#### RAPID SITUATION ASSESSMENT OF STREET CHILDREN IN ASSAM

#### **Introduction:**

A sizeable majority of the children in Assam are impoverished which is supported by the fact that about 36% of the population live below poverty. The literacy rate of Assam is 64.28 and it holds the 24th position in this regard among the Indian States. Assam ranks 26th in Human Resource Development Index and 21st in Poverty Index in India according to the Human Development Report 2001. Gross Drop-Out ratio at classes-I-V and VI-VIII of schools for general education during the year 2001-02 were 48.74 and 69.21 respectively. The number of working children has increased from 327598 in 1991 to 351416 in 2001. All these factors have increased the vulnerability of children in Assam and the whole phenomenon has been largely responsible for the growing incidences of children in difficult circumstances who are destitute, neglected and are deprived of family care, protection shelter and other basic necessities for survival.

Since urbanization in Assam is gradually picking up, street children phenomenon which is essentially an urban phenomenon is increasing in many places mainly the railway stations in the state of Assam. However the present street children programme of Govt. of India only covers Guwahati and Nagaon (with open shelter only at Guwahati) while some other important towns like Dibrugarh, Silchar. Tinsukia, Barpeta, Lakhimpur, Tezpur etc where the phenomenon of street children is widely prevalent remain uncovered.

# **Objectives:**

- To map the size of street children in the state of Assam and to identify the areas of concentration;
- To assess the overall situation of street children in the state of Assam, their activities, needs, priorities;
- To understand their problems owing to street presence, the magnitude and patterns of drug abuse, labour among street children and their health, and educational status;
- To identify current governmental and nongovernmental activities and programs targeting street children, and assess their needs and problems.
- To analyze the mobility pattern of street children;
- To set forth recommendations on appropriate intervention.

# Methodology:

- i. All district head quarters and important urban centers will be selected for enumeration of street presence of children;
- ii. Important railway stations and bus stops will be included for field survey;
- iii. Places with densely populated slum population will be given priority;
- iv. A semi structured interview schedule will be administered to the children and their family members in the selected high concentration pockets to understand

- the demographic profile, mobility pattern, addiction behaviour, occupational distribution, health seeking behaviour, nature of their special problems and the kinds of support they are in need of;
- v. FGDs with community people mainly NGOs, women's group to gain an insight into the problems of such children;
- vi. Mapping of locally available services for child protection;
- vii. A cross section of children living in important stations will be included in the survey to highlight their special problems like substance abuse, unsafe sexual behaviour and lack of facilities for night shelter.

#### **Source of Information:**

## **Primary source:**

- i. Children moving on the streets in selected wards
- ii. Children attending some programmes run by NGOs like CHILDLINE, Integrated Programme for the Street Children etc
- iii. Households in the high concentration zone
- iv. FGDs with the community, NGOs
- v. Station officials, stall owners, coolies, RPF/GRP

## **Secondary Sources:**

- i. Census data
- ii. Ward Maps
- iii. Reports/Records on street children in Assam

# **Major Findings:**

Age wise distribution of street children:

S1.	District	No of Street Children/child
No		labour
1	Dhubri	238
2	Kokrajhar	42
3	Chirang	11
4	Bongaigaon	80
5	Goalpara	60
6	Barpeta	169
7	Nalbari	25
8	Kamrup (Metro)	1154 (continuing)
9	Kamrup (Rural)	To be done
10	Darrang	15
11	Udalguri	10
12	Sonitpur	141
13	Lakhimpur	50
14	Dhemaji	163
15	Morigaon	103

S1.	District	No of Street Children/child
No		labour
16	Nagaon	177
17	Golaghat	50
18	Jorhat	201
19	Sibsagar	156
20	Dibrugarh	241
21	Tinsukia	286
22	Karbianglong	53
23	N. C. Hills	10
24	Karimganj	116
25	Hailankandi	111
26	Cachar	257
	Total	3919

Place of Staying

Sl.No.	Place of stay	%
1	Under Bridge/Flyover	4
2	Bustee/slum	80
3	Railway Station/ Bus terminus	3
4	At employer place	10
5	Others(Market, Mandir, Masjid, Footpath etc)	3
	Total	100

**Nature of Work (Employment)** 

Nature of work	0/0
Brick kiln	1
Tea garden	2
Automobile garage/Cycle repairing	4
Helpers in vehicle	2
Hotel/Restaurant/Tea shop/Dhaba	9
Domestic work	6
Vegetable/Fish/Fruit vending	4
Working in grocery	1
Construction work/wage labourer	6
Rag picker	57
Hawker	2
Begging	2
Others(sibling care, sweeper, shoe polishing,	4
coal collection, biri binding etc)	
	100

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Distribution of children by their daily income.		
Sl No	Daily income (Rs)	0/0

1	Less than 30	07
2	30-60	24
3	60-90	28
4	90-120	27
5	More than 120	12
6	No income	02
	Total	100

**Daily Work Hours of Working Children** 

S1 No.	<b>Working Hours Per Day</b>	%
1	Less than 4 hours	12
2	4-6 hours	28
3	More than 6 hours	62
	Total	100

# Educational Attainment of children.

S1.No	Education	0/0
1	Never Been to school	18
	Just literate	24
2	Primary	22
3	Secondary	15
4	Illiterate	21
		100

Distribution of children by their identification proof.

Sl. No	Identification	0/0
1	Ration Card	65
2	Voter card	70
3	Birth Certificate	50

Migration status

Sl. No.	State	%
1.	Within Assam	80
2.	West Bengal	2
3.	Bihar	5
4.	UP	3
5	Others (Bangladesh, Meghalaya,	10
	Nagaland, orissa etc	
	Total	100

#### Addiction habits of children

Destace	0/0
Drugs	70
Tobacco	2
Alcohol	3
Gutka/khani	40
Chemical Drug	12
Other	4
No such addiction habit	39
Total	100

## Some Key Findings...

- On an average 84% Percent of the surveyed population are male, majority of the children(79%) belong to the age group 10-14 years;
- Majority of the street children have their origin in Assam (80%), others migrated mainly from Bihar, UP and West Bengal. Some were migrated from Bangladesh;
- Exploring livelihoods opportunity (75%) is the main reason for their migration to cities and towns. Other reasons for staying away from the families were: erratic parental behaviour, abuse in the family, parental migration, peer influence etc;
- Children are plagued by problems of basic amenities like toilet, permanent shelter, no place for sleeping, police/public harassment etc. More than half of the children are addicted to some drugs mostly gutka, khaini etc.;
- 57% of the children are engaged in ragpicking, 9% in Hotels, tea shops, dhabas, 6% domestic work, 6% in wage earning activities like construction industries, and others are engaged in automobile garage, cycle repairing works, hawking, begging etc. Children are engaged in tea gardens in districts like Tinsukia, Hilakandi, Dibrugarh, Jorhat etc. Some children were engaged in brick kilns in Cachar, Hilakandi, Jorhat. Girls are mostly engaged as domestic workers and this has been observed mainly in Guwahati, Tejpur, Dibrugarh, Silchar etc;
- A significant portion (62%) put in hard labour more than 6 hours a day to earn scantly living. 31% earn less than Rs 60 per day.
- They spend leisure time in watching movies (86%) in video and also fond of watching television (82%).
- A significant proportion of families of the street children have migrated from the rural areas hoping for a job in the urban areas. But most of them end up working in the low-paid unskilled jobs in the unorganized sector. The earnings are meager especially in the cities where the cost of living is high. They end up pushing their children to fend for themselves and their families.
- They utilize their money mostly on foods and a substantial portion is invested in substance use and watching movies.
- Majority(80%) of the children live in bustees/slums mainly with their families, some children stay in and around railway stations, 10% with employers, 3% under fly over/bridges, and 3% in other places like railway stations, religious places, market and bus terminus.
- 65% Of the children's families had ration card, 70 % had voter Id card and 50% of

- them had birth certificate;
- The children suffer mostly from cold and cough, stomach ailment, skin disease, cuts and wounds (mostly who are working in garage or repairing shops). They do not consult doctor. These children are unhygienic and often fall prey to many diseases. These children badly need nutrition health care and educational opportunities. Occupational hazards like car accidents and railway accidents, cuts and infection are common among rag pickers and scrap collectors. The unhygienic appearance and absence of adult sponsorship were barriers against their seeking medical care.;
- The major pockets of concentration of street children in Guwahati are: Adabari, Guwahati railway station, Gandhi basti, Paltan bazaar, Anuradha railway colony, Kamakhya gate, Bhutnath dham etc. Such places of concentration in Dibrugarh are: Chandmari, New market, Lohapatty, Marwari patty etc. In Silchar the street children are mostly observed in kalibari char, chapra gudam.
- Level of education among the children is very low. Level of illiteracy is high among the platform children (66%),
- Economic deprivation is the root cause followed by parental neglect/torture and natural calamity for children being on the outside the family and eventually out of school. Parents push the children into work at a very young age. Their attitude to life is negative and they suffer from insecurity and lack of belongingness;
- 89% (4463) children are staying with their parents in Kolkata either with single or both parents; 0.5% (28) children are staying with parents outside Kolkata and coming for their jobs in Kolkata almost every day. About 3% (148) children are staying with other guardians in Kolkata. Remaining 7.5 % (380) children including 7.2% (364) male and 0.3% (16) female children are staying alone, either in street, slums or with employers

### **Some suggestive Interventions:**

- i. Considering the vision of **Right of Children to Free and Compulsory Education Act** 2009 it is a great challenge and the need as well to bring all these child labourers who are within 6 to 14 years under the framework of elementary education, track them and ensure their completion of elementary education. As majority of them are contributing a lion share for their family survival and their parents too forcing them to earn money.
- ii. Organise **open shelter under ICPS** in cities/towns like Guwahati, Dibrugarh, Silchar, Tinsukis, Jorhat, Tezpur, Lakhimpur, Hilakandi, New Bongaigaon etc to ensure care and protection of children. Shelters should have facilities for storage, bath, sleep, recreation, food, health care, education and counseling and need to be located in the vicinity of their place of work. Shelter should remain open both during day and night and should be able to address the psychological needs of children deprived of family and parental care.
- iii. Arrange **vocational training for out-of-school children** and young population to provide alternative work opportunity.

iv Health care intervention activities need to focus on areas like **malnutrition**, **personal and environmental hygiene**, **sanitation**, **preventive health care**, **reproductive health** etc. Some other health care interventions are: organise regular medical check-ups, life skill training focusing on **HIV /AIDS** and **reproductive health** to reduce young people's vulnerability, arrangement of mobile health vans especially for providing the service at nighttime in emergency situation.

- v. Among the street children, the use of drugs is a usual phenomenon. There is virtually little or no expertise available in the area of detoxification for children. NGOs need to start with support from the Govt **to initiate de-addiction center** and subsequently to halfway homes for proper treatment and care.
- vi. A joint effort by the Police, Railways, NGOs, older boys, past addicts can be of some benefit in **identifying the addicts and drug peddlers**, **banning of sale of drugs**.
- vii. **Poverty alleviation Programmes** like SJSRY, JNNRUM, MGNREGS etc need to focus on the families of poor children to arrest migration to cities.
- viii. **Advocacy and campaign** should address the root cause of the problems faced by the children and other community members. NGOs should inform, educate and sensitize the public and policy makers to bring about the changes in the children's lives and to create space for their wholesome development.
- ix. Helping street children in issuing credential and official papers like **birth certificates and identity cards**, as a protective measure.
- x. For **capacity building of the functionaries** of the frontline workers of NGOs / CBOs , training programme of Child Rights, Child Protection, laws dealing with vulnerable children, health care issues focusing on RCH, hygiene behavior , primary health care etc need to be organised at regular intervals.
- xi. Extensive Advocacy and **Networking Programs** for information exchange with different agencies (Govt., semi-govt., NGOs, CBOs etc.)