



RISK, VULNERABILITY AND SAFETY OF MARGINALIZED SLUM CHILDREN: CHILD PROTECTION AND CHILD RIGHTS IN DELHI-NCR

A collaborative project of the Indian Council of Social Science Research & Jawaharlal Nehru University

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CONTENTS

Acknowledgements	5-6
List of Abbreviations	7-8
List of Figures	9
List of Tables	9
List of Images and Maps	10
 Chapter 1 Introduction Relevance of this Research Chapterisation 	11-16
 Chapter 2 Study Methodology: Design, Methods, Challenges and Limitations Aims and Objectives of the Study Research Methodology Data Management Data Analysis Selection of Research Sites Sample Size Entering the field: Running the pilot Ethical Considerations Challenges in the Field Limitations of the Study 	17-31
 Chapter 3 Review of Literature: Risk, Abuse and Violence Against Children Who is a child? 'Risk' and 'Vulnerability' in children's lives with focus on marginalized children 'Child Abuse' and 'Violence against Children' Impact of Violence against Children Troubling Numbers of Child Abuse Crimes against Children in India Child Rights and Protection in India: Legislations and Institutional Mechanisms 	32-56
 Chapter - 4 Lived Realities: Children in Slum Communities Life in Slum Communities Profiling the Research Participants Profiling the Parents of the Participants 	57-73
 Chapter 5 Risk, Vulnerability, Safe and Unsafe Spaces for the Marginalized Children Towards Understanding Risks and Vulnerabilities Normalized VAC: The Irony of the Safe-Unsafe Home Experience of Protection and Safety at the NGO Center Feeling Unsafe outside Home: In gali, on main roads, in the Markets 	74-93

 Unsafe at School due to Corporal Punishment: Bullying, Harassment by Boys/Seniors Unsafe at Temples, Public Toilets, and Jungles (for collecting wood) Engagement of Participants with the Police 	
Chapter 6 Summary and Discussion	94-110
Chapter 7 Recommendations and the Way Forward	111-122
References	123-126
Annexure Ethical Clearance Certificate Interview Guide 	127 128

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Dr Sunita Reddy (Principal Investigator)

EXECUTIVE SUMMARY

The project entitled '*Risk, Vulnerability and Safety of Marginalized Children: Child Protection and Child Rights in Delhi-NCR*' started out with the aim to understand risks and vulnerabilities experienced by children within the slums of Delhi-NCR, and subsequently to recommend concrete action plans to tackle 'Violence Against Children' (VAC). More specifically, the project's objective was to recognize the various forms of abuse endured and acknowledged by the research participants – *the slum children* – themselves i.e. through the insider's ('emic') perspective. Further, it aimed to understand these various forms of abuse at the following five interconnected levels of the 'human ecology system' framework first suggested by psychologist Urie Bronfenbrenner (1986) and then adapted by Einar A. Helander (2008). We have utilized this framework, especially at the first three levels, to understand the context-specific situation of slum children at the six study sites.

The five analytical levels of the human ecology framework are:

- I. Micro level: It involves the normal functioning of the individual child's mind and body that can get disrupted by the lack of care at the cognitive, emotional and physiological level;
- II. Meso level: Abuse by the family/teachers/peers in the children's immediate surroundings;
- III. Exo level: Structural violence and abuse condoned by the community/neighbourhood, along with local welfare services that the children are getting, general atmosphere etc.;
- IV. Macro level: Untreated abuse because of limited understanding of VAC within the national policy and its implementation;
- V. Global level: The country's choice of compliance/non-compliance of internationally acceptable child rights standards and policies etc.

Impacting one level in a positive way is bound to impact other levels positively as well, while the reverse is also true. If we analyze Delhi's slum situation from the global and macro level (policy-level) and go downwards right to the micro level (individual child-level) while building on the data we collected through this research, we can see how it affects the quality of lives of the slum children profoundly, both directly and indirectly. Having said that, the focus of our research was more at the micro, meso and exo levels so that site-wise prioritized action points could be suggested after the study.

The primary research participants were 240 slum children below 18 years of age, 40 (20 girls and 20 boys) from each of the six purposively selected slum sites within the north, south, east, west and central regions of Delhi respectively. Local child-rights NGOs facilitated our entry into the slum communities at the select sites for the first time. Along with these 240 slum children were 46 adult key informants who were the service providers in the respective communities (healthcare personnel, police, *anganwadi* workers, community leaders-religious/political/mahila panchayat members and others), who were willing to speak with us about child rights. The sample size is not very big and it does not represent the situation of all the slums within Delhi, but it does help in building a basic understanding about forms of child abuse, its impact upon slum children and helps in making some action-oriented recommendations to help in prevention efforts to heal at least some of the hurting slum children.

For this study, tools such as schedules, in-depth interviews (case studies), writing-on-yellowslips, thumb-impressions-on-posters, FGDs, free-listing, community transit walks etc. were used to collect data in this mixed methods study over six months. Putting it in other words, the qualitative aspects and quantitative aspects of the data were triangulated for obtaining insights into the perceptions of slum children at various levels of the human ecology system framework. *The first three chapters of the research report comprise introduction (chapter 1), detailed research methodology (chapter 2) and review of child rights-related literature respectively (chapter 3). The rest of the chapters are concerned with interpretation of the data (chapter 4 and 5), and level-wise analyses of findings (chapter 6) along with site-wise recommendations that simultaneously also correspond to each of the five levels of the human ecology framework, as previously discussed (chapter 7).*

At the global level, India has ratified the United Nations Convention on the Rights of the Child besides ratifying a number of other relevant International Conventions that have been appropriately listed in the detailed study chapters. Exploring the national compliance of those treaties was beyond the scope of the present study so was not attempted. Coming to the national policy (macro-level) related with the slum situation, continuously urbanizing cities and related migration from the rural to the urban belt would only increase with time. As a result of unplanned city development, urban poverty is bound to stay, even worsen, if it is not acknowledged and dealt with, adequately (Wilson et al 2019). Improper housing affects children in the worst way (Bajpai 2006). It is in this context of ensuring proper housing, facilities and urban development that the Ministry of Works, Housing and Supply was created in 1952 and it got re-named about a dozen times since inception. Appropriate terms like the 'Ministry of Urban Poverty' and/or 'Urban Employment' and/or 'Poverty Alleviation' and so on, have been used within the title of the Ministry through the last few decades depending upon the challenges that needed prioritization above others, even though all the terms used are closely connected conceptually. Today, this Ministry is called the 'Ministry of Housing and Urban Affairs' (MOHUA)¹, with a lot of duties on its plate including that of clearance of slums, housing issues, transport, water supply, garbage disposal etc. as the city of Delhi bursts at its seams. As per the latest Census 2011, about 11% of the city population i.e. 17,85,390 persons lived in slums, including 2,04,300 children between 0-6 years. They lived in poor housing conditions with a lack of all kinds of civic amenities². Just as MOHUA is at the Center, at the State level is the Delhi Urban Shelter Improvement Board. It is the designated official body of the MCD to take care of the matters concerning the slums, namely provisioning of basic civic amenities and also resettling the people who live there to places with quality accommodation.

Many other national-level schemes are also directly related with promoting the health and wellbeing of the marginalized communities including AMRUT or PMAY-U schemes related with proper housing, Mission *Vatsalya* (Integrated Child Protection System), Mission *Shakti*, Mission *Poshan* (Integrated Child Development System), *Beti Bachao, Beti Padhao*, *Samagara Shiksha Abhiyan*, *SABLA* and so on. Various Ministries have been gradually roped in to carry out the development and welfare of the poor and marginalized. For instance, the Women and Child Ministry, Education, Labour and Employment, Home Affairs (police for maintaining law-and-order), Social Justice and Empowerment, Minority Affairs etc., along with designated child-related welfare bodies and institutions such as NCPCR, NIPCCD, Child Welfare Committees, Juvenile Justice Boards etc.

Further, there is great potential and promise even at the child-centric policy level. We have the National Education Policy 2020, National Action Plan for Children 2016, National Policy for

¹ <u>https://mohua.gov.in/cms/mandate.php</u> accessed on 24 April 2024

² That is a sizeable number of children and they must be grown-ups by now, assuming they survived and stayed on in the city through the COVID19 lockdown.

Children 2013, National Children's Charter 2003, National Policy on Child Labour 2003 etc. along with a plethora of welfare provisions for children within the legal regime. For instance, the many Fundamental Rights for the protection of children within the Indian Constitution and laws like the POCSO 2012, RTE, JJA, CLPRA, CPCR, Prohibition of Child Marriage Act and so on and so forth. Unfortunately, a lot is left to be desired on the ground level when it comes to implementing the schemes, policies, even though the laws meant for ensuring child rights and protection abound in sheer volume. This aspect of child welfare in India is a theme for a separate study altogether.

National Crime Record Bureau's latest report names Delhi as a consistent top city when it comes to crimes against children, especially sexual offences and kidnappings, with low convictions under the POCSO Act. Juvenile crime among poor children educated from class V-X and living with their parents also increased by 42% in Delhi alone in the last one year according to the available data³. Probably the answer for such high rates of crimes against children, and by children, could be probed more at the exo level since just having good laws and policies is clearly insufficient. As far as the present study goes, the police force was outnumbered when compared to the requirement of the dense slum population as shared by the police themselves along with the children who felt their absence. Further, the children felt that the police force tended to *'side with the perpetrator'* even when the crime happened *'right in front of the police chowki'*, as was mentioned at one site. The bottom line is that since the police was not succeeding in curbing crime against the children and by the children in the city slums, it is worthy to explore further the challenges faced by the police departments. The other question worth probing further is why primary school-pass children were generally inclined towards a life of crime, as suggested by official data?

In terms of the other welfare services available to slum children at the state level, the Mohalla Clinics were crowded but functional at all the sites although the MCD-run dispensaries or the bigger healthcare facilities were further away at most of the sites so were not accessible quickly during emergencies. Anganwadi Centers and Mahila Mandals were not functioning well or were not willing to participate in the research except at two sites. Many local NGOs were doing credible work on the ground, especially those that facilitated the present study namely *Prayas* JAC Society, BUDS, *Pardarshita*, My Angels Academy and 4B Foundation. They helped children enter the formal education system by getting them enrolled in government schools or assisting them with school admissions in private schools under the Economically Weaker Section (EWS) category, or helped them get admission in open school or college and/or helped them join vocational education at their respective centers. The children found NGO Centers to be 'safe' spaces where they would prefer to spend a lot more of their time if they possibly could since the environment was more welcoming and considerate, with the kind staff offering them nutritious food, health awareness and counselling services etc. and in the process, reviving their hopes and dreams, and giving their lives a constructive direction.

Having said that, the children constantly soaked in *high levels of 'social toxicity' from their neighbourhood* in a general way as a lot of the violence they were experiencing was normalized around them within an unfriendly, squabbling, violent and complaining neighbourhood. *High rates of crime* have been traditionally associated with chronic poverty and material deprivation, the latter being abundantly visible at the research sites and also shared by the participants. Theft was common too within the slums. Things of daily use like cooking

³ <u>https://indianexpress.com/article/cities/delhi/juvenile-crime-rate-highest-in-delhi-last-year-ncrb-data-9056140/</u> accessed on 16 April 2024

gas cylinders, petrol from two-wheelers, cycles, mobile phones etc. were usually the items that got regularly stolen or snatched. So, there was considerable fear among the community, particularly among children, of stepping out of home in an environment of petty to heinous crime (more former than latter); where some people also carried knives and *katta* (guns) at many places and few also have reportedly committed murders in the past. Adding to crime rate is the high incidence of drug and alcohol abuse as well even by children, and women, latter being reported more at least at one particular site. At another site, an alcohol ban was a major topic often debated within the community but somehow the matter usually got politicized and a ban actually never materialized.

Besides high levels of crime and *chronic poverty, including 'child poverty'* (this being an important SDG to be achieved by all the countries of the world by 2030), the other multiple, structural-level deprivations and vulnerabilities faced by the children involve their so-called *lower caste, 'weaker' gender, belonging to backward regions from rural belts, insecure status as 'migrants', with parents who were unemployed or into exploitative contractual jobs or were debilitated due to drug/alcohol abuse and so on. It is important to discuss these <i>categories of structural violence* one by one as together they make the slum children experience more discrimination and other forms of abuse both inside and outside home. The home was considered to be less risky and unsafe by the primary participants as compared to say the *gali* just outside home, the market place, schools, temples, public toilets, and so on.

As mentioned above, a majority of the participants were *migrants* from the nearby poorer states of Bihar, Jharkhand, Uttar Pradesh and so on. The participants informed that mostly they belonged to *the SC-ST and OBC castes*, the traditionally marginalized communities in the Indian set up. Further, a sizeable number of parents were illiterate and without any formal education, more mothers than fathers. An overwhelming majority of fathers were doing poorly paying informal sector jobs (around 70%) for which they stood at the nearby *chauraha* every morning, hoping to land a wage-earning opportunity. They were painters (*safedi karne waale*), rickshaw pullers, street vendors, mechanics, plumbers, drivers etc. There were many days when they did not get work and had to come back home, angry and empty-handed, leading to a lot of depression, anxiety and discord within the household. The mothers were largely homemakers (more than 65%), but they were also doing informal jobs that were paying even less, like domestic work. Some mothers were even heading the households (9%), many in the presence of husbands at home who were unemployed and/or incapacitated due to drug and/or alcohol abuse, or illness. Few were widows too.

Besides having *disturbed parents who were insecure and unsure about their daily wages*, the participants seemed gripped with fears about stepping out of home. It was worse for girl children in terms of risk and vulnerability they experienced in a highly patriarchal set-up. Girls experienced *high levels of gender discrimination* as they were teased, and called names, molested or even attacked (in few cases) etc., and therefore were stopped by family from spending time from playing outside home due to threat to their physical being and dignity by miscreants and drunkards. However, they were stopped from playing much indoors as well since they were anyway so caught up with the adult-like household chores.

Even at school, girls from the slums experienced an environment where they were considered the weaker and vulnerable sex, were made fun of in a targeted way and bullied, especially by the senior boys and objectified openly as they were generally treated as girlfriend of one boy or another ('yeh meri bandi hai)', discouraged in sports as it was not a stereotypically feminine activity, and so on. Further, the boys were encouraged as the macho ones, who seemed under considerable pressure around 'having a girl' or indulging a lot in defining their character loosely by just expressing things like 'achchi ladkiyan bahar nhi ghoomti; chote kapde nahin pehenti' (girls of good character do not roam outside home or wear short clothes, implying western clothes like t-shirts or jeans/shorts etc.). Not surprisingly, more boys were in school, more in sports or doing vocational courses compared to girls. More girls were looking after the household chores and spending time doing care work for the children and elders of the family and tended to stay withdrawn inside home.

As was clearly abundant through our research that gender roles were being socially constructed and kept getting reinforced for both the boys and girls outside and inside homes. By implication, the girls tended to emulate their mothers and kept contributing towards invisibalised labour and kept conforming in most cases and surrendering to social pressure. The boys tended to emulate their fathers, for instance, in picking up many social vices like having drugs, smoking *beedi* etc., being violent towards women and so on. A lot of their time and energy went in picking fights at school concerning girls in some way or another reflecting also *an un-addressed concern around hormonal changes, youthfulness, sexuality, even aggression*, especially among the adolescents. The key informants also spoke about 'teenage pregnancies' and 'an epidemic of promiscuity' among adults in the slums, subjects that need sensitive research for building a better understanding and for suggesting ways to help out.

Coming to a discussion at the macro level or the immediate environment of the children concerning close engagement with family and relatives, school, peers and friends. Children expressed *high incidence of domestic abuse within homes*, especially in context of the girls. Within home, the children were verbally and physically assaulted with hands, even belts in few cases. We do not know to what extent child sexual abuse was involved but many children attested to molestation by male family members through the thumb-impression-on-posters exercise. For most of the children, they actually got caught up among infighting parents or siblings and that is how they unwittingly always became a part of a negative home environment.

One child was diagnosed with anxiety at the age of nine years and continued to live like that for many years until the local NGO got involved and eased her mental health condition triggered by domestic abuse, at least to some extent. Another child complained about her father throwing 'sabji ki kadai' (pot of cooked vegetables) at her mother during dinner while another child related the story of her aunty who nearly lost her mind due to excessive beatings 'woh maar kha kha ke pagal jaisi ho gyi'. Siblings also fought many a times due to division of chores at home, like one sister wouldn't want to keep doing cleaning and mopping while the other one kept doing the less-labour intensive task of cleaning dishes and so on. Further, there was some resentment among sisters against their own brothers who kept going to school, played more, and got less of the household work although even they did contribute substantially, according to the boys. Siblings also fought, sometimes bitterly, over who would get more mobile-time adding to the stress at home.

Verbal abuse, and *corporal punishment continued at government schools* as well for most of the children with hands, wooden scale and even wooden sticks from the trees outside at some sites. Even though corporal punishment is outlawed still it continues undeterred. Many children eventually felt compelled to drop out from school because of constant scolding, humiliation and beating, or when they were charged money to buy books, and uniform, or they took too many leaves from school to take care of their family members or to help with household chores like filling water cans from tankers etc. This was an activity that many parents avoided doing

at one particular site since they developed back issues due to all the heavy weight lifting. Further, many children faced social stigma and discrimination associated with disability or due to coming from the EWS quota. They were often told mean things by peers such as *'kahan kahan se aa jaate hain'* or *'kaamwaali ke bache hain'* etc. (implying these children of maid servants come to good private schools from 'lowly' places so they do not deserve social respect) and so on.

At the level of the micro-system, children's cognitive, emotional and physiological health got affected immensely by the lack of rest and leisure time, and the fact that they did not get to eat nutritious and adequate diet. As was being suggested earlier, children were getting physically and mentally exhausted doing household chores like lifting heavy cans of drinking water, or helping their parents in setting up their vegetable or fruit stall or were separately involved in poorly paid child labour activities. The girls were also helping in the household chores such as cooking, cleaning, aiding the ill and the elderly, feeding and caring for younger siblings and so on. In other words, the children had too much work on their shoulders from morning till evening including helping parents financially, directly or indirectly, contributing towards household chores, going to school and finishing H.W., spending time and energy for doing the vocational course classes at the respective NGO centers. Many a times they were unable to finish their H.W. and were labelled as 'weak students' and were humiliated in class. Some children eventually quit school because of this as well and were guided to join open school or open college instead wherein they could also get time for their household alongside. Further, children were favoring junk food that was tasty, easily available and processed. What they received at the NGO centers was healthy but probably insufficient to cover for all the nutritional deficiencies they had as some of the children looked visibly stunted for their age.

Coming to the *recommendations*, as mentioned before, it was beyond the scope of our study to look at the national compliance vis-à-vis international child rights treaties that India has ratified at the global level. However, one broad recommendation at the national policy (macro level) would be to look at scheme-wise analysis and evaluation of relevant schemes such as *Mission Poshan*, *Mission Shakti* and *Mission Vatsalya* etc. over the impact on children, and in particular, the slum children, as they were found to be so vulnerable and exposed to risk, both at home and outside home as well. Further, the housing and other welfare schemes also need to get evaluated too, both at the central and state level since a lot of the sickness and diseases within the slums also come from unhygienic living conditions, improper garbage disposal, choked drains, mosquito breeding in stagnating water and so on. Anyway, the following are some of the site-wise recommendations at the remaining three levels – micro, meso and exolevel – of Bronfenbrenner and Helander's human ecology framework.

The impact of being over-exposed to social and environmental toxicity day in and day out was that the children found extreme violence as 'normal' when it came to socially appropriate behaviour. So, when they repeated certain adult behaviours they saw around them, it did not occur to them that those were not appropriate behaviours such as copying parents' behaviour due to (undiagnosed) depression or other mental health conditions. For instance, children tended to absorb, at a very young age, the use of aggressive, violent or foul language in normal conversation, or consume drugs or alcohol, or misbehave with girls and women or use force/violence or aggression to express themselves and so on. Further, we did not meet any children who accepted that they have been into juvenile crime, but we did meet children who praised that lifestyle, movie heroes and expressed that 'bhaigiri' was their style. This shows the severe lack of role models for them as none of the family elders fit that role, nor were there any school teachers to fill that gap in cases where the children were dropouts. Even if the

children were school-going, hardly very few spoke well of their school teachers or the fact that they dreamed of becoming a teacher, like them. In this context,

- ⇒ The slum children who have been helped out by the NGO to turn their lives around to get better and financially independent, eventually, *these community peer leaders* should become the role models for other children to inspire hope and future possibilities for them, especially at *Site 6*. Street plays could be organized with the peer leaders to bring about awareness and sensitization about the struggles that they had to go through, and that those challenges and difficulties are surmountable. Igniting hope and dreams is crucial among slum children, and then, keeping them alive.
- \Rightarrow Slum children who actively seek moral support, career guidance (and there were many), in those cases, special handholding efforts should be made in their direction, especially at *Site 2* and *Site 5* while involving the local NGOs. This is imperative to do as children who do not have proper role models to follow, and are already absorbing so much negativity from their environment regularly, will either start replicating it as adults and/or will get tempted towards a life of crime, considering chronic poverty looms large.
- ⇒ Children need adequate nutritious food and clean drinking water on a priority. With the help of Mohalla Clinics and NGOs, they should be regularly tested for deficiencies and given free supplementation and basic treatment like bimonthly de-worming and so on. Only one site was doing this. A similar drive could be conducted regularly at other sites as well to gradually improve the health of children.
- \Rightarrow Further, children and parents should be made aware about the difference between healthy and junk food, along with details about locally available healthy and affordable alternative food.
- \Rightarrow The families need counselling and support to make sure that they stay away from mindaltering substances etc. and more importantly, if someone indeed is addicted, then they should come forward and care and proper counselling towards de-addiction should ensue. Networking with de-addiction centers of the Delhi government would be a major task at all the slum sites with special focus on *Site 1 and Site 3*. At the central level, there is the ambitious *Nasha Mukt Bharat Abhiyan* that started in 2020. Some networking with the district level functionaries would be the need of the hour.
- \Rightarrow Help has to be elicited from the all the Mohalla Clinics for rooting out addiction issues with children and adults as everyone visits the clinics one way or another so they are good and trustable resource people located right within the community. They could help spread awareness about issues of child abuse, addiction and domestic violence and related helplines and the suggested course of action.
- \Rightarrow A stronger network between the NGOs, *mahila panchayats*, police and the community peer leaders is also needed wherein information regarding the above issues is shared and resolved in the most logical and sustainable way.
- \Rightarrow Parents need professional counselling and moral support since their constant bickering, infighting and an environment of general domestic abuse impacts the children adversely as parents unwittingly pass on their negativities, hopelessness and despair to them. This was especially true for *Site 4* where the girls and women have a particularly hard time. Mahila Panchayats could get more involved here and give women's issues some visibility and spread awareness about it within the community.
- \Rightarrow With help from local NGOs at *Site 4*, women could also get help in income generation activities. This would benefit the girls as well who would then have an option of going to school instead of doing paid child labour.

- \Rightarrow Besides that, parents of all the slums should get connected with the government's welfare schemes vis-à-vis food provisioning, employment, other entitlements that would ease the children off the adult-level burden they carry since childhood. It would at least give back to them some of their childhood. A *comprehensive mobile application* could be developed to make this easy since a lot of the slum people were not literate and everything is digitized these days.
- \Rightarrow Continuing from the above point, an in-person crash course on available government schemes could be organized by the local NGOs from time to time along with a crash course on simplified protective child rights and laws such as POCSO and JJA to build basic awareness among the community.
- \Rightarrow Psychological evaluation of children and parents needs to become a regular part of the services provided by the NGO or the government with subsequent treatment at all the slum sites. This is expected to reduce the use of verbal or physical aggression towards each other and towards the children, and usher in some relief for everyone involved.
- \Rightarrow The police need to be sensitized towards their role at most of the sites. Their imagebuilding is necessary as the community has lost trust in them and doesn't look up to them for support or protection from miscreants. This is also directly related with the rise of crime against children that reinforces the existence of a toxic neighbourhood environment where children have to be restrained at home to be protected, instead of being let out to play and enjoy some part of their childhood.



