

Doctors have a dual role to play in terms of the POCSO Act 2012. They are in a position to detect that a child has been or is being abused and also often the first point of reference in confirming that a child has indeed been the victim of sexual abuse. Studies have shown that doctors are less equipped to deal with POCSO even though they are the first point of contact and first one to report such cases. With cases of sexual offences being reported frequently from across the nation there is need to sensitize doctors not to miss cases and pick up early.

The Ministry of Women and Child Development enacted the Protection of Children from Sexual Offences (POCSO) Act, 2012 in response to the rising incidence of child sexual abuse in India. The Act was beneficial, yet it had many loopholes which paved the way of the Amendment Act of 2019. Thus, the Amendment Act was a highly welcomed legislation.

Objectives: To elaborate on the provisions of POCSO Act, and to explain the doctors on how to identify victims of sexual abuse, how to report cases, how to certify such cases, also what are the limitations of medical practitioners, to protect the children from exploitation.

Material and Methods: 1. Gazette of India, ministry of law and justice 20 June 2012, The POCSO Act 2012 (India), 2. Gazette of India, ministry of law and justice 06 August 2019, The POCSO (Amendment) Act 2019 (India).3. Ministry of Women and Child Development, Study on Child Abuse India 2007.

Conclusion: While the principles of medical examination and treatment for children remains the same as that for adult sexual victims, it is important for doctors to keep some specific guidelines in mind in relation to children and also to know their limitations and play the role of saviour in prevention of child exploitation.

Corresponding Author:

Dr Dhananjay Kumar

Junior Resident III, Department of Forensic Medicine, Institute Of Medical Sciences, Banaras Hindu University, Varanasi

Email: drdhananjaykumar@bhu.ac.in

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