

Child Abuse in India

Vipin Jain

Department of Law

Teerthanker Mahaveer University, Moradabad, Uttar Pradesh, India

ABSTRACT: *Child abuse is harm to, or neglect of, another person's child, whether adult or child. Child abuse occurs across all cultural, ethnic, and income groups. Child violence may be physical, mental-visual, verbal or insensitive. Abuse can cause the child to suffer serious injuries and may also result in death. Rapture, sexual abuse, and sexual harassment are issues of gender violence worldwide that are only beginning to come to light in India. In India there is very little research done in this area and only a few books have been written, keeping the subject even further away from the country's consciousness. The problem persists with staggering incidence, however, and unique profile of Indians adds to the complexity of an already difficult subject. Fortunately, the issue of child sexual abuse is slowly becoming a more recognized issue, and this paper will focus much on sexual abuse against minor children: the laws, victims, and perpetrators for this reason. Finally, an analysis will be presented on the aspects of Indian culture which make this issue particularly difficult to understand and to cope with.*

KEYWORDS: *Social problems, Child welfare, Victimized, Poverty, Verbal abuse.*

INTRODUCTION

Cross-cultural research has brought recognition that sexual violence, first recognized as a significant societal problem in the developed Western world, is still a epidemic that exists worldwide, in both developed and emerging countries across the globe. Although its identification, form, and scope may vary across nations, its widespread prevalence is becoming increasingly a source of international concern. Knowledge of the phenomenon of child abuse in developing countries, the norms, values and expectations of different socio-cultural traditions are often camouflaged by third world countries. Since at least the early part of this century, with the passage of the first Children Act of 1924 in Bombay and its subsequent amendment, children's susceptibility to abuse and neglect has been in the consciousness of the Indian political consciousness. In 1960, the Central Government passed the Central Children Act, which extended the legislation of the First Children Act to all states and called for children to be protected from cruelty and indignity. The goal was to prevent the child from being abused or intentionally ignored or hurt so that needless emotional and physical damage could be incurred. The 1986 Juvenile Justice Act also calls for the protection and care of destitute and neglected children. It is therefore clear that India's political infra• system is both conscious of the potential for harm to children and has taken measures to resolve this concern[1].

India is the world's second most populous country and the latest 2011 census shows that it is home to 17 per cent of the world's population. Nearly nineteen percent of the world's children live in India, which makes up 42 percent (more than one-third) of India's total population and about 50 percent of these children need care and protection. Joining the United Nations India's Convention on the Protection of the Child vowed to protect its children from all kinds of sexual

harassment and violence. Policy 34(a) calls for state machinery to keep a child from being tricked or coerced into participating any sexual activity which is illegal[2].

Despite the presence of the Children Act and the Criminal Justice Act, there is relatively little understanding of the magnitude and nature of violence by children in India, both in the general population and in the human service practitioners. Only when the issue comes to the fore as a matter of public interest can policy-makers and care management providers feel the need to act actively on behalf of exploited and abandoned children. This paper (a) discusses the state of knowledge on child abuse in India and the definition of child abuse as advanced by India's first National Seminar on Child Abuse; (b) identifies some of the forms of maltreatment that children may be subjected to; and (c) discusses implications for professionals and policy makers in the human service[3].

CHILD VIOLENCE AS A SERIOUS ISSUE

Practices of child abuse have been intrinsic to the fabric of human society since ancient times. For example, infanticide, ritual mutilations, physical battering, sexual exploitation, slavery and abandonment were common in ancient times and continue to exist to varying degrees in present-day society. Children have been, and still are, regarded in many cultures as their parents' property to be handled as the latter's wish, because children are regarded private family matters. Also in Western society child abuse and neglect have been accepted as significant social issues only relatively recently.

In the United States, the National Center on Child Abuse and Neglect defines child abuse or battering as deliberately maltreating children by injuring them physically, emotionally or sexually, and neglect as not providing for their basic physical, emotional or educational needs. Since the passage of federal legislation in the United States requiring child violence coverage in 1974, the magnitude and complexity of the issue is becoming increasingly evident. Although most countries place penalties on parents who assault or neglect their children, only the United States, Canada and Great Britain have introduced special systems to recognize abused or exploited children[4].

In their significant article on child abuse as an international issue, Finkelhor and Korbin agree that child abuse as described and established in the West is not generally relevant across cultures and national borders, and recommend a common definition of child abuse as "the portion of harm to children arising from human actions that are forbidden, near and preventable." This definition distinguishes it from other international social, economic and health problems, and allows its application to a range of situations and cultural contexts. Focus is on the perpetrator's intention, and social censorship is based primarily on local standards and norms and is based on an awareness that what may be abusive in one culture may well be sanctioned socially in another[5].

CHILD ABUSE IN INDIA

Reviews of social service literature on child abuse in India indicate a lack of information on the subject, because although there may be a problem, it may not be perceived as such by human service professionals since terms such as harshness, discipline and abuse are culture-specific, and professional people from a similar cultural background may not perceive or recognize abuse as an issue. Poffenberger indicates that aggressive behavior towards children which deviates from socially acceptable standards and is the product of emotional disruptions by adults may not be common in India due to strong family support structures and extended family restraining influences[6].

However, it is more likely that there is a prevalent apathy to child violence within the family arising from two inextricably interwoven influences in Indian culture, namely (a) the common recognition of corporal punishment as part of natural child rearing and management, and (b) the parents' prerogative to discipline their children as they like. Furthermore, in a world full of problems of deprivation, neglect, hunger, illness and overcrowding, many practitioners in the human service who are in a position to recognize child violence within the family are either oblivious of the presence of this issue, are apathetic towards it or are already heavily engaged in initiatives of a different nature in human service.

In the early 1980s, some social scientists based their attention on two long-standing trends occurring in India: infanticide-mainly of female babies, and benevolent or systematic neglect-again mainly of female adolescents. Although in both industrialized and developing countries the survival rate of infants at birth is almost universally higher for females than for males, this predominant pattern is not found in Sri Lanka, Pakistan and India. The existence of the child battering problem and the sexual and emotional abuse of children within the family, or by caregivers, has become more apparent since the late 1980s, as it has received increasing media coverage. As evidenced by the first National Seminar on Child Abuse in India, held in New Delhi in 1988 under the auspices of the National Institute of Public Cooperation and Child Development, it has also, more specifically, been brought into the general consciousness of some human service professionals.

Nevertheless, also India's scanty literature on child abuse shows a major controversy facing social sciences in identifying the issue and in distinguishing between intra-family violence and systemic abuse. Several papers included in the National Seminar report indicate that the two types of abuse are intermingled and that it is difficult to isolate one type from another. Certain types of societal abuse have been increasingly recognized as the country's major social problems, and many activists have advocated for such forms of abuse on behalf of the children. Child labor, child prostitution, child beggary, child marriage and street children are the most common among these. While these are big damaging, and frequently deadly, types of violence in a child's life, they are more the product of neglect and social expectations that cause the very vulnerable to be abused than the result of family pathology. Child abuse or purposeful child abuse due to physical, emotional or sexual harm often occurs within the family, resulting from a variety of combinations of child-related factors, parent-related factors and situational factors[7].

Aside from infanticide, physical abuse such as parental battering of children in India has not been well documented. Maybe its appearance, as Poffenberger suggests, is unusual because of the assistance offered by the extended family. However, with the rise in industrialization and urbanization, substantial change has taken place away from the traditional family system to the patriarchal one and some of the pressures associated with child violence in the Western countries will come with this. Increasing media coverage and some findings from child care clinics have led some social scientists and human services professionals to conclude that child abuse is varied and includes beating, emotional abuse, abandonment and sexual abuse, and to suggest that this is associated with parental expectations, marital discord, divorce, dual career, in addition to industrialization and urbanization[8].

Selective or benign neglect is fairly well recognized as a form of population control and in-family distribution of limited resources in a country where women and children with disabilities are devalued and perceived as major commitments. Selective resource allocation, especially in the form of food and health care, is demonstrated by the unequal differences in height and weight between boys and girls in urban and rural areas. In addition, Dandekar suggests that the differential levels of infirmities in both sexes, especially in rural areas, indicate that females are neglected to death if they are disabled. However, as stated in the Juvenile Justice Act and the Children Act, sexual abuse or involvement of dependent, developmentally immature children in sexual activities that they do not fully understand has been sanctioned. Legislation clearly indicates that sexual activity is punishable by law with even a consenting child under the age of fifteen. However, child marriages are common in many nations, and continue due to insecurity and culture. Additionally, child prostitution, which is rampant in the big cities, is nurtured by the superstition that venereal disease is cured by virgin intercourse.

However, these are but two of the many forms of sexual abuse a child may be subjected to, and while they are forms of societal child abuse, they do not necessarily indicate sexual abuse intra-family. A family member or care-giver's sexual abuse of a infant has earned little to no publicity. Cultural values and social taboos against sexuality as a whole are so omnipresent in India that this type of violence is possibly maintained by both suspect and survivor in a strictly guarded secret. It is generally accepted that the definition and identification of child abuse requires the interplay of three factors: (1) the perpetrator's intent and/or behavior, (2) the child's effect, and (3) the observer's perception. Although the perpetrator's behavior and the effect on the child may be similar in two different cultural environments, observers' perception and response may vary greatly based on societal norms and cultural conditioning, awareness of and sensitivity to child abuse issues, and personal values and experience. It becomes apparent, then, that before any meaningful empirical research can be carried out on the extent and scope of the problem of child abuse in India, there needs to be a clearer definition of interfamily child abuse based on the perceptions of the general public and staff of the human service and the vagaries of associated values and personalities[9].

DEFINING CHILD ABUSE

The 1988 National Seminar on child abuse in India developed the definition of child abuse as follows:

Child Abuse and Neglect (CAN) is an intentional, non-accidental injury, abuse of children by parents, caregivers, employers or others including persons representing governmental / non-governmental bodies that may result in temporary or permanent impairment of physical, mental and psycho-social development, disability or death. Two points are apparent in this concept: (1) the concept of child abuse and neglect does not differentiate between family and social abuse, and (2) the term, while broad enough to include all types of child abuse, would give child welfare workers the same operationalization problems as those faced by their Western peers. While the evolution of this definition in India is important and points to a professional recognition of the need for society to heed the injustices faced by several million children, it is merely a start in the long battle against child abuse and neglect.

Some behaviors are clearly abusive, particularly if they lead to a child's death or disfigurement, and few would differ on that. However, as experience in the West has shown time and time again, many parental behaviors cannot be identified as abusive immediately and are subject to observer interpretation. Trained professionals may disagree about whether or not a behavior is abusive, so it may be even more difficult for people who are not so trained, whether or not human service professionals to identify abuse.

While children may suffer a variety of forms of abuse at the hands of several adults unrelated to them, this paper is primarily concerned with the abuse and neglect experienced by children at the hands of their own parents and/or guardians and within family structure. Violence by the family takes on a different aspect, particularly in India, because the family is the most significant community to which an adult belongs, and the parent-child interrelationships and expectations are well established. Violence not only contradicts such standards, it still has social repercussions of a sort that might not actually be so amazing if the violence had arisen in a child's life at the hands of an outsider or a less important individual. Yet child abuse must also be viewed within the context of Socio-culture, because what may be considered abusive in one culture may not be so in another. Recognizing this crucial concept is essential if one follows the sociological viewpoint that presumes that every social activity arises from the social environment in which it happens and/or is described, and that individual actions cannot be interpreted separately from the social context.

Thus, Giovannoni and Becerra argue that behaviors can be considered normal and gain positive or negative connotations depending on the perceptions of a given social environment, and to determine if a action is unacceptable or deviant, one does not look at the conduct itself or the individual performing the behavior, but at the spectator who evaluates the behavior. If one accepts that an abstract conduct is neither right nor wrong, but is so labelled by the observer, it is imperative that, before action in the field of child abuse in India can take place, literature must define the variety of abusive activities and some work must examine observers' impressions and opinions on the extent of different types of child abuse.

TYPES OF CHILD ABUSE

The kinds of abuse that can be found in India can be classified as societal abuse, physical abuse and non-physical abuse. While the Central Children Act precludes child abuse, the parameters of the abuse are not clearly defined and/or operationalized either in this Act or in the definition of child abuse given by NIPCCD.

Sexual Abuse

Child tells you he / she has been sexually abused. Child has symptoms such as:

Hardy walking or lying. Dirty clothing or with sweat. Genital or rectal pain, itching, swelling, redness, or bruise discharge or other genital or rectal injury. In the Near East the sexual use of children is as widespread as it is in the Far East. Historically, all the institutionalized aspects of pedophilia that were prevalent in the Far East are well recorded for the Near East, including child rape, child concubine, boy and girl temple prostitution, parent-child rape (among the Zoroastrians), sibling marriage (very common among Egyptians), sex slavery, ritualized pederasty, and child prostitution. Infant masturbation is said to be necessary to "increase the size" of the penis and older siblings are reported to be playing with the babies' genitals for hours at a time. Also said to be common among children is mutual masturbation, fellatio, and anal intercourse, especially with older boys using younger children as sex objects. In many areas, the nude public baths are particularly eroticized as a place of homosexual acts, both male and female, being particularly notorious.

It is more unfortunate to say that it is evident that among child laborers all the above-mentioned kinds of abuses exist. Social scientists have provided a variety of hypotheses explaining the main motivating forces behind child violence. Explanation of Psychiatric and Cultural Socio. Global cultural interpretation provides reasons for a) non-situational b) global habitability and c) social power. Recently, social scientists have added 3 more types of explanations. 1 explanations of resources, 2 explanations of social interaction and 3 explanations of social learning.

Societal abuse

Societal abuse is those forms of abuse that society, its culture and values, or its tendency to passively accept the existence of a problem, perpetuates. In India, child trafficking, child beggary, child marriage and child labor, both synonymous with violence, are being more widely recognized as violent, as they entail both the abuse of children by adults for personal benefit and the lack of the basic ingredients of childhood growth. While it can be easy to determine and condemn child prostitution, child beggary and child marriage, child labor becomes more nebulous. Is any work a form of exploitation for which a child is paid (either monetarily or in kind)? Is it abusing young domestic servants? Activists in India would claim they are because there is no shortage of unemployed adults who can perform domestic functions, but they would expect higher wages, shorter hours and better benefits. Isn't the young boy or girl in the U.S.A. who is exploiting babysits or mows lawns using this yardstick, then? An person who does the same jobs should deserve higher wages. So it appears that societal abuse is often so much a part

of culture that it is not seen as abusive until an enlightened minority can advocate change visibly and vocally.

Socio-cultural

Explanation says that exploitation of children triggers certain external factors or a socio-demographic component within society. This theory has three major sub-fields: 1 social situation, 2 social housing, and 3 social controls. The rationale for the social condition indicates that harassment and aggression derive from two factors: systemic tension and societal norms. As the social structure in which a parent lives becomes more stress-driven, the possibility of family violence surfacing as an attempt to gain control over irritating, tense events becomes greater.

Additionally, cultural sanctioning of violence as an appropriate technique for conflict resolution provides a basis for the use of corporal punishment in child rearing. If a parent has frequently been exposed as a child to harsh physical punishment, he / she may have a high propensity to view such behavior as normative, and physical force inhibition may be lessened. Many researchers propounded psychological explications of the clinical interpretation. It links factors such as mental illness and personality deficiencies or intra-individual abnormalities to child abuse. It also connects the own childhood memories of violent parents to the low personality growth of the individuals and poor self-control.

The thesis that personality disorder is responsible for child violence was further supported by evidence that offenders frequently had a propensity to behave impulsively and/or antisocially which went beyond the task of prevention. According to this definition, a parent may neglect his / her child with his / her own (parental) expectations due to unmet emotional needs and capabilities, or emotional scars from their own dysfunctional or poor family history that impair their capacity to care for their own offspring. This theory originally gained support from many sectors, including lawmaking and public interest groups, as it focused much of the responsibility for abusive behavior squarely onto the person concerned, and absolved society from guilt for adding to the risk of child violence by lack of employment, sufficient accommodation, family support programmers, work opportunities. Recent research has nevertheless disproved the role of psychopathology in child abuse.

Recently study into the origins of sexual violence has undergone a paradigm shift. The findings of work conducted by the Review Panel on Child Abuse and Neglect at the National Research Council represent the first significant step away from simplistic cause-and-effect models. As researchers have recognized for the panel of the National Research Council, the simple cause-and-effect models have certain limitations, mainly related to their tight focus on the parents. These models restrict themselves by thinking just about the isolated collection of personal traits that may lead parents to harm their children or neglect them. In addition, these models also fail to account for different forms of abuse occurring in a single child. These models, at the same time, had very little explanatory power to weigh the value of various risk factors involved in child abuse. As a result, their prediction of future cases of child abuse was not very accurate.

The panel has adopted what it terms a "ecologic" model, to replace the old static model. This model considers a complex interactive process to be the origin of all forms of child abuse. This ecological model views child abuse within a system of risk and protective factors that interact across four levels: (1) the individual, (2) the family, (3) the community and (4) society. However, some factors are more closely linked to certain forms of abuse than others.

Some parents use violence against their children in social control view, because they have no fear of being hit back. Social interaction explanation approaches the etiology of child abuse with respect to the interplay between individual family and social factors in relation to past and present events. The condition in which children were raised may help to reveal why, given certain setting conditions, some adults are predisposed to abusive behaviors. The philosophy of social learning stresses the learned essence of parenting, and the fact that many parents lack the experience and capacity to carry out the extremely nuanced child-rearing task.

In India, child demand comes primarily from the local population. However, as there are fewer laws against child sexual abuse, India and other South Asian countries are gradually replacing South East Asia as the venue of choice for foreigners, and South Asian children can be bought at more affordable prices. 178 countries including India have rectified and backed the Convention on the Rights of the Child. It gave the NGOs, lawyers, government officials and policy officers no choice but to take all possible measures to ensure that children's rights are protected. There is no need of more pieces of legislation.

Physical Maltreatment

Literature suggests that sexual abuse, benign neglect, failure-to-provide and physical abuse are some of the various forms of physical abuse that can be assessed by children in India and the least controversial, often not. Except where physical abuse of children causes death or disfigurement, individuals sometimes differ on what constitutes violence. This pattern can be found in both countries, as corporal punishment is generally accepted both in the U.S. and in India. The immediate and short-term impact of physical abuse on the child, or the long-term emotional impairment that the child may experience, has been given little attention. In India, parents' right to discipline their children persists, and requires primary prevention measures to focus on alternative ways of socializing children through general public education. Moreover, in the face of such discipline, the focus must be not only on parents but also on observers who condone or remain silent.

Corporal punishment resulting in some form of bruising or disfigurement is banned in nearly all U.S. jurisdictions. In India, human care personnel who are more likely to witness trauma will need to be qualified to recognize non-accidental and unexplained injury trends, and procedures for enforcing the Children Act need to be enabled.

Sexual abuse: The sexual use of children by adults, particularly by parents, has always been considered a very serious matter, not primarily due to the physical or psychological harm inflicted on the child, but due to the violation of a major societal taboo against incest. The extent of the problem in India is unknown, however, popular literature is beginning to indicate that it is

a phenomenon that is far more widespread than is currently recognized. Especially because of the implications for the child's subsequent psychological and moral development, it is up to the Indian social welfare infrastructure to develop a greater awareness of the existence of this problem and its implications for the adjustment of a child.

Benign neglect: Benign neglect is a viable means for families to redistribute meager resources and practice population control, especially in the villages and among the very poor, where resources are scarce and women and/or children with disabilities are a liability. Although certainly not socially sanctioned, it is known to occur and little is done about it other than attempts to educate parents in general terms. That knowledge of the existence of the problem is fairly widespread is evident from data about development rates in various parts of the country. More aggressive educational methods, coupled with tangible assistance, may be the only way to combat this very insidious form of abuse.

Failure to provide: medical incompetence, lack of cleanliness, unsafe living conditions, deprivation of education and lack of oversight can be categorized as failure to perform. Once often concurrent with benign neglect and the lack of medical facilities, medical neglect is gradually addressed as public clinics and public awareness programs reach out to the general population. Continued efforts will help improve children's health as a whole. However, purposeful non-attention to a child's physical pain complaints suggests a pathological relationship between parent and child, and requires a different form of intervention. Cleanliness and living conditions are not just social issues but health issues, and the effect of dirt and poor hygiene on the child's health needs more publicity. As benevolent neglect, nutritional neglect is also the product of deprivation, but unlike the former, it may product more from lack of opportunities and possibly, lack of awareness, than from a propensity to support a young, stable child which is an advantage and an investment rather than a liability. In addition to allocating tangible resources, more nutrition education may be needed. Thus, failure-to-provide is generally referred to as physical neglect and usually includes those behaviors resulting from parents' inability to access or provide resources to meet the basic needs of their children. The 1990 United Nations Children's Summit called on all participating heads of state to recognize the plight of poor children and to pledge additional efforts to address children's health and nutritional needs in their countries.

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companies to provide day care services on-site with 50 or more female employees. However, that does not go far enough to cater for all the people who work in smaller companies.

Non-Physical Injury

Behaviors such as promoting delinquency, maternal social mores, and alcohol / drug misuse by guardians, mental maltreatment and intellectual failure can be classified as non- physical harm. While non-physical maltreatment often receives less attention and media publicity since it is usually chronic, rather than episodic, it often results in antisocial behavior in children who subsequently become psychosocially maladjusted. Such maladjustment may well lead to delinquency and criminal behavior by adults, and may have an impact on the whole society. Fostering delinquency, parental sexual mores and alcohol / drug abuse:

These three types of parental behaviors also constitute non-physical maltreatment and may well be linked by society to concerns regarding morality. While "fostering delinquency" clearly suggests encouragement by parents for the child to engage in antisocial behaviors, deviant parental sexual mores or parental involvement with prostitution suggests abuse to a society where the acknowledgement of sex and/or sexuality is a general taboo. While the infant will not be actively interested or see the parents' actions, therefore the implications of the information itself may be considered far-reaching.

Likewise, the area of alcohol / drug abuse has often been closely linked with morality [disease vs. morality metaphors, and the debate regarding alcoholism as a disease, though dormant now in the West, still periodically raises its head. Therefore, people working with children need to look at their reasons for considering activities abusive and to assess the implications of their value orientations on perceptions and the appropriateness of those perceptions.

Emotional abuse: It has been found that emotional abuse is difficult to document and its occurrence and impact is frequently discussed by U.S. professionals, yet the scarce literature on child abuse in India pays little attention to the effects of emotional abuse on children's subsequent adjustment and shows little awareness of its long-term contributions to delinquent beha. If sexual violence is a tool for manipulating children's behavior, or their non-physical interests are perceived less than significant, one of the antecedents of adult anti-social behavior is neglected by the group. Coupled with developmental initiatives, it is crucial that research connections be made to sensitize parents to the value of mental nurturance for the development of well-adjusted individuals.

Educational neglect: despite calling for at least 80 per cent school attendance at the 1990 United Nations Summit on Children, where the levels of analphabetism are high, educational neglect can not be considered as clearly related to the child's well-being as those conditions which immediately affect the child as in the areas of health, nutrition and physical care. Education is often given a lower priority, even in the US as there are increasing numbers of school-age children working and both parents and children put less emphasis on meeting school expectations. The importance of education in advancing the child's position in life cannot be ignored, and its relevance for the child's future needs to be further recognized by society so that

children can take advantage of better opportunities. Public awareness programs which focus on the importance of education and emphasize follow-up measures are necessary for children who do not attend school. This could be a big undertaking, as 62% of India's children in the 5-9 year age group and 50% of the children in the 10-14 year age group are out of school.

Therefore the forms of abuse to which a child may be subjected in India fall into three categories: societal abuse, physical abuse of the family and non-physical abuse of the family. Since activists in India have begun to discuss social abuse concerns and since child violence by parents and caregivers has only recently become known to the human sector community, this paper illustrates the need for ambitious public awareness campaigns to put the tragedy of parental exploitation of children into people's consciousness, both inside and outside India.

Neglect

Child abuse and neglect may be defined as intentional, non-accidental injury, child malnutrition by parents, caregivers, employers or others, including those presenting government/ non-government bodies that may result in temporary or permanent impairment of their physical, mental, psycho-social development, and death disability. Children, especially infants, are perhaps the most vulnerable victims of crime, owing to their very high dependence on parents. It's a sad fact that children suffer as the hands of parents and their peers and as the hands of strangers to a larger degree. This type of abuse can also be classified as physical neglect, emotional neglect, moral disregard and social neglect.

Emotional abuse

Child emotional abuse can be referred to as a behavioral pattern that impairs a child's emotional development or self-esteem. This may include persistent criticism, threats or dismissal, and retention of affection, encouragement, or guidance. In physical signs emotional abuse is rarely manifested. A few physical indicators of emotional maltreatment are speech disorders, physical developmental delay and failure-to-thrive syndrome. The behavioral characteristics of emotional maltreatment are habitual disorders, conduct neurotic trait disorders of extreme psycho-neurotic reaction behavior (passive, aggressive, rigid reserved, demanding stubbornness), and lag in emotional and intellectual behavior and attempted suicide. Four major causes of emotional abuse are poverty, inadequate parental control and inadequate family relationships, abuse faced by parents in their childhood hood or intergenerational transmission of child maltreatment, and parent alcoholism. A significant proportion of the abusing parents were abused as children themselves.

Emotional - Verbal Abuse

Aggressive behavior, or withdrawn. Shying away from physical parental or adult contact. Feeling afraid to go anywhere.

Physical abuse

Unexplained or repetitive injuries like welts, bruises, or burns. Accidents in the shape of an object (belt buckle, electrical cord, etc.) Accidents which are unlikely to occur given the child's age or skill. Broken bones in a child, for example, are too young to walk or climb. Disagreement between the child's interpretation of the accident and the parent's. Unreasonable rationale for the injury. Obvious child neglect, (dirty, undernourished, inappropriate weather clothing, lack of medical or dental care). A circumstance may be described in which a child experiences substantial harm from an injury caused by the parent or caretaker of the child, or is expected to suffer it. The level of violence among working children is more noticeable than children who usually reside with the parents.

If a child fails to carry out his boss's order, the boss may become angry and beat, burn, fracture, abrasion, etc. Boys are stingier than girls. The other kids are also going to school well beating more. The reports have shown that mothers sexually harm children more than fathers do. Furthermore this study says expressive violence is one in which physical use is an end in itself. Instrumental or power-oriented violence is one in which violence is not only intended as a threat to involve the child in changing behavior, but also to establish parental authority. Child precipitated violence is one in which victims of violence contribute to their own victimization either through thorough action that the aggressor parent defines as deviant or by provoking their antagonism.

Causes of physical abuse

Many social scientists gave various causes of physical abuse. Some view the psycho-pathology of the individual perpetrators as the primary cause factor, others view the psycho-social pathology of family interaction as the main cause, and others place great emphasis on acute stress situations. The situational stresses highlighted four models of dominant causes of the physical abuse of a child 1 relationship between partners 2 relationships between parents and children 3 systemic stress and 4 stress generated by children. Totally it may be claimed that it is not possible to disregard the position of the offenders' personality characteristics but social atmosphere and tension surrounding family circumstances are more important in child battering.

The position of NGOs has almost become a talk template. The rhetoric chosen is that the NGOs are closest to the target groups, and that the role of the NGOs is the most critical and important. It is a way of shifting responsibility from one sector to the next. However, the government cannot shun that responsibility. NGOs can be partners in government efforts, not replacements. There is a need to raise public awareness and sensitivity about these issues that confront us in our work. Child trafficking problem needs to be tackled not just by recovery, but with greater focus on prevention.

There are villages and districts in the back that provide the traffickers with the base. This is where the real problem lies. NGOs working for rural development will concentrate on those vulnerable families who are being pushed willy-nilly to send their children to receive. There are people who make trafficking a waste of money and have witnessed the power of community action in Manila, where the children's parents came out on the streets and demanded justice; and

in Goa, where protests are taking place; Sri Lanka's beach areas, where small community groups are committed to monitoring the problem to protect their own children. The group must rise and join hands, but it's not something that'll be easy to do.

CONCLUSION

Although child abuse is an omnipresent and complex issue with many causes, we should not be taking a defeatist attitude towards its prevention. Despite the lack of strong evidence to guide our preventive efforts, doctors can do a great deal to try to prevent abuse. At the very least, it may help to save our most vulnerable patients from the nightmare of abuse and neglect by showing increased concern for parents or caregivers and increasing our attempts to improve their skills as parents or caregivers. In summary, rape and child sex abuse in India is a big problem without an easy solution. Although the problem continues worldwide, the society of India, which historically holds women below men, makes it shameful to speak about private problems like this, and a biased and poor justice framework when it comes to rape makes the problems even bigger. However, by better teaching children and adults about sexual harassment and training police and enforcing regulations, the condition could be changed. Further empowerment by women could also lead to healthy changes.

It's clear that physicians can't hope to solve the child abuse problem on our own. To prevent child abuse, many things must happen at the international, national, state, and community levels. The doctor concerned with children's welfare should be an advocate for more accessible, affordable, and high-quality child and health care in the local community. Studies have shown that the lowest rate of child homicide is with countries with the most generous social services. Doctors should lobby for more drug and alcohol treatment programs, more homeless shelters, more accessible mental health care and more shelters for abused women and children. These programs and those that provide parenting skills, support groups, and parent and caregiver respite care should be available in every community.

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