



Child Protection Centers and Services

YEARLY REPORT – 2017

Our Achievements with your Help

Forword



After a dazzling year of moving to our new location in Godawari, extreme rainfall during the monsoon and restless election times, CPCS has been able to expand its operations.

Due to new guidelines from the Nepalese government, the street work was made more complicated and negotiations had to be held with the stakeholders to clarify fieldwork and the approach of the beneficiaries. Extensive solutions were sought during a seminar with local field workers working in communities throughout Nepal. Child Protection Rights were overlooked because of the unrest during the elections and clear agreements had to be made with those new responsible in communities and official stakeholders. We sat around the table with official delegations, social street workers, and teachers and discussed how to tackle current problems.

Libraries and educational rooms were set up in the Regional Centers and the partner organizations in Dolakha, Sindhuli, Morang and Godawari. Plans were made to set up FCCs in regional centers (FCC stands for Family Care Center). For CPCS it is extremely important to be in close contact with the beneficiaries and to listen to the needs of the communities. A properly supported community automatically becomes a child-friendly community. It is important to support families so that their children can go to school and receive proper care at home. This means that children don't run away from impossible and harsh situations and can stay at home instead of having a life of danger and abuse in the streets of the big cities or disappear in so-called orphanages. CPCS tries to achieve this through educational, medical, legal and psychological support.

During the terrible floods in July and August this year, the importance of regional centres has been proven. People whose homes and belongings were washed away by the flooding rivers found shelter, care and safety in the regional centre in Morang. In Asia millions of people lost their loved ones and their homes during the extreme monsoon rains. Yet this was hardly in the media and emergency funds were not released. Despite the difficult financial situation, CPCS managed to deliver relief supplies to the unfortunate.

The monsoon also caused landslides and mudflows in the Himalayas. In Dolakha the mud flowed through the centre several times and extra support walls had to be built to protect the children, buildings and livestock.

The CPCS team is proud to announce that Jean-Christophe Ryckmans, director and founder of CPCS, received the honorary title of Commander of the Order of the Crown by His Majesty King Philippe of Belgium. This distinction honours his commitment and achievements over more than 15 years. He received this reward from the hands of His Majesty the King on November 14 in Belgium. We are all proud and happy with this recognition.

Meanwhile, we are installed at the new locations in Godawari and we are back in full action! The ultimate goal is to bring children back to their family and their communities in the context of deinstitutionalisation. By standing close to local communities and supporting children in their community, we want to prevent children from entering the streets of the big cities.

For those children living on the streets, CPCS remains the safe beacon where medical, legal and psychosocial services are available, but especially friendship and respect are of high value.

The CPCS team looks forward to further positive cooperation with its partners, stakeholders and beneficiaries. We would like to thank you all sincerely for making this possible.

.....
Inge Bracke
Country Representative Nepal



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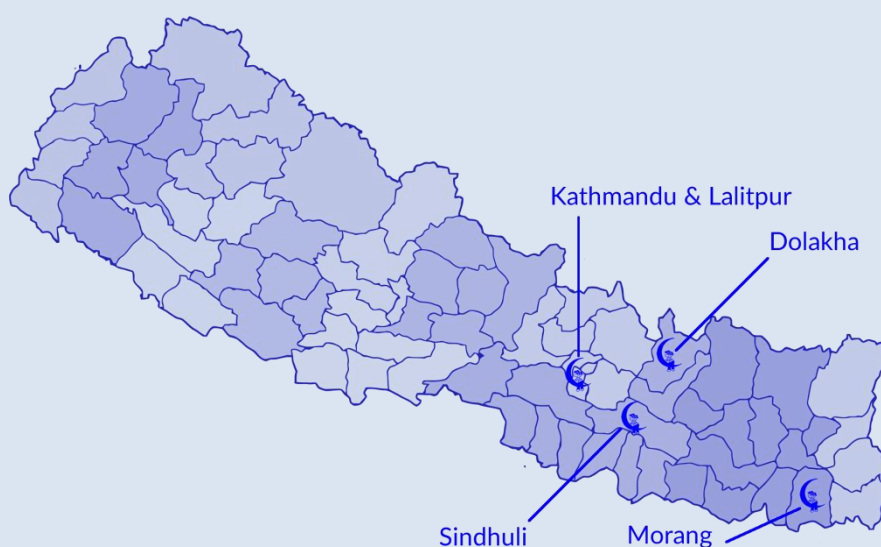
INTRODUCTION

CPCS works on the protection of street-based children and children at risk in Nepal since 2002. Numerous reasons lead children to the street : peer pressure, media influence, natural disaster, family break-up, poverty, family violence, dream of a well paying job or access to free education, dream of easier life in a city.... Children migrate from their hometown or village to Nepal's big cities. Once there, they generally end up in the street where they have to face multiple dangers : drugs, abuses, crimes, hatred, exploitation, discrimination, intimidation, illegal detention and STDs.

We run programs at 3 levels

- **Prevention** (*prior to and during the street life*): a set of interventions focused on
 - ✓ Preventing and avoiding the arrival of the child in the street.
 - ✓ Raising awareness among the public, families, and authorities, children themselves about the realities of street life (its causes, dangers, aspects and consequences).
- **Risk Reduction** (*during life in the street*): a short-term perspective focusing on immediate reduction of the dangers of street life.
- **Social Rehabilitation** (*after life in the street*): a mid-term perspective focusing on progressive reintegration of the child into society.

78 (Part time and regular) Staffs work in our centers and programs: **1 Risk Reduction Center, 1 Rehabilitation Centers and 13 CLASS Centers** (*CPCS Local Action Support and Services*) in Kathmandu valley. **20 other CLASS centers** in **3 other districts**: **Dolakha** in the north of central region, **Morang and Sindhuli** in South of Eastern region, nearby India.



Around **2100 children receive daily support** through our activities. **100 to 200** children are supported by our Socialization and Rehabilitation Centers. **1391** children receive **full scholarship** through our Prevention programs. **3751** medical consultations were provided. **79** youths or children received Legal support and up to **8200** children, youth and their family members were followed and helped by CPCS International in 2017.



In 2017 : Activites and Beneficiaries : 15810 daily CLASS sessions for 1391 kids / 1022 Health sessions for 37175 children (cumulative) / 756 parent meetings for 21659 parents / 7812 family visits / 3751 Medical cases / 1038 cases referred to a local Health Post / 312 cases sent to general hospitals (or our clinic) in Kathmandu

OUR MISSION

CPCS aims to work for a society where all children are respected, valued and protected. Our mission is to deliver basic services (medical, legal, psychological, educational, etc.), in order to bring immediate improvement to street-based children and children at risks.

Our objectives

- To develop services directly on the street to offer protection to street-based children and reduce the risks they are exposed to.
- To develop services allowing street-based children to take a step forward toward their reintegration into society and into their family.
- To develop prevention programs to prevent more children from coming to the street. (community-based support, parents group, awareness)
- To take on the children's problems with understanding and respect, considering them not as victims or delinquents but like human beings with diverse skills.
- To be a bridge between the street and society.
- To reduce risks that the children face when they are in the street.
- To give the street based children basic education, attention and support.
- To protect the children's fundamental rights.
- To raise awareness on street-based children's situation in Nepal and abroad.
- To give the children access to healthcare and hygiene services.
- To reintegrate the children in their community, and reunite them with their families. (through a reintegration process / progressive reunification)
- To reduce and progressively abolish all forms of child exploitation.
- To fight against some of the worst forms of child labor.
- To mobilize communities, organizations, institutions, and families to better meet the children's needs.
- To contribute enforcing the Child Act (1992) and the Child Rights Convention.
- Promoting Deinstitutionalisation and ensure community and family-based care for every child.

Special thanks to all our partners for their support.

The American Himalayan Foundation (AHF) – USA / L'Association des Amis de Soeur Emmanuelle - Belgium, / Dynamo International – Belgium, / The Nick Simons Foundation – USA, / SOS Enfants Abandonnés – Belgium, / La Fondation Vieujant – Belgium / Kinderleven-Vie d'Enfant ASBL – Belgium, / La chaîne de l'espoir – France / CPCS-France & CPCSTAN (Cannes) / CPCS-Belgium / The Rotary Clubs of Durbuy (Belgium) and Brussels (Belgium) / La communauté de la resurrection – Belgium / Caritas International Belgium / L'INDSE de Bastogne – Belgium / Kids in need – Nepal / De Brug – Belgium / The Van Dijk Family and friends / Ingrid Berger and the Davidsen Family / PPOT (Belgium NPO) / Eric Van Cangh and his family / Mr Duez



OUR RECENT ACTIVITIES

Moving and shifting from Dillibazar to Godawari

CPCS was established in Dillibazar since 12 years. Due to the sale of the house and its associated compound, CPCS had to move. CPCS decided to move to Godawari where the NGO already owned land. There was a simple building on the land where renovations had to be carried out for the Drop In Center for boys. In addition, 2 buildings and a groundfloor were rented. Godawari is 9 Kilometres from the Ring Road. It is a peaceful and green setting surrounded by green lush hills. Godawari has historical value and is in development. The activities of CPCS are now divided into 3 buildings and a lower floor in Godawari.



The CPCS International office building

The Administration, Accounting department and Prevention are under one roof in the CPCS International building. All administrative tasks and monitoring with the partner NGOs and coordination with government bodies are carried out here. The heads of departments centralize the decisions; all meetings are held with the staff of the various centres and all beneficiaries. CPCS keeps a “missing and lost child”- data bank up to date in the administrative building.

The Recovery Center

The Recovery Center is housed in the second building. This Center plays an important role in the operation of CPCS. As the name of the Center says, children get medical care and can recover from diseases. The children get a balanced diet. Trained and paramedical personnel follow the guidelines of the hospital. The coordination of fieldwork and emergency work is carried out together with the legal and psychosocial service. Next to the Recovery Center a lower floor was rented where the legal department and the psychological department are housed. The Legal Support office provides all legal aspects such as prison visit, legal awareness class for property rights, birth certificate, identity card, and evidence of death in case of accident.

The psychosocial team gives individual and group sessions to children who suffer from trauma and psychological problems. Telling their problems is an important step in the rehabilitation process.

Some school-going youth have their room where they can study in peace. They also help with work for the little ones in the DIC with dance, art and sports classes or help in the kitchen when preparing meals.



The DIC (Drop In Center) Center

In cooperation with police corps 104 (missing and found children) and the CCWB (Central Child Welfare Board) children can stay in the rehabilitation and socializing program in the DIC building. Children at risk and street-based children receive short-term care. The reunification team checks out if the child can return to his family or village community. Otherwise, alternative solutions are sought. The DIC building is the NGO's property. There is also room to stock material in case of natural disasters or scarcity of basic resources. Sanitation, a new roof and windows, electricity and plumbing, there was a lot of renovation work done to make this building liveable and safe for children.

OUR ACHIEVEMENTS

CLASS & PREVENTION PROGRAMS

Following CLASS centers are running in Different partner Organization:

- 5 in Morang District for 221 children
- 13 in Kathmandu District for 366 children
- 10 in Dolakha District for 585 children (5 ECD)
- 5 in Sindhuli District for 219 children

In total, 1391 children receive full scholarship through our **33** CLASS - Prevention programs. **221** Children in ORCHID , **366** in CPCS Kathmandu, **219** in CRPC Centers in Sindhuli district. **585** children in CPCR Dolakha in total in year 2017.

CLASS Activities

- Awareness on Child Rights, Health & Hygiene, Earthquake, street risks, sexual abuse, scholarship.
- Distribution of bags and stationeries, dresses ...
- Health & medical checkups, Home work check up, Information on culture & religion, dancing, drawing, singing, English writing, storytelling, cleaning, art & craft, sports, games, visits, picnics, celebrations (new year, religious: Holi...), competitions (singing, dancing, carumboard, sports, ...)
- Parents and teachers meeting on safety matters, children admission, studies, progress, regularity, complains about teachers

EMERGENCY LINE

131 calls treated by the emergency line: **33** for medical assistance, **1** other, and **95** information calls received this first semester. “**National Centre for Children at Risk**” referred **86** children to our DIC through the line.

MEDICAL SUPPORT PROGRAM

- **1301** cases of assistance during the First Aid (day & night) patrols of our medical teams.
- **2663** medical consultations, **2671** cases were admitted in our recovery centers clinics.
- In average, **5 children are treated daily** in our recovery centers.

- **187** cases were referred to various hospitals for further checkup.
- **15** children were admitted in hospitals for **123** stay days.

SCHOOLING PROGRAM

- **6** children enrolled in schools through our residential schooling programs.

COUNSELING SERVICES

- CPCS psychosocial counselors gave individual counseling for **163** cases and group counseling for **139** cases.
- **34** cases were linked to physical and moral abuses.
- General Awareness class **150** Awareness session with team **29**.

LEGAL SUPPORT PROGRAM (LSP)

- **59** youths or children benefited from legal assistance after they were taken into custody. **25** were released after our intervention.
- **35** Jails and **64** Custodies visits
- **35** Meetings with Police
- **494** children attending CLASS Programs on legal matters and **8** Awareness Programs conducted with Public

REHABILITATION AND DIC PROGRAMS

- **108** new children enrolled in CPCS Rehabilitation program.
- **86** children were referred by Central Child Welfare Board (CCWB) and Center for Children at Risk (104), **22** joined us directly.
- **21** children referred from CPCS Center to our partner organization.
- **30** children were reunified with their family from different centers and programs, but **32** boys and girls ran away from the centers.

YOUTHS PROGRAM

- **16** children were referred to other organizations for training and further support. **2** youth job placement.
- **2** boys completed SLC (Secondary Level Certification).

25 Programs & Actions planned in 2018

1. Socialization Centers facilities for 30 to 50 children daily.
2. Informal Education Service: working and meeting on the street with 20 to 50 children and youths daily.
3. Other Field Activities covering more than 20 areas in 8 districts. (Mainly around Morang, Sindhuli, Dolakha, Kathmandu and Lalitpur districts) (4000 to 5000 beneficiaries each month)
4. Emergency line 24 hours in Katmandu and focusing on street based children and youth.
5. Recovery Center & medical care for 50 to 70 children, youths and street adults monthly.
6. Counseling & Psychological support for 200 to 300 children monthly. (mainly in Dolakha and Kathmandu offices)
7. Research on various issues (abuse, drugs, livelihood and other risk issues.)
8. Daily Game and activities for 1500 to 1800 children.
9. Cultural Activities for 1500 to 1800 children daily. (including CLASS programs)
10. Youth Empowerment Programs for 20-40 street youths.
11. Family visits and reunification for 10-15 children monthly.
12. Schooling Support for 1524 children. (Through “CLASS” program or other programs)
13. Public awareness campaigns.
14. Socialization-alphabetization classes for 1600-1800 children daily.
15. Creating international awareness about children’s rights and the street-based children’s situation.
16. Local networking and international partnerships.
17. Rehabilitation process for 30-50 children and youths yearly.
18. Hygiene - clothes distribution for 1200 to 1600 children.
19. 10 to 20 safety lockers for working street-based children. (Street bank).
20. Leisure activities as picnics, camps or games in the open.
21. Kitchen club - feeding 100 to 200 children daily. (+ snacks for 1500)
22. Raising children’s self-esteem and awareness about children’s rights, fundamental rights and national law.
23. Children library and literacy classes for 1500-1800 children daily.
24. Child social Rehabilitation process. Individual interventions for children and youths.
25. Child rights protection programs – security, legal help and court actions.



PREVENTION SERVICES

Introduction

In 2007, CPCS set up **Prevention programs** and **Awareness activities** for children and families outside and inside of the Kathmandu valley in order to prevent the arrival of children to the streets. We developed different programs focused on families, community and children “at risk”.

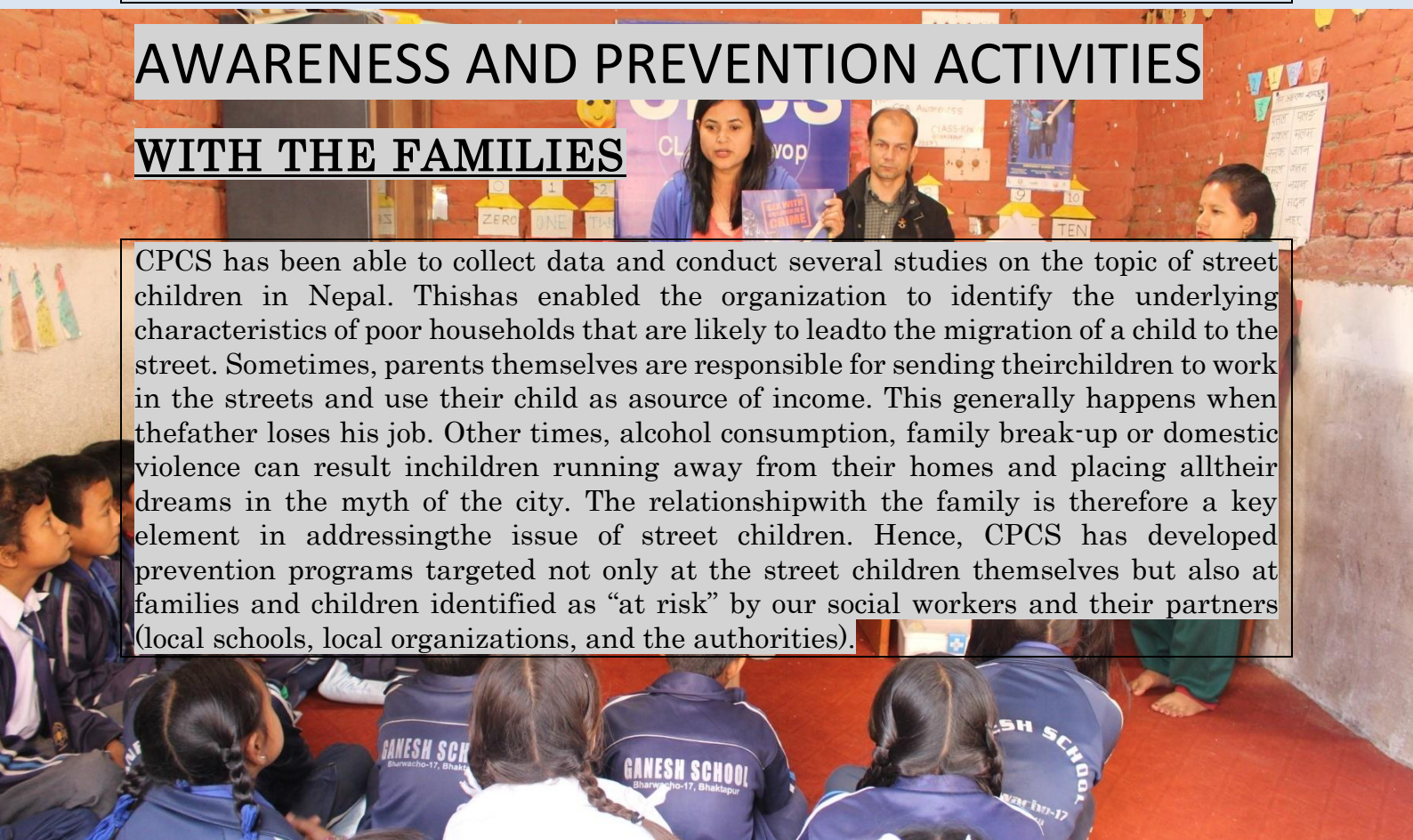
Launched in 2003, **CLASS** (*CPCS Local Action and Support Services*) is a prevention program focused on different realities of the street and working directly on their foundations: village problems, domestic violence, social exclusion, consumption of alcohol or drugs, absence of family planning, etc. The precise aim of CLASS is to address the multiple problems and risks met by children in certain cities in Nepal where the phenomenon is triggered. Children are at a risk of being victims of domestic violence, social exclusion, drug abuse or lack of family planning. Combinations of those causes push children to escape from their village to seek refuge elsewhere. That is why CPCS want to stop the flow of children at the source and reduce their number by encouraging and sustaining their education.

Through the **CLASS** Program, we support children, in their home place, for schooling and scholarship; we enhance their parent's awareness on their right to education, on the importance to attend school, on the risks associated with school dropout and on the dangers of the streets.

Most of our prevention services are supported by La Chaine de l'Espoir – France. The Belgian Organisation PPOT supports 2 centers. Les amis de Sœur Emmanuelle also supports some activities in Dolakha.

AWARENESS AND PREVENTION ACTIVITIES WITH THE FAMILIES

CPCS has been able to collect data and conduct several studies on the topic of street children in Nepal. This has enabled the organization to identify the underlying characteristics of poor households that are likely to lead to the migration of a child to the street. Sometimes, parents themselves are responsible for sending their children to work in the streets and use their child as a source of income. This generally happens when the father loses his job. Other times, alcohol consumption, family break-up or domestic violence can result in children running away from their homes and placing all their dreams in the myth of the city. The relationship with the family is therefore a key element in addressing the issue of street children. Hence, CPCS has developed prevention programs targeted not only at the street children themselves but also at families and children identified as “at risk” by our social workers and their partners (local schools, local organizations, and the authorities).





WITH THE CHILDREN “AT RISK”

CPCS educators also involve with children “at risk” in the villages by organizing activities in the local schools. These awareness-raising sessions cover the dangers of the street (drugs, diseases and abuses of all kinds), the rights and duties of parents and children, domestic violence, hygiene, health, the use of illicit substances. Without knowledge of their rights and these risks, the child is an easy prey for a predator.

WITH THE STREET CHILDREN

In Nepal, about 65% of the children who arrive on the street usually stay there. This is why our educators organize regular information sessions in the street to inform the children about the various forms of abuse that street children might be exposed to, i.e. AIDS, drugs, and sexual exploitation. By doing this, we try to make them better prepared to face the dangers. Children in the street and the ones attending our shelters participate in awareness-raising sessions. Without knowledge of these risks, the child is a designated victim. For example, CPCS has launched a campaign on HIV/AIDS, the risks of clandestine sexual intercourse, and the consumption of drugs. We deal with these topics by using posters and other materials, which facilitates communication with the children.

WITH THE PUBLIC

Many different stakeholders interact with street children in Nepal, including the general public, security forces, shopkeepers, tourist professionals, tourists and schools. CPCS considers that the issue of street children should not only be tackled at the children and their families' level, but also at the level of these other stakeholders. The image of street-based children amongst the public is generally quite negative. Because they wear dirty clothes, use bad language and deny most social norms, they are considered social parasites, young criminals and drug addicts. Children often feel that they have no other choice but to live outside society and reject most of its rules. They form a parallel society with its own codes, its own language and its own rituals, which often include consumption of illicit substances. This leads to a vicious circle: society rejects street children because they are non-social and children are non-social because society rejects them. By working on the public's perception of street children, CPCS tries to break this vicious circle. CPCS believes that "the greater the public's participation, the greater the chances that children reintegrate society smoothly." In addition to information sessions, held in order to raise the public's awareness, our team organizes street dramas and produces short movies. These tools inform the locals on how children are surviving in the street. Street drama enables them to express their experiences freely and reduces the distance with the public. CPCS has also produced two movies, "Beli 1" (2008) and "Beli 2" (2009) featuring Nepali street children in their everyday life situation. The actors are both CPCS children and professional actors. This awareness tool's purpose is to awake the Nepalese population to the reality of the street and give it keys to understanding. Lastly, we have adopted a specific policy with regard to the right to one's image. We do not allow people from the outside to use the pictures taken at CPCS as they wish. CPCS prohibits the use of denigrating pictures of street children and the publication of pictures of children's faces without their consent. By doing this, we intend to respect the rights of the child and set an example for others to follow.

WITH THE AUTHORITIES

The police can also be a partner in the fight that CPCS is leading. Firstly, police officers who are badly informed about children's rights and street children's living conditions might behave unlawfully towards children and notably use violence against them. By informing the police, we can expect a better understanding and a more humane attitude. Secondly, working in collaboration with the police on the problems of the street is a key to our work. Our objective is to calm tensions between the police and the children. Today, thanks to a good relationship with CPCS, the police prefer to contact our hotline rather than incarcerate children in the case of offences. On our side, we try to explain to the child that certain behaviors are harmful to their image and make it necessary for the police to intervene.

WITH THE SCHOOLS

CPCS organizes street dramas on children's rights, sexual abuse of children, family violence, education and other abuses. These street dramas are performed in various schools in Kathmandu and in other parts of the country too. Parents, teachers, community people, civil service employees and students are the target audience.

CPCS LOCAL ACTION AND SUPPORT SERVICES (CLASS)

CPCS believes that prevention programs should also be conducted outside of the valley to address the issue of streetchildren at its source. Our CLASS program aims to raise awareness among ordinary people and stakeholders outside and inside the Kathmandu valley area.

Through the CLASS program, CPCS conducts prevention programs in 33 centers and schools, in Kathmandu valley and in other districts. These places were selected after a study showing that they were the ones from which the majority of street children come from, notably because major roads pass by these towns.

CPCS provides financial support to the family for school related expenses (*monthly fees, exam fees, uniforms, books, stationary etc...*), support to the child (*which he/she usually do not get at home due to illiteracy and lack of education in his/her family*).

The LSA also works as a social counselor trying to install or re-install, through dialogue, a better communication between the family members.

Altogether 2945 parents, teachers and children benefit from our CLASS Programs. 4 offices, National and Regional deliver CPCS support to the children through 33 local centers and 84 staffs.

During first semester, in the 33 centers, about 3800 daily CLASS activities and 288 Awareness activities were held.





National Office Godawari, Lalitpur

18 regular staffs and 15 part time staffs work for the office in various programs: *CLASS, “Drop In Center” (DIC), rehabilitation center, legal and medical support, counseling, field services, youth empowerment, school support, residential school support and education support for families*. 6boys attend school through the residential program. 366 children are in a CLASS programs. Daily we work with 10-20 children for medical checkup, hospitalization, general medication and first aid. 20 to 40 children live in the Drop In Center Godawari.

Regional Office (Dolakha)

Dolakha is one of the most affected districts of the 2015 earthquakes.

21 staffs (full time and part time) work *daily* in the 10 CLASS and 6 ECD ([Early Child Development](#)) programs. 585 children, living with their families, attend schools, ECDs and CLASS programs.

Since August 2016, CPRC has an ambulance (*funded by several Rotaries Clubs*) to provide extended services through its Medical support program (*with authorization of Nepal Government’s Ministry of Health and Population*).

10 CLASS and 5 ECD Centers, for 585 children, running regular in regional office Dolakha.

All centers (*Mati, Lapilang, Kshamawati, Deurali, Bhedikhor, Lamanagi, Kutidanda, Dolakha, Charikot, Tikhatal*) are located in Bhimeshwor Municipality and surrounding Rural Municipality. 6 schools have now their own ECD ([Early Child Development](#)) Centers, for 63 children, supported by our programs (*shree kalinchowk higher Secondary school, Shree Mahendrodya Secondary, Lapilang Higher secondary Raj Kuleshwor lower Secondary and shree Buddha Primary*). Those ECD Centers were opened in April 2016 with some of the new CLASS programs. The Programs of Charikot and Dolakha established in 2007 have started their ECD Support in 2016.





Running CLASS Centers in regional Dolakha

School	Address	CENTER	Children	ECD Children
Shree Mahendrodya Sec. School	Mati, Dolakha	Mati	50	15
Shree Lapilang Secondary School	Lapilang, Dolakha	Lapilang	50	14
Shree Kutidanda H Sec School	Bhimeswar, Dolakha	Kutidanda	55	0
Shree Kshamawati H Sec School	Kshamawati, Dolakha	Kshamawati	53	0
Shree Buddha Primary School	Kshamawati, Dolakha	Deurali	11	11
Shree Lamanagi L S School	Kshamawati, Dolakha	Lamanagi	130	24
Shree Bhumeswari Primary School	Kshamawati, Dolakha	Bhedikhor	27	0
Charikot CLASS Center	Bhimeswar, Dolakha	Charikot	47	0
Shree Tikhatal Basic School	Bhimeswar, Dolakha	Tikhatal	27	11
Shree Rajkuleswar Basic School	Bhimeswar, Dolakha	Dolakha	49	11



Regional Office (Morang)

Morang is high dense district connected to Indian boarder. (affected by the 2017 flooding)

It is located in Morang district adjoining the district Sunsari (*2 highly populated districts*), at 20 kilometers from Indian boarder. It is used mainly during reunification processes and links with the families living in the district (221 children supported). A small medical corner (*part of our CLASS programs*) provides check up and care as well as it provides services to the schooling children and their parents. The center runs also daily CLASS programs. Parents also attend a monthly awareness meeting in the center.

8 staffs work daily with **221** children in 5 **CLASS Programs** and **2 RSS** in the Rehabilitation Center.

ORCHID (Organization for Child Development) was registered in Morang's District Administration office in 2015 as a local NGO working for and with children at risk in the District.



All the children (*from underprivileged families*) are supported for their education in 8 government schools (*school and extra-class CLASS activities: Bhagwati Secondary, Mahendra Secondary, Kabir Secondary, Janata Secondary, Devi Secondary, Swasthani Primary, Janasewa from Belbari Municipality, Koshi Haraicha Municipality, Bayarban VDC*). 100 Children from “Kabir Higher Secondary School” attend daily CLASS activities in the regional office. **From April 2017 we closed the 3 CLASS Centers according to lack of found (CLASS Dhanpal, CLASS Jhapa, CLASS Birtamod)**

Running CLASS and RSS Centers for 221 children in regional office Morang.

School	Address	CENTER	Children
Shree Mahendra Secondary School	Koshi Haraincha- 6, Morang	KOSHI HARAINCHA	25
Shree Janasewa Secondary School	Bayarban - 8, Morang	BAYARBAN	25
Shree Bhagawati Secondary School	Belbari - 3, Morang	BELBARI	25
Shree Janata Secondary School	Itahari - 8, Sunsari	ITAHARI	25
Shree Kawir Secondary School	Belbari- 4, Morang	LALBHITTI	100
Shree Devi Secondary School	Birtamod – Jhapa	RSS	11
Shree Janata Secondary School	Surunga – Jhapa	RSS	10



Regional Office (Sindhuli)

Sindhuli is a mid-hill district at the junction of the main highway to Indian boarder and East way highway.

It is located in heart of Sindhuli city. *It* is used for the reunification process and links with the families living in the district. A small medical corner provides check up and can cure children as well as it provides services to the children at risks.

8 staffs work daily in **5** CLASS programs and 2 RSS with **219 children** from underprivileged families. All live with their families and attend schools in 8 government schools (*Panchakanya Secondary, Shree Siddhi primary, Bhabishya Nirman Secondary school, Shree kamala Secondary Shree Janajyoti from Kamalamai*).

CRPC (Child Right Protection Center) was registered in Sindhuli District Administration office in 2007 as a local NGO to work for and with children at risk in Sindhuli District.

5 Running CLASS Centers and RSS for 219 children in regional office Sindhuli

All CLASS Centers have been opened in different wards of the Municipality. They are located within a radius of 3 km from CRPC office. All supported children attend government schools. Those of Bhabishya Nirman Higher Secondary School and Shree Sidhhi Primary school attend daily CLASS activities in CRPC office. **From April 2017 we closed 2 CLASS Centres (CLASS Sarlahi and CLASS Ramechhap because of lack of fund.**

School	Address	CLASS CENTER	Children
Shree Siddhi Primary School	Kamalamai, Sindhuli	Andheri Sindhuli	25
Shree Kamalamai Sec School	Kamalamai, Sindhuli	Kamalamai Sindhuli	25
Shree Janajyoti Sec School	Kamalamai, Sindhuli	Phosretar Sindhuli	25
Shree Panchakanya Sec School	Kamalamai, Sindhuli		25
Regional office	Kamalamai, Sindhuli		100
Shree Manthali Secondary School	Ramechhap		11
Shree Chaturbhujeswar S School	Sarlahi		8

9 CLASS Centers (195children) closed in 2017 April (mainly for logistical reasons and to follow local legislations (work authorisations)

We had to close 4 Centers in different districts, mainly in the far western part (*Jhapa, Morang, Sarlahi, Ramechhap, Gorkha,*).

CLASS Center	District	Children
Jhapa	Jhapa	15
Birtamod	Jhapa	39
Dhanpal	Morang	25
Sarlahi	Sarlahi	17
Ramechhap	Ramechhap	14
Gorkha	Gorkha	25
Dhalko	Kathmandu	25
Bhaktapur	Bhaktapur	25
Hetauda	Makawanpur	10





RISK REDUCTION

Introduction

CPCS respects the child's wishes and believes. It is the child's own decision to come to CPCS and then to go back to its family or to choose another option. We have developed programs and activities that encourage children to come to our centers where we can help them on their path back to their family, and enroll them in school. Street field workers inform street-based children and encourage them to walk toward their own social Rehabilitation path gradually.

CPCS short-term risk reduction programs conducted both in the streets and in our socialization centers, constituted the first steps to the building of a relationship between the child and CPCS. CPCS then offered any street child who desire it, an individual counseling based on his personal history, educational background, personal abilities, age, and most important of all, on his personal wishes and interests.

Through daily fieldwork and contacts with street-based children within our centers, we gain experience about the daily life and problems of street-based children. In addition, CPCS values very much its network with other NGOs working with street-based children around the world. Being part of the **"Street Field Workers International Network"** gives us the opportunity to share our experiences and learn from others.

CPCS' outreach work was essentially based on frequent day-and-night field visits and on activities within our centers. On the street, the children who met our social/field workers received information on our activities, programs, counseling services, informal education classes, and first aid service. Our social workers were also responsible for identifying and approaching new street-based children.

Nepal's Government has changed its policy concerning street-based children in coordination with existing NGOs. First Aid services directly in the street are now forbidden in favor of placement in Rehabilitation centers. MOWCSW and CCWB have published a [Guidelines and operational manual](#) for organizations working with street children concerning the **Drop In Centers (DIC)** and Rehabilitation/Socialization centers. They started that program on 10 May 2016 in partnership with 10 NGOs.



The Rehabilitation Shelter- Godawari

Due to some policy changes decided by the Central Child Welfare Board, our “shelters” are not fully open anymore. Children have to stay inside and follow a full socialization process.

The socialization center is a place where former street-based children can be safe and receive assistance when needed. They have access to various entertainments (football, board games, carumboard, marbles, cricket, badminton, table tennis, watching a movie) while the educators take this opportunities to raise up their awareness on AIDS/HIV, drugs, child rights and give information about the services that CPCS can offer if they decide to leave the street. Dances, music classes and other activities are also initiated by their peer educator or friends studying in secondary level.

Our Aims

- ✓ *To offer the children a safe place to sleep, take care of their personal hygiene and socialize with other children.*
- ✓ *To give the children nutritious and hygienic meals.*
- ✓ *To offer the children free access to medical care and counseling in our recovery center.*
- ✓ *To offer the children non-formal education, sports, culture and child rights classes.*
- ✓ *To manage family reunifications and family visits.*
- ✓ *To provide children legal assistance and plead on behalf of them in case of court action.*
- ✓ *To reintegrate children after tracing family through family visit and counseling*
- ✓ *To reduce risk among street-based children and children at risk*

Coordination with CCWB, Center for Children at Risk, APC and YCSC

- 56 Children were referred for Rehabilitation in CPCS DIC by different organizations; 21 joined us directly.
- 18 children were referred from our DIC center of Dillibazar to our partner organization CPCR in Dolakha.

SELF-MANAGEMENT AND DAILY ACTIVITIES

The socialization shelter is partly managed by the children themselves to rise up children's sense of responsibility giving them possibility to play an active role in the organization of the center (maintenance, household cleaning, food shopping, cooking, and for defining the rules of good behavior).

- ✓ A **Library** provides books on various subjects and is used by several children each day. They can borrow books as they wish.
- ✓ **Individual Locker deposit boxes** are available for their belongings (*clothes, shoes and valuables*) while they are staying at the center.
- ✓ A **“street banking system”** also encourages children to save money and protects them from having their money stolen by street gangs, junkyard owners... They can deposit their money and retrieve it when needed.

A photograph of four children in a kitchen-like environment. They are gathered around a table, looking at a bowl of food that is being cooked on a small stove. The children are of various ages and are wearing casual clothing. The background shows shelves with some kitchen items.

CHILD PARTICIPATION

A children's central government (CCG), of which members are elected democratically by all the children, meet 4 times a month to discuss and make suggestions about the program they are enrolled in, and they prepare a written report submitted to CPCs management committee. Our objective is to make the children aware of the management of the centers and of their daily lives and to teach them how society works.

Children can also put their comment, critics and suggestions in a **suggestion box**. Most of the improvements brought to the programs came from the children's suggestions and CCG reports.

Staffs have also regular meetings with children representatives to gather their observations.

The picnic program

CPCS has opened a picnic spot in Godawari, outside of the city. Children are regularly taken to picnics in groups of about 20-25 children. This offers them the opportunity to socialize with one another and tightens the bonds both with the other children and with our social workers.

CPCS also organizes a gathering of all street-based children for a picnic once a year. This Program aims to socialize children, to take them out of the city and offer them some fun.

The rehabilitation Shelter program is supported by "Les amis de Soeur Emmanuelle"–Belgium, the Government of Nepal and the Vieujant Foundation

Short Stories

Krishna Tamang (name changed) – 14 years - Chitwan , Madi

My name is Aakash Acharya , I am 14 years old, I am from Chitwan . In my family, father, step mother, 3 big sisters and 2 small sisters. My mother already got second married before 2 years ago. Then my father also got married before 1 year ago. My 3 big sisters already got married and my 2 small sisters read in class 3 and 4. I was read in class 8 on government school. My father and step mother used to bite me. One Day my father brought to me in Kathmandu, Kalanki. And he left to me in one hotel for work. I didn't like to work there, that hotel owner bit to me many time. I worked their 3 months. Hotel owner is every day beat me so I runaway from there. When I start staying on the street police keep me and they send CPCS for rehabilitation. Now I am in CPCS I want to studies.

Kalpana Rai (name changed) - 13 years - Sindhupalchok /Raithane-4

Karishma Tamang has not good family condition, she said that her mother and big brother are beating her very badly so she left her house and came in Kathmandu alone. Same day, the Police caught her on the street when she was walking near Bhaktapur area and brought in CPCS emergency girls rehabilitation center. Her father works in out of country. She is interested to go school, she wants to back home and continue to her study. We have to search her family location and send her home from socialization programs.

The Street Work

Supported by “Les amis de Soeur Emmanuelle” and the Government of Nepal

Day Field Visits

These frequent outreach visits enable CPCS educators to get a better understanding of the street life, to identify new street-based children, keep, and build a relationship with them. A senior staff member and a social worker, provide the children counseling about the street problems, awareness sessions, informal classes and games.

We have reduced this program on demand of CCWB that forbid directly providing first aid in street in favor of rehabilitation through the DIC programs.



DAY FIELDS VISITS MONTHLY STATISTICS

Day Field Visits (KTM)	Tot.	J	F	M	A	M	J
Area 1 - Avg No. of children	128	15	20	22	24	22	25
Area 2 - Avg No. of children	76	10	12	14	12	14	14
Area 3 - Avg No. of children	48	7	8	6	7	10	10
Area 4 - Avg No. of children	66	7	10	10	11	14	14
Area 5 - Avg No. of children	35	5	6	5	6	7	6
Children met by Simple Field	317	105	102	110	0	0	0
Children brought to center by Simple Field	45	10	15	20	0	0	0

Night Field Visits

Night Field visits started 5 years ago, 3 days/week, at night. A Health Assistant, a senior social worker and an ambulance driver patrol the different areas of Kathmandu where street-based children hang out at night. Every night, we meet an average of **70** children.



The main objective is to reduce the children risks exposure at night, (*physical and sexual abuse, alcohol, marijuana or glue, injuries during gang fights ...*). Our team can decide to take a child to a Hospital or to transfer him to one of our centers.

Since the CCWB has launched the program, "no-one child should stay in street" children are less appearing in the street. We assume they hide to avoid that police sent them to a nearby DIC. Our night field program has thus been reduced to 3 days/week, instead of 6 previously.

NIGHT FIELDS VISITS MONTHLY STATISTICS (JAN-JUNE 2017)

Night Field Visits (KTM)	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Area 1 - Average No. of Children	68	8	5	5	4	5	4	6	6	6	6	7	6
Area 2 - Average No. of Children	48	7	5	5	3	4	3	4	3	3	4	4	3
Area 3 - Average No. of Children	39	5	0	3	4	4	3	0	5	6	3	3	3
Area 4 - Average No. of Children	19	5	0	2	2	2	2	2	1	0	1	1	1
No. of Children treated on Field	458	39	16	39	31	46	52	58	60	31	17	28	41
Children brought to center by Simple field	5	0	0	0	1	0	4	0	0	0	0	0	0
Average No. children in daily Night field	147	10	3	12	12	12	15	16	15	14	11	14	13

The Recovery CENTER (Medical support)

The *Recovery Center of Godawari* is open 24 hours a day. Professional Health Assistants and qualified nurses work in shifts. In average, 16 children receive care daily.

In the clinic, equipped with 10 beds, sick children can recover. Special meals can be prepared according to doctors' recommendations. The clinic also treats many viral diseases and epidemics. Children can receive daily consultations and needed treatments including hospitalizations. We face several cases: fracture, hernia, accident, RTI, spinal and hand necrosis. Other cases were: HIV, fractures, head injuries Road traffic accident, tuberculosis, infected wounds, varicella, dental problem ,fall injury, gang fight injury, stab injury, spinal injury, dog bite, flues, chest infection ,nephritic syndrome, gastritis, physical assault, seizure disorder, scabies syphilis down syndrome autism and eye/ear problem etc.

MEDICAL SUPPORT MONTHLY STATISTICS

MEDICAL SUPPORT GODAWARI	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
No. of children (Out patients) treated	1301	170	136	136	124	103	121	90	95	78	86	84	78
Daily average	46	6	5	5	4	4	4	3	3	3	3	3	3
Number of "clinic in" children treated	2663	384	263	232	148	171	161	235	278	184	152	209	246
Daily average	86	12	9	8	5	5	5	8	8	6	5	7	8
No. of In-Patients Nights	2671	351	291	209	154	187	177	271	271	175	175	202	208
Average age of in-patients	148	11	11	11	11	11	12	12	13	14	15	17	10
Number of hospital cases	187	19	21	7	15	18	17	44	17	6	5	12	6
Number of patients admitted in hospital	15	4	2	1	0	1	0	1	1	1	2	1	1
Hospitalization Days	123	34	29	2	0	2	0	3	2	18	23	4	6

Medical Support Program (MSP)

It aims to support street-based children's medical rights and consists of

- ✓ Conducting day-and-night field visits and provide first-aid treatment to street-based children directly on the streets.
- ✓ Providing first aid or medical support for minor injuries & illness to children of all CPCS programs and centers.
- ✓ Referring more serious cases such as surgery, diagnosis, lab tests or further medical intervention to public hospitals.
- ✓ Increasing the street-based children and youths' awareness about the risk of HIV, AIDS, drugs, Hepatitis, Jaundice, STI's, STD's and other communicable diseases.

CPCS medical staffs are present in different zones in Kathmandu through Day & Night Field visits. Medical support is provided to all children without any discrimination, regardless of their pathology, toxic addiction, or HIV status.

MSP also organizes health camps to perform medical check-ups and inform the youths. We work in partnership with several public hospitals and coordinate with other health organizations. CPCS ensures its staffs remain healthy and safe through preventive measures, trainings and immunization.

The medical team meets with other health organizations in Nepal on a regular basis. We frequently participate in an Ambulances Management meeting in the District Health Office, Kathmandu to ensure that we follow the rules and regulations applicable to ambulances in general. CPCS also participates in coordination meetings with the Nepal Red Cross Society, the Chief District Officer, and the Nepal Police about mechanisms and strategies to be adopted by social NGOs to rescue street children when demonstrations and general strikes hit the country. Our medical staff faces some serious infection risks (AIDS, hepatitis or other diseases) due to their work; CPCS ensures the staffs remain healthy and safe through preventive measures, trainings and immunization.

Supported by the Nick Simons Foundation through the American Himalayan Foundation

The Emergency Line 5560700

CPCS operates a 24 hours emergency line, available for citizens, parents, police, shopkeepers, tourists, teachers, GOs, other NGOs, and street-based children themselves. They mostly call us to inform us about a fight, an injured child needing medical assistance or a friend taken into custody. Other groups of people call us to report a case, or to query for information.

The “National Centre for Children at Risk (#104)” referred us 55 children for rehab.

EMERGENCY LINE MONTHLY STATISTICS

Emergency Line Cases	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Medical Problems	33	2	4	0	8	3	3	5	3	2	3	0	0
Under Arrest	2	0	0	0	0	0	0	0	0	1	0	1	0
Abuses - trafficking	0	0	0	0	0	0	0	0	0	0	0	0	0
Others	1	1	0	0	0	0	0	0	0	0	0	0	0
Child Labour	0	0	0	0	0	0	0	0	0	0	0	0	0
Information	95	12	6	3	14	3	4	10	9	6	9	11	8
Line Calls Total	131	15	10	3	22	6	7	15	12	9	12	12	8

Child Focus Notices about child lost and family missing were also submitted for weekly publications in newspapers. We are replacing it by online publications in our Blog and through other social Medias (Facebook, Twitter...)

Supported by the Nick Simons Foundation through the American Himalayan Foundation

Case Study

Name: Bibek Thapa (name changed) – 16 years - Gitanagar, Chitawan

I am Bibek Thapa. I am 16 years old boy from Gitanagar, Chitawan. My other name is Sita Thapa. My father died. I left my home because of lack of care. They don't love me also my big brother is always beating me. I'm in the street since 10 years I spend lot of time in Thamel. I smoke cigarettes, hashies. I use glue and alcohol. I inject drugs etc. I spend 5 years in Thamel area as a beggar and Plastic collector. That time I had others friends. They also use drugs. I went to school up to Class 6 in Minor Boarding School Basundhara, Kathmandu. I am also interested in cooking. One day when I was sick in Thamel area the 104 police picked me up and send me to CPCS. Since 18 Nov 2016 then CPCS recovery staffs find out my problem and send me to the Hospital for further investigation. After my check up it was clear that I am suffering from Tuberculosis TB and start ATT Anti Tuberculosis Treatment. Now I am regular using the medicine. I need to continue 6 to 8 months to cure. Now I am in CPCS recovery center. When my treatment is done I want to go for a cooking training. I don't want to go back home. I want to thank CPCS for the help.

Legal Protection Program

CPCS provides legal assistance to street-based children and youth. Professional lawyers are ready to intervene when a child is involved in illegal detention, for recovering wage from an employee, in cases of sexual abuses, or when a street child wants to initiate the legal procedures to obtain his birth registration, his citizenship certificates or to recover parental inheritance. A CPCS lawyer and a staff member conduct also regular visits to police custodies. Many cases are also reported by the police or the public through our Emergency Line service.

LEGAL SUPPORT MONTHLY STATISTICS (JAN-JUNE 2017)

Legal Support	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Jail visits	35	4	6	5	4	3	2	3	2	1	2	2	1
Children/youths in jail	34	7	6	2	2	1	1	5	2	2	2	3	1
Custodies visits	64	8	7	5	7	8	7	4	6	5	3	3	1
Children/youths met in custody	25	8	3	3	4	3	2	2	0	0	0	0	0
Children/youths released from custody	25	8	3	3	4	3	2	2	0	0	0	0	0
Court Action	0	0	0	0	0	0	0	0	0	0	0	0	0
Meetings with Police	51	5	2	3	4	8	5	5	6	5	3	3	2
Awareness Program / Class with children	37	2	3	2	3	4	3	4	4	4	3	3	2
Children in Class programs	494	45	70	74	50	46	43	50	45	40	13	9	9
Awareness Programs with Public	8	1	1	1	1	2	2	0	0	0	0	0	0

Supported by the Nick Simons Foundation

through the American Himalayan Foundation

Case Study

Sonam Lama (name changed) – 17 years

*He has no idea about the family/ permanent Address he only listen **Hetauda Phaparbari**. His father name is Dorge lama and Mother's name is Phulmaya lama. He has two siblings elder brother name is Furba lama and small brother name is Pema Lama. He was arrival in cpcs with street friends at that time he was worked in hotel in Hadigau, Kathmandu. In the beginning both parents were used to drink and make quarrel each other. Big brother was working in hotel but he never shares the name of hotel.*

When he presents his discipline he enrolled in the rehab program but due to unclear address still there is no finding his family. He spends his childhood in Kathmandu not in village. He reach in street because father left mother and escape somewhere else, they never meet with father after this event. Mother sheltered in one of the relative hotel as worker in Hadigau there were three children so why mother start job. Then big brother also disappeared from the location but small brother also with mother. After the sometime when he visit the place there was no hotel in the same place.

Counseling Services

Most of the children met by CPCS or living in our centers have experienced street life and some forms of violence, trauma or torture. A majority of them has been victims of physical, psychological or sexual abuses and has experienced drug addiction, criminal activities, or detention. These experiences often result in psychological disorders such as low self-esteem, loneliness, insecurity, inferiority complex, substance addiction or violent behavior. Therefore, CPCS provides children with a psychosocial support through individual and group sessions.

We have 3 psychosocial counselors for all our programs and centers. Social Workers can refer children in need to the psychosocial support cell, but children can also request to meet a counselor. The cell in collaboration with the involved staff ensures an effective follow-up of each case. Counselors make also recommendations concerning the possible and suitable rehabilitations for each child (family re-unification, schooling ...).

COUNSELING SERVICES MONTHLY STATISTICS

COUNSELING SERVICES Godawari	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Individual Counseling	163	28	23	18	10	9	17	10	12	9	10	9	8
Group Counseling	139	15	15	12	11	8	15	10	11	10	11	12	9
General Awareness Classes	150	18	15	15	12	12	15	12	11	12	11	9	8
Sexual Abuses Victims Support	0	0	0	0	0	0	0	0	0	0	0	0	0
Physical and moral abuse victims supported	34	4	3	1	2	1	3	0	5	4	4	5	2
Awareness Sessions with the team	29	2	2	2	2	2	3	3	3	2	3	2	3

Supported by the Nick Simons Foundation through the American Himalayan Foundation



Case Study

Aasish Pariyar is now 14 years old, he is from Sindhuli. His Father was laborer and his mother had already passed away when he was very young. He has studied till grade 2. His father didn't care about him so he left his home and started living in the streets. During that period he made many friends having bad habits. He started smoking and sniffing glue.

He worked as a rag picker and also started begging in the streets. He earned Rs 100 to 200 per day. He spent all his money on food and cigarettes. One day he sniffed glue and walked on the street. While doing so he saw a god on the sky then suddenly fell down and broke. Then he came to CPCS for treatment. He stayed in CPCS for 2 months and left. After a few months, he came back to CPCS and started living here.

After 2-3 counseling session he changed his habit and behavior. He realized the value of life. He left all his drug habits and got involved different activities. He wants to open a mo: mo: shop and he wants to serve free food to those people who cannot afford to pay for it.

Subash Pariyar is from Sarlahi and is 13 years old. His family's economic condition is quite poor. His parents are laborers. As his parents could not give him proper time and care, he ran away from his home with his sister and younger brother and they started living in the streets. Then he separated from his brother and sister. He got involved in bad company and started taking drugs like Dendrite, drinking alcohol, smoking Marijuana and cigarettes. He came to CPCS with our social workers where he attended counseling session.

He got involved different activities at our organization and gradually he changed his behavior. He stopped taking drugs. He wants own a hotel in the near future.

Ganesh Dahal's family permanent address lies in eastern north part of Nepal. Because of family economic condition of poverty they leave home and migrant to Kathmandu for survive and better children education. Even in Kathmandu parents does not found good job and enough earning for the family so Ganesh also leave home and involved as car bus washer in the chobhar street.

He is involved in our class because his parents weren't able to provide him education and learning environment. Our class also focuses on prevention of the children to reach in street. School management committee also selects him to keep in our education support class program. Father working as labor in Chobhar area mother also works with father. Mother does not regular on her job due to take care of the children. Now Ganesh is regular in his school. Now he said he will continue his study for +2 and above.

SOCIAL REHABILITATION

Introduction

CPCS has developed services to encourage street-based children's social Rehabilitation as well as to protect them from risks. One of the objectives is the child's reintegration into its community and with its family if the conditions allow it.

Through these programs, we try to provide the best solutions for the child, according to his age, personal wishes, and family situation. We encourage them to leave the streets and help them, when they want, to find their path toward a better future either through family reunification or by any other most suiting mean: non-formal education, formal education or vocational training.

THE IDENTIFICATION PROCESS

We try to collect as much information as possible about children we met. We have developed different strategies to identify the child and his family (questioning the child, interviewing his friends, conducting field visits in the area mentioned by the child to inquire with the local people and local authorities ...).

THE FAMILY REUNIFICATION PROCESS

CPCS strongly believes that the best place for a child to develop itself is within its family, as long as and if the situation allows it. In addition, street-based children often express their will to go back to their houses during counseling sessions and interaction with the social worker. Family reunification success relies on the child's willingness to return home and on the family's readiness to receive him again. CPCS never pressures a child to go back to its family or on a family to take back a child. We have thus developed a set of mid-term and long-term interventions with the families concerned, for each stage of the family reunification process. Our family reunification social workers cell support these "before", "during" and "after" stages. CPCS interacts with the child, the social worker and the family to analyze the reasons for why the child ended up on the street in the first place: poverty, family problems or other reasons.

We organize child counseling and family visits. After family visits, CPCS evaluates the possibility of reunifying the child with its family. CPCS plays a mediator role, which motivates children to go back home to their family and reintegrate with society independently. Reunified children remain in contact with CPCS, making it possible to monitor the evolution of the situation. This way we can see if the child stays with the family or ends up back on the street.

During festivals or other cultural events, CPCS lets children visit their family, which is another tool to reunite children with their families voluntarily.

Reunification, de-institutionalization and Residential School Support (RSS)

CPCS believes in family care, love and support for children, our ultimate goal being to make family responsible and aware about child right and their responsibility towards their own children. NGOs can be the short-term solution to this family awareness and behavior. We launched family visits and family reunification programs this year.

52 children were reunified to their own family from girls and boys program in Dillibazar and Godavari. **21 boys and girls ran away from the centers.** The RSS program was launched in 2009 for children who had reintegrated their family but were in need of educational support for schooling. Underprivileged and poor families benefit from the education support. Some governmental authorities, CBOs and partners, NGOs use our RSS support. It is coordinated within our CLASS programs and by prevention teams regularly visiting schools and students.

CPCS Drop In Center (DIC), Godawari

The CPCS Drop In Centre is for former street and working children who want to leave the street life in order to develop themselves within a more positive and promising environment. Children are offered three educational sessions per day (*Nepali, English, mathematics, physical education, or personal hygiene*). This program mixes education and socialization through arts and sports and helps bring back children's self-esteem. It enables children to get over bad street habits such as drug addiction, violence, and pick pocketing, and preparing them for a more rigorous study program or family reunification.

Children involved in these programs have spent time on the street enjoying total freedom and living in a world without any form of obligations and commitments, their stability often remains fragile and temptations to go back to the streets are frequent. Therefore, CPCS particularly focuses on personal counseling with help from our social workers and regular interventions with the psychological counselors. After having spent two months in Rehabilitation, children who have not been reunified with their families join the second Rehabilitation program where more long-term solutions are considered such as referral to other NGOs for vocational training, or schooling programs. The program will be moved to Dolakha very soon.

CENTERS MONTHLY ATTENDANCE STATISTICS OF DIC

Drop In Centre (DIC), Godawari	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Sent from CCWB-104	86	26	20	5	4	0	1	5	1	0	2	8	14
Field from Organization CPCS	22	8	3	0	0	1	0	4	2	3	0	1	0
Family Reunification	30	3	9	3	3	3	1	0	4	0	3	1	0
Refer to Other organization	21	1	3	4	6	0	0	0	0	0	0	5	2
Drop Out	32	6	9	1	3	2	0	4	0	0	5	0	2

Supported by the La Chaine de l'espoir – Vieujant Foundation – Les amis de Soeur Emmanuelle

The Rehabilitation Center for Girls

There are few girls in the street. However, once they are on the streets, they are unfortunately much more vulnerable to any kind of abuse including sexual abuse. It is essential to provide a safe place where they can benefit from socialization and Rehabilitation services.

The center is entirely dedicated to former street girls. They are directly referred to the Center, from the street, by other NGOs or GOs. Most of the cases referred to us by police are prostitute or domestic worker. In many cases, girls ran away as they cannot handle staying in a closed environment due to drug addictions and bad habits. The Program will be moved to Dolakha very soon.

Supported by the American Himalayan Foundation up to March 2017 and Kids in need – Nepal



Karishma Tamang (name changed) – 13 years

Karishma Tamang has not good family condition, she said that her mother and big brother beat her very badly so she left her house and came in Kathmandu alone. Same day, Police catch her on the street when she was walking near Bhaktapur area and brought in CPCS emergency girls rehabilitation center. Her father works abroad. She is interested to go school, she wants to go back home and continue her study. We have to search her family location and send her home through socialization programs.



Dolakha Rehabilitation Program (CPCS Center in Dolakha District)

The Dolakha Rehabilitation center is sheltering children rescued from street life and/or life at risk. The idea is to bring back children within their community and/or family as soon as possible. CPCS strongly believes that children belong in their family or village community and not in institutions. This in the context of "deinstitutionalization".

After the devastating earthquakes in April and May 2015 many children escaped from their village because nothing was left. Destroyed buildings, schools and due to land shifts no crops could be grown. People had lost everything: their cattle, their life stocks, their official documents, their belongings. Traffickers also became very active and led children with false promises to Kathmandu. Once arrived in Kathmandu many children were left to their own devices, or disappeared in networks. CPCS wants to bring these children back to their families. There is a lot of poverty in the area. The majority of the local residents are Thami, an ethnic group that has been suppressed for centuries. They are considered as « low caste » and are paperless, do not have rights, have no property and work since human memory on the landlords fields. Often the farmer must deliver the yield to their owner and get a small portion for their own use.

Given the difficult circumstances in which the schools should work, it was decided to offer support with libraries and game equipment. Supported schools are encouraged to offer good education and give children opportunities to attend school. There are no medical facilities in the area where CPCS has built its rehabilitation center. Once former street-based children or working children decide to leave the street life or their working life, they need a transition and a safe environment. There fore CPCS runs rehabilitation centers for both boys and girls. CPCS believes in community participation and involvement near where the base of the problem is. In this case it's important to be near the beneficiaries.



The objective is to support not only the child in the rehabilitation center but also the surrounding communities and to listen to the problems, the needs and to search together for solutions.



For this CPCS constructed a building for boys and girls separate, a recovery center with an ambulance service and a regional common room with a library, games. The common room is also open for the surrounding communities. Children and their families come to the center for several reasons.

This can be from medical to legal, to assist with the homework or just a listening ear to everyday problems. To play, to watch tv, to have a snack. In short: everything that suppose to happen in a common room and for the community.

- 14 residential girls and 29 boys in the new building in a rehabilitation program.
- 150 children come to the regional center daily (common room)
- 120 families benefit from the common room, medical center and library.
- 585 family members in total.
- 350 children use the libraries in 2 schools.

Project realisations :

- Construction of a building for girls. (supported by Caritas)
- Alternative energy and water system.
- Alternative energy/solar panels are installed for light in all buildings and warm water for showers.
- Water storage management.
- Goat and chicken shed ;
- Set up materials girls building, kitchen, bedding, wood stove .
- TV set, Washing machine, Big cooking stove, Stock gas cylinders.
- 24 girls live in the new Girls' building in a socialization program.
- The kitchen provides 70 meals daily.
- Two school libraries are running well and are eagerly visited by the schoolchildren.

The Dolakha Regional Centre has received support from many organisations and individuals : Les Amis de Soeur Emmanuelle, Caritas, La Chaine de l'Espoir, la Fondation Vieujant, Kinderleven/Vie d'enfant, Rotary (Brussels, Durbuy), INDSE, Paard Van Troye, SALAAI, Monsieur Duez, Child in Need-Nepal,... A recreational room including games, toys, books, tv, "woodstove", cupboards has been established with the support of La Chaine de l'Espoir, Eric Van Canghai and the touchful gesture of the Berger-Davidson Family, in loving memory of Ingrid Berger (a wonderful lady that visited CPCS few years ago)





The goats and chicken farm provide for own use of eggs and meat. In addition, the children strengthen their sense of responsibility and this is good for their self-esteem, which is an important tool in the rehabilitation process. The local community benefits from awareness information. The word not to sent your daughters to the big cities to have a so-called better future is spreadThe common room is a meeting point for the beneficiaries, local residents as well as the surrounding schoolchildren and their teachers.

School children in two schools have access to a library and games.

DOLAKHA PROGRAMS MONTHLY STATISTICS

MEDICAL SUPPORT Dolakha	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
No. of children (Out patients) treated	496	6	6	18	3	80	84	1	171	43	24	14	46
Patients admitted in clinic	58	3	3	1	0	5	8	3	3	10	20	0	2
In Patients bed Nights	213	3	1	5	0	16	66	15	22	9	70	0	6
No. Of community patients treated	736	11	6	18	25	105	48	103	64	120	61	117	58
Ambulance of referred community patients	70	1	3	4	3	8	8	7	9	15	6	2	4
Total # of referred CPR child patient	69	0	0	0	6	7	18	19	3	8	6	0	2
Children treated on the field	160	0	3	0	0	0	18	0	0	0	6	4	129
Total	1802	24	22	46	37	221	250	148	272	205	193	137	247

Dolakha Rehabilitation Center	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
No. of children (beg)	25	4	4	4	5	0	0	0	2	2	0	2	2
New children	30	0	0	1	23	2	0	2	0	0	2	0	0
F.R from office	2	0	0	0	0	0	0	0	0	2	0	0	0
Internal Referral	27	0	0	0	27	0	0	0	0	0	0	0	0
Drop Out	5	0	0	0	1	2	2	0	0	0	0	0	0
No. of children (end)	25	4	4	5	0	0	0	2	2	2	2	2	2

Dolakha Schooling	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Scholarised children (beg)	41	18	17	17	17	40	41	41	41	41	41	41	41
New children	24	0	0	0	23	1	0	0	0	0	0	0	0
Internally Referred Kids	1	1	0	0	0	0	0	0	0	0	0	0	0
Scholarised children (end)	41	17	17	17	40	41	41	41	41	41	41	41	41

The Schooling Program

Due to family problems or lack of information on families' whereabouts, family reunification is sometimes not suitable for some of the street-based children. Therefore, CPCS has developed a schooling program in order to offer them services adapted to their situation. Through schooling, the children socialize, meet other children and get out of the street environment. It allows them to enter and be part of another community than the one of the street-based children. Children attend government schools and pass exams like any other student. They attend classes in Nepali, English, mathematics, social studies, sciences, and sports.

Most street-based children used to attend school in their hometown. However, because of illiteracy and other social problems, education is often not a priority for the parents. This causes school absence and frequent dropouts. The general level of education is also very low in rural areas of Nepal. Additionally, the time children have spent in the street results in a great gap in their education. Hence, CPCS has developed good and close relationships with each of the schools that children attend. The teachers help CPCS social workers assess the level of the child and the class he should be admitted in.

CPCS is slowly decreasing its residential schooling support programs to focus on family reintegration and community-based care. It decreased from 110 to 84 students in different CPCS centers this year. Several students went back home and some others joined the Rehabilitation program.

The *Schooling Center for Boys (Dillibazar)* was established in 2004. The schooling program is one of the pioneer programs and there are currently 10 (10-17 years) children enrolled in school. They were 22 in January 2016. 7 new children enrolled in the program, 9 were reunified with their families, 1 was referred to another center, 16 were sent to our Dolakha center to attend the same schooling program and finally 6 drop out. They all study regularly in a nearby government school. 6 students live in their own room.

The *Schooling Center for Girls* is for now in a village surrounded by a natural environment at 100 meters north from the road to Godawari. It is located in a residential area and very safe for the girls. *This center will move to Dolakha in 2017.*

*All Residential (mid-term support focused on progressive family reunification)
Schooling Programs moved to Dolakha, from April 2017.*

Case Study

Laxmi - 15 years - Dolakha , Lapilang

Laxmi is from dolakha, she said she came in Kathmandu with her sister's and stayed in a room as house servant after her father and mother death. She doesn't like to stay in there with her sister and sister's husband. So She left her sister room. Same day Police brought to her from Kandaghaari , Koteshowr area. Then Police send to her in CPCS girl's emergency center. First she didn't like to tell any things about her story but slowly we found her real story. Her family is not there her father and mother death when she was small. She has mantel problem some time her mind is not work, she feel alone and scare. She works very clearly and keeps need and clean also. We are trying to find solution keep in socialization center. We send to her Patan Mental Hospital also but, doctor said she doesn't have any mental problem. She can't tell her future plan. Now she is in Girls Rehabilitation Center.

Anshu and Bunu - 11 years - Dhading

Anshu and Bunu are sisters they lived in a village with their family (Father) they said that their mother died, and father doesn't take care of them so one day they run away from Dhadding to Kathmandu. They stayed on the street, one day police caught them in Kalimati area, and sent to the CPCS rehabilitation center. Now they are in CPCS Emergency girls center, a few days ago their father came to met them with 104 but the girls didn't want to go back home and don't want to go village. They want to be dancers, and study. Their family situation and economic condition is very bad. Anshu's arm is damaged by fire. We have to refer in girl's socialization center. And support them to continue school.

The Youth Program

Many former street-based children are above sixteen and have been referred to the youth program. They are going through adolescence and deserve a specific kind of attention. They need to be given responsibilities and to be fully involved in their Rehabilitation process for it to be a success. Youths of this age who have spent time on the streets are likely to engage in delinquency or criminal activities.



The Youth program was developed with the idea of delivering services and means of intervention tailored to those youths' particular needs. CPCS does so by giving responsibilities and guidance towards the youth's professional life and future according to their literacy, educational background and wishes. CPCS encourages youth's responsibility (*participation in daily work life, involvement in CPCS programs, tuition, office support, help in the kitchen, discussion groups*) and possibility of working as a volunteer.

Youths can also choose between different options offering progressive responsibilities:

- ✓ A 5 levels training leading them to become a social worker: Starting as a Junior Social Worker, then an Assistant Social Worker before becoming a Social Worker.
- ✓ Vocational trainings in various fields (Electricity or mechanics for example) provided by partner organizations.

CPCS also organized a closed camp, awareness programs and orientation for youths to motivate and talk about their family, personal life, skill training, vocation center, personal hygiene, personality, citizenship and personal identification. It is held on different dates. It covers about **69** youths from the street and from Rehabilitation centers. 2 youth are (Arjun Majhi and Ganesh Tamang) job placement.

YOUTH PROGRAM MONTHLY STATISTICS

Youths Program	Tot.	J	F	M	A	M	J	J	A	S	O	N	D
Total Youth Level 1	74	2	1	4	3	2	6	10	10	9	9	9	9
Total Youth Level 3	12	2	2	4	4	0	0	0	0	0	0	0	0
Total Youth Level ASW	54	5	5	8	8	8	2	3	3	3	3	3	3
Total Youth Others	28	1	1	1	1	0	0	4	4	4	4	4	4
Total	168	10	9	17	16	10	8	17	17	16	16	16	16

Case Study

Sonam Lama 17/M

*He has no idea about the family/ permanent Address he only listen **Hetauda Phaparbari**. His father name is Dorge lama and Mother's name is Phulmaya lama. He has two siblings elder brother name is Furba lama and small brother name is Pema Lama. He was arrival in cps with street friends at that time he was worked in hotel in Hadigau, Kathmandu. In the beginning both parents were used to drink and make quarrel each other. Big brother was working in hotel but he never shares the name of hotel.*

When he presents his discipline he enrolled in the rehab program but due to unclear address still there is no finding his family. He spends his childhood in Kathmandu not in village. He reach in street because father left mother and escape somewhere else, they never meet with father after this event. Mother sheltered in one of the relative hotel as worker in Hadigau there were three children so why mother start job. Then big brother also disappeared from the location but small brother also with mother. After the sometime when he visit the place there was no hotel in the same place.

Now Sonam complete his secondary examination level by getting 2.85 GPA. Still he is keeping his study continue. He want to go his village for once to search the family.

By the rescept of youth intersest our reunification team send him makawanpur for his family fisit. It was 4 days visit of his parents or relatives searching. During the visit people can not recongize hima gain he back to our program and enrolled in the class 11 study in Kitini secondary school. Still we are trying to finding his family.

We are in the connection of local government and police of his village, where our legal team also providing help to him and us.



CPCS - RELIEF SUPPORT FLOOD VICTIMS 2017

Every year during the monsoon there are floods, landslides and casualties in Nepal. However, this year, on August 10, the rain continued for 4 days as rivers floated outside their banks. At least 1,200 people have been killed and millions have been left homeless following devastating floods that have hit India, Bangladesh and Nepal, in one of the worst flooding disasters to have affected the region in years.

International aid agencies said thousands of villages have been cut off by flooding with people being deprived of food and clean water for days.

A CPCS team went to the emergency area to take up the state of the region and provide immediate relief to flood victims. A Child Safe Camp was established in the regional center in Morang -ORCHID - the partner organization of CPCS.







The target groups of CPCS are the economically underprivileged. Due to lack of resources, these people live in self-contained cabins next to the riverbed in the slums. All had lost their homes and the fields were flooded and destroyed. The situation was beyond imagination and very disruptive.

The rice was planted and would be harvested before Dashain, the most important religious festival in Nepal. However, everything is destroyed and famine is expected in the coming months.

GENERAL REPORT

The CPCS team arrived in Morang on August 15 and immediately set up a Child Friendly Camp for the children and their families who had lost their homes or were in trouble due to the terrible floods in the area.

Food and shelter were provided. Medical camps were immediately organized. Clothes were distributed to the children and all kinds of activities were organized.

EMERGENCY PLAN IN MORANG >> MONSOON 2017		
CPCS Emergency Kit		
Kit d'urgence CPCS - CPCS Emergency Kit		
	Tent <i>Tente Tent</i>	1 PC
	Rice <i>Riz Rijst</i>	25 KG
	Dal <i>Lentilles Linzen</i>	2 KG
	Mosquito net <i>Moustiquaire Musketennet</i>	2 PCS
 DONATE NOW : WWW.CPCS.INTERNATIONAL 		





Day 1: 155 children and 150 parents arrived at the Emergency Camp. Most were CPCS-supported CLASS. Their brothers and sisters came along.

Day 2: A medical camp was organized where more than 300 children arrived.

Day 3: A medical camp was organized in CLASS Belbari, where 78 children and their parents participated.

In CLASS Bayarban, 53 children and their parents received medical attention.

Day 4: Medical camp in CLASS Itahari where 42 children and their parents received medical care.

Main problem: fungi, colds and fever, ocular infections, diarrhea but especially "mucous membranes" and ears full of mud. Seriously ill patients were referred to the hospital.

DISTRIBUTION RELIEF GOODS:

CPCS stayed in the area till August 29 and distributed relief goods:

56 families of CLASS Itahari, CLASS Bayarban and from the Regional office received a Emergency Relief Kit. 250 tarpaulins were distributed to families who became homeless. 32 families are still in dire need and request for support. 1.000 children got support from CPCS (supported kids and their siblings).





Flood Victim list/Supported Children Family

List for relief				
SN	Name of Children	Class	Center	Short description
1	Salina Khatun	3	Koshiharaicha	During the flood time they runaway from own home all mud and flood enter into home.
2	Sujan Bhujel	3	Koshiharaicha	Flood make damage all ground floor of the house. Flood enter into the house
3	Anita Urau	3	Koshiharaicha	Flood enter into the house but not make any damage
4	Raj Urau	3	Koshiharaicha	Flood enter into the house, His house lies in in bank of the river make all food dirt
5	Preeti Majhi	5	Koshiharaicha	Flood enter into the house but not make any damage
6	Jibisha pokharel	4	Koshiharaicha	Flood enter into the house but not make any damage
7	Pratiksha BK	4	Koshiharaicha	Flood enter into the house but not make any damage
8	Salina Risidev	3	Koshiharaicha	Home totally damage by flood
9	Bhim Rishidev	4	Koshiharaicha	Home totally damage by flood, members can not stay at home
10	Susmita Bhandary	5	Koshiharaicha	Home totally damage by flood, members can not stay at home, High risk, Simple rain also affected.
11	Love Dhanuwar	1	Regional Office	Flood enter in the house and covered all things of the house
12	Rasmita Rijal	2	Regional Office	Flood enter in the house every things are wet
13	Laxmi Bhujul	2	Regional Office	Flood enter in the house
14	Samiksha Sijali Magar	4	Regional Office	Flood enter in the house
15	Tanchoma Sijali Magar	3	Regional Office	Flood enter in the house child also sick
16	Sumina Majhi	3	Regional Office	Flood enter in the house and flowed all ground floor
17	Susma Danuewar	5	Regional Office	Flood enter into the house, high risk, house is damage
18	Rajesh Mushar	2	Regional Office	Due to flood they able to run at night for the save and life, High risk.
19	Alisha Rishidev	1	Regional Office	Home is totally damage , mother is pregenent, Younger sister flowed but villagers save her life
20	Kumar Koirala	9	Regional Office	House damage after flowed the wather they restay in house after two days
21	Sandhya Limbu	2	Regional Office	Flood enter the house and covered every things of the house child is sick by cyst in head
22	Sandip Rai	1	Class Belbari	All things are damage flood enter in the house, after three days they reentry in home, high risk
23	Yubraj Rai	1	Class Belbari	situation is simple, but there is still risk house damage
24	Indra Rijal	3	Class Belbari	Flood enter in the house
25	Binda Rai	3	Class Belbari	Flood enter the house
26	Gunja Mandal	9	Class Itahari	His house lies near by Tangra Khola, House totally
27	Chunu Limbu	7	Class Itahari	Everythings are flowed nothings is in house
28	Durga Thakur	10	Class Itahari	There is no way to flowed the frezed wather house is totally damage
29	Sabina Puri	6	Claass Itahari	Due to flood there is mud and damage in ground floor
30	Muskan Begam Feroj	9	Class Itahari	Due to flood there is mud and damage in ground floor
31	Rojisha Khatun	3	Koshiharaicha	Can not reach at home flood flowed all home stuffs
32	Prabesh Lamsal	3	Regional Office	Flood enter in the house and flowed all ground floor

A part of the costs to support flooding victims has been provided by the Vieujant Foundation and Kinderleven/Vie d'enfant.

ASIAN REGIONAL MEETING IN NEPAL



On December 18, 2017,

Program: Seminar: Capacity building - Local Social Actors on Child Protection and their role.

Summary

36 Local Social Actors (social workers who work in communities / education). This is an important part of the work of CPCS and is covered by prevention work. CPCS supports children who live in very difficult family situations with education. This to relieve the family but also to prevent the child from ending up in street life.

The Local Social Actor guides the children before and after school and maintains contact with the family through information campaigns. Child rights activist and expert Mr. Subharaj Pokharel was facilitator. He shows “demonstration of role play” activities during the seminar along with participants.



Discussion was held about awareness for families and the communities about child rights. Sharing and spread information about legal protection institutes of govern, government bodies and the international treaty signed by the Government of Nepal.

After the seminar of all LSA responded positive and they commit to apply their new knowledge in their working field and to the communities they work in.

On December 19, 2017

Seminar Social Protection and Trust Building Social Street Workers

Capacity building of NGO's, political actors, administrative actors and street social workers.

Guest speakers:

Madav Pradhan (CWIN), Bijesh Shrestha (CPCS), Marie-Françoise Michel (Viralanie Foundation – The Philippines), Government representative DSP Mr. Nirmal Budhathoki from NCCR 104.

Summary

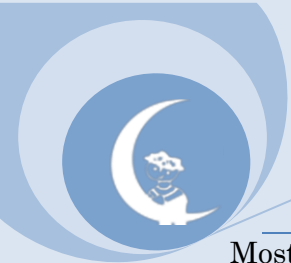
The Social Street Worker is a valuable partner for the local authorities and the institutions concerned. The SSW is the actor who is in regular and daily contact with the particularly vulnerable members of the society who are often victims of human rights violations. Social solidarity is the strength of a country. Social protection for all: Discussion between authorities and Social Street Workers about the current difficulties and the new rules from the Government bodies (CCWB-Police Cell 104).

15 organisations involved in social street work and rehabilitation were present at the meeting.

The current problems related to the new government regulations were criticized and social street workers could share and discuss their difficulties. In cooperation with the new DSP of the Police Unit 104 (in Nepal department of the police responsible for missing and found children) it was discussed how to urgently change current practices. This is the interest of the child but also to rebuild the broken trust between the social worker and the child. There was a positive input from the governments' side.

Marie-Françoise Michel had prepared a power point, which highlighted the problems currently facing street children and street educators in Manila. Given the political situation and the "War on Drugs" action of the current president, the problems were shared and compared with the situation in Nepal.





Most social street workers asked for training and education but it was generally concluded that there are no budgets for this. It was also asked to repeat this kind of meeting regularly, but there are currently no budgets for that. There are many difficulties in the field work for field workers due to the change of government policy and political scenario in Nepal.

Madav Pradhan said now the political situation is very unclear so we have to see what will be the results of the elections and the implementation of Child Rights in Nepal. Organisations and new government bodies (municipalities) have to share their problems and make agreements.

Santosh from SFWN said that there is only one organization NAOSC which is working for the street field workers but it's still a loose forum. It's important to share experiences in such a network.

Aaitraj from CPCS said that now there is a hide and seek game in the street between field workers and street children/youths. Kids and youth have no trust in the fieldworker nowadays because of the new politics. The trust is broken and kids think that the fieldworker is working for the government and with the police.

CWIN representative Bimala shared that if they are on field visit they see no children during morning time but a lot of children during the evening time. Madhav sir said there is huge visibility of police on the streets.

Sober representative said that they work with trafficked youth and drugs addicts. They got many threats from street youths when they drop out from the rehabilitation center.

Government representative DSP Mr. Nirmal Budhathoki from NCCR 104 said that he will organize a meeting with authorities and circulate the information and policy improvements to the stakeholders.



Virланіe Foundation – The Philippines representative presentation on the issue of Philippines street field work. She shared the latest problems in Manila because of the “War on Drugs”-policy by the current President of The Philippines. 13.000 people lost their lives because of the razzia’s done by the police and the army. The situation for the Social Street Workers is dangerous because of the risk to be arrested and thrown in jail and the gunned violence on the streets.

Final overview and conclusions was made by Bijesh Shrestha, Madhav Pradhan, Santosh Paudel .

Most social street workers asked for training and education but it was generally concluded that there are no budgets for this. It was also asked to repeat this kind of meeting regularly, but again there are currently no budgets for that.

It was generally requested to repeat this kind of seminars. Everyone liked sharing information and problems. There was general interest in actually doing something to solve the current problems.

Date: December 20, 2017

Awareness activity on Child Rights for Street based Children and Youth

Location: Godawari Picnic spot.

Summary:

There were 100 children/youth and staffs from different organizations. They were from VOC , APC and CPCS. CPCS organize various programs for the participated children through songs and games. All participation organization representatives presented their awareness activities about affection and abuse.

Sponsored by: CNCD 11.11.11 **Through:** Dynamo International

Organized by: CPCS



JEAN-CHRISTOPHE RYCKMANS NOMINATED "COMMANDER OF THE ORDER OF THE CROWN"

14th November 2017 - Jean-Christophe Ryckmans, Founder and International Director of CPCS International was nominated "Commander of the Order of the Crown" by the Belgian King Philippe, thanks to all children, staffs and all the persons supporting CPCS ! We will go ahead for the best interest of the children and youth trusting us!



The CPCS team – Nepal is proud to announce that Jean-Christophe Ryckmans, director and founder of CPCS, has been awarded the honorary title of **Commander of the Order of the Crown by His Majesty King Philippe of Belgium**. This distinction honors his commitment and the work accomplished over more than 15 years. He will receive this reward from the hands of His Majesty the King on November 14 in Belgium.

Jean-Christophe Ryckmans is a former student of journalism. His life changes when he was confronted by street based children. He decides to fight against this injustice, and his energy has already served thousands of children, their families and indirectly their communities. In Nepal, the Child Protection Centers and Services (CPCS) fights the phenomenon of street based and marginalized children, working with them in a process of socialization and ensuring access to medical care, legal protection, educational activities, schooling and shelter.

A small word from Jean-Christophe Ryckmans:

"To receive this honorary title is above all a recognition for the entire CPCs team, years of action, fighting, success (and failure).

Honestly, it's a pleasure, A small recognition! It are not only the smiles and the lives that prove that our action is worth it ...! But it ensures that projects are seen, followed and commented ... that there is support and a heart for CPCs.

I'm moved by the thought to all those young lives who passed away too early: Krishna, Ganesh, Ganga, Deepok, Lal, Gopi, etc., etc ... This medal is yours "





ADMINISTRATION

CPCS International

Child Protection Centers and Services International was established in December 2005 and registered in SWC (Social Welfare Council) as an INGO. It has been collaborating with “**Chabahil Pashupati Child Shelter**” CPCS since establishment. It works for children at risk and street-based children for their health, education and Rehabilitation.

After 11 years of partnership with CPCS, an agreement with 3 other partner NGOs: CPRC (Dolakha), CRPC (Sindhuli) and ORCHID (Morang) has been signed on September 15, 2015. The Project Agreement with SWC was signed in April 8, 2016.

CPCS International has created the **CPCS Alliance** with those 4 partner NGOs to coordinate practically for the sake of children, for Rehabilitation, reunification, family tracing and family visits. It was needed due to the different locations and working areas covered by the partners NGOs. 10 staffs work in the INGO led by a Country Director and one Expatriate with 8 local staffs. **CPCS International** is located in Godawari, Lalitpur.



Gunja Bahadur Bal is working now with the administration of CPCS International. A wonderful young man in CPCS since years and unfortunately paralysed since the earthquake of April 2015... With the support from many friends/partners through the Leetchi appeal (<https://www.leetchi.com/c/gunja>) - 2365 euros have been collected ! Then Walter & Nadia Vandeperre-Van Herck decided to offer the scooter and Joris Van Dijk proposed to pay an additional Kitchen to help Gunja ! After month of troubles to ensure the tax-free scooter ! Gunja got it. He is working at the CPCS admin office as a staff ! The objective was to fundraise 5000 euros ! We reach it !

The CPCS Team

Our team is composed of **78** professionals (*members of the 4 NGOs grouped under CPCS- Alliance, regular and part time*). Some of them are former street youths.

MANAGEMENT: STAFF FOR ALL TEAMS AND DEPARTMENTS OF PARTNER NGO'S.

Position	Name
International General Director (CPCS- INT)	Mr. Jean-Christophe Ryckmans
Country Director (CPCS- INT)	Ms. Inge Bracke
Financial Director (CPCS-INT)	Ms. Anna Vermeulen
General Director (CPCS NGO)- Administration and Finance	Mr. Himmat Maskey
General Director (CPCS- INT)- Program	Mr. Bijesh Shrestha
Deputy Country Director (CPCS- INT)	Mr..Nawaraj Pokharel
Center Director (DIC Godawari)	Mr. Aitaraj Limbu
Financial Manager	Mr..Tek Bahadur Paudyal
National Director (Monitoring Evaluation Partnership) (CPCS-INT)	Mr. Ekta Narayan Pradhan
Center Director (Regional)	Mr. Badri Prasad Sharma
Program Director (Legal)	Mr. Hem Bahadur Budhathoki
Program Coordinator (Medical)	Mr. Padam Adhikari
Deputy National Director (Prevention)	Ms.Ranju Shrestha
LSA and Expert (Public Relation)	Mr. Dabal Pandey
Deputy Centre Director (DIC Socialization)	Mr. Kailash Rawal
Driving Officer (Senior)	Mr. Krishna Prasad Dhital
Program Officer – Socialization	Mr. Nabaraj Baniya
Health Assistant	Mr. Biken Kalikote
Nurse	Ms. Shova Ojha
Nurse	Ms. Sangita Pradhan
Driver	Mr. Saroj Suwal
Data Officer	Mr. Gunja Lama



OUR ADMINISTRATION SYSTEM

CPCS Administrations is composed of a **Board of Directors** and an **Executive Management Committee**. The organization gathers a variety of expertise in different areas: legal, social, fieldwork, administration, management, and medical. The employees work in different shifts (morning, mid-day and evening) in different centers and programs ensuring services from dawn to dusk.

The CPCS Board of Directors

The CPCS's Board Members meet regularly and discuss the smooth running and events of the organization. Consideration is given with great care and plans are made to ensure a good future for the organization. CPCS yearly organize General Annual Assembly. The current committee is presided by Rajendra Rokka, assisted by Gita Limbu and other members: Bijesh Shrestha, Himmat Maskey Nawaraj Pokharel, Gunja Bahadur Bal, Kalpana Dahal, Sanu Maiya Shrestha, Sujita Shrestha and Malika Shrestha.



The Executive Committee (CDC – Central Direction Committee)

This committee is the government of CPCS, mandated by the **Board of Directors** to ensure the overall coordination and daily management between the different centers and divisional directors. The Committee takes decisions discussing different subjects: the implementation of the Board of Directors, the coordination and efficiency of CPCS projects, centers and programs, the suitable way of communicating information to the entire team, and the Human Resources Management.

They have a meeting once a week. Proposals of meetings are submitted to the executive board for approval. Since 2015, CDC organizes its meeting in formal way and participation also increased. The members provided suggestion and feedback on management proposals. In , 2017 we have announced the golden handshake plan for long-term working staffs since they plan to leave CPCS and we offered six months equals basic salaries for them. 18 employees resigned and 2 new people joined our team: 1 Health Assistant, 1 Driver, 1 Care taker (Kaka).

During this year 1 staffs got a paternity leave of 10 days. Likewise, 3 LSAs resigned. CPCS advertised for HA, counsellor, social worker, nurse's vacancies and 5 many candidates applied. All staffs and their first level family members have a domiciliary and health insurance.

The Staff Meetings

Once a week, the staff from all the centers has a meeting with the children “ministers”. It is essential for the information to flow properly from top to bottom and reverse. All the children elected by their peers to represent a program at the meeting are present. CPCS frequently organized internal training for staffs about Child Protection Policy leaded by our lawyers.

CPCS organized every month different kind of training and meeting for CLASSLSA from Kathmandu valley. All LSAs participated. The training covered the child rights, objectives and issues of CLASS programs.

CPCS also provides Mobile NCELL card to 99 staffs for inter-staff communications.

Implementation of Child Protection Policy

CPCS organized regular follow up sessions for staffs to implement and inform about child protection during work. 36 staffs attended the program.

They came from different centres from Kathmandu and from different centers out of valley.

THE CHILDREN PARTICIPATION

CPCS has created a children's central government. Government members are elected democratically by all the children and meet every week in Godawari. These meetings give the children the possibility to bring any topic they want on the table and to make suggestions about the program they are enrolled in. Those meetings take place in two different phases. First off, every child has a chance to give its opinion about its own center. Secondly, there is an in-depth discussion about different ideas or comments that were brought up by the children during the first round of the meeting. For every meeting the government members write a report about what was said and about possible actions that need to be taken in the future. To ensure that the rules and the system are respected, the children have formed a court of Justice to ensure that the system works and that the rules are followed properly and correctly. By making the children participate in the life and management of the centers, we try to make them feel responsible and offer them a role to play in our structure. The objective of this government is to make the children aware of the management of the centers and their daily lives and to teach them how society works. The CPCS staff facilitates the meeting: ATR and Bijesh Shrestha.

Examples of children participation:

*The **Kitchen Club** that exclusively takes place in the girl's center illustrates the participation of the children in the centers. In 2006, CPCS opened a canteen system for the meals and snacks managed by a subcontractor. It was not a great success and many children complained about the food quality. Consequently, the Kitchen Club replaced the canteen at the beginning of 2007. Every day, two children from the Kitchen Club have to prepare rice, lentils, and vegetables for the other children and the members of the organization. Each group is responsible for purchasing food at the market, for keeping accounts, and for the cleaning. Particular attention is paid to the safety and quantity of food in stock, what is distributed, and thrown away. It is the role of the children to be creative and care about the kitchen area, including hygiene and the look of the kitchen. The kitchen club system is currently being revised considering less number of children.*

CHILDREN COUNCIL MEETINGS STATISTICS

Representatives by Center	J	F	M	A	M	J	J	A	S	O	N	D
Godawari DIC	4	4	5	4	4	5	18	16	17	17	12	18

This is only DIC center kid's record who participated in child council meeting.

NETWORKING WITH AUTHORITIES STATE BODIES AND OTHER ORGANIZATIONS

CPCS International organized its 2nd Central Project Advisory Committee meeting on 23rd Jan 2017 and 3rd Central Project Advisory Committee meeting on 27th Dec 2017. Mr. Dilli Prasad Bhatta (Member Secretary-SWC) Chair Mr. Nawaraj Pokharel (Deputy Country Director -CPCS-INT) Co-chair Ms. Bhagawati Sangraula (Act. Director – SWC) Member Dr. Kiran Rupakheta (Program Director – NPC) Member Mr. Om Prakash Bhattarai (Section Officer- MoF) Member Ms. Sunita Nepal (Under Secretary- MoWCSW) Member Mr. Dilip Poudyal (Under Secretary – MoFA) Member Mr. Dhurba Raj Regmi (Under Secretary-MOE) Member Mr. Rajiv Pokharel (Under Secretary-MOH) Member Mr. Binod Kumar Bhattarai (Under Secretary-MOLJ) Member Mr. Hari Tiwari (Act. Director –SWC) Member Mr. Rukmagat Aryal (Section Officer) Member Mr. Yam Kanta Pandey (Section officer- MoF) Member Mr. Bhoj Raj Uprety (Asst. Director –SWC) Member Mr.

Bijesh Shrestha (President -CPCS-NGO) Member Mr. Tek Bahadur Poudyal (Finance Manager – CPCS) Member Mr. Badri Parsad Sharma (Social rehabilitation – CPCS) Member. The meeting took 1 and half hours and was followed by tea.



Similarly, “Chabahil Pashupati Child Shelter” (CPCS) organized on 19th June 2017 its DPAC meeting in Kathmandu. It was presided by LDO Gopal Kumar Adhikari and graced by Kathmandu CDO. “Child Rights Protection Center” (CRPC) Sindhuli organized on 27th August 2017 its DPAC meeting in Sindhuli. “Organization for Child Development” (ORCHID) Morang organized on 25th August 2017 its DPAC meeting in Biratnagar, Morang. “Center for Protection Child Rights” (CPCR) Dolakha organized on 28th August 2017 its DPAC meeting in Charikot, Dolakha.

Project Agreement (PA), provisions DPAC meeting for analyzing, evaluating, monitoring and qualifying project activities in district for the sake of stakeholder children and parents as well as coordination and network with local government bodies. CPCS International organized program. Child Protection Officer, Child Right Officer, Woman Children Development Officer, District Education Officer and District Public Health Officer and District Superintendent of Police attended the meeting and opined about CPCS programs and activities. They highlighted the child selection process for education support, child parents’ support, Rehabilitation of children at risk, project sustainability and budget. **CPCS -INT** representative replied the question raised by authorities during the meeting. As per government rules, DPAC should be organized by INGO in every six month.



Networking with NGOs and other Child Protection Organizations

- ✓ CPCS has developed a partnership with the Central Child Welfare Board (CCWB) and attended dozens of meetings to support and lobby the authorities and join their campaigns for the best interest of the children.
- ✓ Coordination and collaboration with “Kids Shangrila”, “Jyoti Vocational” and CWSN, mainly through youth’s referral for skills and vocational trainings.
- ✓ Regular coordination with the *Center for Children Search and Found* or 104 (CCSF, *Balbalika Khojtalash Kendra*), whose mission is to search/find lost children’s families, to inform about lost children (*they do not know their home address*) and to reduce the risks of violence, abuse, or exploitation of children. During first semester 2016, CPCS has provided a grant to the CCSF, for media publication support and logistic expenses.
- ✓ Collaboration with Shivapuri Higher Secondary school, Gyan Bikash school, Bijaya Memorial high school, and Nandi secondary school, which have been managing the enrollment of CPCS children in schooling programs, and offered support for their academic growth and development.
- ✓ The Central Child Welfare Board (CCWB) organize meeting on Rehabilitation of Kathmandu street children and aim for Kathmandu to become street children free.
- ✓ Series of meetings were held in ministry of women, children and social welfare (**MOWCSW**) and **CCWB** with other active NGOs for consultation and partnership. Ministry and **CCWB** already made the guidelines to regulate and monitor the street children work in Kathmandu Valley. NGOs assisting the meeting were: CWIN, SAATHI, SATHATH, PRAYAS, KHUSHI VOICE OF CHILDREN CONCERN HEARTBEAT. CCWB has also visited CPCS Sifal shelter and proposed to increase its capacity for children rehabilitation. CCWB “Street Children Desk Chief” Mr Rabi Gautam has visited CPCS and participated in our night field’s activities for few days. He has also collected the number of children met in the street.
- ✓ Different colleges government and privates; padma kanya College, Saint Xavier College, Saint Lawrence College, KMC College, Nobel College, Stupa College, Trichandra College has sent their interns and volunteers for their field works.
- ✓ CMDN- Nepal has come for street children HIV test and diagnosis among children with professional counseling services. Saint Xavier’s College distributed 25 pair’s warm clothes to children.

OUTLOOKS FOR 2018

- ✓ Reinforce the rehabilitation program with specific mid-term care in the Dolakha Regional Centre. (for girls and boys)
- ✓ Open FCC's (Family Care Center) in Regional center Dolakha and Charikot.
- ✓ Focus on prevention / Family – based support.
- ✓ Deinstitutionalize more street based children or children at risks and develop/enhance the reinsertion process to ensure either reunification of children with their families or others ways empowering them for a better future.
- ✓ Improve support and services to street-based children out of Kathmandu valley and better focus on their legal support.
- ✓ Quality improvement and child protection / participation focus.
- ✓ Improve the socialization centre (Short-term care) in Kathmandu valley and plan a 5 years development plan including the building of own facilities in Godawari.
- ✓ Planning to make 3 Rooms Home in Godawari Land to ensure appropriate care for the street-based children sheltered in the socialization center.
- ✓ Improve the CPCS structure (board, CDC, management) with multiple local partners and develop the International Alliance (The CPCS Alliance)
- ✓ Reinforce our link and partnership with local authorities (DDC, SWC, CCWB, MOWCSW)
- ✓ Implement better the new HR policy / Financial Policy.
- ✓ Improve the implementation of [Child Protection Policy](#) among staffs, children etc.
- ✓ Open a Youth Support Program in Dolakha including farming, rehabilitation and trainings (*for girls and boys*).
- ✓ Reinforce the Sindhuli and Morang Regional Centers to ensure “long term, costs-effective and efficient support)
- ✓ Adopt new strategies/methodologies to continue working with street-based kids (including street work, field, local partnerships)
- ✓ Improve our monitoring and reporting system and expences control .
- ✓ Organise an International Meeting in Nepal (October 2018) with Dynamo International and the Street Workers Network.

ANNEXES

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CPCSTAN

(CPCStan est une association étudiante (loi 1901) fondée par la promo ECE 2015-2017 de l'Institut Stanislas Cannes pour sensibiliser et collecter des fonds)

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