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## **Unit-07 □ Problems of Children in Need of Care and Protection**

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### **7.1 Introduction**

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Children constitute the most precious human resource of a country. They are also a vulnerable section of the society—and may easily become victims of exploitation and abuse. The constitution recognises that children need to be protected and nurtured for their proper development into useful and productive citizens of the country.

As per the 1991 census, the estimated population of children below 19 years in West Bengal is 3, 35, 62, 436, which is nearly half of the total population (6, 79, 82, 732) in the state. So the Society must create an environment congenial for their survival, development and protection and must provide opportunities for children to participate in matters affecting them and the environment around them. Achieving such an environment is a tremendous challenge.

For a variety of reasons, many children grow up experiencing poor healths (including nutrition) do not have the opportunities to attend and participate fully in school, and are expected to various forms of abuse, exploitation and discrimination. Few children that grow up in such an environment are unable to reach their full potential, which is a violation of their rights and also impedes society's efforts at promoting development.

It is important that all persons in society, particularly those who come into contact with children in their daily activities, are sensitized about children's rights and are motivated

to take action to help promote and protect rights of all children, in particular the most vulnerable from economically and disadvantaged backgrounds.

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## 7.2 Categories

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- (i) Children who do not have either parents or any relative or orphan.
- (ii) Children of single-parent families where the husband is dead or desertion or vice-versa belonging to destitute category.
- (iii) Children whose parents are unable to take care of them due to leprosy or mental illness.
- (iv) Children belonging to very low income group families who are not even fed properly.
- (v) Children living in red light areas and whose mothers are working as sex-workers.
- (vi) Children working as child labourers in hazardous factories/industries.
- (vii) Street children who live in streets and grow up in the streets.
- (viii) Children who mainly work as rag pickers and almost live in garbage for all time.
- (ix) Children whose mothers work as daily labours or as maid servants and the child live in slums and in neighbourhood during her work time.
- (x) Child victims of trafficking and sexual exploitation, or run-away from home.
- (xi) Children suffering from HIV/AIDs or drug abused.
- (xii) Children suffering from Thalassemia carrier and other diseases where recurring medical expenditure is very high.
- (xiii) Children who suffered from natural calamities or terrorist violence.
- (xiv) Children who are handicapped-visually, hearing, mental or orthopaedically by birth or accidentally.
- (xv) Children who are in conflict with law (delinquent) in compelling circumstances and needs reformation.
- (xvi) Children who are in moral danger due to broken families or other disturbances.
- (xvii) Children who are used as informers, drug traffickers, beggars, thieves and for other anti social activities.
- (xviii) Maladjusted children and children in the behavioral and emotional disorders.

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## 7.3 Nature of Problems

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The problem of street and working children was there in the long past too but from late sixties it started becoming acute and alarming day by day. The migrated families coming from rural areas, tribal areas and across the borders and got the opportunities of employment as unskilled labourers, made their shelter in the vicinity of construction sites, beneath the bridge, in the large-dia hume pipe, and on the nearby pavements children born in these families are the worst sufferers. These children do not have the opportunity of proper childhood and due to negligence of their parents they are deprived of education, health care and so on. In absence of proper parental care these children are found in the street almost 16 to 18 hours a day.

Almost all the previously mentioned category of vulnerable children suffer from some common problems which are enlisted below :

1. Most of them belong to poor families and do not get two square meals to eat and so they are malnourished.
2. No or little scope of education
3. Prone to physical abuse from parents
4. Sexual exploitation at workplace or in streets.
5. Prone to any serious disease and addiction towards drugs, alcohol or smoking.
6. No source of recreation, sports or spending time in creative manner.
7. Lack of health check-up, immunisation or any type of prevention from hazardous atmosphere.
8. These children are easy prey for anti socials who use them as beggars, drug traffickers, informers etc.
9. Children from rural areas migrate to metropolis for job in house hold or runaway from home who are ultimately trafficked and girls are sold to red light areas boys are used as beggars, strugglers.
10. These children are prone to HIV/AIDS and are exposed to this world in very early stage.

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## 7.4 Causes

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Repaid urbanisation and industrialization contributes increasingly to the problem of destitution. The problem is on the increase, specially among children due to continuous migration of families from rural to urban areas forces them to live under slum conditions or in the streets. This in turn contributes to the increase in destitution and delinquency.

Increasing number of child beggars found in metropolitan and industrial cities is only a symptom of the larger problem of destitution.

The economic situation of the country presently compels each of the family members to work and earn for survival where children are dependent. The children are, in most cases, left to themselves or under the custody of any of the neighbours or older children who do the baby sitting. The child indulges in unhealthy and hazardous activities in this prevailing environment. The economic insecurity and the feeling of natural environment of these workers towards acceptance of basic concepts of hygiene, new food habits and simple remedies for daily ailments and the children being the weakest link, suffer mostly from malnutrition, unhygienic living and lack of social education and literacy and develop abnormalities duplicating their capacities to get on to the main stream of life.

The break-up of joint families & traditional moral values has made the nuclear families independent. The side effect of this breakage is desertion by husband or wife, remarriage and some times the wife is sold by the husband in high price to touts, finally they are trafficked to different areas. As some families migrate frequently so regular contact with relatives are rare which makes the bad intentions of a husband strong. The worst sufferer in between all this is a child.

The bad effect of modernisation and westernisation is also a cause for making children vulnerable. As consumerism has increased and due to broad circulation of print media & cable network the companies have spread in the remotest corners of our country which in turn makes the people eager to use all that are sold which cost very high and running behind money pays a person's family and mainly children. Women of remote villages are trafficked, are lured for better job, good salary and every kind of facilities and they leave their families for never reaching their destination.

Children are more vulnerable than adults in any situation because :

- (i) Understanding of cause and effect is less accurate.
- (ii) The impact and its resulting effects of a disaster are more intense.
- (iii) Skills necessary for dealing a problematic situation are weak due to lack of maturity.
- (iv) Coping skills are fewer as they are young.
- (v) Resistance is lower.
- (vi) Unable to withstand disruption of regularity as it is necessary for development.
- (vii) Apprehension of interruption of regular life and consequent anxiety are strong
- (viii) Unable to discuss the stress and trauma.
- (ix) Suffer from various fears and anxieties like repetition of disaster, injury, loss, loneliness-separation & uncertainty.

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## 7.5 Extent and Magnitude

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The children of the world are innocent, vulnerable, dependent, curious, active and full of hope. Every day millions of children are exposed to danger and suffer from poverty and economic crisis. As a result, hunger, homelessness, epidemics and illiteracy are increasing. Millions of children are becoming orphans, street children and engaging themselves in hazardous work and petty criminal activities for their livelihood. Child workers are gripped in bondages of prostitution and sexual abuse after inflicted with HIV and open to other forms of exploitation.

The present situation of Indian children is that infant mortality rate is 70 per 1000 births. Girls continue to face higher risk of mortality. 3 million children live on the streets. 111 million children are child labour and a large number of children never enter school (As per CRY).

The incidence of disabilities in West Bengal is significant with about 1.8% of the population facing one or the other physical disability. Among the physically disabled population orthopaedically, handicapped persons accounts for a major part nearly half while about 30% are hearing impaired persons and 20% are visually handicapped. It is estimated that there are about 15 million physically disabled persons in India today. For locomotor disability the figures are 676 million in the rural areas and 431 million in the urban areas in the children between the ages of 0 and 14. A large section of this population is from W.B.

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## 7.6 Combating Measures

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**Health :** The Universal Immunisation Programme (UIP) has provided excellent opportunities of reaching all mothers and children particularly infants and pregnant mothers and other health interventions necessary for achieving the goals set for ensuring optimum levels of health and development of mothers and children in the state.

- (i) The present intervention of Deptt. of Health & Family welfare W.B in routine immunization at all primary health centres, subcentres, out reach villages and urban basic services for poor centres.
- (ii) Special campaign to improve measles coverage, administration of vitamin A with measles immunization has been taken up.
- (iii) The number of reported cases of Acute Poliomyelitis in the state have shown a decline from 886 (1990) to 473 in 1992. Broad publicity for giving the child polio drops has been taken up by central govt itself. All level of welfare organizations have been involved to give all the children below 5 years polio drops.

- (iv) Neonatal tetanus intervention programme is run to stop infant mortality rate.
- (v) 70% reduction in deaths due to diarrhoea in children under the age of five years has been nearly achieved. Provision of ORS packets to hospitals & PHCs is also made and Integrated Control of Diarrhoeal Diseases and water & Sanitation (CDD-WATSAN) is being conducted to reduce diarrhoeal morbidity and mortality.
- (vi) The children affected with HIV/AIDS are detected and treated in different Govt. hospitals. Wide publication and General awareness among masses is done to prevent infection through this disease. Many NGOs are presently rehabilitating the AIDS victim and providing them shelter, medicine aids and care.

**Water and Sanitation :** Water and sanitation services are regarded as one of the essential components of primary health care. The Govt. is promoting the provision of clean water in all communities for all their children as well as universal access to sanitation.

CAPART a Govt. funding agency also funds the NGOs working in rural areas for digging tube wells and constructing low cost latrines etc. under Jawahar Rozgar Yojana (JRY) Programme operated by Rural Development Department a house-hold latrine and smokeless chulah are provided within each Indira Aash Yojana house.

**Education :**

- (i) The Education Deptt is working towards universal enrolment, retention, minimum levels of learning, reduction of disparities and universalization of effective access to primary education.
- (ii) The success of the literacy drive, increasing awareness among the people of the advantages of education, rising economic levels are all creating a growing demand for education.
- (iii) The lowering of the age of admission into primary level from six to five years has increased the school going children.
- (iv) The Govt. is also offering incentives like free tuitions, textbooks, school dress, mid day meal etc to encourage children of SC/ST families & girl child to enter the formal system.
- (v) The SC/ST Deptt provides scholarships to meritorious students who belong to below poverty level.
- (vi) The street children project, slum children project, shikshalaya prakalapa accommodates the children in difficult circumstances and provides them with non-formal education.

**Nutrition :**

- (i) The problem of malnutrition has many roots viz : inadequate food supply, limited purchasing power, poor health condition and incomplete knowledge about nutrition.

- (ii) The success of nutrition programmes depend upon inter-sectoral co-ordination and community participation.
- (iii) Supplementary feeding, Growth monitoring and promotion for pre-school children through ICDS projects is operational in all blocks.
- (iv) Mid day meal is introduced in all primary schools for all children.
- (v) All the welfare projects run by Govt funded NGOs provide with tiffin and meals in all their educational programmes.
- (vi) Control of vitamin A deficiency and its consequences including blindness is being checked by the health centres.
- (vii) Empowerment of All mothers to breast feeding of their children exclusively for six months which works wonders to childs immunization
- (viii) ICDS projects are conducting growth monitoring of Pre-school children in the state.

#### **Other Welfare Activities**

- (i) The children in conflict with law are provided shelter in state run reformities and there they are provided with education, nutrition, recreation and other amenities for proper development.
- (ii) Govt and Govt. funded NGOs are running many spl. schools for disabled children where they are provided with spl. education by trained educators and nutrition.
- (iii) The children in red light areas are also provided with education and nutrition in their areas and girl children are admitted to shelter home where their lives are secured and the environment is appropriate for their development.
- (iv) The drug addicted children are provided treatment in the drug de-addiction centres where they are given residential care.
- (v) The destitute homes/orphanages provides shelter, care & protection to the children vulnerable to any type of abuse.

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### **7.7 Exercises**

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- (i) What are the different categories of children who need care and protection?
- (ii) What is the extent and magnitude of the problems of children?
- (iii) Enuerate the combating measures undertaken by Govt. and NGOs.