# THE JUVENILE JUSTICE ACT AND ITS GROUND REALITIES

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#### **ABSTRACT**

The Juvenile Justice (Care and Protection of Children) Act 2015, despite its well-intentioned and comprehensive framework, faces significant challenges in achieving its stated goals of care, protection, and successful reintegration of children into society. This paper critically examines the on-the-ground implementation of the Act, highlighting major emergent problems that hinder its effectiveness. A pervasive issue is the lack of vocational skills among juveniles exiting the system, which severely impedes their society reintegration into mainstream by limiting opportunities. Furthermore, mental health and substance abuse issues are alarmingly prevalent among juveniles within the system, often left unaddressed due to systemic deficiencies like a shortage of qualified mental health professionals and inadequate staff training in juvenile detention centres. These centres, intended as rehabilitative spaces, frequently fail to provide specialized reformative programs, leading to ill-treatment and further perpetuating mental and physical health issues. Additionally, Childline Services, a crucial component of the juvenile justice framework, is experiencing fundamental operational problems following its transition from NGO partnerships to full government control, particularly concerning funding for transport and awareness campaigns. Drawing on primary data collected through extensive interviews with stakeholders—including members of Child Welfare Committees, Juvenile Justice Boards, social workers, and juveniles themselves—as well as field visits to relevant organisations in a district of Rajasthan, this study provides a pilot analysis of these implementation realities. This research offers practical, cost-effective, and easily implementable solutions derived from consultations with all parties involved in the system. Ultimately, the paper advocates for a paradigm shift in the Act's interpretation, moving beyond mere "care and protection" to encompass "love, growth, and awareness," thereby fostering an environment where juveniles can truly thrive rather than merely survive.

**Keywords:** Juvenile Justice Act, Child Rehabilitation, Mental Health in Juveniles, Vocational Training, Childline Services

#### Introduction

In Lakshmi Kant Pandey V. Union of India (1984)<sup>1</sup>, it was stated in the judgement that children are "supremely important national assets"<sup>2</sup>. To protect such national assets, this juvenile justice system was established with the main aim of reintegrating these children back into society, yet this goal remains unachieved due to many hindrances in implementation and interpretation. The title of the act is Care and Protection of the Children, but in reality, the offshoot on the ground through the Act's implementation has been or resulted in just keeping the child "alive". This interpretation of the act has led to one of the primary goals of the act, 'rehabilitation of the juvenile into society', being sidelined. This paper discusses the real intention of the act, and to achieve this, the paper has given many solutions that could lead to better implementation of the act and higher chances of successful reintegration into society of juveniles.

Primary data was collected through questionnaires and interview with CWC's four members, two social workers of JJB, member of District Child Protection Unit(DCPU), Officer of specialised Adoption Agency, Member of ChildLine Services, Officer Of Juvenile Detention Centre, District Child Psychiatrist, Member of Bachpan Bacho Andolan, Child Counsellors in Juvenile System, Member Of Drug De-addiction Centre, Officer of Labour department, District Child Police Officer and Officer of Human Trafficking Department of a district in Rajasthan. They shed light on the problems faced by juveniles and the changes they would want. Field visits to all organisations connected to the Juvenile Justice Act in a district were conducted to understand the ground reality of implementing the Act. Juveniles (now adults) who previously lived in the Children's home were also interviewed to understand the reality and experience in the system. This research was conducted by interning at a children's home in a district in Rajasthan by one of the Co-writers.

The research has been done as a pilot study to show what are the ground realities of the implementation of the JJ Act. The objective is to encourage a national study on these problems and find common solutions concerning these problems.

In India juvenile justice system began in 1850 with the Apprentices Act. India's juvenile justice system was established; the Indian Penal Code of 1860 set an age limit for juvenile criminal

<sup>&</sup>lt;sup>1</sup> Lakshmi Kant Pandev v Union of India (1984) 2 SCC 244; (1984) 2 SCR 795.

<sup>&</sup>lt;sup>2</sup> PN Bhagwati J, 'Children are a Supremely Important National Asset' in *Lakshmi Kant Pandey v Union of India* (1984) 2 SCC 244; (1984) 2 SCR 795.

culpability, and the 1876 Reformatory Schools Act addressed the treatment and rehabilitation of juvenile delinquents. The Children Act of 1960 established two separate bodies for children needing care and those in conflict with the law, a first for the Union Government; this was followed by the 1986 Juvenile Justice Act mandating their care, protection, treatment, development, and rehabilitation. In 1992, the central government ratified the United Nations Convention on the Rights of the Child (UNCRC) of 1990. Following the convention, Parliament enacted the Juvenile Justice Act 2000. Under the JJ Act 2000, Juvenile Justice boards were established for children in conflict with the law. In 2015, the Juvenile Justice (Care and Protection of Children) Act was brought, which led to a more welfare-oriented approach towards children, connecting it to many juvenile-related laws and organisations. <sup>3</sup>In 2021, Parliament passed the Juvenile Justice (Care and Protection) amendments, which aim to fast-track the adoption process in the country.

In section 2(12) of the Juvenile Justice (Care and Protection of Children) Act 2015, a child or a juvenile refers to "a person who has not completed eighteen years of age". In the Act, a child is divided into two categories: a child in conflict with the law and a child in need of care and protection<sup>4</sup>.

A child in conflict with the law refers to a child who is alleged or found to have committed an offence. They have to be presented before the Juvenile Justice Board (JJB), which comprises a magistrate and two social workers. A child in need of care and protection refers to those juveniles who are abused, exploited, neglected, or without adequate parental care. These children need to be presented before the Child Welfare Committee (CWC), which must comprise three or more members who are social workers. CWC and JJB, while implementing these Acts, shall be guided by the fundamental principles mentioned in section 3, which states the general principle to be followed in the administration of the Act<sup>5</sup>.

The primary goal of the act is not to punish juveniles in conflict with the law but to rehabilitate and reintegrate these children into society by providing them with a second chance. For children in need of care and protection, CWC utilises social control agencies, such as schools and children's homes. These residential facilities assist juveniles in their reintegration into

<sup>&</sup>lt;sup>3</sup> Pranav Chadha, 'Role of Juvenile Justice System in India' (2022) 4 *Indian Journal of Law and Legal* 

<sup>&</sup>lt;sup>4</sup> Vartika Hansaria, 'Juvenile Justice System in India' (2023) 5 Indian Journal of Law and Legal Research 1.

<sup>&</sup>lt;sup>5</sup> Deepshikha Agarwal, 'Juvenile Delinquency in India—Latest Trends and Entailing Amendments in Juvenile Justice Act' (2023) 5(6) *International Journal of Legal Science and Innovation* 

society. The act aims to provide care, protection, treatment, development and rehabilitation to juveniles.

#### **Problems in the JJ Act:**

## The Challenge in Addressing Mental Health and Substance Abuse

Mental Health and Substance abuse are mentioned in the JJ Act 2015, and failure to mitigate these issues results in various problems, from mental issues to committing crimes. The act focuses on well-being, mental health, substance abuse, the role of mental health professionals, mental health and substance abuse treatment, primary assessment, rehabilitation and the privacy of juveniles involved in legal issues<sup>6</sup>. On the ground, various people are tackling these issues, like psychologists, counsellors, caretakers of homes and officers in juvenile detention centres and drug de-addiction centres. Despite that, approximately 70% of the youth involved in the juvenile justice system have at least one diagnosable mental health condition<sup>7</sup>. A psychologist in a district highlighted the gaps in the system that push this high number of children into these situations.

Numerous districts suffer from a shortage of government psychologists and psychiatrists; some districts have only one or two. This puts a lot of burden on homes and juvenile detention centres, where another problem lingers as most of the workforce is unqualified in these issues and does not show that much empathy; they are not taking the recommendations and orders of doctors seriously, which results in the continuation of these issues.

This either delays or hastens the diagnosis of mental health issues such as depression, bipolar disorder, trauma from sexual harassment, parental loss, verbal and physical harassment, and attention-deficit/hyperactivity disorder (ADHD).

On the other hand, identifying substance abuse cases is relatively easy, as withdrawal symptoms are present for most of them. However, the treatment remains a big problem as the same workforce does not take the recommendations and orders of doctors seriously, and this

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<sup>&</sup>lt;sup>6</sup> The Juvenile Justice (Care and Protection of Children) Act 2015, ss 3(ix), 3(x), 15(1), 39, 53(vi), 53(ix).

<sup>&</sup>lt;sup>7</sup> Snehil Gupta and Rajesh Sagar, 'Juvenile Justice System, Juvenile Mental Health, and the Role of MHPs: Challenges and Opportunities' (2020) 42(3) *Indian Journal of Psychological Medicine*.

persists.

A report by the DCPCR (Delhi Commission for the Protection of Children's Rights) on substance abuse by children found that 100 per cent of children in conflict with the law were drug abusers in 2015 (Sharma, 2016). According to officers of juvenile detention centres, the majority of children there are there because of substance abuse, as expensive substances push them into the world of crime. If the problem of substance abuse is not addressed sensitively in homes and juvenile detention centres, this may result in major repercussions for a child.

According to officers in the drug de-addiction centre of a district, legal substances such as alcohol or cigarettes have a higher rate of relapse than illegal substances like marijuana or smack. As these are easily available so more sensitivity is needed in treatment. They also stated the problem of children suffering from inhalant abuse, most commonly through sniffing glue, which is almost impossible for people in homes and detention centres to detect. As per a psychologist in a district, it is even harder for them to easily detect if a child is high on glue fumes. As the quality of de-addiction centres is not up to par, concerning juveniles, both homes and juvenile detention centres try to treat them there.

# Children of the Juvenile System Often Lack Skills

Currently as mentioned in Section 30 (vi)(vii), any child in need of care and protection is sent to a Children home or any child care facility by CWC if such child does not have any capable parent or guardian to take care of him, the child shall live in the child care facilities, and on reaching the age of maturity the child is re-integrated with the society. According to CWC social workers in a district, often the children who are sent to the Children home are either illiterate or have left their education, and as mentioned in Section 53 of the act this leads to a mammoth task for these facilities to teach these children from the beginning, which is possible for younger children as they are at developing age, they can grasp things easily and relatively have a much higher rate of learning but for a child above the age of 14 this is hard to achieve. A child above the age of fourteen who has never studied in his life or has left education at a very early age, being forced to study cannot learn, as fifteen years of education cannot be given to a child in just four years and this leads to child reaching the age of maturity, without any credible education or skill. The purpose of the act fails here, as the child cannot reintegrate into society successfully without an employment opportunity.

#### **Issues in Juvenile Detention Centres**

These Centres act as a rehabilitation place for children in conflict with the law; the main goal of these Centres is not to punish the child but to help them. The officer at the facility expressed that these children are not born offenders; they become offenders because of external pressure, which society sometimes assists in. Currently, the centres are not acting like rehabilitation facilities; these children suffer ill-treatment like criminals, leading to long-lasting mental and physical health issues that make juvenile rehabilitation impossible. <sup>8</sup>

The major reason for a juvenile to commit an offence is, that a child gets addicted to a substance provided by the supplier for free, but eventually, when the child is addicted to the substance, the same supplier will ask for money, as most of these substances are illegal to procure child resorts to crime, numerous times it also includes sexual activities. The child has mental health issues that have not been resolved or have been ignored by the guardians, or the child could be manipulated by someone to commit a crime, as the punishment for crimes is less for children, people use them to commit crimes, and when the child gets free, they again use him to commit the crime. If these issues are not resolved, then the child is more likely to commit the crime again. For example, if the child is not treated for substance abuse, he is more likely to commit the crime again to obtain the substance, and this leads to a vicious cycle that creates a hindrance in the rehabilitation of these children.

#### **New Realities of ChildLine Services**

The primary goal of this organisation is to rescue children in need of care and protection by receiving complaints and presenting the children in front of the CWC within 24 hours of rescue. This organisation started with the Tata Institute of Social Sciences in 1996, and by 1999, it was incorporated by the central government. Eventually, in 2006, it was taken over by the Ministry of Women and Child Development, which created the organisation Childline India Foundation. As per CWC members in a district, the majority of children brought in front of them are through Childline. It worked as a semi-government organisation in partnership with NGOs until recently, when the central government fully took over Childline as a government programme. According to a Childline officer in a district, this shift has created a major problem in the organisation, which is so vital to the JJ Act. Compared to NGOs, where

<sup>&</sup>lt;sup>8</sup>Khyati Saxena, 'Effectiveness of Rehabilitation Programs in Indian Juvenile Centres' (2023) 5 *International Journal of Legal Science and Innovation* 118.

they enjoy certain freedom to act according to children's best interest and the ground reality, under government supervision, this freedom has decreased. The biggest problem is the funds for the transport of the juveniles who called for rescue and campaigning for number 1098 in the area. After the shift of the organisation, the only money they are directly getting is their salary. This means if a juvenile or anybody calls, it is hard for the officers to reach them, as there is no money designated for transport. Most of the children presented in front of CWC by ChildLine services are being transported through their vehicles with a bill attached, which they presume will be paid later. When Childline used to work under NGOs, the same problem used to happen sometimes when the funds did not arrive on time, but the NGOs somehow arranged for the money later to be compensated by the government, and now this can't be expected by the salaried officer of Childline services.

Campaigning for the number 1098 is a major work of the Childline, as this is the only effective way for them to reach out to juveniles and make them aware of their rights and who to call if they are in distress or believe their rights are being violated. They used to campaign in schools in the district and in areas where they believed these campaigns would help. As per the officer, from the time they came under the government directly, they could not campaign, which would eventually result in people, especially children, forgetting the number to contact. The whole job of Childline Services is to educate juveniles and other people about the rights of children and rescue them when they are in distress. Both these objectives are almost impossible to complete when an organisation is taken out of the control of NGOs and under a government without the rules and guidelines set in place.

#### **Solutions:**

#### **Mental Health and Substance Abuse Problems:**

## **Changes Required in the System**

Solutions to these problems were recommended by a psychologist in a district who is consulted by CWC and JJB. A major solution in their view is to hire qualified people who are educated in these fields so they can address the problem of mental health and substance abuse. This could help the psychologist in treating the juveniles in the system, as right now, they do not take the recommendations and orders of doctors seriously and seem to work against the doctors rather than as a team. They also accentuated stress by taking the Emotional Intelligence Test (EQ

Test) before hiring people in this system, as this will add more people who can empathise with these juveniles, rather than ignoring their problems.

#### Love

Changing these hiring criteria can drastically negate the problem of a shortage of mental health doctors in the district, as annual training seminars and weekly visits of these doctors in homes and juvenile detention centres happening right now will be enough to curb the problem with the staff of these qualifications. JJ Act 2015 provides two words as the intention of the act, for the juveniles: 'Care and Protection'. But a major solution for most mental health issues and substance abuse is providing them with 'Love'. According to psychologists, mental health problems like depression, bipolar disease, emotional trauma, etc, can be treated through love, to make juveniles believe there is someone there for them. The deficiency of love in their life has created most of these mental health issues, and this could be the most natural way to bring them to normalcy. Even substance abuse in most juvenile cases is because either they are suffering from mental health issues and want to get out of it, or their primary caretakers, like parents or guardians, do not provide them with the same security of love, care and protection. The addition of the word love would expand the intention of the Act to provide good lives to juveniles in the system.

#### **Introducing Skill Program for Children:**

CWC social workers suggested a solution to this problem, that to give children above the age of 14 the option to learn a vocational skill with primary education rather than forcing them to pursue higher education<sup>9</sup>. Vocational skills refer to skills that will help in employment or making a living, for example, bakery, plumbing, tailoring, mechanics, carpentry, bricklaying, agriculture, and embroidery are among other skills. The primary goal of this program would be to reintegrate the children into society by teaching them skills that might help them in the real world. This would help them find employment more easily after the age of eighteen, when they graduate from the juvenile justice system. Learning vocational skills will not be compulsory, but an option for the children; those who want to study can continue to do so. The vocational skill training will be a certificate-based program, so children can provide proof of qualification for employment. Entrepreneurship programmes should be held to develop the confidence and

<sup>&</sup>lt;sup>9</sup> Vocational Education and Training for Young Offenders in Juvenile Approved Schools, Nazirah Hassan & Muhammad Amirul Aidil Rosly.

communication skills of children to open their businesses, for which the government assists after the child leaves these institutes. Organising these types of vocational skill-oriented programmes might be expensive for the government, so these programs should be connected to skill development programs under the government, like Jan Shikshan Sansthan, a semi-government program that aims to provide vocational training to non-literates or neo-literates and school dropouts in rural regions by identifying skills that have a relevant market in that region.

#### **Changes required in the Juvenile Detention Centre:**

The officer also expressed that when these children go out in society and they do not have the necessary education or skills to earn a living, they resort to illegal activities to survive, which leads to failure of the act, as the purpose of rehabilitation is not achieved. Mehta S. (2017) stated that rehabilitation is a slow and subtle process that begins when an offender is convicted and continues until he or she is reintegrated into society. To achieve rehabilitation, we must solve each problem individually: the solution to substance abuse has already been tackled above but to add it must focus not only on substance abuse but also the scars, that substance leaves behind, in the centre if we can succeed in getting the child de-addicted we must also ensure that the child does not fall prey to it again after his release from the centre this can be achieved through making the child's guardian or the Homes more vigilant, making sure the child does not go back to the company of the people who got him addicted to the substance at the first place and the child understands the consequence of consuming the substance again; juveniles mental issues problem has also been discussed above but to add the psychologist and psychiatrist should make sure that after child's release from the centre, there is a regular check-up of the child for few months and if needed the psychologist observes that the guardian cannot take care of the child, he can suggest this to CWC; and one thing that must the is he focused every child in centre the vocational skills on as proven above children above the age of 14 should be provided with the vocational training so they can earn a living and they will not have to resolve to illegal means to survive, here JSS must be connected with the Centre to provide these children with expert education and training, in numerous Centres bakery have been opened to teach children the skill and make them have some outside interaction. These practices and solutions might lead to the increased rehabilitation of child offenders.

#### **ChildLine Services: Giving Them the Same Flexibility That They Had Before:**

Solutions to these problems were recommended by an officer of Childline Services of a district, who stated that the previous funding system, when Childline Services were under NGOs, could be used. NGOs that previously ran Childline services were provided with the funds beforehand, and a large chunk of it was supposed to be used for campaigning. They were instructed as to how to use the funds, which included the salary, insurance of officers and transport money. These NGOs submitted a utilising certificate at the end of the financial year to prove that the spending was as per the guidelines. A head of one of these NGOs stated that the money was often not provided on time, and they used to manage till it came, but the same cannot be continued now, as officers of Childline Services do not have the same resources as NGOs. Any other method can also be used, but the essential service to the JJ Act, like Childline Services, should be allowed to function properly for the betterment of juveniles.

#### **Conclusion:**

One of the most fundamental responsibilities of any government extends beyond merely enacting well-intentioned and fair laws; it critically includes ensuring their effective and equitable implementation on the ground. As this paper has meticulously discussed, the overarching purpose of the Juvenile Justice (Care and Protection of Children) Act 2015—to facilitate the successful rehabilitation and reintegration of children within the juvenile justice system into mainstream society—is demonstrably not being achieved in reality. Despite the Act's high standards and comprehensive aspirations, its implementation is severely hampered by various on-the-ground realities and systemic hindrances.

The multiple obstacles highlighted in this study demand immediate and focused attention. Foremost among these is the critical absence of adequate vocational skill training for children exiting the system. This lack of practical, employment-oriented skills constitutes a fundamental barrier to their successful reintegration, as it directly impacts their ability to secure gainful employment and live independently post-release. Furthermore, the pervasive issues of mental health and substance abuse among juveniles in the system are often left unaddressed, exacerbating their vulnerabilities and increasing recidivism rates. Our research underscores that with increased awareness, empathy, and crucially, the integration of 'love' and compassionate care, genuine rehabilitation for these complex challenges can indeed become a tangible possibility.

The current functioning of Juvenile Detention Centres, intended as places of reform and improvement rather than punitive incarceration, also falls short of the Act's foundational intent. Transforming these centres into true rehabilitative environments, complete with specialized programs and professionally trained staff, is paramount to fostering positive outcomes for children in conflict with the law. Finally, the operational challenges faced by Childline Services following their shift to full government control—particularly concerning funding for essential transport and vital awareness campaigns—are severely impeding their ability to rescue and protect children in distress. Ensuring Childline's operational autonomy and adequate, consistent funding is critical to upholding its pivotal role in the juvenile justice ecosystem.

Therefore, one of the most significant overarching suggestions emanating from this research is to explicitly incorporate the concepts of 'love, growth, and awareness' alongside 'care and protection' within the very language and spirit of the Juvenile Justice Act. This seemingly subtle yet profound semantic shift would send a clear, unequivocal message to all stakeholders on the ground: the Act's interpretation must evolve beyond merely ensuring a child's survival to actively fostering an environment where every child within the system has the opportunity to truly thrive. By addressing these identified implementation gaps with pragmatic, stakeholder-informed solutions, India's juvenile justice system can move closer to fulfilling its noble ambition of safeguarding its "supremely important national assets" and facilitating their meaningful return to society.