

**A SOCIOLOGICAL STUDY OF PROBLEMS AND SUBSTANCE
ABUSE AMONG STREET CHILDREN OF AGRA DISTRICT**

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INTRODUCTION:

Majority of us are blessed when we return home from school, colleges, and offices, there is a family waiting for us which takes our tiredness. But all are not that fortunate. Many children in India and worldwide are deprived of this feeling of family and home. These children are called street children who spend their life near bus stations. Railway stations, markets, on footpaths and pavements etc. The phenomenon of street children is an alarming and escalating worldwide problem. Street children are maltreated, imprisoned and in some countries killed. Street children, as the offspring of complex contemporary urban environment, represent one of our most serious global challenges.

The phenomenon of street children is not new. The term “street children” was first introduced by UNICEF following the UN International Year of the child in 1979. Soon afterward, UNICEF (1986) and other international organization claimed, without empirical evidence, that these ‘Street Children’ are parentless and therefore in need of supervision and direction. After a time, UNICEF and other international organization recognized that all of the children on the streets in the developing world, who were working, did not have the same family circumstances and hence developed new terms. Street children were “of the streets” meaning they did not go home at night. While working children who returned home at night to give what they earned to their families were called “children on the streets” (Aptekar & Stocklin, 2013).

STREET CHILDREN AROUND THE WORLD:

According to UN sources, there are up to 150 million street children in the world today chased from home by violence, drug and alcohol abuse, the death of a parent, family breakdown, war, natural disasters or simply socio-economic collapse, many destitute children are forced to eke out a living on the streets, scavenging, begging, hawking in slums and polluted cities of the developing world. These are those who work on the streets as their only means of getting money, those who refuge on the streets during the day but return to some form of a family network. All are at risk from abuse,

exploitation and vigilante or public violence, but the most vulnerable are those who actually sleep and live on the streets hiding under privileges, in gutters, in railway stations. While they may have some small jobs such as- shoe-shining or market-selling to pull through, many also end up dying on the pavement, victims of drugs, gang rivalry and diseases (UNESCO,2017).

According to a survey conducted by the Bangladesh Institute of Development Studies (BIDS), the number of street children nationwide was found to be 670,000 for the year 2004 and 1.14 million for the year 2014 (UNICEF, n.d.).

The number of street children in **Pakistan** estimated to be between 1.2 million to 1.5 million. Issues like domestic violence, unemployment, natural disasters, poverty, unequal industrialization, unplanned rapid urbanization, family disintegration and lack of education are considered the major factors behind the increase in the number of street children (United Nations, n.d.).

According to some estimates made in 1982 by UNICEF, there are 40 million street children in Latin America, most of them work on the streets, but they do not necessarily live on the streets (Tacon, 1982). A majority of the street children in Latin America are males between the ages of 10-14. There are two categories of street children: home-based and street-based. Home-based children have homes and families to return to, while street-based children do not. A majority of street children in Latin America are home-based (Scanlon, Tomkins, Lynch & Scanlon, 1998).

STREET CHILDREN IN INDIA:

In India, nearly one out of every three persons in urban areas lives below poverty line. Poor, marginalized street children are a common sight. They exist without education, care, affection and guidance. These children experience abuse from nearly everyone. The community treats them with contempt, they are harassed and accused by the police, and they are even brutalized by older street children. They fall easy victim to drug dealers, who turn them into addicts and force them to peddle drugs. They are exploited by parents and employers alike. In short, street children in India are inadequately clothed, fed or loved; they are victims of family violence, including physical and social abuse (Panicker & Nangia, 1992).

India is home to more than 444 million children below 18 years, equal to approx 37 per cent of India's total population (Census of India, 2011). Together youth (those in 18-25 years age group) and children comprise of more than 52 per cent of the population, enough to define India as young country. In 1994, UNICEF estimated that there were 11 million street children in India (Child line India, n.d.). This number is said to be a drastic under-estimation. The India Embassy estimated 314,700 street children in cities like Bombay, Calcutta, Madras, and Kanpur, Bangalore and Hyderabad and around 100,000 street children in Delhi.

Although street children are a well known reality in many countries, yet it is difficult to provide a clear picture of them. These children spend intermittent periods with their family or alone and move from one city to another, depending on the time of the years and their circumstances. Since many do not have identity papers, or birth certificate, there are no official statistics on their numbers.

REVIEW OF LITERATURE:

Review of literature is focusing on issues related to such terms as street children, children on street, street working children and specifically lifestyles and socio-economic conditions and demographic profile of street children.

Angela Veale, Azeb Aderfrisew and Kevin J. Lalor (1992) conducted a research study in four selected towns of Ethiopia. The main objective of the study was to contribute to a greater understanding of the causes, nature of and consequences of being a street child in Ethiopia by monitoring the profile and changing circumstances of street children in the capital city, Addis Ababa. The sample of 1000 street children was selected in four urban centres in Ethiopia; Addis Ababa, Bahir Dar, Nazareth and Mekele, in which 400 street children were selected from Addis Ababa while 200 children were selected from each of the other three towns. An interview schedule of both open-ended and close-ended questions was followed for the collection of data. The results of the study showed that only 29 per cent of the street children in Addis Ababa were aware of any organization that helps children like them. The phenomenon of street children was recognized as a major problem throughout Ethiopia.

C. Malhotra, R. Malhotra, M. M. Singh, S. Garg and G.K. Ingle (2007) studied the use of tobacco among street children of Delhi. The main objective of the study was to find out the tobacco consumption habits and reasons for initiation and continuation of tobacco use by these children and to assess their awareness about the harmful effects of tobacco use. A cross-sectional study was conducted at “Prayas”, a Child Observation Home for boys in Delhi. A sample size of 60 boys was calculated on the basis of the results of the pilot study on 20 boys between the age group of 10-18 years. It was found that ever use of tobacco was reported by 34 respondents. The most common age for initiation of tobacco was found between the age of 8-10 years with 60.9 per cent of the children smoking and 64.5 per cent consuming a smokeless form of tobacco before 10 years of age. Majority of the children had initiated tobacco use before leaving their house. The most common reason for the initiation of tobacco was found to be peer pressure.

A. M. Gaidhane, Q. S. Zairuddin, L. Waghmare, S. Shanbhag, Sanjay Zodpey and Sudhakar R. Joharapurkar (2008) in their article, *Substance Abuse among Street Children in Mumbai*, conducted a study on street children of Mumbai. A cross-sectional study conducted in a 3-day ‘Diwali Festival Mela’, an annual celebration organized every year by a reputable NGO in central Mumbai, where adolescent street boys are invited from almost all areas of the city and provide with 24-hour shelter and other support services. The Institutional Ethical Committee of the Medical College and the NGO gave approval for the study. Pilot study through interview schedule was followed in the study to establish the study feasibility. An interview schedule was formulated based on the information gathered from pilot study and literature survey. Having past experience of such health camps for street children in Diwali Mela, 700-900 street children were expected. A simple random sampling technique was adopted to obtain a representative sample. Out of 780 adolescent street boys aged 10-19 years who came for health camp check-up, 195 were approached to participate. However, analysis was restricted to 163 children only, because the rest (32) were either: unwilling to participate, who gave inconsistent answers and those who had language problems. These 32 children were excluded from the study. The data was collected through face to face interview using a structured interview schedule. Chi square test and multiple logistic regressions were applied to the statistical analysis of the data and SPSS package was also used. The results of the study revealed that adolescent street children in the

study ranged between the age 11 to 19 years and their median age was 16 years and they had been on the street for 4-5 years. Out of 163 boys, 148 boys were found as the victims of one or more types of abuse; 132 boys were substance abusers; 87 were physically abused and 52 were sexually abused. However, 31 boys who were indulged in substance abuse were sexually as well as physically abused. Nicotine was the most frequent substance of abuse used by 104 street children. Most of the street children were using inhalants, alcohol, and hypo-sedatives and stimulants. This study highlighted the need for more aggressive outreach strategies to make comprehensive health care treatment services more accessible to street children.

H. A. Chande (2008) conducted a study on the street children in Thane city. The objectives of the study were to understand the reasons of street and working children living in Thane City, to comprehend the problems and living conditions of street and working children and to recommend measures to improve conditions of street and working children. the primary data for the study was collected through surveying 121 street child labours engaged in different activities like begging, petty vending-selling of different kinds of food items including fruits and vegetables, selling cosmetics, grocery and cloth items on street etc. a questionnaire was framed for collecting data from different parts of Thane city including Kalwa, Mumbra and Diva. It was found in the results that the average age of children was 11.22 years, and 66 per cent children were males and 34 per cent were females. It was found that 30 per cent of the children were migrants. Main cause of working and living on street as indicated by sample of child labour was poverty (53 per cent), followed by other causes like alcoholic father (10 per cent), disintegration of family (6 per cent) and violence (0.82 per cent). It was recommended at the end of the study that a program focusing on re-uniting street children with their families should be adopted. There is an urgent need of coordination among development agents working for the rights of street children and information sharing among all stakeholders to enhance implementation strategies. It was also recommended that much larger focused interventions are also needed such as a better housing plans, inclusive urban development policies, and increased number of boarding school for poor children in both urban and rural areas.

Shveta Nanda (2008) in her master's thesis studied street children's perceptions of their health, illness and health-seeking behavior in New Delhi. The main purpose of the study was to strengthen healthcare provision for working street children. An exploratory qualitative study was followed an in-depth case studies of working street children were done. The sample was taken through snowball sampling technique. The data was collected through semi-structured interviews. The results of the study revealed that the working street children were prone to much illness and negative health outcomes as a result of their conditions. The health and medical problems of street children ranges from minor problems such as cough, cold and fever to major ones such as injuries, diarrhea, high grade fever, accidents, skin wounds and chest pain etc. it was recommended in the study that there is a need to be effective public-private partnerships or amalgamation of health services among private and public resources, in order to provide sustainable and normal health care to this group of children.

Meena Mathur (2009) conducted a study on socialization of street children of Jaipur city. The objective of the study was to develop an in-depth socio-economic field profile of the life of street children in Jaipur city. The study aimed at reaching the field realities and made an attempt to understand the interrelated socio-economic conditions which play a significant role in the socialization process of street children in India. The study was largely planned as a field survey, where the children were asked to narrate their 'life realities'. A pilot study was carried out before embarking the main study, on 20 children randomly from main city centre. The experiences drawn from the pilot study led to initiating the main study. The geographical lay out of the city was divided in six zone (A-F) covering approximately significant equal parts, to map the street children in the city. The child was included in the mapping list on his/her own willingness to participate in the study. From every zone 70-80 children were identified to ensure the availability of 35 children per zone in the main study. Children were reached zone-wise covering six zones. Due to the exploratory nature of the study, purposive sampling (through mapping and identification) and the snowball sampling procedures were employed. 35 children from each zone were included for the study. The total sample comprised of 200 street children, inclusive of both boys and girls; in the group of 5-16 years. Children varying ages, religious/community backgrounds, occupations and residential status were included, with a special focus to include the 'girl' child. An in-depth interview schedule was formulated to

collect data covering-the child and the family, educational status, availability of food and clothing, work experience, play & entertainment, attitudinal profile: personal habits, peer interaction, perception towards self, family & society and aspirations and expectations of street children. This study also involved in-depth case studies of street children who were selected on the basis of belonging to 'run-away' category of children; involved in different types of work situations, and represented both genders in total sample. Children's response were converted into frequency scores and calculated into percentage profiles.

The results of the study found that the larger number of street children was found on the streets in the age of 8-12 years. From the total sample a large percentage of children were boys and comparatively girls were lesser in numbers. The religious backgrounds of the children indicated that majority of children were Hindus, and few were Muslims and a very small percentage belonged to tribal communities of Rajasthan. The educational status of children revealed that only 20 per cent of children were attending a community school in their slum and remaining 80 per cent of the children were not studying but only working on the streets. 31 per cent children reported to have been enrolled in a school but had dropped out. 49 per cent of the children had never been to a school. A large number of street children (86 per cent) reported eating 'two' meals a day and 8.5 per cent reported one meal a day. Children were interviewed regarding their occupation; age of initiation in work-life; the money earned per day by children; the money spent by them; number of hours of work per day; and relationships among variables were studied. During the study, children were seen engaged in a variety of semi-skilled and daily wage manual jobs in the unorganized sector. Despite work schedules on street jobs, children managed their time and small money to play and entertain themselves in various ways. Gambling, watching films and television; smoking and drinking and taking drugs were common modes of entertainment and relaxation for these children. The results throw light on significant development concerns which emerge from the socialization of street children in India; and drew a parallel with the findings of research studies carried out in different parts of the world to strike common grounds for theory building and practice.

Eme T. Owoage, A. O. Adebisi, and M. C. Asuzu (2009) conducted a cross-sectional analytic study of street children in the Kajola Local Government areas of Oyo State in South-West region of Nigeria. This study was conducted to describe the socio-demographic characteristics of the street children found in a group of rural communities. A descriptive research design was followed in a cross-sectional analytical study of street children in a group of rural communities undergoing urbanization. A cluster sample of the street children was taken in the seven chosen political wards of the study area. A total of 227 street children were selected as a sample. The results of the study revealed that majority of the street children were within the age group 15-17 years with more males than females. Most of the street children were engaged in different types of work such as part-time driving, car washing and petty trading. It was recommended in the study that that more studies would be needed on the driving factors for street life in rural communities undergoing urbanization.

N. B. Patel, Toral Desai, R. K. Bansal and Girish Thakar (2011) in their article studied the occupational profile of the street children in the city of Surat. A cross-sectional study was conducted by interviewing 326 street children Surat. The study revealed that the majority of the street children started earning money as beggars. It was found that the occupational profile of the street children changes according to their age, period of stay and money available with them. The major five occupations of street children were eatable and tea stalls, begging or sweeping, selling newspapers, magazines and books; shoe shining and selling drinking water bottles and pouches and cold drinks. It was also found that commercial sex work by girls was considered as inevitable by street girls.

Poonam R. Naik, Seema S. Bansode Gokhe, Ratendra R. Shinde and Abhay S. Nirgude (2011) conducted a study on street children in Mumbai. A cross-sectional study was undertaken to study the demographic profile and substance abuse among the street children in two shelter homes of Mumbai:

Anmol and Salaam Balak- Anmol shelter home (day care and residential) caters to street girls only and Salaam Balak (day care) caters to both street boys and street girls. Subjects for the study were selected from the street children attending the open house program of Anmol and Salaam Balak shelter homes. The study was conducted during February 2003 to May 2004. A total of 217 subjects belonging to adolescent's age group i.e. from 10 years to less than 18 years were selected by

Universal sampling method. Data was collected by conducting face to face interview with street children by using pre-designed questionnaire at both the shelter homes during open house program. Informed consent was taken from both the shelter homes before starting the study. Data was compiled and tabulated and presented in percentages and proportions. Chi square test was used to study the factors associated with substance abuse. The results of the study showed that out of 217 study subjects interviewed, 113 (52.1 per cent) were boys and 104 (47.9 per cent) girls. The mean age of the subjects for boys was 13.96 years and girls 13.91 years. Majority of children belonged to Hindu religion (66.3 per cent) followed by Muslim religion (32.7 per cent). Majority of boys (49.6 per cent) and girls (90.4 per cent) were presently located in pavement, followed by 17.7 per cent boys and 67 per cent girls were located at chowpatties. In the study a total of 96 (44.23 per cent) subjects admitted to substance abuse with overall males abusing more (63.54 per cent) than females (36.46 per cent). The most common substances used by boys were smoking, tobacco, gutkha, charas, ghanja and alcohol. In case of girls, pan, tobacco, gutkha were found to be the common substances. Also 32.8 per cent boys and 37.1 per cent girls admitted that they use glue solution and Masherri respectively as these substances are cheap and easily available. Peer pressure and inquisitiveness were the main reasons to initiate substance use.

Anjali Gupta (2012) studied social determinants of health of street children in South Delhi. The aim of the study was to gather relevant information about the situation of the children in especially difficult circumstances in Sangam Vihar, on the biggest unauthorized colonies of South Delhi. The sample population comprised of 100 children in the age group of 5-16 years. The objective of the study was to analyze the physical, social, and economic conditions in which the street children were living and their consequences for health of the street children. The study followed an interdisciplinary approach to present the social determinants of street child health an exploratory and descriptive research designs were used. The results of the study showed that majority of the street children (50 per cent) were in the age group of 13-16 years and 41 per cent were in the age group of 9-12 years. It was found that 84 per cent were boys and 16 per cent were girls. Majority of children (74 per cent) were living with their families in small congested houses in the blocks of Sangam Vihar. Only 15 per cent of the street children were found to be attending school. The largest number of street children

was working in the roadside restaurants selling quick street foods like tea, coffee, cold drinks etc. Based on the findings, it was suggested that the street child phenomenon necessitates partnership between governmental and non-governmental organizations to provide for policy and legislation, funding and resources to translate programs into concrete plans of action.

Apurba Shah and **R. Dhanasekhara Pandian (2012)** in his article, *Substance abuse among street children: Community risk factors and protective factors*, studied substance abuse among street children in Bangalore. The aim of the study was to understand the community risk and protective factors for substance abuse among street children. The objectives of the study were; to assess the psychosocial profile of the street children and to study the community risk and protective factors among street children with and without substance abuse. The descriptive research design was adopted for the study. A total of 60 street children were selected randomly for the study which comprised of 30 non users and 30 children with active substance use from the Non-governmental Organizations working with the street children in Bangalore. The inclusion criteria of the study was male children between 12 to 18 years of age who are staying on streets and the exclusion criteria was female children, children with developmental disorders and any major psychotic illness. A semi-structured interview schedule was prepared by the researcher to gather personal data and socio-demographic profile of the respondents. Based on review of literature a comprehensive check list was developed to assess the community risk and protective factors which were suitable to assess the population. The checklist was having total 64 questions including the socio-demographic details, personal history and work history. The checklist was applied on the 5 street children before final administration on subjects. The data was collected from two different NGOs called BOSCO-Nilaya and SATHI at Bangalore, working on street children. The collected data was analyzed by using the computerized programme of Statistical Package for Social Sciences (SPSS), version 16.0. Descriptive statistics that includes frequency distribution, mean, standard deviation item distribution of the questionnaire were applied to find out the univariate characteristics of the independent and dependent variables. Chi square test was carried out to check the homogeneity of the respondents profile from the non-user group and user group. The independent t-test was used to find out the difference in community risk and protective factors between the user and non-user group. The results showed that the mean age of

the non-user group was 13.97 years and the mean age of the user group was 14.07 years. The mean education of the non-user group was 6.07 years and the mean education of user group was 5.67 years. Out of 60 children, majority of the children (78 per cent) were coming from government coeducation school and 11 per cent were from the government boys' school. A total number of 6 children were illiterate out of 60. According to the group wise distribution, 23 of the children in non-user group and 24 of children in user group were from government coeducation school. Majority of the children (85 per cent) were hailing nuclear family and 15 per cent were from the joint family. A sizeable number of the children in non-user and user group (83.3 per cent and 70 per cent respectively) were belonged to Hindu religion. Out of 60 children, majority of the children (91.7 per cent) were hailing from lower socio-economic strata of the society and 8.33 per cent were from middle socio-economic status. Out of 60 children, 10 were left school because of different family issues, 11 were due to issues in school, 10 were illiterate and a majority of children i.e. 29 were left school because of peer influence and not interested in study.

Sadia Rafi, M. Ali, and M. A. Aslam (2012) in their article, *The Problems of Street Children: Case Study of Sargodha Cit*, studied the different types of problems of street children in Sargodha City in Pakistan. Total numbers of 110 respondents were selected through snowball sampling technique. The data was collected through interview Schedule. The findings of the study revealed that 45.4 per cent respondents were in the age group of 4-11 years and 54.5 per cent were 12-18 years old. All the respondents were boys. It was found that only 13.6 per cent respondents were living in joint families, followed by 67 per cent in nuclear families and 19 per cent of the respondents were from broken families. Majority of the respondent street children (95.7 per cent) were migrated with their parents. The reasons of leaving home were school or madressah violence and financial problems. It was recommended in the study that community mobilization strategies to develop monitoring/early warning systems to identify children at risk of taking to street life and provide them with the alternatives.

Pawan Kumar Thatiseti and Sharband Raj V. (2013) in article, *Psychopathology, Temperament and Substance Abuse in Street Children*, studied different aspects related to the problems of street

children of Hyderabad. The aim of the study was to study the demographic profile, street activities, and reasons leading them to street life, psychiatric morbidity and substance abuse pattern of street children. This study was carried out in a shelter home, run by a Non-governmental Organization in Hyderabad. 50 boys in the age group of 5 to 15 years coming to the shelter home were selected as respondents. Regular visits were given to the shelter home. New comers were enrolled in the study till a sample size of 100 was achieved. The data was collected through various techniques. Intake Performa was prepared for collecting data related to demographic profile, life style, etiological factors, psychiatric morbidity and substance use. **DSM-4 Criteria** was used for clinical diagnosis of the conditions like major depression, conduct disorder, nocturnal enuresis etc. Children's Psychiatric Rating Scale (CPRS) was used to assess various psychiatric symptom clusters. Other tools, such as Psychological Examination Behaviour Profile (PEBP), Drug Abuse Screening Test (DAST) and Michigan Alcohol Screening Test (MAST) were also used in the study. The results of the study found that the majority of boys (88 per cent) in the study had left their homes after the age of 10 years, were Telugu speaking and belonged to the rural areas; mainly from the same state (Andhra Pradesh). About 84 per cent of them had primary education and about half were currently attending schools and half was school dropouts. Financial difficulties were commonest reason given for leaving the education. Many of the children (84 per cent) had run away from their family homes and did not have any contact with their families. Before coming to the contact shelter, they were staying on the street on an average for about 2.5 years, either alone or with other sometimes, shifting between shelters. Many of them used to work as a hotel boy (28 per cent) or used to beg on street (20 per cent) and some as rag pickers. About half of them were working for more than 8 hours a day and were earning on an about 30 rupees per day. Many of them liked to play games and watching television or movies while in the shelter home. Many of them (54 per cent) had friend circle. Abuse at home or family related problems had brought majority of them to street at tender age of about 9.6 years. Most of them were physically abused by their step parents and relatives. The study of family structure suggested that most of them (68 per cent) were from nuclear families with larger size. It was found that about two third of them were abusing substance, either simple or multiple. Majority was abusing substance about five times a day. Study revealed that children scored quite high on CPRS, mean score 91.03, mainly on the

antisocial, depressive and anxiety clusters, pointing towards the increased psychopathology in them. The low mean score 28.56 on PEBP showed the low level of arousal or interaction. They mainly showed low self-confidence, low level of frustration, tolerance, poor attention span and difficulty in communication.

It was concluded that proper understanding of risk factors which derive children to street may help reduce the number of such children. Also, early identification of psychological disturbances in such children, timely interventions and enriched environment may prevent further damage to their future.

Narayan Sharma and Suresh Joshi (2013), in their article, *Preventing-substance abuse among street children in India: a literature review*, presented a review to define substance abuse among street children in India and its prevention. The aim of this literature review was to identify the factors that put children on the streets, understand the context of substance abuse among street children and released health problems in order to develop a framework that can help in preventing substance abuse among street children. This review was based on 15 full text academic journal articles. Beside these, - publications from government and private organizations were also included as **grey literature**. This study revealed that 10 per cent of the world's children live on the streets in India and more than two third were boys. It was found that most of the street children abuse nicotine and alcohol. The major reason for children to be on the streets was poverty and peer pressure for substance abuse. HIV/AIDS, violence and crime were the major social effects of substance abuse. It was recommended in the study that programs on empowerment, employment, equality with culturally sound interventions are required to prevent substance abuse among street children in all parts of India.

Khwairakpam Sharmila and Sukhmindar Kaur (2013) in their article, “**Street Children in India**”, studied the perception of street working children on health and illness. The main objective of the study was to explore and understand the perceptions of Delhi's working street children regarding their health, illness, healthcare seeking behavior and the obstacles to healthcare services use. In this study, an exploratory qualitative study was used. A semi-structured interview and in-depth case studies of working street children were conducted for the collection of data. The snowball, purposive and convenience sampling techniques were used for selecting respondents for the study. The results of

the study showed that working street children in Delhi had many illness and negative health outcomes as a result of their poor living conditions. The medical and health problems of street children were ranged from minor problems such as- cough, cold, and fever to major ones such as injuries, diarrhea, high grade fever, accidents, skin wounds and chest pain etc. it was recommended in the study that in order to provide sustainable and normal health care to street children there is a need of effective public-private partnerships or amalgamation of health services among private and public resources.

Md. Abdul Hai (2014) conducted a study to define the problems of street children of Bangladesh. The aim of the study was to shed light on the predicaments of the street children in their in their street life, their coping mechanism is response to innumerable problems and survival status. A qualitative method with the juxtaposition of FGDs and case studies was employed to generate descriptive data with the organizational support of UCEP. Four FGDs were administered on a total respondent size of 74 beneficiary and non-beneficiary street children in two schools of UCEP in Mirpur and Lalbagh areas in Dhaka city. A checklist was developed as an instrument to collect empirical data. It comprised of different parts containing questions based on the objectives of the study problem. The findings drew the flamboyant picture of the ongoing endangered livelihood mostly and mainly triggered by poverty, insecurity, powerlessness, weak or no social network and social capital, insufficient institutional support etc. Since the respondent lacked proper capabilities to secure a descent job, they had to endure oppression, torture, insecurity and other problems to survive on the streets. Drawing upon their problems, this study dismantled some specific coping mechanisms adopted by the street children whether by avoidance or approach to the predicaments and stress they face to survive on the street.

A. S. Berad, Sampat Momula and Ravi Kumar BP (2014) conducted a study of health status of street children in Khammam city of Andhra Pradesh. The objectives of the study were to study the health status of the street children in Khammam city and to study the socio-cultural environment of the street children. A prospective and descriptive research design was followed for the study. The population of the study was all the street children in the city who were less than 18 years of age. Out of total 384 street children, 150 were included in the study. Children in different age groups of both

sexes were selected. Children who did not cooperate, did not give consent or were missing for follow up were excluded from the study. Data regarding socio-cultural environment and health status was collected by using pretested structured questionnaire after obtaining proper consent. General physical examination of the children, anthropometry and health checkup was done taking help of doctors from Community Medicine Department following the standard methods. At least 20 per cent of the questionnaire was cross checked by the study guide and senior faculty to ensure the quality of data. Data was analyzed in the Department of Community Medicine using SPSS software. A total of 150 street children were interviewed (males 86 and females 64). The mean duration of stay on street was 5.31 years. Nearly 10 per cent of children were illiterate. The overall personal hygiene of the children was very bad. 97 children were malnourished. 6.7 per cent of children had scabies. 30.66 per cent children were anemic. 46 per cent children had Vitamin A deficiency. 17.33 per cent children had vitamin B deficiency. 34.7 per cent children had visual problems, 18.66 per cent children had ear and hearing problems, 60.66 per cent had dental problems, 5.3 per cent children had some psychiatric problems and 42.66 per cent children had various addictions. Most of the children were among the poorest of the poor who have migrated to urban centres as a survival strategy. It was recommended in the study that children should be facilitated in getting identity proof, which the government accepts as an entitlement document, and enables them to get admitted in schools. It is essential to increase the number of shelters, not only night but also day shelters for street children. Interventions are also needed in rural areas to reduce migration of young children from rural to urban areas.

J. O. Aransiola and Christina Zarowsky (2014): studied the street children of Nigeria to examine the live experience of street children and other stakeholders' perception in three urban cities (Logos, Kaduna and Port Harcourt) in Nigeria. The theoretical framework of the study was guided by the combination of lifestyle activity and strain theories. While strain theory help to understand why street children involved in crime and indulge in some antisocial lifestyles as a way of coping with their stressful conditions, lifestyle activity theory explain how much lifestyle may subject street children to crime victimization. The study was carried out in these three cities of Nigeria. In these cities, five different categories of respondents were including for collecting primary data: government agencies, civil society organization, the community and non- governmental organization and street children

themselves through both qualitative and quantitative techniques. Total number five hundred children were interviewed by using convenience and snowball sampling technique with the assistance of trained field workers in each city using self administered structured questionnaires. The quantitative data was analyzed with the use of SPSS software and ANOVA was also used. The results found that majority of street children live with their families and nearly half lived in the streets. The mean age of street children found to be 14 years. Most of the street children were males (83 percent). The highest proportion of girls was in Port Harcourt. The data of educational level of children reveal that 26.7 percent dropped out of primary school and 26.2 percent dropped out of secondary school. It was found that 47.5 percent of the street children were Christians while 48.3 percent were found to be Muslims. The findings also revealed that street children perceived to be perpetrators as well as victims of crime. They were exploited, abused and used as drug mules. It was recommended that there is a need of more programmatic steps by the Nigeria government and civil society to address the conditions faced by street children in order to address the security problems and the fundamental human rights of the children.

Chiranjit Mukherjee (2014) conducted a study on socio-educational and rehabilitations status of street children in Kolkata. The objectives of the study were to understand the educational status of street children in Kolkata, to explore the different types of problems faced by them, and to find out the rehabilitation status of street children. The study was followed by hypotheses. The study was carried out on a sample of 600 street children ageing 2-16 years selected from streets of Kolkata. Simple random sampling method was employed to select the sample; due to this gender distribution was not equally distributed. Data was collected from both North and South Kolkata. Interview schedule and observation methods were occupied for the collection of data. Variables under the study were “migration” and “poverty” as dependent variable and “street children” as independent variable. The hypotheses were statistically tested by using **T-test**. It was found through the study that majority of street children (32 per cent) were within 8-10 years with more males (65.33 per cent) than females (34.66 per cent) in which up to 71.66 per cent was literate including high drop-out (53.95 per cent) while 28.33 per cent were literate.

The important findings were categorized into three categories: **Social Status, Economic Status** and **Causal factors & influencing factors of Migration.**

- **Social Status:** It included living pattern of street children with or without family. 71.5 per cent children with or without family live in temporary houses on streets made with only tent like plastics whereas 15 per cent were completely homeless, who were roaming around and searching for livelihood. On the pavement or roadside or under the bridge, few of these families (2.66 per cent) live in permanent shelter made with bamboo, old jute pieces, plastics etc. Using of some household acquaintances like broken dressing table, trunk, Chula, cycle, utensils etc. also seen in them.
- **Economic Status:** Economic status of street children in Kolkata included family pattern, number of earning members and range of income. The majority of street children still live with their family in which role of association of joint family were high (51 per cent) than nuclear family (34.83 per cent). The economic status of nuclear family, joint family and orphan has significant difference in terms of monthly income along with earning members. In maximum nuclear family (54.33 per cent), earning members were two whereas maximum joint families (53.59 per cent) run by one bread bearer. Maximum nuclear (96), joint (139) families and orphan's (43) monthly income range were 1001-1500; which has shown much more difficulties in joint families than other two because of more family members.

Economic status was inter-related with occupational status of street children. it was found that 78 per cent (468) children were labour, engaged in non-hazardous (62.39per cent) pattern of work, more than hazardous (37 per cent) pattern. Many children were engaged in begging, car-washing, selling goods on streets, which were consider as non-hazardous; in contrast some were also involved with cinema ticket blacking, substance peddling, prostitution as hazardous working patterns.

- **Casual factors & influencing factors of Migration:** Sources of migration can be divided in to two categories- outside from West Bengal and outside from Kolkata. Study found that maximum children with or without family (51.33 per cent) migrated to Kolkata street outside from Kolkata than outside from West Bengal (48.66 per cent). The leading causes of migration of children with or without

family were poverty & ill environment, unemployment and lack of education and awareness of opportunity.

Aliya Khalid, Muhammad Nasir and Shuja Ur Rehman (2014) conducted a study to identify the hot spots of street children in Lahore. The main objective of the study was to identify the localities which were considered as the hot spots of street children in Lahore. This study was followed by an exploratory research design. A survey was conducted in selected 15 areas in Lahore and data was collected through direct observation technique. The results of the study showed that following localities: Data Darbar, Raliway Station, Minar-e-Pakistan, Laxmi Chowk, Regal Chowk and Badami Bagh were the hot spots of street children in Lahore on the basis of their maximum presence and socio-economic activities. The results of the study indicated that there is a need of initiating such programs with the cooperation of public-private organizations in these localities which directly address the root cause of street children phenomenon.

Loknath Ghimire (2014) in his master's thesis studied the causes, survival strategy and societal perception of street children of Kathmandu Valley, Nepal. The main objective of the study was to find out the major reasons that force any children being on the street and the perception of the society towards street children. The research design of the study was based on the descriptive and analytical method of interpretations. Based on pre-observation, the areas of the study were selected as four different places of Kathmandu- the capital city Jamal, Thamel, Putalisudak, and Maitidevi. The purposive judgmental sampling was applied for the selection of the sample of the street children below the age of 16. The data was collected through face-to-face interview and pre-structural questionnaires. The results of the study found that the number of street girls were fewer in comparison to the street boys because of the social and cultural impact of Nepali City. Most of the street children did not know about their parents. The major reason of being on the street was found to be family abuse and exploitation.

F. Islam, S. Kaur, A. Debroy and R. Seema (2014) studied the substance abuse among street children in Guwahati City, Assam. The main objectives of the study were to study the socio-demographic profile of the street children, to ascertain the substance use among street children and to

find out the risk factors of substance abuse among the street children in Guwahati City. A cross-sectional study was conducted among 215 street children between the ages of 5 and 18 years. The data was analyzed in Microsoft Office and percentages and Chi-Square test were used to analyze the variables. The results of the study revealed that 80.9 per cent of the street children were substance abusers. Presence of step parents and substance use in the family were seen to be risk factors for substance abuse. It was found that the majority of the substance users (87.4 per cent) were in the habit of sniffing glue and this followed by smoking. It was recommended in the study that non-governmental organizations and government should come forward to curb this problem.

Indrapal Ishwarji Meshram, Stephen Gade L and Pothu Raju Battina(2015) conducted a study on street children in south India. A street based cross-sectional study was carried out on the street of twin cities of Hyderabad and Secunderabad, Andhra Pradesh. The aim of the study was to assess the nutritional status, prevalence of anemia, risk behavior and substance abuse among street children. The data on age, schooling, family history, reasons for street life, numbers of years on street etc. was collected using convenience sampling technique. A total of 305 children of 8-18 years of age were covered. It was found that the prevalence of thinness was 26 per cent and that of anemia was 54 per cent among, street children. It was observed that 42 per cent street children were involved in substance abuse and 14 per cent in sexual risk behavior. Risk of substance abuse was higher among children staying in railway premises, on the streets for more than five years and working in hotels. Sexual involvement was more prevalent among children living in railway or bus station premises and among those living on street for more than five years.

TISS and Action Aid India (2015) conducted a study on street children in Mumbai City. The objectives of the study were to undertake a census of street children in the city of Mumbai, to understand the social, economic, educational, work and family background of street children in Mumbai and to understand the reasons why children live on the streets, the current problems and future aspirations of children living on the streets of Mumbai. The study was followed by quantitative research design which comprised of two parts: census and a sample survey from those enumerated through the census. First part included a head count of street children living in Mumbai UNICEF

definition of street children. Information regarding basic details about street children who were covered through the census was collected such as age, sex, category of the child vis-à-vis location, health status, disability and addiction. Second part included a sample survey of street children based on a structured interview schedule to collect information regarding socio-economic, education, work and family background of the children as well as to understand the reason for their existence on the streets. The findings of the study revealed that a total of 31,059 street children were enumerated in the census in which 70 percent of the children were boys while 30 percent were girls. The result showed that 65 percent of the children living with their families on the streets and 24.44 percent of the children fell in the category of street working children. The majority of street children (20.80 percent) were in the age group of 16-18 years, followed by 18.80 percent in the age group of 13-15 years and 17.60 percent in the age group of 10-12 years. It was found that 24 percent of the children were illiterate. The major occupations in which children involved were selling flowers, newspaper, fruits and other items on the road. It was recommended in this study that there should be a paradigm shift in the thrust of the Juvenile Justice System and the DWCD from a curative approach towards children indifferent circumstances, to an outreach and preventive approach to vulnerable children.

Shimelis Kassa Kebede (2015) conducted a research study on the street children living in Hawassa City. The main objective of the study was to assess the overall situation of street children in Hawassa City. The researcher in this study employed both qualitative and quantitative research methods. The data was collected through interview schedule and focused group discussions. A total number of 170 street children (31 females and 139 males) were selected as sample through snowball and purposive sampling techniques. The results of the study revealed that age of the respondents street children ranged from 9-17 years with a higher proportion of children (50 per cent) in the age group of 12-14 years. It was found that the most common factors responsible for the existence of street children were poverty, death of parents, peer pressure, and family breakdown. The study further revealed that street children in Hawassa were vulnerable to wide range of violation of their rights. The street children were also found verbally, physically and sexually abused.

Fedrick Mtaita (2015) conducted a study on street children's perception and the role of the community in supporting their access to education. The objectives of the study were to explore the perceptions of street children about their identity, to explore the perceptions of primary school teachers about street children and to examine the role of the community in supporting street children to access education. The information was collected from 10 street children, 32 primary school teachers, 35 pupils, 40 community members and 2 district officials through questionnaires, interviews, focused group discussion and observations techniques from the department of Social Welfare in Ilala Municipality. The findings of the study revealed that there were mixed feelings in identifying and talking about street children. Street children on their side, identified themselves as normal kids, but some street children identified themselves with the names that other people identify them with, such as chokoraa, watoto wo mitaani, thugs, homeless and the like. It was found that none of the community member considered helping these street children to go to school as important. It was recommended in the study that an effective charter on child rights is needed to provide all the children their right to education.

Pratibha, A. Mathur and Ansu (2016) in their article, *Difficulties and Problems of Street Children*, studied the problems of street children of Faizabad District. This study was followed by a descriptive research design a cross-sectional survey method was used to collect data from the selected sample. The study was conducted at Fiazabad as the researcher was acquainted and familiar with the place. Various slums of Faizabad district were selected using random sampling method to draw the sample. Children in to the age group of 5-15 years were selected from different slums. A total sample of 260 children comprising 130 boys and 130 girls respectively were selected for the study. The information was collected through self-made questionnaire from the respondents. The study reveals that the majority of street children (30.38 per cent) were belonging to family of 7-10 members. It was found that majority of street children (41.92 per cent) were having second mother and 30.38 per cent respondents were not having second mother and 27.69 per cent street children did not know about their parents. In the study, it was found that majority of street children (41.15 per cent) started their life as a street child between the age group of 4 to 6 years, 10.76 per cent children started their life as a street child by their birth and 26.92 per cent respondent were between the age of 6 to 10 years or

above when they started their life as street children. The majority of street children (32.30 per cent) were living with their parents, 19.23 per cent respondents were living without parents and 30.38 per cent respondents' parents were divorced. Poverty and gender discrimination were the primary causes of street children crisis. These children had also limited access to food, shelter, protection and health.

Kwaku Oppong Asante (2016) conducted a study to understand the lived experiences of street children and adolescents. A qualitative approach was used in the study. The sample of 16 street children was selected through purposive sampling technique from the Central Business District of Accra, Ghana. The study revealed that the factors of pushing children to street were disorganized and broken homes, and desires for freedom from parents. The study showed that street children were facing severe behavioural and health risks problems including substance and alcohol use, sexual harassment and rape, violence and violent-related behaviours. It was recommended that there is need for an effective community parenting programs that focuses on parental and protective family reconciliation skills, and the provision of supportive structures to help youth access physical and mental health services for providers.

Mona Srivastava and Nasra Shareef (2016) conducted study on street children in Varanasi. The main objective of the study was to assess the different types of abuse to the street children residing in the urban area of Varanasi. A sample of 415 children was selected through random sampling technique. A semi-structured interview schedule was followed for the collection of data. The result of the study found that all types of abuse were common and physical abuse was highest (74 per cent) and the police was the perpetrator. It was recommended in the study that policies are needed for these children.

Abhishek Mehta and Shahnaz Mansoori (2016) conducted a research study on the assessment of oral health status of street children in New Delhi. A cross-sectional exploratory study was conducted on 583 institutionalized street children residing/visiting eight shelters home across Delhi. In the study, out of 583 street children of the age group 5-15 years, 340 were males and 243 were females. It was found that enamel hyperplasia was observed in 211 street children. Majority of the street children were suffering from bleeding gum or calculus deposit on their teeth.

Ronita Nath, Harry Shannon, Kathy Georgiadas, Wendy Sword and Parmindar Raina (2016)

studied the impact of drop-in centres on the health of street children in New Delhi. The objectives of the study were to determine whether street children who visit drop-in centres experience both physical and mental health and engage in less substance use than street children who do not visit centres and to determine whether the duration of attendance at a centre has an impact on the above outcomes. A cross-sectional study was conducted with 69 street children from two drop-in centres in New Delhi and a comparison group of 65 children who did not visit drop-in centres. It was found that the children who visited drop-in centres experienced fewer ill health outcomes, engaged in less substance use and had better mental health outcomes than the street children who did not visit drop-in centres.

Dr. Ameer Ali Abro (2017), in his thesis, defines the problems of street children of Urban Sindh. The main objective of the study was to examine the phenomenon of street children with sociological perspective in Urban Sindh as well as socio-economic conditions of street children and their families, causes of the problem and its solution. The study was followed by exploratory and descriptive research design. The area of the study was ‘Urban Sindh’, ‘Sindh’ is the province of Pakistan, its overall population and area and cities can be distributed into two parts, Rural and Urban. Big cities are collectively called as ‘Urban Sindh’ and the rest of the area is known as ‘Rural Sindh’. There are four major urban cities namely Karachi, Hyderabad, Sukkur and Larkana counted as cities of Urban Sindh. These cities were chosen as the area of the study. Purposive sampling technique was used for selection of the subjects with the help of non-governmental organizations working for street children in each city. The population of street children in these four cities was quite different; according to various studies and non-governmental organizations approximate number of street children in Karachi was up to 16000, in Hyderabad 8000, in Sukkur 5000 and in Larkana 2000. Therefore 400 street children were taken from these four cities with different percentages as a sample. The data was collected through an interview schedule. This study also followed Focused Group Discussion to discuss and to obtain comments of the participation on the topic of this study. Results revealed that majority of street children population were born in Sindh and few belonged to Balochistan. It was found that majority of children were living in their own homes but spend most of their time in the streets or out of their homes, large number of street children speak Urdu language rather than Sindhi.

Study also found that majority of street children were residing in their homes with parents rather than on the streets while a lesser number of street children did not know about their parents or not attached with them. Study also revealed that behavior of step-mother also plays a role in making a street child, because one fourth of the street children have their second mother. It was also found that large number of parents of street children was uneducated, this led to the conclusion that illiteracy plays an important role I family disturbances and uneducated parents cannot tie up with their kids with family interaction.

K. Jagdish Kumar, K. B. Chethak and H. V. Rama, H.R. Bhaktavatsala and V. Vikash (2017) conducted a study on street children in Mysore. The main objective of the study was to assess the hemoglobin levels and nutritional status of the street children in Mysore. A cross-sectional descriptive study was conducted. A convenient sample size of 264 street children was selected. The results of the study found that Anemia was noted in 52.2 per cent of the street children and 76.5per cent of the children were underweight, 36.8 per cent had stunting and 52 per cent had wasting according to WHO criteria.

Mahuya Majumdar, Sarmistha Chakrabarti and Suniti Ghosh (Chatterji) (2017) conducted a study on street children of Kolkata. The main purpose of their study was to investigate the health status of the children aged from 3 to 18 years living in the streets of Kolkata Metropolitan City. A cross-sectional study was conducted on 540 street children in different 10 zones in Kolkata. The random sampling technique was used to take the sample. It was found that out of 540 street children, 331 were boys and 209 were girls. The study revealed that low BMI prevalence was 62.40 per cent, protein deficiency was 57.85 per cent and calorie deficiency was found 60 per cent in street children.

Anuj Jhakar, Priyanka Sharma, Samar Hossain, Sonal Yadav and Vandna Sen (2017) studied substance abuse by street children in Jaipur City. The main objective of the study was to assess substance abuse and the factors associated with them. The study was an observation and included children between 5-15 years of age living on the streets of Jaipur City. It was found that three common reason for starting substance abuse were peer pressure, increase in confidence and out of

curiosity. Other reasons of substance abuse were to feel elated, to forgot sorrow and to decrease hunger.

Tushar Savarkar (2018) in his article, *Psychosocial Distress among Children Living on the Street in Mumbai City, India*, studied the factors associated with psychosocial distress among street children in Mumbai. The main objectives of the study were to examine the psychosocial distress among children on street in Mumbai and factors associated with it. The data was collected for this study through the survey of 234 children living on street during October 2015 to November 2016. The study has used GHQ 12 scale to examine the psychosocial distress among children living on the streets. The results indicated that the two-thirds of children from age group 13-15 years and 16-18 years were facing severe kind of distress. Gender analysis showed that boys were slightly more prone to psychosocial distress than girls. Children from Muslim religion were considerably more prone to psychosocial distress than children from other religion. Children who were saying five years or more were having severe kind of distress. The study has found that factors like age of the children, duration of stay, gender and their occupation contributes to the distress among the children on street.

Nilika Dutta (2018) conducted a study on street children in India. This study focused on access to health and education in street children from 6 to 18 years old in the Indian Metropolises of Mumbai and Kolkata. The study also aimed to assess the role of social work interventions in ensuring the rights of street children. A combination of quantitative and qualitative research methodologies was used. Convenience sampling was used to recruit 100 children. Data was collected through semi-structured interview schedules and by non-participant observation. Findings of this study revealed that extreme poverty was the primary cause for the increasing numbers of street children. Lack of awareness among illiterate parents regarding educational opportunities kept most children away from school attendance. It was evident that those living with their parents had better access to health care facilities than did those living on their own; however, non-governmental organizations made significant efforts to redress this imbalance, setting up health check-up camps at regular intervals. Although exposure to harsh reality at an early age had resulted in a parameter loss of innocence in most, the non-governmental organizations were striving to ensure child participation and the growth

of individual identity. The interventionists therefore focused in developing a rights-based approach, rather than a charitable one.

STATEMENT OF THE PROBLEM:

According to the Human Development Report of UNDP (2000), India has the greatest number of street children. It is found that New Delhi, Mumbai, Kolkata have around two lakhs street children each and Bangalore has about 45,000 street children. Another estimation of UNICEF (2001) reveals that in six major cities of India- Bombay, Kolkata, Chennai, Hyderabad, Bangaluru and Kanpur- there are about 4,14,700 street children and of these about 48 per cent spend their nights on the open street. Thus the phenomenon of street children is a challenging social problem of India. The problem of street children is a very serious problem at the level of small cities like Agra. It has many dimensions. The research studies on street children worldwide shows that these children face many problems such as lack of proper food, shelter, and no contact with family, poor health, and most of the children are facing some kind of abuse. They have many issues, and therefore there is an urgent need for greater concern for these children. The present study will be an attempt in this direction, which will help in understanding the socio-economic conditions, problems of street children and also provide the role of different organizations working for the betterment and welfare of street children in the area of the study.

IMPORTANCE OF THE STUDY:

Street children are not a homogeneous group. Each child has a different family background, a different reason for being on street, and different requirements to be filled. An effective categorization will bring a better understanding of the problem and needs of each group of street children. Even though the country has progressed significantly in the areas of child survival and child development; there is still a long way to go for ensuring child protection. There is a pressing need for specific data depending on the various facets of the lives of children in difficult situation for affective planning and formation of specially designed interventions to save such children. There is a need to make in-depth study on street children, as they are the most vulnerable group. This study is in this direction. This

study will provide an overview of the major forces and social factors that impact the lives of street children and highlight the major problems of street children.

OBJECTIVES:

- To find out the different types of problems faced by street children.
- To study the types and causes of abuse among street children.
- To study the impact of substance on the life of street children.
- To examine the government's and non-governmental organizations' efforts for the betterment of street children.

HPOTHESES:

- Street children face different types of problem due to poverty and unemployment.
- Adult street children influenced young street children for substance abuse.
- Street children face physical and mental health problems due to substance abuse
- Street children are found vulnerable because of the lack of proper implementation of government policies and programmes.

RESEARCH METHODOLOGY:

The methodology of the study will be designed so as to achieve its primary objective of developing a comprehensive understanding of the socio-economic conditions and problems of street children.

Research Design: A descriptive and exploratory research design will be followed for the study.

Area of the study: It is estimated that there are about 7,900 street children residing mostly at railway stations, bus stations, pavements, slums, market places in Agra city. Most of the street children are centred at three bus stations (Idgaha, Bijlighar, and ISBT), three crossings (Bhagwan Talkies, Rambagh and Hariparwat), two market places (Sanjay Place and Sadar Bazar) and three railway stations (Agra Cantt, Rajamandi and Agra Fort). Therefore, the study will be conducted at these places.

Universe: The universe of the study will be the total estimated 7,900 street children of Agra city.

Unit: Street Children.

Sample: The targeted sample of 400 street children of the total estimated population will be drawn through purposive and snowball sampling technique. The sample representation of the areas will be:

Sr. no.	Area of the study	No. of street children (sample)
1.	Idgaha (Bus Station)	30
2.	Bijlighar (Bus Station)	50
3.	ISBT (Bus Station)	55
4.	Bhagwan Talkies (Crossing)	25
5.	Rambagh (Crossing)	30
6.	Hariparwat (Crossing)	30
7.	Sanjay Place (Market Place)	25
8.	Sadar Bazar (Market Place)	40
9.	Agra Cantt (Railway Station)	50
10.	Agra Fort (Railway Station)	35
11	Rajamandi (Railway Station)	30
	Total	400

Tools of Data Collection: A structured interview schedule will be used to collect the information from street children of Agra City.

Classification of Data: On the basis of the nature of collected facts and information about street children, data will be classified in different categories.

Analysis of Collected Data: The collected data will be analyzed through average and percentile method.

Presentation of Data: The data will be presented into graphs and pi-chart.

OPERATIONALIZATION OF CONCEPTS:

Definition of a Child: The biological, social and legal definition of child can be defined by following:

- **Biological definition of child:** Biologically, a child is generally anyone between birth and puberty.
- **Social definition of child:** Socially a child is defined as a person of lower level of maturity needing adult protection, love and nurturing.

- **Legal definition of child:** The **United Nations Convention on the Rights of the Child** defines child as “a human being below the age of 18 years unless under the law applicable to the child, majority is attained earlier.

Definition of Street Children:

Cosgrove has used two dimensions to define street children: the degree of family involvement and the amount of deviant behavior. According to Cosgrove, a street child is “any individual under the age of majority whose behavior is predominantly at variance with community norms, and whose primary support for his /her development needs is not a family or family substitute”. Cosgrove’s definition assumes a great deal of cultural consistency, but deviance and “family substitutes” are greatly embedded in cultural particulars. For example, how do we handle the fact that in many cases the life of street children is healthier- both physically and emotionally- than is the child life at home? Which life is deviant (Cosgrove, 1990)?

According to UNICEF, street children are those for whom the street (in the widest sense of the word i.e. unoccupied dwellings, wasteland etc.) more than their family has become their real home, a situation in which there is no protection, supervision or direction from responsible adults (Reddy, 1992).

The categorical definition of street children given by UNICEF:

1. **Children on the street:** Forming the largest category, these are children who have homes, and most returns to their families at the end of the day.
2. **Children of street:** These children choose the street as their home and it is there that they seek shelter, livelihood, and companionship. They have occasional contacts with their families.
3. **Abandoned children:** These children severed all ties with their families. They are entirely on their own. Not only for material survival but also psychological.

Definition of Street Children for this study:

The current prevalent definition that is widely used by UNICEF defines street children “as anyone under the age of 18 who either lives or works on the streets”.

According to this definition, there are three types of street children:

- **Street Living Children:** These are the children who live alone on the streets, public/open places or night shelter. They may have no responsible adults who look after them.
- **Street Working Children:** These are children who spend a majority of their time working on the streets or in public spaces but return with daily or occasionally to their home.
- **Children of Street Family:** These are children who stay with their family but live on the pavement/street, public places and are homeless.

For the purpose of this study researcher will use the current UNICEF definition.

THEORITICAL AND CONCEPTUAL FRAMEWORK OF THE STUDY

A theory in a research project is the frameworks for the project on the basis of which we describe or explain are phenomena (Silverman, 2005). Concepts are ideas deriving from models, which offer ways of looking at the world and which are essential in defining a research problem. Therefore, a theoretical framework consists of concepts, together with their definitions, and existing theory that are used for a particular study.

The conceptual framework for the study identifies the causes of the problems of the street children. it shows the complex and interlinked social and structural factors that are pushing and pulling children to the streets. There are several causes of becoming street children, such as the interplay of push and pull factors (poverty, migration, death of parents, illiteracy, freedom, influence of friends etc.).

SOCIAL SYSTEM THEORY - In the social system theory the functionalist perspective focuses on the system's ability. **W. C. Nessmith** states that according to the functionalist perspective a society is seen as an organized network of cooperating groups operating in a fairly orderly manner on a set of rules and values shared by most members. The phenomenon of street children has emerged due to instability of family system or in general by social system which is the product of failure of family institutions (Nessmith, 1995).

Talcott Parsons – Talcott Parsons looks at the problems of street children communities in the relationship between integration and allocation. Allocation refers to the distribution of scars needs

(resources) among people and the distribution of people in two certain positions in street children communities. Integration refers to the arrangement of tensions caused by allocations.

TENTATIVE CHAPTERIZATION

Chapter 1: INTRODUCTION

- **Introduction**
- **Street Children around the World**
- **Street Children in India**
- **Review of Literature**
- **Statement of the Problem**
- **Importance of the Study**
- **Objectives**
- **Hypotheses**
- **Research Methodology**
- **Operationalization of Concepts**
- **Theoretical Framework and Conceptual Framework of the study**

Chapter 2: Socio-economic Background of the Street Children

Chapter 3: Problems of Street Children

Chapter 4: Substance Abuse among Street Children

Chapter 5: Government's and Non-Government Organizations Efforts for Street Children

Summary, Conclusion and Recommendations

Appendices:

- **References**
- **Interview Schedule**

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