

STREET CHILDREN OF INDIA - A GLIMPSE

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Childhood ought to be a period free from worries about the world. Every individual is talented, gifted and special in one way or the other and inputs of a warm loving home, kind parents and a good school education can develop a child's all-round personality. Unfortunately, a very large number of children in our country are deprived of these basic needs.

The National Policy for Children was formulated in 1974. It emphasises equal opportunities for development to all children during their growing years. This would serve reducing inequality and ensuring social justice. The strategies proposed to achieve the broad objectives of the National Policy for Children, especially those living in conditions of poverty and deprivation, concentrate on nutrition, health and education. Our Constitution prescribes compulsory and free primary education to children of 6-14 years. Under the Five Year Plans, the Integrated Child Development Services (ICDS) project was launched to mitigate the overwhelming problems of malnutrition and nutrition-related diseases.

The year 1979 was celebrated as, '*International Year of the Child*' by the UN to provide, through national child development policies and implementation of a wide range of activities, hope and a new future to children living in conditions of severe deprivation. A large part of such children are street children.

The phenomenon of street children is closely linked to that of large-scale migration of populations from rural to urban centres. Unemployment or under-employment and hopes of a better life are at the back of such migrations and this has led to proliferation of slums and people having to live on pavements and streets and, indirectly, to the increasing numbers of street children in urban centres. Some children also end up in the

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streets as a result of a compulsion to escape from family tensions and broken homes, as also, due to their pursuit of independence.

Sociologists identify street children under three categories. Of the three, the worst are the abandoned and neglected children with no family ties left, uprooted and unwanted. They are mostly working children. The second category constitutes children of the street. These also are mainly working children with few family ties. The third category comprises children who live with their families, but are on the streets due to poverty and their parents' unemployment. These can be considered to be the best placed among the three. They usually have migrated from rural areas for want of employment and taken shelter on pavements, in railway stations and bus stands or near temples etc.

Of these three categories, the largest (90%) is that of children, primarily working children, with regular family connections. The next is that of the 'Children of the Street', which, though smaller, on account of the children viewing the streets as their home, is more complex. The members of the last category, abandoned children, also forms a complex group, since they are also completely on their own. The children of the street and the abandoned children, together, form 10 per cent of the total.

The National Policy for Children, which stresses programmes for the maintenance, education and training of destitute children and orphans and also professes to protect children against neglect, cruelty and exploitation remains on paper only. According to a study conducted by UNICEF, nearly 40,000 children die every day in developing countries and, out of them, one fourth are from India.

Street children are deprived of all health programmes, since our health services are in such disarray that even a person from the middle class finds it difficult to avail of them. Obviously, the possibility of street children getting them is very remote indeed. Studies conducted in some major cities of India suggest that a street child has moderate health. Studies conducted in Madras, Calcutta, Hyderabad, Bangalore and Kanpur show that 69, 33, 84, 93, and 77 per cent respectively of street children in these cities had moderate health.

As regards health facilities, most street children preferred government hospitals in case of need. Studies conducted show that in Indore, Madras and Bangalore, 27, 82 and 76 per cent, respectively, went to government hospitals. In Kanpur, 96 per cent of them said that they were not suffering from any illness.

Since no good health facilities are easily accessible to the poor destitute street children, many of them suffer from chronic diseases to which they are exposed day and night due to the polluted and unhygienic environment of the pavements and lack of proper shelter. Since government hospitals do not entertain prolonged treatment to such children and as they can not afford private hospitals, the duration of illness is often very long. It varies from less than a year to more than 5 years. Studies conducted in Bangalore, Bombay, Madras, Hyderabad and Calcutta show that around 21 per cent in Calcutta, nearly 70 per cent in Hyderabad, 15 per cent in Madras, 12 per cent in Bangalore and 74 per cent in Bombay have been sick for more than five years.

Street children suffer not only from various chronic diseases but also the effects of undernourishment. Even though nearly 60 per cent of them said that they got at least two meals a day, according to studies conducted, 87 per cent in Bangalore, 32 per cent in Calcutta, 85% per cent in Hyderabad, 88 per cent in Bombay and 75 per cent in Kanpur were undernourished or severely undernourished.

Chronic diseases and undernourishment are not the only problems. Water is a commodity for which they often have to pay. Nearly 97 per cent in Calcutta, 99 per cent in Bangalore and 90 per cent in Madras have no bathing and toilet facilities. The reverse was the case in Kanpur, where 83 per cent said that they had these facilities. Since many street children are involved in professions like begging and rag-picking, bathing has no perceived value. Begging is such a profession that a daily bath affects the profession adversely. Rag-picking, because of its very nature, makes and keeps the children dirty so that bathing and washing serve no useful purpose. Any expenditure of money or effort on them would be sheer waste.

In recent years, nothing has been heard of the National Children's Board which was set up in 1975 and, of which the

Prime Minister is the President. The annual report of the Department of Women and Child Development makes no mention of the Board, though it speaks about the National Children's Fund created at the Board's behest. Apparently, the board has gradually waned.

Various schemes planned in 1992, by the Union Welfare Ministry, in association with UNICEF, included identification of street children and their families, mobilization of preventive health services and provision of nutrition support to maintain the requisite level of mental and physical efficiency. It was also proposed to link their physical efficiency to gainful vocations, trades and skills, priority being given to those who are destitute with no family ties and those who are victims of abuse and exploitation. Also, special attention and priority were to be given to the girl child.

Extending extra health facilities, carrying out nutritional programmes, giving them vocational training through NGOs and protecting them from abuse could be the basic measures in the healthy upbringing of the street children. To mitigate their lot, in addition to long range measures, distributing dry-food polypacks to them could be one effective step and this can be done through ICDS. Steps are being taken to provide night shelters for them in school buildings etc. Municipalities could be involved in providing ration cards and creating bathing and toilet facilities.

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