

A Study of Deprivation among Children working/living on the Streets of Bareilly, India

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Abstract

This study investigates the extent of deprivation among the children who work on the streets of Bareilly. A questionnaire was administered to 50 children who were found working and or living on the streets of Bareilly. It was supplemented by focus group discussions. Results revealed that these children were suffering severe deprivation of several forms particularly the education deprivation and deprivation of basic amenities. The majority of such children were pushed to the streets due to poverty and they were dependent on begging and selling petty items for earning a livelihood and supplementing the income of their families. On the streets they were exposed to several types of abuses by different people. The phenomenon of street children can be addressed through social security measures such as cash transfer, health and education assistance.

Keywords: Abuse, Children, Health, Nutrition, Poverty, Street.

Introduction and review of literature

There is no denial of the fact that children are the future of any nation and when they are at the risk of poverty and deprivation, no nation can sustain the race of development. Several Conventions of International institutions such as United Nations and UNICEF; constitutions of countries, various national institutions, ministries, private bodies and scholars have time and again emphasized the children's rights to a core minimum level of well being, including protection, survival, basic education, nutrition and the right to grow up in a family. Children

who live and/or work on the urban streets are at the extreme end of the continuum of poverty among urban children.

de Moura as quoted by Dutta analysed the media and literature on these children and found that the use of the term “street children” is predominant in Latin America, Asia, Africa, and Eastern Europe, while the term “homeless children” is used in North America and Western Europe^[1].

Amiri as quoted by Zarezadeh emphasized that the phenomenon of street child is considered as an increasing social problem by the majority of scholars. The poor children, with or without family, living in streets, train stations, and other business centers make a portion of human society^[2].

Kebed as quoted by Laha and Alem highlighted that the problems of street children are widely dispersed (psychological, physical, and sexual abuses), but for several years they were not in societies’ programme^[3].

Wasi mentioned about the exploitation of working street children by their employers who make them work for long hours in the same posture, without food, without providing any safety information or equipment, without informing them about the consequences of the activity, and by making them work for abysmally low wages without any social security and without any leisure or holiday^[4].

Street children do not have what society considers appropriate relationships with major institutions of childhood such as family, education and health. The continuous exposure to harsh environments and the nature of their lifestyles make them vulnerable to substance use and this threatens their mental, physical, spiritual and social well being. Street children live a transitory life style and are vulnerable to inadequate nutrition, physical injuries, substance use, and health problems including sexual and reproductive health problems^[5].

Children most frequently reported family conflict (including violence, parental drug use, physical abuse, neglect) or changes in family structure (death of a parent, remarriage and resulting discrimination or abandonment) as their reason for being on the street^[6].

Several studies indicated that street children experience high levels of hopelessness, vulnerability to depression, and depressive symptoms^[7, 8, 9].

Street children reported limited access to health care. Barriers included cost, minority status, stigmatization by providers, distrust in quality of care, and difficulty finding time to seek care because of lost earnings^[10, 11].

In a study conducted on 237 street children in Manga district in Burkina Faso (West Africa), 84.8% were boys; the overall mean age was 11.5 years, and 72.6% were adolescents (aged 10 to 17 years). Growth retardation (15.9%) predominated among the children aged 4 to 9 years, while a weight deficit (27.9%) was most common among those aged 10 to 17^[12].

A study conducted in Shahbagh area of Dhaka, Bangladesh on 120 subjects found that only 23.3% of them studied to the primary level of education. Most of the street children were drop out from the primary level or they may have never been given the opportunity of an education. Nutritional Status was assessed by BMI for age-weight status categories and majority of the street children were found to be underweight. They lacked access to safe drinking water, adequate and nutritious food and shelter^[13].

The present research study emphasizes on the deprivation suffered by children living and/or working on the streets of Bareilly by exploring the findings of a survey of 50 children.

Objectives

Following objectives were framed for the study-

- (i) To understand the extremely vulnerable circumstances in which street children live and/or work.
- (ii) To know the factors which push these children to the streets.
- (iii) To know the activities street children undertake on the streets.

Research Methodology

In contrast to child rights approach which omits the multidimensional aspects of deprivation and poverty this study used the deprivation approach emphasizing the necessary conditions for the holistic development of the children. It is worth mentioning here that most studies emphasize on the families 'with an address' this study by following a deprivation approach seeks to omit this weakness. This study used the six key dimensions of deprivation to determine the poverty status

of children. These were –safe drinking water, nutrition, access to sanitation, shelter, health and education. The international deprivation thresholds for each dimension can be conceptualized along a continuum ranging from no deprivation to mild, moderate, severe and extreme deprivation. This study draws on primary data collected by the author in January 2020. Following are the details of the population and the sampling procedure-

Study area- Study was conducted in Bareilly, Uttar Pradesh.

Population of the study- Children living and/or working on the streets constituted the population of this study.

Sample size- This research study was conducted with 50 respondents.

Sampling technique- Due to non availability of sampling frame of street children population, a respondent-driven sampling method was used, where individual respondents referred the researchers to other children they knew, these children in turn referred the researchers to still other children.

Data collection tool- Data was collected in the field by using a questionnaire.

Data analysis tool- Data was analyzed by using SPSS 16.0 software.

Results and Discussion

Following results were obtained from the data analysis.

Characteristics of the children in the sample

Study found the circumstances of the children to be complex. There was a continuum of connection of street children with the streets ranging from those worked on the streets during daytime and returned to live with their families at night to those who were completely alone for survival and having very loose ties with their families.

There were multiple responses cited by the children when they were asked about why they came on the streets. Only the key reason was noted. Majority of the children cited economic hardships as the key reasons which pushed them to streets. Other reasons cited were abuse by the parents or

other family members, fun and frolic. A small proportion of small aged children were also found on the streets with their mothers. Following table summarizes the results-

Table 1

| Factors which pushed the children on the streets | Percentage of children(N=50) |
|---|-------------------------------------|
| Obtaining income for self and/or for family | 42% |
| Abuse by parents or members of extended family | 14% |
| Orphanhood | 6% |
| Came with mother or mother’s influence | 26% |
| Just for fun and frolic with friends | 16% |

Source: Primary data

16 % children were from the rural areas and 84% were living in the urban area at the time of conducting the survey.

Parental presence is a significant factor related with street children phenomenon. Data from the study revealed the same. Parental status of the children varied. 66% children reported their parents to be together, 20% had single mothers, 8% had single fathers, and 6% lost both the parents.

Following table shows the sleeping arrangements of the respondents.

Table 2 Places used for sleeping by children who did not frequently return to their homes at night (Multiple responses)

| Places/location | Number of children |
|-----------------------------------|--------------------|
| Bus stations | 3 |
| Railway vicinity | 4 |
| Under a bridge | 2 |
| Doorstep or pavement of buildings | 2 |

Source: Primary data

10% of the total respondents were not returning to their homes at night frequently. Such children chose pavements of the buildings/shops, railway platforms and bus stations to spend the nights. All the girls except one reported to return to home at night. Children who returned to their homes at night were there on the streets due to the push factors mentioned in the earlier section of this article. Such children are partially self supporting and provide a helping hand to their families also by supplementing their families’ income through various economic activities on the streets during day time.

Economic activities, income and expenditure of the children on the streets of Bareilly

Due to their age and situation, street children find income generating activities only in the informal sectors of the economy. Just having a look at their appearance on the streets, one can easily say with certainty that they all were engaged either in some petty work or in begging. Figures also confirm the same. 48% were obtaining their income from begging only, 30% were obtaining income from selling petty items and begging both. It was observed by the researcher in the field that these small children were pushing hard to sell their items to the people outside the parks, malls, temples and schools in Bareilly. When they failed to sell anything they started begging for some money or food. Out of the total sample 22% were obtaining income only by doing some work such as selling petty items (ballons, small toys, neem sticks for brushing teeth, bubbles). They also reported to be used occasionally for distributing advertising flyers and to look after the vehicles of the people outside the malls, parks and tourist places.

Average daily income of the children was found to be 57.7 Rs. with a standard deviation of 11.2 Rs. It was found that older children spent their income on a variety of items whereas small aged children were giving their earnings to their parents/family members. Detailed picture regarding the expenditure has been presented in the table below.

Table 3 Expenditure per month (N=50) (multiple responses)

| Expenditure Item | Number of children | Average per month (in Rs.) | Standard deviation | Minimum (in Indian Rs.) | Maximum (in Indian Rs.) |
|------------------|--------------------|----------------------------|--------------------|-------------------------|-------------------------|
| | | | | | |

| | | | | | |
|----------------------------|----|-----|------|-----|-----|
| Food items | 32 | 315 | 44.8 | 276 | 380 |
| Clothing | 18 | 281 | 52.6 | 210 | 358 |
| Given to parents/guardians | 39 | 440 | 71.2 | 340 | 600 |
| Others | 18 | 230 | 31.3 | 215 | 378 |

Source: Primary data

Since engagement of children below 16 years of age in economic activities is treated as child labour; therefore in this regard, the children were severely deprived of their fundamental rights.

Vulnerabilities of children working/living on the streets of Bareilly

Study found the physical and verbal abuses as the most common forms of abuse children faced on the streets by the adults. Few children reported to have been attacked by other street children also, so abuse occurred amongst themselves also. Incidences of sexual abuse were not reported. Other hardships they faced were the scorching heat during summers, bone chilling cold during winters, traffic, inhaling polluted air on the streets and animal (particularly dogs) menace at certain places.

Forms of deprivation among the children on the streets of Bareilly

Education deprivation

Education deprivation along a continuum can be defined as-

- Completed school- no education deprivation
- Dropping out of school- moderate education deprivation
- Never attended school- extreme education deprivation

Figures from the study revealed severe education deprivation among 40%, rest of the proportion of the children was dropped out of the school so they were experiencing moderate education deprivation. These results are comparable to the findings of other researchers^[13].

Dropped out children cited economic constraints as the reasons for dropping out of the school and supporting themselves and their families by doing some sort of economic activity on the

streets. Other reasons cited for dropping out were- inability to cope with the school, non-interest in attending school and non-importance of education.

Nutritional deprivation

Sights of the children consuming unhygienic food which they picked up from the leftovers and/or obtained through begging were not uncommon. However, at times several food items were also bought by them. Weight and height of the respondents were measured to gain an insight into the nutritional status. Following values of height and weight provided by the Nutrient Requirements and Recommended Dietary Allowances for Indians, I.C.M.R. 1990 were used as a benchmark. 64% of the children out of the total sample was found to be underweight, no children was found to be severely underweight and 48% were found to be stunted and 8% were severely stunted. These results are comparable to findings in literature reviewed that street children experience malnutrition [14, 15].

Table 4 Average height and weight of boys and girls at different ages

| Age | Boys Weight (in Kgs) | Boys Height (in cms) | Girls Weight(in kgs) | Girls Height (in cms) |
|----------|----------------------|----------------------|----------------------|-----------------------|
| 5 years | 18.7 | 109.9 | 17.7 | 108.4 |
| 6 years | 20.7 | 116.1 | 19.5 | 114.6 |
| 7 years | 22.9 | 121.7 | 21.8 | 120.6 |
| 8 years | 25.3 | 127.0 | 24.8 | 126.4 |
| 9 years | 28.1 | 132.2 | 28.5 | 132.2 |
| 10 years | 31.4 | 137.5 | 32.5 | 138.3 |
| 11 years | 32.2 | 140.0 | 33.7 | 142.0 |
| 12 years | 37.0 | 147.0 | 38.7 | 148.0 |
| 13 years | 40.9 | 153.0 | 44.0 | 150.0 |
| 14 years | 47.0 | 160.0 | 48.0 | 155.0 |
| 15 years | 52.6 | 166.0 | 51.5 | 161.0 |

| | | | | |
|----------|------|-------|------|-------|
| 16 years | 58.0 | 171.0 | 53.0 | 162.0 |
|----------|------|-------|------|-------|

(Source : Nutrient Requirements and Recommended Dietary Allowances for Indians, I.C.M.R. 1990)

Sanitation deprivation

No access to adequate sanitation facilities poses a serious health hazard. Sanitation deprivation along a continuum can be defined as-

- Access to a public/private sanitation facility- no sanitation deprivation
- Access to an unimproved sanitation facility- moderate sanitation deprivation
- No access to any kind of toilet within the surroundings of the dwelling place- severe sanitation deprivation

Figures revealed that majority (64%) of the respondents had access to toilet facilities within 500 meters of where they slept. 24% respondents reported not to have any access to any kind of toilet and they were therefore severely deprived of sanitation facilities. Such children reported to relieve themselves near brooks (naala in local language), roadsides, near dump bins installed by Nagar Nigam Bareilly(a local governing body), in vacant plots and in abandoned buildings, 12% respondents had access to unimproved toilet so they were moderately deprived of sanitation facilities.

Health deprivation

According to Gordon et al.(2003) the health deprivation approach related with children in the developing world considers two health dimensions-first is the occurrence of childhood diseases which are untreated particularly diarrhea and acute respiratory infections and second is the vaccination. In the study sample, a minuscule proportion (22%) of the total sample was certain of having been vaccinated. Since majority of the children were not certain about the vaccination status, it was not possible to determine the proportion of deprived children along this dimension.

Diarrhea is one of the most common causes of death among under-five children in India. It accounts for 13% deaths in this age-group, killing an estimated 300,000 children in India each

year. 34% respondents out of the total sample reported the occurrence of diarrhea within the last one month.

Conclusion

This study emphasized the multifaceted circumstances of children working and living on the streets of Bareilly. It found that children in the study suffered deprivation of multiple forms particularly the sanitation, education and nutrition deprivations. They were deprived of the children rights set out in the United Nations Convention on the Rights of the Child. The situation of such children living and working on the streets of Bareilly is serious and needs immediate attention. Addressing the phenomenon of street children requires multi-sectoral and multi-stake holder approach. To this end, it is necessary to understand the reasons why they are left vulnerable by adults in general and their parents/guardians in particular due to which the children end up on the streets. Assistance to begging children by the general public by giving a few cents at an intersection does not have any impact on improving the conditions of these children and may perpetuate their situation.

Limitations

- 1- Sampling frame of street children population is generally not available from any agency. Present study relied on primary data collected from the children using snowball sampling which is a non-probability sampling, so it suffers from all the flaws and limitations of sampling in general and non-probability sampling in particular. Since this study was not a complete enumeration therefore the non representativeness of the entire population by the small sample size should not be ignored.
- 2- Cautious is required in making the inferences from the findings of this study.
- 3- More detailed and funded research studies need to be conducted to fully understand the plights of street children.

Ethical Clearance- Ethical clearance was obtained from the ethics committee of Amity University.

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Conflict of Interest- None

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