Study on perception of child living in slum

Dissertation Submitted

to

The IIHMR University, Jaipur

for the partial fulfilment for the award of the degree of

Master of Business Administration (MBA)
in

Rural Management

By

Shashank Anand

Under the Supervision and Guidance of

Sazzad Parwez

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DECLARATION BY STUDENT

I hereby declare that this dissertation titled Study on perception of child living in slum is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

(Signature)
Shashank Anand

Name of Student: - Shashank Anand
Date: - 05-07-2021

CERTIFICATE

This is to certify that Shashank Anand in partial fulfillment of the requirements for the award of the degree of MBA (Rural Management) from the IIHMR University, Jaipur has successfully completed his internship at Save the Children during April 8, 2021 to June 19, 2021.

Place: Bihar

Rafay Eajaz Hussain
Preceptor/Head of the Organization

Name of the organization

Date: 5/07/2021

Save the Children

CERTIFICATE

This is to certify that dissertation titled study on perception of child living in slum is a record of the research work undertaken by Shashank Anand in partial fulfillment of the requirements for the award of the degree of MBA (Rural Management) from the IIHMR University, Jaipur under my guidance and supervision and his approach to the research study has been sincere, scientific, and analytical.

Faculty Guide
Dr. Sazzad Parwez

IIHMR University, Jaipur
Date

School Dean
Prof. Rahul Ghai

IIHMR University, Jaipur
Date

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Shashank Anand

List of Acronyms

CCDRR	Child Centred Disaster Risk Reduction
CG	Children Group
CMAM	Community Management of Acute Malnutrition
CRPC	Children Resilience & Protection Committees
CSS	Comprehensive School Safety
CSSP	Comprehensive School Safety Plan
DRR	Disaster Risk Reduction
FGD	Focus Group Discussion
FRP	Family Resilience Planning
GIS	Geographic Information System
ICDS	Integrated Child Development Scheme
MCGM	Municipal Corporation of Greater Mumbai
MG	Mothers Group
PDS	Public Distribution System
PVCA	Participatory Vulnerability, Capacity Analysis
SC	Save the Children
SMC	School Management Committee
ULBs	Urban Local Bodies

STUDY ON PERCEPTION OF CHILD LIVING IN SLUM

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Abstract

This study attempts to find out the socio-economic condition of the slum, trace out the present child perception of living in slum situation and scenario of slum dwellers as well as identify the social and institutional barriers in access to educational facilities in three slums areas The story of urbanisation in India is replete with some remarkable statistics - the number of people residing in urban India has risen five times since 1961, the net population increase is now more in urban areas than in villages and is expected to grow to 600 million by 2030. It will eventually have a 50% share in the total population by the decade of 2040- 50. Also, the share of urban India in the GDP will grow to 75% by 2030. The 21st century is going to be India's 'urban century'. The rise in the number of the urban poor, currently standing at 76 million, is equally alarming. As per Census 2011, there are 13.7 million slum households across 63% of India's towns. These include migrants, half of them being among the poorest. Of the 377 million urban Indians, 32% are children below 18 years of age. Despite the much-celebrated demographic dividend of India, more than eight million children under 6 years live in approximately 49,000 slums. In India, with the urban population growth, the number of slums and the people who dwell in them are rapidly increasing. More than half the slum inhabitants are children, nearly 15 million boys and girls. Due to socio-economic factors, the incidence of neglect, abuse and deprivation, particularly in the case of girl child, has gradually increased. The whole life cycle of a child is full of deprivation and oppression. children of slums area have extremely limited opportunities for a decent lifestyle: they lack a foundation for healthy and fulfilling lives, and at the same time carry immense responsibilities to support the families. This neglect may be either deliberate or unintentional but whatever is the cause, it restricts the support necessary for the physical, intellectual and emotional development of the child. Presently when these issues are so central, it is worth studying situation of children in slums.

CHAPTER 1: INTRODUCTION

The story of urbanization in India is replete with some remarkable statistics - the number of people residing in urban India has risen five times since 1961, the net population increase is now more than in the urban areas than in villages and is expected to grow to 600 million by 2030. It will eventually have a 50% share in the total population by the decade of 2040- 50. Also, the share of urban India in the GDP will grow to 75% by 2030. The 21st century is going to be India's 'urban century'. The rise in the number of the urban poor, currently standing at 76 million, is equally alarming. As per Census 2011, there are 13.7 million slum households across 63% of India's towns. These include migrants, half of them being among the poorest. Of the 377 million urban Indians, 32% are children below 18 years of age. Despite the much-celebrated demographic dividend of India, more than four million children under 6 years live in approximately 49,000 slums. Almost 1 billion people in slums worldwide and the number is likely to continue to rise. For instance, overcrowding, unsafe tenures and inadequate access to infrastructure, such as health services and education, are characteristic of these people circumstances of life. Lastly, the health of the population is significantly affected. Therefore, several UN Sustainable Development Goals explicitly (Goal 11 sustainability cities & municipalities) and implicitly (Goal 3 health and well-being; Goal 6 clean water and sanitation; Goal 9 industry, innovation and infrastructure) mention the people living in slums and necessary improvement of their living conditions. Studies on slum upgrade, in which the slum settlements are gradually linked to the infrastructure of the city, are used to improve the condition for the people of these settlements. However, the present status and developments of these settlements must first be properly evaluated before any counter-measures may be undertaken.

The urban development in India is fast and increase rapidly. 285 million (27.8 percent) of India's overall population is 1027 million. In rural and urban regions, the decadal growth percentage is 17.9 and 31.2%, respectively, from 1991 to 2001. In 2011, there is an estimated slum population of 60 million, 21% of the urban total. These figures do not

however represent the actual size of urban poverty as a result of the fact that squatter sites are "unaccounted" and disorganized and reside in urban regions. Undoubtedly, a considerable percentage of the urban population live in slums or slums that severely jeopardise their health and health conditions and put them at considerably greater risk than non-slum populations.

The Slum Urban Health Program is therefore among the main topics of RCH II, National Policy for Population and National Health Policy in the 10th Five Year Plan. Five cities – Delhi, Agra, Bally, Halwani – were further selected by GoI to produce samples of the concept for urban health. Agra has really been taken into account to create a health strategy for metropolitan areas. Slum occurrence is the most frequent phenomena in the globe. It is present in almost every city in the globe particularly in poor nations, especially. Rural impoverished people are drawn to cities where traditional living is not available or where housing is not planned. Slum residents usually occupy vacant areas. In the developing world, the population of towns grows quicker than in rural regions. For cities in India, urbanization raises many social and economic and environmental issues and one of them is the increase of slums. A slum is a habitat with poor living circumstances, both social and economic (Neuwirth, 2005).

Children who are raised in slums encounter a childhood that frequently challenges both the supporters of the 'innocent infancy' and those who promote the 'world childhood.' The slums are generally without adequate sanitation, clean drinking water or systemic waste collection. In the homes where children reside, there usually is a significant lack of space and no useful public areas. That does not imply, however, that these children have no childhood but rather another type of childhood in which they play on rugged, uneven terrain, assume various roles in their daily lives and share responsibility with adults in the home and the community.

1.1 Background of the Study

In developing nations and in newly industrialised countries, the development of many cities is accompanied by slums. While the nations and international organizations are varying exactly in the definition of slums, the general agreement is that the slums are

doing very badly and they are deteriorated and worse and poverty-stricken and have no access to water, sanitation, power and land.

There is much disagreement about the number of people in the slums of the global cities. Slums are extremely vibrant urban forms and are often stubborn in the sight of urban planner and so on, being informal. The newest United Nations estimates estimate the number of slum population to be close to 1 billion, although the figure has been repeated since 2003, while the urban regeneration process has not been widespread in the past 10 years. The United Nations estimates utilise national government figures.

1.1.1 SLUMS

A slum is a compact community with a collection of badly constructed tenements, most of them temporary in nature, which are typically packed in the tight area with insufficient sanitary and drinking water amenities. This region was deemed a "slum" for the purpose of this study if at least 20 households were living in it. "Registered slums" were regarded as areas notified by the relevant municipalities, companies, local authorities or development agencies as slums. Only urban slums were included for this study. In a sample urban block, the slum portion of the sample block was regarded as a slum for the purposes of the survey, as long as it included at least 20 families. It was applicable to both reported and unnotified neighborhoods. In India, the overall population of the slums is 42,578,150 and the population of the males is 22,697,218. They are prevalent in suburbs but slowly occur in other cities and towns in India as well and are identified by different nomenclatures such as Bustees in the city of Kolkata, Chawl in Mumbai or Jhugi-Jhopdi in the City of Delhi or Cheris in the Chechennai area, Keri in Banglore.

1.1.2 Slum definition

1) 1) the slums as being those places where physical and social decomposition occur, and where it becomes impossible to live a decent family life. It includes the bad housing condition which is a key indice for the slum environment which implies homes where air, light, bathing and toilet facilities are inadequate and where the

family has no secrecy, are not repaired, discarded and poorly heated. They are susceptible to fire dangers and have virtually little recreational space.

2) (2) The slums of section 3 of the Slum Programs Act, Government of India of 1956, were primarily defined as those dwelling places where there was no suitability for human housing as a result of slumping, congestion, misconception or supply of these buildings, limited sanitary arrangements, ventilation, the road, no lighting entry, or a combination of any of these facsimile facilities;
3) 3) The area of the slum is characterised by a lack of strong housing, insufficient living space, no provision of clean water, inadequate sanitary treatment and unsafe tenancy according to UN Habitat. UN-Habitat defines slums as an adjacent resort of people with inadequate housing and basic services. A slum that the public administration frequently overlooks and does not see it as important or comparable to the metropolis." (French version, 2009).

1.1.3 Evolution of slum in India

EARLY SLUMS – Since 1947, the number of slums has increased significantly. The slum growth was mainly due to two reasons. One is India's division and the second is Industrial and Independence Revolution. Education has not been seen as a requirement.

PRESENT SCENARIO - The National Sample Survey Organization (NSSO), India, describes slum areas as "compact settlements with poorly constructed tenements that are mostly of temporary character, typically surrounded by unsatisfactory sanitation and drinking water supplies." If at least 20 families reside in that location, a slum is deemed unnotified. Education is now deemed essential for everyone.

1.1.4 Slums around the world

There is unparalleled urban development, and the greatest urban expansion happens at the city's perimeter and huge, illegal colonies are created. This has led to significant forms of migration from the countryside and villages to towns and urban caused poverty. These towns that have slum pockets are required to provide a minimum of essential facilities, such as provision of water, scientific drainage, power, housing, sanitation etc.

According to the WEF, Agenda 2016 is five of the world's biggest slums:

- Cape Town, Khayelitsha, South Africa (Population: 400,000)
- Nairobi, Kenya, Nairobi.. (Population: 700,000)
- Dublin, India, Mumbai (Population: 1 million)
- Mexico City, Mexico City, Ciudad Neza, Mexico (Population: 1.2 million)
- Karachi, Pakistan, Orangi Town (2.4 million inhabitants).

1.1.5 Characteristics of slums

Lack of fundamental services

One of the most common features of the world's slum definition is the lack of essential amenities. The most significant characteristic, occasionally augmented by lack of trash collection systems, power supply, streets and foot pathways, road lighting and rainfall drainage is lack of easier access to improved sanitary facilities and better sources of water.

Under standard housing or unlawful and insufficient construction structures

Many cities have construction regulations that establish minimum residential structures criteria. Built using non permanent materials, which are inappropriate for dwelling under local circumstances and local conditions, the slum zones are linked with a large number of substandard buildings. For example, clay flooring, mud-and-wattle walls or stroke roofs are factors leading to a building deemed to be under-standards. There may also be significant violations of various space and housing arrangements.

High density and overcrowding

Low space per person, high occupancy rates, cohabitation of several families and a large number of single bedroom units are linked to overcrowding. There are overcrowded slum housing areas with five or more people sharing a one-room apartment to cook, sleep and live. Bangkok needs a minimum of 15 units per rai of residence (1600 square metres).

Unhealthy living and living in dangerous places

Unhealthy living circumstances arise from a lack of essential utilities like visible, open sewers, walkways shortage, unregulated trash disposal, contaminated surroundings, etc. Houses may be constructed near industrial facilities with harmful emissions or land for disposal in regions that are inappropriate for settlement, such as floodplains, and areas susceptible to land-life discharge. Due to lack of access and high density of delayed construction, the architecture of the community may be dangerous (Singh et al, 2018).

Insecure tenure; settlements that are irregular or informal

A lot of definitions see the tenure of safety as an essential feature of the slum areas and the absence of any official document entitling the occupier to inhabit the land or building as prima facie proof of unlawful occupancy and slum occupation. Settlements informal or unplanned are frequently considered to be identical with the slums. Many definitions highlight both informality of occupancy and failure to comply with land use plans in communities. Settlements established on land designated for non-residential uses or invasions of non-urban land are the major contributing elements to non-compliance.

Poverty and social discrimination

The primary feature of slum communities is considered poverty, with some exceptions. It is not considered an essential feature of slums, but rather a cause (and mostly an impact) of slum circumstances. Physical and legislative expressions that cause obstacles for human and social development are slum conditions. Slums are also regions of social exclusion, which are frequently seen as high crime levels and other social dislocation indicators. In certain definitions, regions such as new immigrants, internally displaced people, or ethnic minorities, have been linked to specific vulnerable populations.

Settlement size minimum

Many criteria of slum additionally provide for some minimum area to be designated a slum area, such that the slum is a separate neighborhood and not a single house. For example, the municipal slum of Kolkata mandates that huts occupy a minimum of 700 square metres or the Indian slum definition that needs a minimum of 300 persons or 60 houses residing in the cluster of settlements.

1.1.6 Problems of slums

Natural and unnatural risk vulnerability

Slums are frequently situated in locations where natural catastrophes such as slopes and waterfalls are susceptible. Slums start on the small areas which are difficult to access or start at the foot of flooded valleys in towns situated across a hilly territory, frequently concealed from the city center's plain view but near to some natural water source. Some slums risk dangers created by human beings including hazardous industry, overcrowding of the traffic and crumbling infrastructure. Fires are another significant danger for neighborhoods and their citizens, with streets too thin to enable good and fast access to vehicles controlled by fire.

Informal unemployment and economics

Many slum residents suffer high unemployment rates due to a lack of talent and knowledge as well as pleasant working marketplaces. Many of them work inside the informal sector, within the slum or in established city regions around the slum because of the limited employment options. Sometimes without employment contract or social security, it may be legal informal economy or criminal informal economy. Some of them seek employment at the same time and, after acquiring certain professional abilities in informal sectors, some will ultimately obtain positions in formal economics.

Violence

Some scientists believe that crime in slums is one of the major problems. Empirical statistics indicate that the crime rate is greater in some neighborhoods than in other neighborhoods; the slum murders alone are 7 years longer than for the residents of the neighboring neighborhoods. Officials have deployed military officers in certain nations like Venezuela to suppress slum criminal drug violence. Rape is another major problem of slum crime. One fourth of all teenagers are raped every year in slums in Nairobi, for instance.

Disease

Inhabitants of the barrier typically have a high illness rate. Cholera, HIV/AIDS, malaria, dengue, typhoid, TB drug-resistant and other diseases were recorded in slums. Cholera and diarrhea are particularly prevalent in young children, research focused on child health in slums. After the 2004 tsunami, a Cholera epidemic occurred in Haiti (where the bulk of the population is living in poverty), killing 8321 people. Apart from the susceptibility of children to illness, several academics also concentrate on high HIV/AID prevalence in women's slums. The risk of HIV/AIDS for women in some slums rises with gender inequality. Two major methods to avoid HIV/AIDS are mutual monogamy or using condoms, however some women may not change sexual conduct because of males' power or aggression. In addition, occasionally illnesses may contribute to significant slum mortality. HIV/AIDS and TB were ascribed about 50% of the death load according to a survey in Nairobi slums.

Malnutrition of children

In slums children are less frequent than the non-slum regions. Child malnutrition. 47% of slum children under 5 years of age and 35% and 36% of slum youngsters in Mumbai and New Delhi are underweight. All of these youngsters are malnourished by the third degree, which is the highest in the WHO level.

1.1.7 Perceived family environment of children living in slums

Slum occurrence is the most frequent phenomena in the globe. It is present in almost every city in the globe particularly in poor nations, especially. Rural impoverished people are drawn to cities where traditional living is not available or where housing is not planned. Slum residents usually occupy vacant areas. In the developing world, the population of towns grows quicker than in rural regions. For cities in India, urbanisation raises many social and economic and environmental issues and one of them is the increase of slums. A slum is a habitat unit that has faulty living circumstances, social and economic.

In slum dwelling circumstances, there is extremely inadequate light and ventilation without sufficient illumination. Slums rarely have roads; more often small, twisting alleys

and dark tunnels, some homes may be built inside in a manner that gives the impression the veranda of the one acts as an intersection to the next (Doval, 2019).

Size of the family

Family is a fundamental social institution that cannot exist without. Typically, family slums are big because techniques of family planning are not followed. The family meets the greatest number of people's wants and needs. It is the family in which individuals are born, raised and trained for many kinds of social roles. It is the family that cares for the affected individuals and performs the final rites. It is the family that develops an organic person into a socialized one.

Family work

In slums, the job that is accessible at the moment is highly dependent. In summer, individuals proceed to building work according to their season. Many of the ladies participate in building labour while the women also make rag picking. The particular depiction of child malnutrition in underdeveloped nations is evident from settlements of low revenues, notably slums (Jolly, 2016).

Slum community occupancy types

- Cobblers
- Cow dung cake manufacturers
- domestic staff
- Rag picker
- Bottle Collectors
- Construction staff
- Street sellers
- Vendors
-

Slum education facilities

In slums, with the exception of Balwadis, there are seldom high schools or high schools. Since children in the slum have to move and transfer a lot, the majority of slum youngsters are lack of ability in their development.

1.1.8 Primary education

The first level of the formal education is the primary education from 5 to 7 years of age to 11 to 13 years of age. This period in the life of the kid is extremely essential for its growth overall, since it considers that it is the root of the life of the child. A kid's primary education should not be skiped as it plays an important role in their life, what the child learns later when he grows up and questions what kind of primary education he or she has. The first stage in a kid's life should be excellent and precise, since it is when the youngster never forgets what he has learnt in his or her life. Primary education is like the roots of the plant and should be robust enough for you to learn or experience in the subsequent life. If a plant is not sick, the child's life will similarly be troubled when its root is weak if its roots are not cared for, i.e., its basic education. Primary school is the start of everything, when we start to clarify our foundations of discipline by learning various abilities and values of life. Primary education is indirectly linked to what type of person in your life you will be later. It helps you to build your intellect. Everytime throughout our lives, this learning will assist us to shape our choices and distinguish between good and evil, and enable us to make correct judgments. All of these things will remain in your super-ego. Every crime that occurs in the world is dependent entirely upon our minds and thinking, our behaviours, our experiences, etc., all of which are based on what kind of education, particularly primary school. Good and robust primary education may thus possibly assist us eliminate the threat in society (Van der Kop et al, 2013).

Today people believe that education is extremely essential to an individual's existence, even in primitive cultures. But they still just provide harsh training. No emphasis is placed specifically on primary education. Given this as a major issue, these days several NGOs are beginning to fight for excellent primary education, which in some schools is poorly educated, visits there, works, teaches and improves school circumstances. Middle class individuals and upper class people recognise the significance of basic education,

and are giving their children with a decent primary education, but mostly the parents do not concentrate on primary education in lower or primitive cultures, since they do not comprehend its relevance. More and more NGOs with this particular purpose should be opened.

1.1.9 New approaches to education of slum children

The panel on education of the president of the scientific advisory committee representing the national consensus of the educational leaders pointed out that "the slurry kid may have linguistic virtuosity in the language of his own world. The panel criticized schools for the propensity to continue on the old approach, "where greatest spending produces minimal outcomes," even when they receive additional money to enhance education in the slums. It criticized the use by underprivileged students of "watered-down" versions of the conventional curriculums. "Their instructors have to comprehend, and teach in a manner that builds on the foundation what these youngsters know and value." Instead of always admonishing youngsters to listen, the group suggested that more emphasis be placed on spoken language. It recommended that some topics "be taught intuitively, not in the booking field, such as math and physics.

Another assistance method is for schools or another Community organization to run programs that would offer slum kids a kind of experience at a young age that would bring them closer to middle class kids in the school. At least 70 school districts in the nation are experimenting with pre-kindergarten programs out of more than 30,000, the US Education Office reports. Another two important experimental initiatives, recently established by the or, is the pre-kindergarten programs of children with disadvantaged origins in Portland, which are being carried out in New York City. (Following the debate in Abdi, 2014).

1.2 Research Questions

- What is the problem faced by children in slums?
- What is the slum educational institutions?
- What are children's families' socio-economic background and educational nature?

- What is the role of nongovernmental organizations in training slum children?

1.3 Objective of the Study

- To know about the present condition of children living in slum
- Understand how children in slums are growing and developing.
- Evaluating accessibility to fundamental requirements of the children.
- To disclose the living and family facilities in the slum area.
- To identify the way to improve situation for children living in slums.

1.4 Significance of the Study

Slums in India have so many difficulties. Education is one of the most essential solution in order to fight against them to eliminate them. Education in the world now is extremely essential not just to high-ranking individuals, but also to everyone and the children in slums. It helps individuals build a bright future for themselves and may also enhance their environment. Major education should also be the primary emphasis, since the plants bloom when the roots get stronger. In a social world there has been slum since a period of non-necessary schooling. But education is now needed. The most essential aspect of this research is to explore children who are seen as our society's future. No nation can grow easily if key parts of the population are left out, i.e. children. The country will be assisted in a healthier, physical, social and mental growth of a kid. This will assist to attract everyone's attention to the development of impoverished people, in particular for slum children.

CHAPTER 2: LITERATURE REVIEW

The relationship between buildings and health is stressed by **Ige (2019*).*** Unfortunately, only indirectly addressed slum residents with inadequate living circumstances, with limited access to tap water and sanitation. Although large amounts of research are accessible on the health effect of the living environment in the slums, exams are very frequently carried out in extremely short, defined areas, and therefore only very small-scale findings are useful and must be extrapolated to larger sizes.

The impact of 'Kanyashree Prakalpa' in empowering young girls who live in the vicinity of the slum was studied by **Sen (2016).** In this article, he define that poverty and children's marriages in the slum region are linked with student drops. The dismissals of pupils of females from post-primary education have been decreased after execution of the "Kanyashree programme" of the West Bengal province. In developing post primary education of slum and decrease in child marriage, the Kanyashree project plays a crucial role.

The prevailing weight and obesity among young schoolgirls was studying at **Bhattacharyya (2015*)*** in the urban slum of Kolkata. In the research, they showed that overweight and obesity in young people are increasing even in poor socioeconomic conditions. The overweight and obesity of the teenage schoolgirls of an urban slum are closely linked to variables such as the length of leisure time, including the duration of the TV/Video viewing, the reading and listening to music or book stories, school transit and intake frequencies.

Bedre (2015) investigated the variance in sex preference with gender unequal treatment in the Mumbai urban slum region in relation to child raising methods. The research has shown that the weaning at the right period, i.e. 4-6 months, is significantly associated with sex. Complementary feeding begins more quickly in males than in girls. The nutritional condition & sex of the kid also have a major relationship. In comparison with male counterparts, it was shown that a greater percentage of female children had any level of undernutrition. The research has shown that the vaccinations and sex of the kid

are significantly related. In comparison to females, most boys have been fully vaccinated. Although these facilities cost much more than females, the majority of guys were transported to private clinic for treatment.

Goswami (2015) emphasises comprehensive social evolution that includes poverty eradication, the encouragement of the acceleration of productive work, social integration, quality education opportunities, etc. Social well-being is also designed to allow every person, via productive economic, social, cultural, moral and political actions, to enhance his or her capacity to take control of his or her destiny, and to participate in choices and decisions affecting society in its collective direction. Social development policy must, in order to accomplish these goals, concentrate on man, equity, social justice and security along with social cohesiveness, human rights and non-discrimination, and ultimately involvement of people in all development policy areas.

In their research paper of **Jha (2014*)*** tried to quantitatively evaluate quality of life in the Varanasi town slums. The research emphasised that the slums of Varanasi are of poor and extremely low quality of life. Lodging, literacy and medical services are inadequate. The absence of an adequate waste disposal system and inadequate wastewater system is both accountable for pollution and health issues.

Singh (2014) said in his research that slum conditions are very dismal in Indian mega-cities. In his research, the number of cities recorded in India was explained by the rising number day in and day out. The quality of living in slum neighbourhoods below in standard, meaning that local authorities must be enabled to provide services and infrastructure for the urban poor with financial and human resources. He also recommended that socio-economic policies and programmes, for socially-marginalized sections should be properly implemented, measures of land reform enforced, legislation should take account of the slum inhabitants' interests, co-ordination and cooperation among the different slum agencies, and proper minimum wages l should be properly implemented He concluded so that there must be certain measures to create a decent quality of life for the slum inhabitants.

The underdevelopment of urban hospital context in the slums of Ahmedabad, India has been discussed by **Laura Zalzala. (2014).** Two slums, the Ramapir No Tekro and Rama Rahim No Tekro, with 150,000 and 60,000 inhabitants respectively, were the subject of this empirical research. They track the installation, over the years, of a health and record management system supported by the local nongovernmental organisation.

The public policy response to the slum population in India was emphasised by **Sawhney (2013)** on the demographic characteristics, its socio-economic and ambiente effect. He examined several programmes that the government had developed to limit slum development and the rehabilitation effort of slum residents. He also found that the programmes initiated by the Government of India have a lot of flaws and are implemented in various ways. The difficulties in implementation are both caused by the slum residents, whose lack of sensitivity to better their life quality, and also by the practically non-functional implementing agencies.

The quality of life in Balurghat, West Bengal, was studied by ***Das (2013).*** Her research aims to provide insights into recent improvements in the slum dwellings that give slum residents a high quality of life in the study region. She emphasises the improvement of slum residents instead of the societal issues of slums. As well as relatively higher literacy rates, better conditions of public health, easy access to drinking water, sanitary installations, there are also issues in the slum area, such as inadequate sewage and drainage conditions, poor leisure facilities, poor management of solid waste, etc.

The socio-economic status of Kurukstra slum residents was examined by Sharma and **Kaushik (2013*).*** They noticed that slum residents are 'hand-to-hand' from their jobs and cannot meet the fundamental demands of their lives. They evaluated open defecation and waste disposal in these locations as inviting communicable illnesses and contaminated water as the source of worm infection and diarrhoea for children in these communities.

Tripathy (2013) examined socio-economic condition in the western Midnapur district of Bengal for semi-urban disadvantaged residents of Ballavpurmouza. Slum regions' socio-economic condition depends mostly on education, money and employment, which affects slum residents' nutritional health, lifestyle and survival. The majority of inhabitants in the slum region are in the BPL class, with transport comprising rickshaw pullers, managers of cattle carts, trolley pullers and day workers. However, his research shows that most

families living in a slum have some assets such as bi-cycle, DVD players, mobile telephone and television, some having the newest LCDs or LED television, bicycles, etc.

Nath (2013) examined the issues facing children living in the district in Kolkata Municipal Corporation while obtaining basic education. The main difficulties in primary education among 6-14-year-olds include the large family size, poor living conditions, poor health, unfavourable homes and surroundings, migration, language problems, insecure occupations and an economic environment, a weak education background and the school environment. Furthermore, in slum neighborhoods there is virtually a tranquil atmosphere to concentrate and study at home. The majority have resided in tiny single dark, wet, room with no enough air and were also utilised for multifunctional activities in these slum neighborhoods. Due to the drunken character of most males, struggle with harsh and slang language is frequent in nearly every home, hitting women and children. Children learn and begin to use such a language quite naturally. In a slum culture it is often typical in the environment that people rent a stereo box for each entertainment programme in the community and place it on the foot or roadside and play famous movie songs in quite a large volume. Therefore, while a kid wants to learn it is almost difficult for them to focus and study in such a loud and chaotic environment at home and outdoors. Where slum households are intercommunal migrants, the migrated children's mother language is entirely different from the teaching medium at local schools where they are accepted after migration either because of their lack of access to such schools nearby or because of a parental dis-consciousness. They are struggling to comprehend what leads them finally to drop out. Parents rely on private tutors in first-generation students, but they are of considerably lower quality and therefore barely enhance their level of performance.

The slum situation in India has been studied by **Bandyopadhyay (2013*).*** They stressed that the slum area's housing situation is extremely serious. In reported slums the housing density is greater than in unreported slums. Many homes are not pucca and in the unnotified slums the issue is more severe. They further stated that the main issues in the slums are insufficient water and poor hygienic conditions.

The morbidity profile of children under five in the urban slums of Nagpur was studied by **Narkhedé (2012*).*** Their research showed that among children under five, morbidities such as anaemia, nutrition, breathing disorders and different vitamin failures were extremely frequent. Anemia had the greatest disease prevalence. They analysed that children with poor nutritional levels were greater among anaemia, and that children with acute respiratory infection, followed by diarrhoea, other diseases, and measles, had a higher frequency of undernutrition than ordinary children.

Ahmad (2003) exclaimed that Bal Bikash Kendra (BK) is now considered as an Urban Information Resource Centre (UIRC) for poor children. The scope of the center has been widened facilitating access to awareness and basic education in a meaningful way along with developing the vocational skills. BK uses a combination of formal and non-formal approaches in its education programmer for urban poor children. Rather than focusing only on literacy, it addresses the wider issues of child development. Through BK, is trying out a methodology, which eventually may emerge as a model of good practice for child-development

Jorgenson *(2012)* have shown that the presence of urban slum in many less developed nations has a significant effect on child mortality. The predominance of urban slums represents a component of social mortality production based in prevalent social inequalities and economic organisation, the underlying element of which is the development of urban slums. Child mortality cannot thus simply be reduced to biological and comportemental risk factors at the individual level. Urban slums are a critical setting for promoting the disproportionate deaths of children in less developed nations.

Patel, Joshi, Ballaney & Nohne (2011) recognizes the significance of the tenure history of the landowners, communities and government, and respects their legal and informal rights. In his research, the application of local expertise is better enabled by decentralization; it encourages the formation of local SPSs and enables the effort necessary to address the issue of slum in Indian towns to be mounted.

Lekshmanan (2010*)* has been studying migrant child labour for hotels, restaurants and tea stores. It says that although poverty is a significant cause of infant labour, child labour, due to the detrimental long-term impact on children, families and communities, is also a leading source of poverty. His survey showed that the causes of child labour are

the most formidable in addition to poverty, such as parent coordination because of unemployment, family conflict and abuse of 'parent.etc..' Food is one of the main attractive elements in the hotel industry for children to work.

CHAPTER 3: METHODOLOGY OF THE STUDY

3.1 Introduction

The study adopted a conceptual approach and observations of the women entrepreneurs in rural areas.

Duration of study- 3 months

Research Design- The descriptive research design will be used for this study, includes quantitative and qualitative data.

Data type- Primary data will be collect through Interview and focus group discussion will be used to gather data of the women entrepreneurs and local women.

Secondary data will be collected through different texts, books, journals and social media

Research tool for primary data will be use questionnaire.

Different databases include digital databases, manual searches and authoritarian writings were evaluated by a literature study published. The research included questions of scientific quality that were in line with the goal of the study, which was to create slums and to perceive children living in slums.

3.2 Qualitative Approach

Qualitative research is mostly study in exploration. It is used to obtain an overview of reasoning, views and motive. It gives insight into the issue or helps to generate hypotheses or suggestions for possible quantitative research.

3.3 Sampling

For this study, data will be collected from the slums in patna. Firstly, purposively those slums is chosen. Then, by using simple random sampling technique 120 households that is 20% from total population are selected from these slums. In this method, each observation has an equal probability of being selected, therefore, the sample taken is very much representative.

- The sampling of Non probability is utilized.

- The Non-Probability Sample is a sampling method in which to choose samples from the random selection depending on the subjective assessment.

3.4 Tools of Data Collection

1. Interview plan - A schedule is a series of questions to assist the
2. interviewer, investigator or researcher in order to provide an organised response. It is an investigative strategy or guidance.
3. Observation - Observation is the practice of observing someone or something attentively.
4. Facts and literature review
5. Collection of relevant data from online sources
6. Article and journal review

3.5 Limitation

1. Time and manpower limitations in an empirical research are limiting and this study may be constrained because of these factors.
2. Respondents as such must be considered truthful to their reply.
3. In some problems the responses may be very clear and certain conclusions should be made from the observation of the respondent's overt conduct, which could include gestures and facial impressions.

CHAPTER 4: RESULT AND EXPECTED OUTCOMES

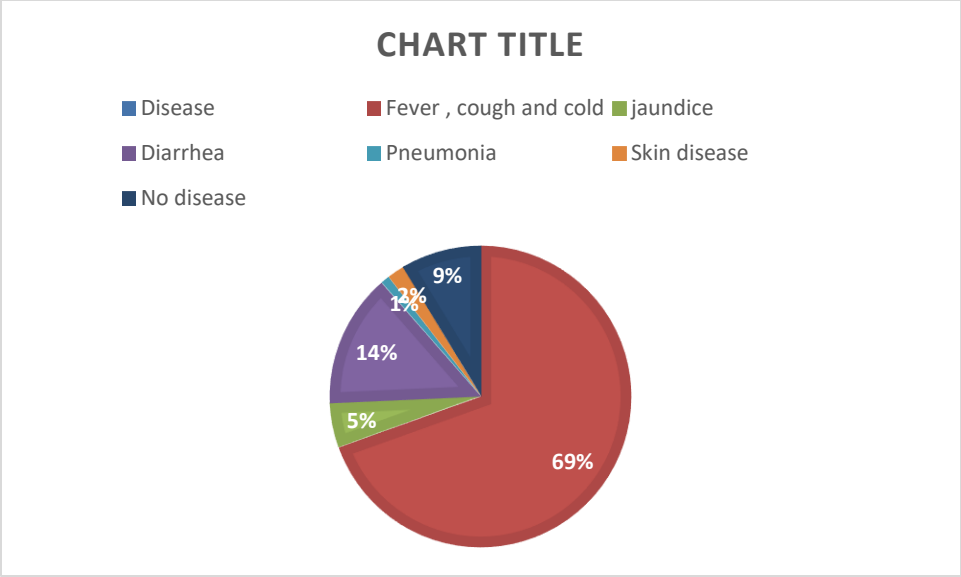
Slums in India children have faces so many difficulties like malnutrition, education, food security, water, health sanitation and hygiene and the growth and development child trafficking and child labour, In the nutrition the major factors responsible for malnutrition in children in the slum areas include improper infant feeding practices, inadequate food and health security, not economic well-being of the parent, In India there are the highest number of children death rate in a year compared to any other country in the world. There are about 2 million children are die in every year with the lack of proper health care system in India. There are many things that the slum children have to face day by day. Not only do they suffer from lack of food and education, but they also suffer from water aid and sanitation. Urban poor children face a number of health and sanitation problems. While the average infant mortality rate in urban India is 41.7, it is 54.6 among the urban poor. Similarly, while 28 out of every 1,000 children in urban India die before reaching one month of age, among urban poor this rate stands at 36.8. Water aid and sanitation are one of many important things in the slums and it is the important needs for the living. slum areas have to face and that in a way is affecting the children mostly and the people who live there. Water is not found in the many slum areas therefore women and children have to walk 2-3 miles each day to fetch water for their daily needs. Crime against children is also an indicator of the state of children. It is pertinent to highlight the data captured by National Crime Records Bureau (NCRB). The 2018 report of NCRB says that in percentage terms, major crime heads under "Crime against Children" during 2018 were kidnapping and abduction (44.2%); and cases under the Protection of Children from Sexual Offences (POCSO) Act, 2012 were 34.7%, including child rape. The crime rate per lakh children population was 31.8% in 2018 in comparison to 28.9% in 2017. It indicates that the rate of crime against children is increasing day by day, which is indeed a serious concern. Apart from crime against children, the issue of missing children is another indicator for deteriorating state of affairs pertaining to children. economic pressures force families and individuals to live in unsafe locations and conditions. When disaster strikes, those living in slums and poorly constructed colonies are most vulnerable and most badly affected,

Education is one of the most essential solution in order to fight against them to eliminate them. Education in the world now is extremely essential not just to high-ranking individuals, but also to everyone and the children in slums. This will assist you to build a bright future for yourself and enhance your environment. Major education should also be the primary emphasis, since the plants bloom when the roots get stronger. In a social world there has been slum since a period of non-necessary schooling. But education is now needed. The research is intended to do a study on the slum housing of children that helps discover socio-economic variables that influence children's health and well-being in

the slum environment. Another significant issue is that the research emphasizes the health and nutritional condition of children and highlights the highly critical risks to the health of children. The actual healthcare situation for the poorest segment may give the government or private groups attention. The study results will attract the attention of policymakers in developing effective policy both for development of children and for the improvement of the slum. Urban disasters have been increasing in the recent years, some of them resulting from natural hazards, flash floods, fire and other every day shocks and stresses. This is also the case in the targeted cities of Patna, which come under earthquake and cyclone zones respectively. Urban populations and slum populations have expanded with migration, and rural settlements have been reclassified into cities and towns. Urban populations, especially poor slum dwellers, face growing risks. In addition to the physical dangers, they are often not aware of social entitlements and sometime do not have the right skills and means to access these entitlements. This makes it extremely difficult to cope with the stresses and challenges caused by both their underlying vulnerability as well as hazard impacts. This is especially of vulnerable groups such as children single-parent-headed households, and elderly. This calls for replicable and scalable models for improving the safety and resilience of communities and institutions in informal settlements. Within informal settlements we differentiate among unregistered informal settlements and registered which therefore are recognized by the government and have therefore also the formalized right to access basic services.

Types of Diseases suffered by children during last 6 months

Disease	F	%
Fever , cough and cold	73	69
Jaundice	5	5
Diarrhea	15	14
Pneumonia	1	1
Skin disease	2	2
No disease	9	9
Total	105	



Rapidly expanding and increasingly vulnerable slum populations: Patna have continued to experience rapid urbanization, which on the one hand offers many benefits but also leads to increasing inequality, environmental degradation and growing numbers of urban poor and of slum dwellers. Slum dwellers in the cities suffer in varying degrees from poor sanitation, inadequate access to clean water, crime, unemployment, threats of evictions, overcrowding and poor-quality housing. Such poor living conditions make them more vulnerable to both large scale as well as localized hazards, especially fire and flooding. Urban disasters have been increasing in the recent years, some of them resulting from natural hazards, flash floods, fire and other every day shocks and stresses. This is also the case in the targeted cities of Patna, which come under earthquake and cyclone zones respectively. Urban populations and slum populations have expanded with migration, and rural settlements have been reclassified into cities and towns· Urban populations, especially poor slum dwellers, face growing risks. In addition to the physical dangers they are often not aware of social entitlements and sometime do not have the right skills and means to access these entitlements. This makes it extremely difficult to cope with the stresses and challenges caused by both their underlying vulnerability as well as hazard impacts. This is especially of vulnerable groups such as –children single-parent-headed households, and elderly. This calls for replicable and scalable models for improving the safety and resilience of communities and institutions in informal settlements. Within informal settlements we differentiate among unregistered informal settlements and registered which therefore are recognized by the government and have therefore also the formalized right to access basic services.

When working with poor and marginalized communities on DRR, evidence from around the world shows that it cannot successfully be addressed in an isolated way. For the poor to have more resilience in times of disaster, they should be in good health, cannot suffer from chronic malnutrition, etc. With the overarching vision of "Reducing Risk, Saving Lives", Save the Children India developed the H-E-L-P DRR approach. It embeds various life-line areas critical for survival, protection, development and participation of children, youth where their rights are enshrined. Every one of these life-lines is impregnated with risks and vulnerabilities. Some of these have the potential to impact lives severely. These life-line areas are intrinsically linked to survival and wellbeing of children. **H-E-L-P** as an acronym represents the following lifeline areas:

H = **Health, Nutrition and WASH**

E = **Education** – in peace time and disaster time

L = **Livelihood** – resilient and sustainable

P = **Protection** – focusing on Social Protection / Entitlements for poor and marginalized as well as Child Protection / Child Sensitive Social Protection.

Name of Slum	Actions	No. Of People Benefited
Yarpur Mushari	Installation of water tank and construction of a platform at the water tank	158 (37 male, 46 female, 32 boys, 43 girls)
	Street and Construction of drainage	158 (37 male, 46 female, 32 boys, 43 girls)

	Installation of street light	350 (70 male, 82 female, 76 boys, 122 girls)
Yarpur Masterpada	toilet repairing	445 (92 Male, 103 Female, 113 Boys, 137 Girls)
	Street and drainage measurement taken by PMC	147 (34 male, 41 Female, 35 Boys, 37 Girls)
	Construction of new toilet (4 units)	326 People (63 Male, 74 Female, 93 Boys, 96 Girls)
Yarpur Domkhana	Construction of community toilet in progress	416 People (94 Male, 108 Female, 92 Boys, 122 Girls)
	Installation of submersible pump and water tank	376 (72 Male, 87 Female, 98 Boys, 119 Girls)
Ramdaspath	Street and drainage system construction going on	485 people (90 male, 107 female, 142 boys, 146 Girls)
	Installation of street light	1597 people (455 male, 532 female, 286 boys, 324 Girls)
Nahargali	Installation of street light	1345 People (465 Male, 394 Female, 227 Boys, 259 Girls)

Name of Slum	**Actions**	**No. Of People Benefited**
Adalatganj	Submersible water pump being installed	2750 People (712 Male, 782 Female, 608 Boys 648 Girls
	Construction of community toilet (12 units)	1121 People (328 Male, 371 Female, 204 Boys, 218 Girls)
R-Block	Construction of street	814 People (231 Male, 247 Female, 170 Boys, 166 Girls)
Kamla Nehru Nager	Drainage with street construction.	4325 People (1125 Male, 1243 Female, 963 Boys, 994 Girls)
	Installation of submersible pump and Water tank (2 functional and 2 working in progress)	4563 People (1258 Male, 1345 female, 898 Boys, 1062 Girls)
	Repairing of community toilet 23 unit.	5532 people (1256 Male, 1467 Female, 1289 Boys, 1520 Girls)

CASE STUDY ON COMMUNITY TOILET OF YARPUR DOMKHANA

In urban resilience project, Participatory Vulnerability and Capacity Assessment (PVCA) is a tool for identification of risk and vulnerability of a slum. In Yarpur Domkhana Slum of Ward-19, Patna Save the Children conducted PVCA Mapping with the help of community people during last reporting period. Based on the reflection from PVCA Mapping, we observed that lack of toilet facility a serious concern for all category of people and specially women and children. So its poses risk and threats in many ways, being people has to go distant place for toilet even in the night and also forced to go for open defecation. People of that slum used to go near railway track for toilet, going for toilet near railway track at early morning is a threat to the life of community people especially with women and children. People of Yarpur Domkhana observed cases of death even as train passes at high speed.

Looking at such risk factors, Save The Children Team who are working in Yarpur Domkhana Slum organized on Citizen Forum meeting with the help of Ward Councilor Representative of Ward-19, Mr. Tinku Kumar. In his addressed, issues of slums were discussed and committed to take forward the matter to Patna Municipal Corporation. There was no result till 3rd quarter.

So, With the passage of time, Feb 2020, Save The Children Team organized a Ward Sabha (Under 74th Amendment, 1993 of Indian Constitution there should be a Ward Sabha in each ward. In ward sabha local committee member of respective area comes and raise their issues in front of ward councilor). In ward sabha meeting ward, displayed approval of application from Patna Municipal Corporation and will start constructing new community toilet.

Construction was not started and complete lock down, due to covid-19 imposed. Leaders from our community groups and Save the Children staffs continued follow-up to create pressure on Word counsellor and mayor to construct the community toilet. They come to know that fund crunch was an issue but work will be done. Ultimately the day come and in Sep 2021 the community toilet finally constructed. It will benefit around 150 families

and more than 800 people. The new community toilet was inaugurated by MLA, Nitin Navin and Sanjeev Chaurasia. People of Yarpur Domkhana formed a local group name "Toilet User Group" who will take care of toilet cleanliness and maintenance. Project team members were also invited by ward counselor during the inauguration.

Case Study

Yarpur Mestarpada, ward no-19 in Patna is a one of the oldest slum of Patna which is located in ward no. 19 in Patna Municipal Corporation area. This is a notified slum. There are 185 households & people mostly belongs to Schedule cast. People engaged in manual sanitation work for livelihood with Municipal corporation as well as independently. This slum is situated at multi-hazardous place- one side of railway track and other side is busy road. (Jailor Devi & Soni Devi) – govt. offices were closed during lock down. Advocacy failed. People didn't allow those families to take water due to reducing crowed as the water point was in another helpmate at a distance of 100 meter.

During the lockdown period, people of one hamlet from this slum (Tola- approx. 20 to 30 households) faced problem in accessing drinking water. People from this pocket has drinking water source was at a distance of about 100. In another hamlet. It used to be crowded water point as it serves more than 100 house hold. so people from that helmet out of fear of Covid-19 infection blocked people from other hamlet

Soni Devi approach the community mobilizers of Save the Children for solution. As per suggestion she along with other CRPC members visited word counsellor to make arrangement for drinking water, but ward counsellor expressed his inability to support her as most of the related governed offices were closed due to lock down. It was a big crisis as children were also suffering from the situation. She again approached to Save the children team as an immediate relief was required from such crisis.

After lots after brainstorming the only solution was to set-up pipe line connection from another water point. But it requires permission for connection of pipe from another point and cost around Rs. 75000 for concrete and permanent set-up. Project team convinced word counsellor for consent for connection and to convince community from that pocket. Soni Devi took the lead to convince people with two members of CRPC to raise fund from individual contribution. Her leadership role, convincing skill helped to collect subscription of Rs. 75000. She conducted meeting with members of


Installed water pump set

mother group, CRPC and selected community members in this process to collect Rs. 75000. They along with the ward councillor connected pipes to the public supply water

line, constructed a tower, installed a tank and also installed a motor to pump water to bring water to their locality.

CHAPTER 5: RECOMMENDATION

- Considering the existing problems of community latrine, spitting and hand washing increase public awareness is needed so that hygiene of girl children can be ensured in the slum
- Increased access of vulnerable households to basic services (Health, Education, WASH, Nutrition, Child Protection, etc.), entitlements and resilient livelihoods, strengthening and extending the quality of coverage
- Schools and other local institutions engage with, adapt, adopt, incorporate and demonstrate child friendly, gender sensitive and inclusive risk reduction and resilience through their improved service delivery and entitlements
- Enhanced capacities of children and communities for advocacy and engaging with local institutions in demanding effective service delivery to the most vulnerable
- Government policy and frameworks incorporate child friendly, gender sensitive and inclusive urban risk reduction and resilience

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