural shortcomings, and institutional constraints have prompted concerns about their effectiveness and suitability for the Juvenile Justice framework's child-centric objectives. The objectives of this paper are to understand the staff's responsibilities for the care, protection, and rehabilitation of the institutionalized child. A child's future development is greatly influenced by the type of care facility they are in and their experience there. Research indicates that residential care facilities foster a healthy self-identity in young children and have a big impact on how they develop in a complicated society. To help these children overcome the obstacles, it is crucial to provide them with ongoing assistance, care continuity, and attention to their health and educational needs. (Dutta, 2016) ^[4] In India, the Juvenile Justice Act, 2015, is the primary legislation looking into the care, protection, and social integration of children who are in need of care and protection and those in conflict with the law. This paper looks into how staff perform their duties as mentioned in the Juvenile Act and its rules for care and protection.

Status of Child Care Institutions in Odisha under the Juvenile Justice Act, 2015

According to the Minister of Women and Child Development Department, Government of India, the number of care facilities has increased over the past three years. In 2022-2023, the number of CCI was 2,305, compared to 2,245 in 2021-2022 in Odisha. The number of child care institution facilities increased for children from 2,450 in 2023-2024 to 3,010 in 2024-2025.

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Government statistics indicate that more than 60,000 children in India are in institutional care, with Tamil Nadu state having the highest number at about 10,000. (Datta, K.B, 2024) ^[2].

The State-Level Child Protection and Welfare Monitoring conducted a review meeting was held in Bhubaneswar, Odisha, in June 2025. Chief Secretary Manoj Ahuja presided over the meeting, which took place at Lok Seva Bhawan. Currently, in the meeting, they discussed that the state has 30 District Child Protection Units (DCPUs), 31 Child Welfare Committees (CWCs), 34 Juvenile Justice Boards (JJBs), 36 dedicated Juvenile Police Units, and 220 Child Care Institutions (CCIs). There are approximately 8,150 children under institutional care and 6,317 children under non-institutional care. Of the 220 Child Care Institutions in Odisha, 33 are Specialised Adoption Agencies. These have facilitated a steady rise in in-country adoptions over the past three years, with more girl children being adopted than boys each year, reflecting the success of awareness and process-streamlining efforts. The broader institutional network also includes 160 children's homes, 12 open shelters, 7 observation homes, and 7 special homes. (Rout Jayati, Pragativadi, 2025) ^[12].

In accordance with Section 41 of the JJ (C&PC) Act, 2015, children in need of protection can receive shelter, education, and individualised care from Odisha's 220 registered Child Care Institutions (CCIs), which include Children's Homes, Open Shelters, Specialised Adoption Agencies, Observation Homes, Special Homes, and a dedicated Place of Safety. Approximately 8,338 children are presently cared for by these CCIs, and all of them are routinely observed by formal committees conducting systematic inspections to make sure care standards are followed. There have been 220 child care institutions in operation, including 13 specialised adoption agencies, 12 open shelters, 160 children's homes, 7 observation homes, 7 special homes, and one place of safety in 2025. (Annual report from the Government of Odisha, Ministry of Women and Child Department, 2024-2025)

Review of the literature

The fieldwork was conducted by teams in different districts of Odisha, along with the Department of Child Development, District Child Protection Units, Child Welfare Committees, and district authorities. To assess facilities, safety, and child welfare procedures, 50 child care institutions—managed by the government and non-governmental organisations—were examined. The findings of the study were as follows: Systemic inadequacies in child safety are revealed by the NCPDR's (2019) investigation of Odisha's Child Care Institutions (CCIs). The report emphasizes that institutionalization should only be used as a last resort because, in contrast to family-based care, it frequently impairs children's emotional and social development. Poor infrastructure, lack of health and hygiene, a lack of safety and security, and a shortage of qualified counsellors were major issues, which are consistent with research in child welfare that shows the dangers of abuse and neglect in homes with careless regulations. The report's discussion of religious influence has connections to global discussions about children's freedom of thought and identity. Lastly, identifying unregistered hostels and pseudo-CCIs highlights a larger worldwide issue of unregulated establishments serving as vulnerable areas. The suggestions, which include closing

noncompliant homes, stepping up monitoring, and encouraging family-based alternatives, are consistent with previous studies that advocate for child-centered care models and systemic change.

Gour (2008) ^[5] states that the juvenile justice system in India is based on the principle of promoting and safeguarding the rights of children. It is administered by the Juvenile Justice (Care and Protection of Children) Act, 2006, which is a progressive and proactive legislation providing for the care and protection, treatment and juvenile conflict with law. However, the act was amended in 2015 due to issue that exists in the said act. The issues are a lack of a budget system, inadequate infrastructure, a lack of training and capacity building of the staff, and a lack of human resources at the state and district levels. So, the present Act address all these lacunae that exist in the previous Act. It is not only a priority in the state list but also a primary responsibility of the central government to implement the Juvenile Justice Act, 2015. (pp.144)

By offering food, shelter, education, skills, and counselling, institutional care attempts to prepare children for reintegration into families and society. However, children who are institutionalised frequently experience neglect, isolation, and developmental delays, all of which can have a harmful impact on their emotional and social development.

The study was conducted in Manipur based on 20 child care institutions with 40 staff respondents. The findings are the following: Poor facilities include insufficient restrooms, play spaces, counselling and sick rooms, and separate dorms. Educational problems include low teacher-to-student ratios, prejudice against most students in government schools, and a lack of evaluation of students' learning. Training in obsolete vocational and life skills, such as tailoring, pickle-making, and needlework, does not adequately prepare kids for the demands of the modern workforce. Important life skills like problem-solving, money management, and decision-making are mostly lacking. Untrained Staff: Institutions offered little to no training, and most lacked professional social work or child development credentials. Unhealthy Parent-Child Relationships: Some parents are reluctant to return their children, visitation is erratic, there is little financial or emotional support, and some kids fight to be reunited. Administrative problems: Government funding delays have a detrimental impact on personnel compensation and institutional operations. (Wanglar, 2021a) ^[13].

For the sake of their survival, many children in India are subjected to risks and challenging situations. In India, 1.8 lakh children are living in child care institution facilities since their parents are unable to provide for their basic needs, such as clothes, food, and shelter (Jena Committee Report, 2017). This study attempted to find out that how the child care institution was providing care and supports to the children under the juvenile justice act, 2015.

With the goal of providing child welfare and protection through all-encompassing, non-institutional care and service delivery systems, Mission Vatsalya is the government's implementation vehicle. The Juvenile Justice Act of 2015 provides the legal framework and procedures for defending children's rights, deciding cases involving minors, and establishing care and protection requirements. By providing outreach, capacity development, and protective services, Mission Vatsalya effectively expands and operationalizes the Juvenile Justice Act's legal obligations. The Juvenile

Justice (Care and Protection of Children) Model Rules, 2016, were introduced in India and based on them, all child care institutions implemented these schemes. This study focused on how the child care institutions operate in Odisha state.

The literature review from NIPFP Working Paper No. 418, "Mission VATSALYA: A Public Expenditure and Institutional Review of Child Protection Scheme across Districts in Odisha, India," finds that Odisha has made notable progress in child-centred planning, including establishing a special budget for children and giving programs like Mission VATSALYA priority due to their financial disappointment and policy emphasis. However, research consistently discloses that, in spite of formal policy frameworks and budget allocations, institutional capacity, infrastructure, and systematic procedures for identifying vulnerable children are all inadequate, which hampers actual implementation and leads to inconsistent application of these programs across the districts of Odisha. (Chakraborty *et al.*, 2024) ^[1]. In the child welfare sector, NGOs are widely recognised for their role in reintegrating children, rehabilitation and strengthening their families. In India, NGOs play a vital role in the family strengthening project before the launch of Mission Vatsalya regarding restoration of children to the family and avoiding separation, which is consistent with the fundamental principles of the Juvenile Justice Act. (Modi & Kalra, 2024, cited in Majumdar and Sarkar, 2025) ^[9]. According to Modi and Kalra (2024), the project prioritised follow-up support. It made it easier for people to access welfare programs, education, skill development, and psychosocial health services like identity documentation, counselling, and healthcare. This reviews the potential of Mission Vatsalya in escalating its scope and the key component of enhancing family-based care to children through NGOs that serve as vital mediators between the government and the community. NGOs play a vital role in implementing the Mission Vatsalya and enhancing family-based care to children. NGOs deliver required technical assistance through initiating learning exchanges and dialogues, as a result, it increases the scope of the intervention of integrating family-centred care. (Majumdar and Sarkar, 2025) ^[9].

What is a child care institution in Odisha?

Juvenile Justice Act 2015, under sections 47 to 52, which mentions types of child care institutions (CCI), provides care and protection to vulnerable children in India. These CCIs must be registered under the act. Sections 47 to 52 of the Juvenile Justice (Care and Protection of Children) Act, 2015, structure and categorise the child care institution to provide care and protection of children in conflict with the law and those in need of protection. Initially, observation homes offer temporary reception during the inquiry process, which guarantees that the environment remains non-threatening and secure. Secondly, special homes are designed to provide rehabilitation services to juveniles who have been convicted of crimes, with an emphasis on tailoring interventions to facilitate their reformation. Third, Places of safety are for children above the age of eighteen and children between the ages group of 16 and 18, those children who have been convicted or accused of heinous crimes under the Act and the Indian Penal Code. Fourth, children's homes is important child care institution, present paper focus on this only which promote the complete

development of vulnerable children by offering them comprehensive care and protection. The Act also empowers the Child Welfare Committee or Juvenile Justice Board to choose suitable facilities and qualified individuals for short-term childcare, ensure adherence to welfare guidelines and appropriateness. The Juvenile Justice Act, 2015, emphasises rehabilitation, social integration, child rights, and protection within the juvenile justice system, which is collectively reflected in these provisions. (Government of India, 2015). This study focuses on the children's home category of children who need care and protection who stay in such institutions from 6 to 18 years old. The Juvenile Justice Model Rule, 2016, mentions the role of the staff of the CCI and what kind of facilities and provisions to provide to the children.

Role of the Staff in Child Care Institutions under the Juvenile Justice Act, 2015

In accordance with the Juvenile Justice Act 2015 and its model rule 2016, the staff of Child Care Institutions (CCIs) in Odisha play an essential role in ensuring the provision of the needs of care, protection, rehabilitation and social integration for children. The Superintendent, Child Welfare Officer, Counsellor, House Mother and House Father, and Paramedical Staff are involved in the functioning of the CCI. The duty of the superintendent is to supervise the CCI's overall operation and management, guaranteeing that the children's basic needs are fulfilled. He/She must nurture a conducive environment on the campus of the CCI, and legal compliance is maintained as per the Juvenile Justice Act. The Probation Officer is responsible for conducting social investigations and developing personalised care plans that are customised to the child's requirements for a child in conflict with the law. The Child Welfare Officer assists as a liaison between the children and external stakeholders such as the child welfare committee and the district child protection unit, while simultaneously facilitating rehabilitation and reintegration initiatives for CNPC children. Children receive emotional and psychological support from counsellors, which assists them in managing trauma. The role of House Fathers and House Mothers in Child Care Institutions (CCIs) is both essential and deeply nurturing to the children. Their primary duty is to establish a family-like atmosphere that promotes the emotional well-being and daily care of the children, while working under the supervision of the Superintendent or Person-in-charge. They ensure that the fundamental requirements of children, including health and hygiene, nutrition, and clothing, are addressed and fulfilled with consistency and care. The counsellor at a Child Care Institution (CCI) in Odisha offers significant emotional, behavioural and psychological support to children. They assist children in their rehabilitation and coping with trauma through counselling sessions, the preparation of individual care plans, and the facilitation of their social and emotional development. As a result, it will create family-based care at CCI. (Government of India, Ministry of Women and Child Development, 2016) House Fathers and Mothers perform as parental figures who cultivate trust and connection among children, providing emotional support, stability, and a sense of security in addition to their routine responsibilities. As well as overseeing bedrooms, play areas, and activity rooms, they ensure that these areas are safe, clean, and comfortable. Odisha State Child Protection Society (n.d.).

Methodology of the study

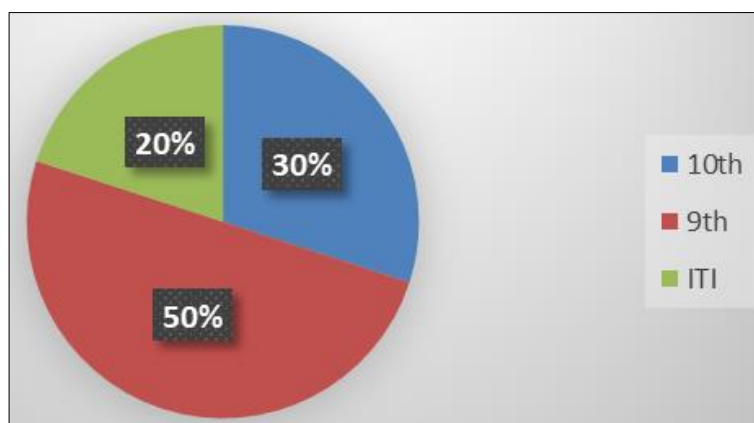
In this study, purposive sampling was employed. Children who have been in the Child Care Institution (CCI) for more than three years were the particular criterion used to choose the responders. Currently, students are enrolled in upper secondary courses from 9th class to +2 class. This method was employed to ensure the participants were mature enough to assess the assistance, care, and rehabilitation provided by the personnel and had enough life experience in CCI. The study was conducted in the Balangir district of Odisha, where the researcher selected three child care institutions (CCIs). All are children's homes. Out of the 6 child care institutions, 3 child care institutions were selected from the six childcare institutions. 30 children were selected for this study, ten from each of the three childcare institutions, all of whom lived in CCIs in the study area, which is called the sample size. The topic of the Juvenile Justice Act of 2015, such as health and well-being, education and development, shelter and basic needs, and emotional support, was covered in a semi-structured, closed-ended, and open-ended interview scheduled for data collection. The researcher also used informal observation with the interview schedule, noting the institution's milieu and the interactions between staff and children, which added profundity to the data.

The data collection procedure was carried out ethically, with prior permission obtained from the concerned, such as the

superintendent of the CCI, and the chairperson of the child welfare committee of Balangir district of Odisha. Prior to the interview, the children were provided an age-appropriate explanation of the purpose of the research, and their participation was completely voluntary. To ensure that the dignity and vulnerability of each child were respected, confidentiality and anonymity were maintained. Simple frequency and percentages were used to present answers for data analysis. Qualitative observations were also incorporated to contextualise the results and emphasise the children's opinions.

Findings and discussion of the study

This section examines the lived experiences of the children who stay at the Child Care Institution (CCI) to analyse the functions and work of the staff as outlined in the Juvenile Justice (Care and Protection of Children) Act, 2015. During the interviews with children, the children revealed how the Superintendent, Child Welfare Officer, Counsellor, House Father, and House Mother respond to their needs and concerns in terms of family reconnect, future plan and health care. Beyond their formal duties, the staff's participation shows a human element of caring and support that is crucial to the well-being of the children. The findings discuss how staff's behaviours and duties impact the sense of safety, trust, emotional bonding, and problem-solving skills through their role in CCI.



Sources- Fieldwork Data, 2025

Fig 1: Educational Qualification of the Respondents who stay at CCI

The above pie chart (Figure 1) shows that 50 percent and 30 percent of the respondents enrolled in the 9th and 10th classes in the government school nearby, and 20 per cent of the children enrolled in the government ITI of Balangir town. The Child Welfare Committee has placed these children at the CCI to ensure their care, protection, and future social integration—not just for their education but holistic life. The CCI offers a safe environment where children, usually from marginalised families, parentless and single-parent families, can get stability and organised support. ITI strives to support both academic and skill-based learning that is suited to each student's needs by providing access to government schools and vocational training. Those students who enrolled in Industrial Technical training (ITI) revealed that they do not want to pursue this course, but by compulsion of the staff, they were enrolled on the ITI course. As per principles of the Juvenile Justice Act, children must actively participate and give their informed consent before being enrolled in vocational courses like ITI,

even though the goal is to improve skill development and employment prospects. It may be argued that forcing children to enrol against their will goes against the Juvenile Justice Act of 2015's protective, participatory, and child-centred principles. For compliance with legal and ethical requirements, a more child-sensitive approach that includes counselling and collaborative decision-making is necessary to comply with the Act.

Table 1: Children's Response to Food Quality at the CCI

Response to Food Quality	Frequency	Percentage
Can't say	3	10.00%
Not Satisfactory	10	33.33%
Satisfactory	17	56.66%
Grand Total	30	100.00%

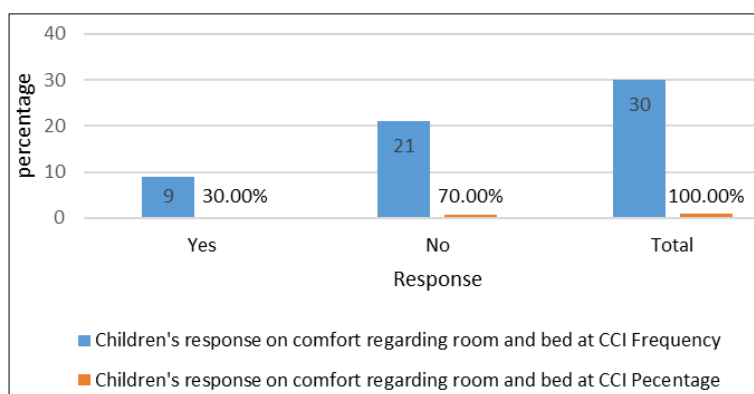
Sources- Fieldwork Data, 2025

The Juvenile Justice (Care and Protection of Children) Act, 2015 stipulates that Child Care Institutions must ensure that

children in their custody receive sufficient nutrition and a conducive living environment, recognizing these as fundamental rights to care and protection.

Table 1 shows that a small percentage of the children surveyed—specifically, 10 per cent of the children articulated uncertainty regarding the quality of the food provided to them, suggesting either ambivalence or an absence of a definitive stance. In the provisional, a noteworthy 33.33 percent of the children viewed the food quality as inadequate, demonstrating a level of dissatisfaction that could suggest concerns related to taste, culture, variety, or nutritional value. It is noteworthy that a significant portion of 56.66 per cent of the children expressed that food quality is satisfactory. This indicates that more than half of the children perceive their fundamental nutritional requirements as adequately fulfilled.

More than 40 percent of the children revealed that they are not satisfied with breakfast because most of the time, the food given to them is monotonous. A lack of satisfaction regarding the quality of food provided to children at the Child Care Institution (CCI) could be attributed to a failure to comply with the prescribed meal timetable and menu stipulated by the Juvenile Justice (Care and Protection of Children) Act, 2015. With the approval of the district child protection unit, the timetable and menu should be displayed in a prominent place of the CCI where anybody can observe what kind of food is provided to the children, as stated in the Rule of the Act. The researcher observes and assumes that no matter how nutritious the food is, children may feel alienated or lose interest in eating it if it does not fit their tastes or cultural expectations. This clash of cultures often influences a person's appetite and overall satisfaction with food services.



Sources- Fieldwork Data, 2025

Fig 2: Children's response on comfort regarding bed and room at CCI

The above bar graph (Figure-2) shows that 70 per cent of the respondents said they were not comfortable with the bed and room at the CCI; however, 30 per cent of the children said they were comfortable with the bed and room facilities at the CCI. Section 42 (A and B) of the Juvenile Justice (Care and Protection of Children) Model Rules, 2016, facilitates physical infrastructure, bedding and clothing to children at the CCI. The "Best Interest Principle" (Section 3, Juvenile Justice Act, 2015 & Rule 4) is not being followed. Under the Juvenile Justice Act, 2015, the "best interest of the child" is the most important principle that directs every decision and action. This principle is explained in more detail in Rule 4 of the Model Rules. It is inherently against a child's best interests to live in an uncomfortable and unsatisfying environment. It has an adverse effect on their mental and physical health (stress, lack of sleep) (feeling insecure, uncared for). A child cannot be expected to develop, recover, or integrate properly if they do not feel safe and at ease in their own "home."

Counselling received by the children of the CCI

Among the 30 children who participated in the survey, 50 percent of children indicated that they had undergone counselling sessions facilitated by a counsellor during their stay in the Child Care Institution. In contrast, the remaining 50 percent reported that they had not engaged in any counselling sessions during their residency. It shows that the children were not accessing equal psychological support within the CCI. The state government must ensure consistency and availability of counselling services in CCI and provide proper training to counsellors of the CCI.

Inadequate counsellor availability may be due to restricted availability because of staff shortages or a lack of qualified professionals, leading to missed sessions. Due to the absence of follow-up or individual attention, counsellors may not be able to render each child individualised counselling, particularly in situations with enormous workloads. Juvenile Justice Act, 2015, section 37 mentions that the child welfare committee direct that the CCI of the children need to provide immediate counselling and other provisions of care and shelter to the child as per coordination with the district child protection unit. Section 38 of the Juvenile Justice (Care and Protection of Children) Model Rules, 2016 mandates that a Child Care Institution (CCI) with a maximum capacity of 50 children must recruit a minimum of two qualified counsellors or psychologists. Regular personalised counselling sessions are mentioned in the rule, which ensures that child psychological support is sufficiently available to meet the complex behavioural, emotional and mental health requirements of children in care. The counsellor must be aware of child-centred care, child psychology, empathetic care, and be committed to being involved in a homely atmosphere in CCI. (Juvenile Justice Model Rule 2016)

Table 2: Staff's response toward children's problems at CCI

Response	Frequency	Percentage
Yes	22	73.33
No	2	6.66
Sometime	6	20
Total	30	100

Sources- Fieldwork Data, 2025

According to the information gathered, a significant majority, table 2 displays that 73.33 percent of the Child Care Institution (CCI) staff listened to the children's issues and offered advice, demonstrating a generally encouraging atmosphere. There is a notable lack of staff responsiveness, though, as 6 percent of employees failed to address the concerns of the children. Furthermore, 20 percent of respondents said staff members only occasionally guided or listened to the children. It was pointing to irregularities in the frequency or quality of support offered. It shows that in order to guarantee that every child consistently receives sufficient emotional support and direction in resolving their issues, the state government must enhance its mechanisms for a better communication system for staff training.

Table 3: (A and B)

(A) Children's Responses to Efforts Made to Reconnect with Family (If Safe)			(B) Children's Willingness to Continue Residence at the CCI Until Completion of Studies	
Responses	Frequency	Percentage	Frequency	Percentage
Yes	10	33.33	10	33.33
No	20	66.66	20	66.66
Total	30	100	30	100

Source-Fieldwork Data, 2025

Table 3(A) shows that a troubling discrepancy is revealed when children's responses about efforts to reconnect with their families are analysed. Out of 30 children, only 33.33 per cent said that efforts were made to promote reconnecting their family relationships, whereas 66.66 per cent said that no such efforts were made. To address the disparity, the staff of the CCI may be aware of child psychology and the rights and principles of the Juvenile Justice Act. To create a family-based environment at CCI, the government impart the training programme for the staff of the CCI for their capacity building and understanding of child psychology. It is linked with the component of child welfare that supports emotional stability, identity development, and long-term reintegration possibilities is the restoration of familial ties when it is safe and appropriate. The results highlight the need for institutional staff to prioritise and support family reunification processes more consistently and proactively in order to respect the child's right to meaningful family relationships whenever it is safe and feasible.

Table 3(B) shows that, in addition to providing safe custodial care, CCIs also offer opportunities for development and rehabilitation. In contrast to alternatives like families with problems or ambiguous community-based arrangements, institutional care is seen as supportive, structured, and resourceful, as evidenced by the two-thirds majority, 66.66 per cent, who expressed a strong desire to stay in CCI until their education was completed. In contrast, 33 per cent of the children expressed no because they may have been influenced by emotional requirements, such as a need for independence, a desire for social belonging outside of the facility, or reintegration into the family.

Conclusion

According to the Juvenile Justice Model Rules, 2016, child care institutions should safeguard children's physical needs—such as food, shelter, medical treatment, and sanitary conditions—as well as their emotional, intellectual, and recreational well-being. According to this approach, every child in a CCI has the same rights to development,

dignity, and opportunities as other children in society. The effective implementation of these laws depends on the staff's daily efforts to transform regulations into lived reality. CCIs become encouraging environments that promote resilience, hope, and the prospect of a better future when staff members blend their professional responsibilities with compassion.

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