

THE HEALTH STATUS AND MENTAL CONDITION OF STREET CHILDREN

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Declaration by Research Candidate

I, Fatema-Tuze-Johora, hereby declare that the dissertation entitled “The health status and mental condition of street children”. Submitted by me to Department of pharmacy at East west University. In partial fulfillment of the requirement for the award of the degree of Masters of Pharmacy is a complete record of original research work carried out by me during the period 2015 January-2015 November under the supervision and guidance of Farhana Rizwan, Assistant professor of East West university.

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Dissertation submitted to

East West University

Dhaka, Bangladesh.

Certificate by the Supervisor

This is to certify that the dissertation entitled “Health status and mental condition of street children” is a one type of Prospective study done by Fatema-Tuze-Johora, in a partial fulfillment of the requirements for the degree of Masters of Pharmacy.

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Abstract

Background: In this study were the health status and mental condition of street children where the street child phenomenon 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 represents one of our most serious global challenges .The article investigates the cause of the phenomenon, as well as the characteristics of street children throughout the world.

Objectives: The objective of this study is to define and quantify the street children phenomenon in view of finding appropriate solutions to the related problems.

Methodology: It was a prospective study .The study was conducted four different area of the Dhaka city. The main place was The Kamalapur-railway station, Shahbag, Gulshan-1,Rampur breeze. Two hundred fifty was collected from different area of Dhaka city.

Result: The primary interest of present study is to descriptive about street children situation in Dhaka. Two hundred fifty children (Female and male) were selected based on the simple random sampling. The total two hundred fifty children were involved in the study .Data was collected via personal and family information from data sheet. Research finding related to responders, genders, age, educational background, experience as street child ,father occupation ,guardian, family member and reason for leaving home, type of work presented by using the frequency distribution and percentage.

Conclusion: From these above study we should find out the overall health status and mental condition of street children.

Key words: Family information, Personal characteristics, Street children of Dhaka city.

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Chapter One

INTRODUCTION

1.1: street children:

The most common definition of a street children is “any girl or boy who has not reached adulthood, for whom the street (in the broadest sense of the word, including unoccupied dwellings, wasteland, etc.) has become her or his habitual abode and/or sources of livelihood, and who is inadequately protected, supervised or directed by responsible adults” (international-NGO, 1885). This definition was formulated by Inter---NGOs in Switzerland in 1983.

UNICEF as quoted in Mexico Child Link Trust has defined three types of street children:

- ❖ **Street Living Children:** children who ran away from their families and live alone on the streets.
- ❖ **Street Working Children:** children who spend most of their time on the streets, fending for themselves, but returning home on a regular basis.
- ❖ **Children from Street Families:** children who live on the streets with their families.
- ❖ Amnesty International categorizes street children as follows :
- ❖ **Children on the street:** Children on the street are those engaged in some kind of economic activity ranging from begging to vending of manufactured commodities of food. Most go home at the end of the day and contribute part of their earnings for the economic survival of the family unit. They may be attending school and retain a sense of belonging to a family or household. Because of the economic fragility of their families, these children may eventually opt for a permanent life on the streets. (Dr.Peter Fonkwo ndeboc, 2009)
- ❖ **Children of the street:** Children of the street actually live on the street. Family ties may exist but are tenuous and maintained only casually or occasionally. Most of these children have no permanent residence and move from place to place and from town to town. (Dr. Peter Fonkwo ndeboc, 2009)

The World Health organization (WHO) classifies street children according to four categories:

Children who live in the street.

Children who have left their families and reside in the street, hotels, shelters, or abandoned places.

Children living in protection centres or orphanages, who are at risk of becoming homeless.

Children who have weak or insubstantial relations with their families, and whose circumstances force them to spend the night outside their homes.

Children who have weak or insubstantial relations with their families, and whose circumstances force them to spend the night outside their homes. (UNICEF, 2010)

According to UNICEF, there are three types of street children:

Children who reside in the street: Children who have run away from their families and live alone in the street.

Children who work in the street: Children who spend most of their time in the street, but who regularly go back to their homes.

Children from street families: Children who live with their families in the street.(UNICEF, 2010)

1.2: Background of street children:

The recent decades have witnessed the growing concern for the rights and welfare of children. These concerns were marked by the adoption of the Convention of the Rights of the Child by the UN in November 1989 followed by the adoption of the Organization of African Unity's Charter. There is a real need for increased vigilance given the constant rise in the number of street children across the world, especially given their increased exposure to other hazards like HIV/AIDS, substance abuse, child labor, early pregnancy etc. Street children are considered to be among the MARPs (Most at Risk Populations) for the HIV/AIDS disease given their sexual behaviour and their vulnerability to various forms of abuse including sexual abuse and injection drug use among others. All of these are major predisposing factors to HIV infections or other STIs. In fact Dube (1997) found out that both street girls and boys have risky sexual activities that make them vulnerable to HIV infection. There is thus a need to focus on

this category of children in the fight against HIV/AIDS because of their hard-- to--reach nature coupled with their increased vulnerability.

By every standard, the street children phenomenon has multiple and interdependent causes; economic, social and political. The inherent dangers of being in the street situation: economic deprivation and lack of adult protection and inadequate socialization etc., make “children in street situation” extremely vulnerable. When pushed into the difficult street situations, they develop survival mechanisms to protect themselves from such aggressions. (Dr.peter Fonkwo Ndeboc, 2009)

The children mostly come to the limelight only when such survival mechanisms, such as pick--pocketing, prostitution drug abuse are noticed etc. That is when they become a nuisance to the general public. Unfortunately these symptoms of the phenomenon are often confounded with the root problem which is the underlying problem that made them escape from responsible adult control and support. The most common reaction is repression, further exclusion in the name of putting them into special reformatory institutions. The poor conditions of some of these institutions and poorly adapted programs only lead to further isolation, stigmatization and deprivation. A vicious circle is quickly formed as these lead to further poverty. Most authorities are quick to index poverty as being the main cause of the phenomenon, which is often wrongly tagged as a problem of the poor. Poverty is evidently not the only reason behind the problem. After all, not all “children in street situation” are from poor families and many children from poor families are not in the street situation. (Dr.peter Fonkwo Ndeboc, 2009)

From a good number of official reports in Mauritius Island, there is evidence that the recent years have seen an increase in the dislocation of family cohesion and consequently a decline in parental presence within the lives of their children. This has partly been attributed to increasing divorces and high levels of economic hardship. In an effort to meet the material needs of members of the family parents have had to leave their families behind in search of economic El Dorados. This has led to an almost social dislocation. Some parents have practically resigned before their responsibility towards their children. Those who have had to move out into the wider world to fend for this very family, have at times had to leave the children either with family relatives or a single parent and thus leading to a decline in adult control/support. Some of the children from such families out--rightly fall victim to societal predators of all sorts and are at times pushed on to the

streets in order to survive. As was also described by Gilbert Vogt Inde (1995), in cases where mothers are left to fend for themselves and for their children, they are often obliged to take refuge by a male companion often under conditions of duress. For the same economic reason some of the companions decline from taking charge of children that are not his. This may lead to total rejection and outright brutality in some cases. The mother is thus put into a dilemma, having to make the choice between the children and her companion. Some of them resort to sending the children back to their grandparents when the latter are willing to receive them. In other situation, the children have no option than to fend for themselves in the “streets”. These children who are often left under conditions of uncontrolled freedom, consequently go everywhere except where they are supposed to go. They fail to attend school thus jeopardizing their chances of a better future. (Dr.peter Fonkwo Ndeboc, 2009)

From all of the above it is evident that the number of “children in street situation” is likely to increase as more and more parents (mostly men) are moving out, in search of jobs elsewhere, leaving their family behind. Poverty is evidently a key factor that pushes the children into the street situation. However more direct ones that immediately push the child out of the family bounds may include, family violence and hunger. The root causes thus lie with the factors that bring about pauperization of the families in the first place. (Dr.peter Fonkwo Ndeboc, 2009)

In Mauritius, there are very few NGOs that are specifically dedicated to working with the population of children in street situations. SAFIRE is one of few and its mission is getting the children off the street situation for a start and later, either reintegrating them into their families, home/communities or finding other secure environments where their basic needs—for physical safety, medical care, nutrition, counseling, education, recreation, and spiritual growth—can be met. (Dr.peter Fonkwo Ndeboc, 2009)

In line with the general concern for the rights and welfare of children, the Government of Mauritius and other local partners like MFPWA and Safire, with the assistance of local and International donors like Rogers and the Global Fund for Health, are making some efforts to ensure that the children of the land are taken care of timely and correctly. The presence of street children in Rodrigues is signaled by various organizations but this is less clearly the case in Mauritius Island. There is no clear idea as to the amplitude of the problem or the mechanisms involved. In fact some authorities are in the state of denial as to the existence of street children on the Island. The problem stems from the lack of

consensus on the definition of street children. Many stakeholders reduce the definition to just one aspect of the street children problematic, which is that of “street living children” as we will see below. Unfortunately there is a failure to recognize that the terminology of “street children” is not a rigid category but a whole panel of situations related to the socio--economic and cultural realities of each country, characterized by a host of factors ranging from parental neglect, various forms of child abuse, school absenteeism to actual ‘street life’ situations. The definition of street children in Mauritius is believed to be different from those street children in Mexico or the Philippines but special attention has to be given to them as the number of children living in situations of social exclusion is on the increase. It is thus evident that, more emphasis should be on the problematic of children which put them in situations similar to those of street living children elsewhere in the world. Like Gilbert Vogt Inde (1995), and for the purpose of this study the more encompassing and less pejorative and irreverent terminology of ““children in street situation”” will be used interchangeably with “street children” to mean the same thing. Given the complex nature of the problem of street children or “children in street situation”, it was thus necessary to carry out specialized studies on these children, if the factors and dynamics of the problem were to be well understood. This is an unavoidable prelude to determining correct strategies for the fight against HIV/AIDS, one of the many hazards that the “children in street situation” are exposed to under the conditions described above. As Anne Hatloy & Anne Huser (2005) rightly put it, determining who the children are is the first step in designing policies to identify them, understand their needs, improve their life in the cities, or reintegrate them into their home communities.

(Dr.peter Fonkwo Ndeboc, 2009)

1.3: Street children in Bangladesh:

The widely accepted definition of street children comes from UNICEF in Bangladesh. UNICEF defines street children as “who is of the street and on the street” (Aktar, 2004), that means who works all day in the street pass their times, eat and go back to the family at night for sleep are children on the street and those who work, pass time and sleep on street are children of the street. (UNICEF, 2009)



Therefore children living, working and passing their times in streets with or without parents is called street children, these floating children usually eat, sleep and work on the street may live in one place and sometime move to other place. They generally sleep at footpath, railway station, bus station and in other public places at night and found in district and thana (Sub district) . The Bengali term of street children is “Pathshishu” and informally people used “Tokai” to address them, “Tokai” means rag pickers who use to collect waste paper, bottle, shoes and other item from road and dustbin. These floating children are also named as disadvantaged children, hard to reach children, urban working children and children at risk or in need of special protection to associate them with support and reintegration. (UNICEF, 2009)

In Bangladesh, Although any reliable surveys have not been conducted for the actual numbers of street children but it predicted to be increasing day by day . Here the table shows the number of street children in six district in total number of Bangladesh:

Table 1.1:

Location	Number of street children
Dhaka	249,200
Chittagong	55,856
Rajshahi	20,426
Khulna	41,474
Barisal	9,771
Sylhet	13,165
Bangladesh (total)	679,728
Bangladesh (total projected for 2014)	1,144,754
Bangladesh (total projected for 2024)	1,615,330

('Estimation of the Size of Street Children and their Projection for Major Urban Areas of Bangladesh 2005' commissioned to BIDS by ARISE, Cited from UNICEF 2009.)

In Bangladesh cities are overcrowded with plenty of slums, squatter settlements and pavement dwellings (UNICEF, 2009). Children in Bangladesh are living on streets with their parents or without parents if they have been orphaned or abandoned by parents (Ibid). Children also run away from home and shifted in street due to poverty and physical abuse of parents or caregivers . Other reasons of child migration to street are related with urban migration and causes addressed as natural disaster, low working condition and limited working facilities in rural areas which forced children to migrate in city streets with or without parents. (UNICEF, 2009)

1.4: Child migration to street in city areas:

A baseline survey conducted by Bangladesh Bureau of Statistics reported the reasons of children migrating to street, where majority of their respondents shows poverty and hunger as the main cause of street migration (BBS, 2003). Other reasons of child migration to street are stated as run away from home, step mother/father, earn money, no one look after them, abuse respectively (BBS, 2003). At all, economic poverty remains as strong argument about child migration in city areas. National reports and surveys also represented economic poverty and economic shock such as land erosion, floods and shortage of food as the main reasons of children migrating to street . In Bangladesh it is

argued that low income and lack of income opportunities in rural areas compel children to migrate city areas to contribute their household income . However Conticini argued that economic factors and shocks are only played very limited role in decision of children migrating to street where non economic factors are evidently high in this decision . Such as collapse of adult child relation especially with parents or care giver in terms of emotional bonding. He emphasized on “run away” children where alleviation of economic poverty could be a partial solution, as the decision of child migration not only process of vulnerability but also process of empowerment and freedom . So beside economic matter as pull factor there are family environment for children are remains as strong push factor in migration of children in streets. Whatever the reasons of child migration to street are, their living and working conditions are as worst as vulnerable without guidance and protection. (UNICEF, 2009)

1.5: Living and working condition of street children:

One of the national daily newspaper reported on street children that, they are found in bazaars (Market Place), commercial areas, bus terminals, hotels and parks, on the pavements, around the stadium and they try to earn a living through collecting garbage, breaking bricks or pushing rickshaws, some of them work in roadside tea stalls while some are just beggars, some street children are involved in petty crime where some underworld gangs use the street children in drug peddling, snatching, toll collection and in other crime.

“Fatema, who is 9 years old, works at Rampura “kacha bazaar” (Vegetable Market), she collects fish from the fish market and sells them to earn money. The men who work in the market treat the children shoddily and inhumanly. The child was crying and saying to me: "I went to the bazaar to collect fish apa, the shopkeeper poured ice-water (thanda borof ar pani dale dicche) on me and slapped me. I could not collect any fish. What will I eat today apa (Sister).

Example :“Kalam does not know his identity. He cannot remember his parents, not even have any near and dear ones. He was born and grown up on a road at Hazaribag in the city. The 10 years old boy feels his mother most whenever he becomes sick. During his sickness in last month, he was crying by the name of mother on the roadside. He could not go to a hospital with his very little money or could not buy attention to him. Kalam’s mental and physical agony was culminating thinking the fate of one of his peers who died untreated after suffering from this sort of fever. He left on the roadside with high

fever, chill, rigor and repeated convulsions. After 3 days, one kind passerby did notice and admitted him into the Mitford Hospital with his own money. It was also found that the street children are also habituated to professional blood donation which fuels the spread of” transmissible diseases”. The photograph below is showing a female child hawker who use to sell lemon during traffic signal. This is very common scenario of the streets of Dhaka where lots of children sell cheap goods and beg, in a risky way during traffic signal. (The Daily star, 2008)

The baseline surveys conducted by Bangladesh Bureau of Statistics and by other organizations or by researcher groups show a small number of interviewee or sample size. Therefore it is difficult to draw the actual picture of working and living condition of street children though it is imaginable that how vulnerable situation those children could face in childhood without association of state, society or other agencies. Besides, researcher founds hesitant, unwilling interviewee as they fear about interview, being tired at day times who work at night and being engaged in work at night time . Even most of the younger street children do not know their actual age, occupation, income level, parents income, when they left from home. As well, most of the street children engaged in sex work, pick pocket, drug business, theft and do not report about their occupation in front of researcher, they like to report other works if their activities are anti social. Their living status depends on their earning and work and most often they move from one place to another place. (The daily star, 2008)

1.6: Living status of Street children:

Street children usually move from one place to another place for better working facilities, sleeping place and for weather. They often have to sleep on street, park, railway and bus stations, government buildings, they have to change open sleeping place due to rain and in winter time. Night guard, other guards and police made difficulties for street children in sleeping. Basically street children love to live with their street friends together as Conticini estimates social relationship with peers as main livelihood asset of street children. (UNICEF, 2009)

The baseline survey conducted on street children at 2003 represented the living status of street children in many places of Bangladesh and the most important reasons reported by those children for moving the living place was having better working facilities while majority of children move from one place to another for better work, second major reason was identified to have better sleeping place at night and other reasons was avoid

police harassments, stay with friends was reported respectively . The survey demonstrated that maximum street children do not use any beds or anything for sleep and some other uses cloths and jute bags for sleeping at night, they change their sleeping place from street to stations and other accessible government building during rain (Ibid:23). Bathing facilities was reported accessible and most of them bath everyday though toilet facilities are very limited and a significant number of street children use open place for toilet. (UNICEF, 2009)

80% earnings of these children are being spent on food, some reported to beg food from restaurant and even some collect food from dustbin . In addition 39% of street children reported to have two meals in a day followed by 3.1% have one meal in a day and 0.7% said sometimes they starve a day and most children go to bed at night without having food at least one or two nights in a week . More than 80% street children said they do not have any winter clothing and high proportion of them became sick in winter for not having cloth . While more than half of street children reported they feel sick and fever as common sickness followed by water borne disease and headache, usually no one look after them during sickness even though some reported to being looked after by friends . Majority of them consul the person in the pharmacy and took medicine from him while very limited number of them even heard about organization and facilities associated for them for health care as well as for other issues . (UNICEF, 2009)

There is no official statistics about drug user among street children but a large number of street children spend their money on drug and when one of them is asked about reasons for using drug, he replied “addiction is very good thing and it does not harm body” while his peers agreed with it . At all street children engages in different types of works for their survival whither paid or unpaid and if paid, they spent their money both for basic needs and for other causes. (UNICEF, 2009)

1.7: Working status:

Children in urban areas without effort of family and no supervision of law are under great threat now a days; in informal sectors employers are interested about children, due to cheapest labor and at all no bargaining power, ready to work long hours .



Example, Rubel was pushing a rickshaw full of sacks and a man was sitting on the sacks. Though 12 years old, the malnourished boy looked not more than 10 years of age” (Daily Star, 2008).

BBS 2003 baseline survey found that first work of majority of street children was beggar, paper picker, hawker, flower seller, garage worker, cooli (who carry goods) and helper, followed by domestic worker and agricultural worker. Even most of children in Dhaka city work without payment just for food and sleeping palace. In 1stMay, the daily Protom Alo done an interview session on a market place and almost all the child worker replied that they are working without payment for the same reason (Prothom alo, 2011,).

The average age of these children in engagement of work is 7.81 years and 50% of them started working at the age of 8-11 years while 42% started working before 7 years old, consequently the major reason of starting work was poverty. More than half of street children said their parents sent them for work and a significant number of street children were domestic servant before coming to street therefore it indicates that working as a domestic servant made them vulnerable which later shift them to the street . As well as majority of children works 8-12 hours hour and 83% of them works 7 days in a week . Despite of long working hours and no off day at all, the children earn \$3.50 to \$4.50 per week and the earnings become better with the age .About 56% of street working children do not like their works and the rest like their works because of earning ability for food cost and very little like their jobs because they can help their family.

They often injured in work, the nature of injury is mostly cut/wounds followed by back pain due to heavy work load and suffered for injury from less than one week to more than three months .Almost every street child reported to not use any protection during

works . Apart from first work as a beggar, street children are also compelled by adults to boy. (Prothom Alo, 2011)

1.7.1:Street children as a beggar:

Street children are being using as street beggar in Dhaka city. So called gang leaders are compelling alone street children to beg for them by torturing and by making the children disable. An arrested gang leader had reported to the police that they injured the kidnapped children and intolerably torture the children to make disable beggar (Prothom Alo, 2010). He also reported that if they see any children walking on the street who do not have any parents or guardian, they kidnapped those children, store in a big ball and gave them very little food which made this children look like an skeleton and people use to give them money when they saw a child like this and all the money goes to the gang, they also cut hand and leg of children to make them disable. These gang have good communication with police and after reporting, police do not arrest them, the children also been threaten about police from the gang member if they rejected to do what the gang members telling to do. After those incidents high court of Bangladesh declared the removal of child begging from Dhaka city and asked government to show causes about why child begging by making them disable is still not stopped and had not taken any steps for this with having law. Street children are also used as picketer in political and other general public protest. (ATN News, 2011)

1.7.2:Street children as a picketer:

Recent capital market fall protest of general public in Bangladesh had been reported and broadcasted that, street children (locally called “Tokai) are throwing stone in the office building of capital market. Although these children do not have any relation with protest, may they don’t know why they came to the event but they do what they told to do. Most of the time in front of police they are throwing stones, breaking things in public protests (Daily Janakantha, 2011)

1.7.3:Sexually and other vulnerability:

UNICEF reported, children living on the streets are mostly vulnerable to abuse and exploitation even if they live with their families because for poverty and lack of services parents are not in a position to provide appropriate care to their child (UNICEF, 2009: 2). These children on the street grow up without suitable accommodation, protection, education, health care, food, safe drinking water, security, supervision, recreation and guidance . Often these children work in hazardous and low-waged jobs to support their

families for survival as well as doing work without education trapped them in a cycle of low-skilled, low- income employment which pushes them into the cycle of poverty . According to UNICEF these children frequently find themselves the victims of sexual abuse and risk of HIV infection, physical torture and trafficking . Criminal networks also engage street children in commercial sex work, smuggling, stealing and distribution of drugs and weapons which leaves no other options to many children . This hardship and abuse of life made the children reluctant and distrustful which later become difficult for the service provider to help them .Moreover, ECPAT global monitoring report on Bangladesh reported that “Commercial Sexual Exploitation of Children (CSEC) continues to be a widespread problem in Bangladesh, although there are no reliable statistics on the extent of commercial sexual exploitation of children, it is estimated that there are approximately 10,000 to 29,000 victims of CSEC in Bangladesh, about 27,000 Bangladeshi women and children have been forced into prostitution in India, and around 40,000 children from Bangladesh are involved in prostitution in Pakistan. Government statistics usually bracket women and children together with no distinction by age. Despite the limitations in quantifying the problem, a growing number of qualitative studies and reports by national and international organizations have provided a sound base for understanding the nature, extent and causes of CSEC in Bangladesh.

There are indications that in recent years the incidence of the commercial sexual exploitation of children in the country has changed. In addition to child marriage and traditional/customary laws that contribute to the commercial sexual exploitation of children, more incidences of child trafficking for sexual purposes, child prostitution, and child pornography are evident. It appears that the majority of Bangladeshi children forced into prostitution are based in brothels, with a smaller number of children exploited in hotel rooms, parks, railway and bus stations and rented flats . Along with sexual vulnerabilities children in the street often faces negative behaviors and torture from the member of law enforcement agency who suppose to protect the children. (Janakhanta, 2011)

1.8:Education policy and street children:

This chapter discusses about education policy for street children by briefing about education structure of Bangladesh, recent progress, facilities and probabilities for children within education policy, enrolment of street children in education program and

some reasons for education policy failure (not achieving the target of each and every school age child in school).

1.8.1: Education as a special emphasis for development policies for street children:

Children living in the street have to take care about themselves whether they with or without parents because for poverty and working situation, parents are not in that position to take good care of their children. Therefore countries existing policies for children can not directly benefit to street children as there is no valid statistics about street children and for living in street they are actually in out of society. As well as running so many programs separately like education, nutrition, HIV, sanitary and pure drinking water facilities, vaccination etc for ensuring child rights issues is difficult for a third world country like Bangladesh where major populations lives below poverty line. Education is the most cost effective possible way for Bangladesh to mainstreaming street children in the society and to ensure their rights according to the countries law and policies since the child right programming could be operated under education policy. School enrolment could be useful registration process for government to count child population and simultaneously could be helpful to operate development policies throughout school. Early learning facilities can really improve formal education of street children as most of them live without parents supervision and guidance which was necessary before to admit in formal school system. In addition learning with joy can impact on their aim of life and can give them idea about their rights in the country.

The global perspective of child rights policies first comes from CRC to ensure, protect and promote children rights everywhere in the world specifically education, and the right to be free from all kind of exploitive activities that harm childs physical, cognitive and social development (UNICEF, UNESCO,). Secondly there is ILO convention, as street children survival is closely related with child work since they have to work for bearing their living cost or to support their families. Later it comes about Millennium Development Goal (MDG), Education for All (EFA) program and other international organization like UNICEF, UNESCO and World Bank for their initiatives “The present education system of Bangladesh may be broadly divided into three major stages:

primary, secondary and tertiary education. Primary level institutions impart primary education basically. Junior secondary/secondary and higher secondary level institutions impart secondary education. Degree pass, degree honors, masters and other higher-level institutions or equivalent section of other related institutions impart tertiary education.

Bangladesh formed new education policy in 2010 and it says that confirming basic education for all is constitutional responsibility of country and right of every person in Bangladesh, in that way the government gave high emphasis on primary education (National Education Policy 2010: 4). The education policy formed by considering constitution of Bangladesh and universal child right convention and it had targeted of hundred percent primary education enrolment within 2011- 2012 . The education policy also mentioned to enhance basic primary education from grade five to grade eight within 2012 and children could have vocational training and education after completing primary education, in addition number of vocational and technical training center will also be increased . Students after completing primary education till grade eight could enroll in government and non government vocational and technical institute but primary education had been made mandatory and will be provided for all in Bangladesh.(The National educational policy, 2011)

a)Primary Education:

“Ministry of Primary and Mass Education (MoPME) of the Government of the Peoples Republic of Bangladesh is mainly responsible for policy formulation, supervision, planning, monitoring and evaluation and initiating legislative measures relating to primary and non-formal education. Bangladesh has been trying relentlessly to uphold the cause of education for all since its emergence as an independent country. Article 17 of the Constitution of Bangladesh stipulates that primary education shall be the responsibility of the State. To bear this responsibility primary education in Bangladesh underwent a great deal of changes and development during the last decades. Bangladesh is a signatory to the World Declaration on Education for All (EFA) held at Jomtien, Thailand in March 1990. Bangladesh is also a signatory to the Summit of 9 high Population Countries held on 16 December 1993 in Delhi. Bangladesh participated in the World Education Forum meeting held in Senegal, Dakar in April 2000. The Government enacted Compulsory Primary Education Act in 1990, created a separate Primary and Mass Education Division in 1992, introduced compulsory primary education program in 68 Upazilas in 1992 and expanded this program all over the country in 1993. At present primary education program made some progress.

b)Recent Progress in primary education

The teacher student ratio is not balanced in Bangladesh therefore the two years progress in primary education report published that government are recruiting new teachers in

vacant post and they recruited 1852 head teacher together with 51289 assistant teachers within 2009-2010 . Moreover private primary school establishment, management and registration process had been made easier to encourage set up of private primary schools. In 2010, government supplied hundred percent new books to primary schools previously it was 50%, the government had increased primary school scholarship and had introduced pre primary education from 2010 (Ibiden). In addition, 22833 government primary schools, 7506 registered private primary schools and 869 community schools successfully running pre primary education, all the material for pre primary education had been served and government had plan to run pre primary education in every school within 2011, the teachers recruitment and other necessary training for teachers will be done within 2011(Ibiden). Besides government is setting 1500 addition primary schools in different villages and they constructed sanitary toilets, cyclone center, arsenic free tubewells together with reconstructions and additional rooms

Another steps of government is school feeding activities, they feed 0.6 million students in different area together with 0.5 million in natural disaster affected area with 75 gram high protein biscuits in schools days . And with the help of European commission this program is expanding in poor areas for 2 million more, and along with World Food Organization Bangladesh government had taken a project of school feeding in extreme poor areas of sub districts which will cover 2.64 million more students . Vocational and technical education systems also improved by the government. (National Education Policy, 2011)

c)Vocational and technical education:

Bangladesh new education policy 2010 declared that it will include pre vocational and information technology education in primary education level and every student have to complete the 8th grade of primary education (National Education Policy, 2010). Student interested in vocational and information technology education can admit on that system. Who will not join in the main system they can receive a six month training.

d)Child to child approach:

Child to child approach is a child centre programming specially running by UNICEF for the school readiness on time. Children who are already in school will encourage younger children to enroll school on time, its a child to child trust based program which developed at the University of London Institute of Education and first used in health sector. (UNICEF, 2009)

e) Learning with joy:

The learning facilities that most children are getting free of cost from government or other agencies are not reaching to street children. Such as educative programs like “Sisimpur, Meena Cartoon” broadcasting at the countries national television and helps children to learn basic lessons like counting, alphabets with joy, besides these are child centered programming which makes children aware about their responsibilities and safe guards.

1.8.2: Education enrolment of street children:

Surveys conducted at 2003 on street children found that 60.7 percent street children never attended any formal or non formal school. 82 percent children, who had attended school, stopped it, to join their first job even before they were street children (Ibiden). The survey showed that 76.4 percent street children could not read and 75.8 percent of street children could not write at all. However 39.3 percent of street children ever attended school and among them 22.6 percent attended class I but not completed class I. but 2.8 percent completed class I, 23.2 percent completed class II, 13 percent completed class III, 6.7 percent class IV and 5.7 percent completed at least class V .Among the reasons for not attending school the following four were found to be important according to the survey:

- Parents did not send: 44 percent of never attended children mentioned;
- Parents/ Family could not afford: 31 percent of never attended children mentioned;
- Had to work for the family: 9 percent mentioned;
- School education was not important: 8 percent mentioned. It is noticed that poverty and ignorance about the importance of education were the main causes for not going to school.

As well as the street children reported the reasons for currently not going to schools and “the most important reasons were:

- Cannot afford school cost: 41 percent mentioned
- Because of work: 38 percent mentioned
- School education is not important: 9 percent mentioned
- Parents did not send, and now the school age is over: 7 percent mentioned

Moreover the survey found that these children dont have clear idea about education but they considered education as an helping element for people in gaining skills and 80.2 percent said that they gave importance to education where 19.8 percent reported that they

don't give importance to education and schooling, however, 83 percent showed interest about attending school if opportunity given (Ibiden). Consequently 95 percent of street children showed their high interest and eagerness to acquire skill training if provided only 5 percent had not shown any interest, the preferred job was driver in first position, mechanics in second and garage worker was third to them .As well, there are weaknesses in development policies for children which failed to improve education enrolment of street children.

1.8.3: Why these policies are not working to increase education enrolment and other opportunities for street children: The paper discussed that education can give clear idea about child rights to the children; can ensure safer, healthier life with accumulating government services for children. But all the policies taken by Bangladesh government is not ensuring that all the children are getting equal access in government services as because government have no valid statistics in every year therefore policies taken by state most of time follow previous projection where in real there is much more. As well as the paper discussed that, government had taken policies together with international organization to improve the situation of child rights to ensure hundred percent school enrolments of children with school age in its policy papers. But the research found that all the policies are not really targeting hundred percent children including street children. First of all the National Child Act 2011 and National Education Policy 2010 had not targeted to mainstream hundred percent street children by confirming that there will be no children in the street without state supervision, though those policies addressed food for education as a policy to keep street children in school but in city areas government school are very limited comparing to the number of children. UNICEF gave total number of street children in Dhaka are 249,200 (UNICEF, 2009) in 2005 which could be said out of formal government school education. There is no apparent policy that could cover all the street children under schooling program. Besides the policy taken to provide basic education for hard to reach urban working children is only targeting non formal education for 200,000 urban working children and life skill training to limited number out of them where in Dhaka city there were more than 200,000 street children at 2005 . In addition, PCAR project is also targeted and benefiting very limited number. But all these development policy could work if government target to cover all the street children under schooling program. As all government school had opened pre primary education, there is no necessity to provide non-formal education in a separate way. Research also

found no linkage in all development policies. State and development organizations sometime together sometime separately are working for different issues like HIV, Nutrition programs, non formal education, sanitation, safe drinking water. But all these issues could be done under schooling program in a joint way And failure the policy. (The national educational policy, 2011)

1.8.4: Major reasons for education policy failure

There is push factor which forced children to migrate in the street which the paper discussed about reasons of child street migration. Moreover pull factor working together for which most of the children engaged in work. In 2004 total 3.9 to 5.3 million children in primary school aged children was categorized as extreme poor on various criteria (UNICEF, UNESCO, ILO, 200). According to UNICEF, UNESCO and ILO, the push factors that children engaged in work rather than school are:

- Death of earning member in family
- Parental divorce
- Abandonment of children
- Economic shocks
- Catastrophic health problems in family
- Natural calamities. And the pull factors are:
- Work opportunities for cheap and unskilled labor relative to the inaccessibility of school.
- Economic benefits of sending child to work are greater than that of going to school.

Here comes the tradeoff between child work and child education. As because, all state policies are not targeting hundred percent children for quality accessible education and required training for later occupation, most of street children and their family prefer child work as the best way to survive. Although primary education is free and mandatory in Bangladesh but related indirect cost and lacking of government school in city areas made child work most preferable then education. In addition, there is no assurance that every child could admit in school and could have training for post education occupation. As a result, street children and their parents or relatives (If exist) think that, why should children spend time on education, they easily could be expert in work if they spend time in working instead of education and obviously will earn from work. In addition, reasons for not attending school was estimated including being busy with household economic

activities (16.3%); having to work for wages (9.6%); are weak in education (8.2%); have not found it possible to study or have been unsuccessful in exams (7.2%) (UNICEF, UNESCO, ILO, 2008: 24). While it is quite clear that the affordability of education and economic poverty of the household are critical obstacles in children attending school, children are also not going to school because they perceive themselves as being weak students or have been unsuccessful. This indicates a problem in the way schools assist students and how inclusive and effective they are in responding to students with different abilities .

Moreover present formal education system from grade I in Bangladesh start with formal examination, grade sheets and definitely with previous knowledge of reading and writing, students need guidance at home after school to pass in the examination. Furthermore schools do not have satisfactory implementation of learning with joy, early education, and child to child approach. From primary level school have merit list systems which make competition among children and required strong supervision and guidance. Such a competition in this early age could impact on children mind that they feel themselves looser or weak in education. Therefore it becomes difficult for street children to find joy in learning in school in formal education system if their parents are illiterate or have no parents.“(Teachers always give home task which students had to cover at home with guidance of either parents or someone elder literate person. Students have three exams yearly and finally they got a merit position which called “roll number” according to the performance of yearly final exam. All these exams need proper guidance at home for which parents always give pressure to the children).Although recently in 2011 government is planning to introduce early learning in every school but no increase in number of school in city area for covering floating children (National Education Policy 2010). Teacher student ratio is also very much unbalanced which prevent quality education with proper supervision and guidance.(The National educational policy,2011)

1.9:Comparison between different characteristics of street children and urban poverty:

In order to compare different characteristics between street children and the urban poor in general, six factors will be employed. These factors will be related to poor and

vulnerable conditions that characterize each group and how each group manages to live in such conditions. (UNICEF, 2002)

1. Shelter

Street children usually do not have a permanent place to sleep. Many of them sleep in the streets or on pavements near shops and malls, while others prefer sleeping at bus terminals, railways platforms, under bridges and by cinemas. Meanwhile, some girls prefer spending their nights with security guards due to being vulnerable and subject to abuse if they spent their nights on the streets. So, they try to find a suitable place to sleep according to their surrounding circumstances. (UNICEF, 2002)

Meanwhile, many urban poor live in very poor quality housing known as slums where people do not have access to one or all of these services: drinking water, sanitation and electricity. Nevertheless – for example in India- some slums are legally accepted and recognized by the government, and provided with these services. It could be argued that despite the poor conditions of slums, they provide a permanent place to live in, and are more secure than living in the streets like street children. However, slum dwellers need to pay for rent, electricity and water while street children do not need to pay for any of these services, which would reduce the financial burden on them. (UNICEF, 2002)

2. Income:

Street children work as car-parking boys, car washers, guards for the cars, shoe shiners and baggage loaders. Some older girls exchange sex for money .Some of them rely on selling goods and begging in traffic for making an income. Others are involved in illegal work like drug dealing (UNICEF, 2002). In order to secure their daily basic needs, they set up a system whereby each group has a zone where they undertake their activities to avoid any kind of competition for the available resources. On the other hand, slum dwellers are involved in the informal sector as a source of generating income that represents an acceptable alternative to the formal sector. However, the informal sector has some disadvantages that affect the poor, such as absence of social insurance and vulnerability to economic shocks. It could be argued that despite street children seeming more vulnerable than the urban poor in general, they can manage to afford their daily life needs due to being very well organized. For example, they know worshipping places and times so they can go there at prayer time in order to gain money or food. They are also aware of religious festivals and celebrations, as these days bring them good sources of

income. They also use tourist sites and NGOs as a good source for survival. However, being chased by police and state authorities hinders their activities. (UNICEF, 2002)

3. Infrastructure Amenities :

Some street children use seawater for washing, while others use public bathrooms. Sometimes they use leaking water from public pipes or use public water kiosks to fulfill their needs for drinking water. However, they are harassed either by people or by police. Some use public and railway toilets while others use pavements, parks and the seaside. Slum dwellers also suffer meeting their needs for water. Interviews conducted with slum dwellers in India show the extent of this suffering. People who have money can pay to install. Water taps or buys water, while those who cannot afford that bring water from public taps, police stations and leaking pipes. Some others bring water from houses where they work. (UNICEF, 2002)

It can be noticed that both groups do suffer to access to drinking and washing water, but street children suffer more because of being chased by the police and not being accepted by society. So, both groups are using similar ways to access water, but street children are not accepted in doing so, while the slum dwellers can do the same freely. Furthermore, it has been acknowledged and legalized that slum dwellers have the right to civic facilities in some cities. (UNICEF, 2002)

4. Social Network:

As mentioned earlier, street children depend on peer groups as their social network for their protection, support and solidarity. The urban poor in general also set up a sort of social network that provides them with means of support, especially economic support and solidarity. (UNICEF, 2002)

5. Health Care:

Besides being subject to HIV/Aids street children are also exposing to other type of diseases because of the harsh environment where they live. As for treatment, it depends on how much money street children can afford when one of them becomes sick. If they have money, they go to the chemist to buy medicine, especially if they have some knowledge about medicines, but if they do not have money, they wait until their bodies heal naturally. Some of them also receive support from their friends during illness. Whereas, urban poor people who are living in slums are subject to other infectious diseases such as tuberculosis due to the unhealthy environment and overcrowding, but they have no access to health services. However, they have alternatives to finance their

needs through possibility of savings, access to loans, borrowing, and they also may consider selling some assets and this money can be used to access to health care service. (UNICEF, 2002)

6. Assets:

Some of the urban poor have assets that help them to overcome difficult living conditions. One of the most important assets is having a house where they live, regardless of its condition. an urban poor family that has different assets, including having a house and renting out part to lodgers, having a sewing machine, and also having two of her children contributing to the household economy. Street children do not have this kind of assets that the urban poor have. They own nothing except the clothes they wear and what they earn from work during the day. It seems that the only asset street children have is being healthy, so they can manage to generate income to cover their daily needs. Girls are different from boys in this regard, as they consider their bodies their assets when they sell sex in return for money and protection. (UNICEF, 2002).

1.10: What are the problem encountered by street children:

Street children are confronted by a large number of population problems. Infact growing –up in an environment generally regarded as dangerous, they in cure considerable risks as a consequences ,some of their rights are very often compromised. (UNICEF, 2009)

a)Right to food:

Street children often don't have access to a healthy and sufficient diet. Sometimes they don't even have food ,because living on the street ,they don't produce any and don't have money to buy food.

Also, these children don't benefit it form a balanced diet. they eat what they can find. Sometimes when they have the choice, they even favour unhealthy foods such as ice-cream, cakes etc. and so run the risk of malnutrition. growth problems are also common with these children. (UNICEF,2009)

b)Right to health:

the health of children growing up on the street is strongly compromised. In-fact they don't access to sanitary facilities. they are often dirty and infested with fleas. Also because of their lack of hygiene, street children are exposed to different disease. Their health is often troublly.without a family to take care of them ,these youth must take of them selves. Additionally, street children to escape their reality ,often use cannabis,

alcohol or inhale natural gas. Unfortunately, these very hard living conditions have a negative impact not only on their physical and psychosocial development, but also on their cultural and economic development. (UNICEF,2009)

c)Right to education:

Street children are obviously not educated. Because of this, they don't have the same opportunities as other children. In-fact because they don't see future from themselves. and because they have no professional training, they are hindered from finding a job and from finally leaving the streets. (UNICEF,2009)

d)Right to non-discrimination

“people speak badly of us,they blame us for everything and call us wad-bi or rouge – gnoudba”.

Seen as marginals ,street youth are often victims of discrimination .Generally adults have prejudices that stigmatise them as “Street children”.

Consequently ,they are often associated with the dangerous of the streets.It is often difficult for these children to reintegrate it society. (UNICEF, 2009)

1.11:Causes of street children:

Street children are one of the most vulnerable groups of urban poor. They face difficulties while living in the streets, and they also develop their own ways to overcome such difficulties. They have some common characteristics with the urban poor in general, but they still have their own different characteristics that distinguish them from other urban poor groups. This paper will present the characteristics of street children as a group of urban poor and will identify the differences between street children and the urban poor in general. It is divided into two main sections. The first section will talk about definitions of street children, causes of this phenomenon, and some of street children's characteristics. (UNICEF, 2009)

There are two main causes classified:

There are two main causes of the phenomenon of street children. The first is the economic stress and poor conditions that families face due to industrialization and urbanization. The second cause is changes in the traditional family structure, especially when women became the main contributor to households' economies. Nevertheless, poverty cannot stand alone as the only reason behind the phenomenon of street children, as a comparative research conducted on street children and working children in Brazil

shows that the per capital household income of families of street children is higher than that of working children's families. (UNICEF, 2009)

1.12: Characteristics of street children:

Street children face difficulties in providing themselves with good sources of food, clean drinking water, health care services, toilets and bath facilities, and adequate shelter. also suffer from absence of parental protection and security due to the missing connection with their families. In addition, there is a lack of any kind of moral and emotional support .Regarding gender representation, the majority of street children are boys. Females are less represented owing to cultural sanctions: girls are more controlled by their families. Moreover, when they escape from their families, they either work as servants for a family or are caught by pimps; it is particularly because they are more subject to abuse than boys on the streets that they prefer any other place than the streets. The average age at which street children start living on the streets is between 9 and 12 years old, and they keep living on the streets until they reach the age of 15 to 16. When they became older they start to look for stable jobs with better wages. As for culture, morals and traditions, street children usually are not concerned about culture and morals, owing to being away from their family since childhood .street children as “ not only homeless or roofless, but they are also culturally rootless”. (UNICEF, 2009)

Regarding their health conditions, street children are subject to sexually transmitted diseases like HIV due to unprotected sexual behaviours among them and also because of casual sexual relationships. Girls who offer sex in exchange for security and shelter cannot oppose any unsafe sexual behaviour because of their weak position. This is unlike the urban poor in general who tend to live a normal life with only one partner, which helps control the transmission of sexual diseases: the urban poor are not forced to practice unsafe sexual behaviours like street children. In terms of social networks, children who do not have ties with their families form peer groups. These peer groups play the role of family and are a source of solidarity, economic and emotional support for their members. Each group has a leader who is obeyed by group members, reflecting how well organized they are. (UNICEF,2009)

Street children are subject to dangerous and illegal activities such as drug dealing, crime, theft and gang activities (UNCHS, 2000). However, many of them also undertake legal economic activities such as parking, car washing, baggage loading and others.In terms of security, some of them depend on peer groups to provide them with security and

protection. Girls are different from boys in forming their security groups. Girls group usually. have an older girl who has a sexual relation with a boy or a guard who provides them with protection in return. (UNICEF, 2009)

1.13: Root causes of street children:

The existence of street children is a social phenomenon that should be analysed in terms of the underlying economic, social and educational factors that either trigger or exacerbate the problem. Although each child has his/her own experience that drove him/her to the streets, the reasons contributing to this phenomenon are similar in many countries.

A 2002 World Bank report summarizes some of the main causes of the street children phenomenon as follows:

- 1.Low family income, forcing the family to find jobs for their children in order to contribute to increasing their income.
- 2.Inadequate housing conditions, as the lack of adequate housing may push families and their children to the street.
- 3.Neglect and abuse, which are common problems with either one or both parents addicted to drugs and alcohol or families that do not provide enough time for interaction among their members.
- 4.Failure in school.
- 5.Loss of parents due to armed conflicts and natural disasters, as well as due to epidemics and diseases, such as AIDS and others, in addition to refugee problems in various parts of the world.

1. Economics:

Poor economic situations are a major factor contributing to the problem of street children. Poverty, unemployment, elevated prices, declining national income, poor distribution of wealth within society, and the increasing gap between the rich and the poor are all factors with a direct impact on the rise of the phenomenon of street children. In Mongolia, following the collapse of the socialist system, attention to social care stopped, and the situation became very difficult as prices have increased and families have been unable to manage. This has forced children into the streets. According to official statistics, there are currently 4,100 street children in Mongolia, as compared to 400 prior to the collapse of the communist system in 1990. Dr. Abdullah Ben Abdel-Aziz's study about street children in the Arab Gulf states also explains the causal

relationship between economic factors and street children. When a child feels that the family is unable to afford education fees, the child leaves her/his education and joins the labour force. In addition, a financial crisis of the family provider or a decline in the family income can create factors conducive to driving more children onto the street. (UNICEF, 2009)

2. Familial Relations:

The family is the primary institution responsible for fulfilling the basic needs of children, including providing security, love, food, clothing, shelter, health care, education and entertainment. Moreover, the family raises children in their own culture and passes this culture to them through the socialization process. The family is considered the reference point for the construction of children's norms, for the shape of their personality and for the direction they take in life. The family situation and the type of relations within a family are, thus, important elements in shaping the features of the child's life. Often, the phenomenon of street children is reversely proportional to the prevalence of normal relations within the family. A study by UNICEF examined the reasons why children may leave the family and found that some have left the family because of ill-treatment by their fathers or stepfathers or after the death of a parent. Others decided to leave in order to avoid parental control or because of the dire economic situation of the family. Still others left simply because they wanted to enjoy more independence from their families. (UNICEF, 2009)

3. Low Educational Level of Parents:

In spite of attempts to eliminate illiteracy, there remain high levels of illiteracy among the families of street children. As a result of their own lack of education, parents may be unaware of the importance and value of education and may not provide appropriate educational care for their children. This situation encourages children to drop out of school and remain in the streets. Often the family does not resist this action. In some cases, the family is the main factor that drives children from school. (UNICEF, 2009).

4. Large Family Size:

The size of the family has a strong impact on the family's economic situation. Families with more children incur more costs and require more efforts in terms of provision of care. Often poor families are unable to assume complete responsibility for raising and supporting their children if there are many. Large families provide less time, care, and money for each single child. When the father is working all day to earn enough to cover

the basic needs of his family, children become deprived of their father's attention and affection, and even from his mere physical presence.²³ A study on street children in the Philippines indicated that most street children there come from large families with an average size of 6 to 10 members.(UNICEF,2009)

4. Dropping Out of School:

Education is a major incentive for social advancement that contributes to a better life. However, too often children drop out of school for various reasons and find refuge in the street. Research on Brazil indicates that 57% of street children in Brazil drop out of school before they resort to staying in the streets, 25% drop out of school while being out in the streets and 12% do so after finding final refuge in the street. These findings emphasize the strong correlation between dropping out of school and becoming street children.(UNICEF,2009)

5. Migration from Rural to Urban Areas:

Urban areas hold considerable appeal for many poor rural residents, as they believe they will achieve their hopes and dreams there. Eventually, however, they encounter a harsh reality that destroys the dream that originally pushed them to the city. Immigrants to the city from rural areas are more willing to take a wide range of jobs in order to provide for their family. Since they are in a new environment, they feel less obligation to follow the strict social controls and constraints that they obeyed in their places of origin.

For example, a study on street children in Zimbabwe showed that between the 1920s and 1950s, indigenous farmers between 10-14 years of age used to go to urban centres where offices and imperial institutions were situated. There they worked as servants and guards in the houses of white and black citizens. In urban towns, children worked for the black supervisors in companies, for example, as cooks or cleaners. Sometimes, they offered sexual services to workers who lived in poor neighbourhoods.(UNICEF, 2009)

6. Wars and Natural Disasters:

Wars and natural disasters often lead to massive spikes in the street children population. Wars contribute to the deterioration of the national economy, the destruction of homes, the killing and displacement of thousands and the dispersion of families. This, in turn, leads to an increased number of orphans and homeless children. The same applies to natural disasters, such as earthquakes, volcanic eruptions, floods and hurricanes. For example, the recent earthquake in Pakistan has resulted in the existence of thousands of

street children due to the death of their family members, full demolition of their homes or dispersion of their families. (UNICEF, 2009)

1.14: Violation of street children by police in detention:

Additionally, street children's rights are often violated when arrested or detained. The outcome report of the Civil Society Forum for North Africa and the Middle East on Promoting and Protecting the Rights of Street Children lists the most common violations as follows: arresting children forcefully and abusively, especially during group raids that officers carry out to 'clean' the streets. Street children must also often endure appalling detention conditions, locked up together with adult offenders. These children are frequently subjected to sexual abuse by police officers or the adults with whom they sometimes share a detention cell. Even when a child is detained separately from adults, mixing children together with no regard given to age differences implies a violation of their rights. Other areas of concern were that many countries in the Middle East and North Africa provide no special protection systems for detained girls. Also, deprivation of liberty is often the first resort sought and for periods that often last beyond what is stipulated by law. (UNICEF, 2010)

1.15: Homeless:

There is variation in the ways in which homelessness is defined and measured. People who are homeless include those "living rough" and in night shelters, who may be described as "roofless"; people in accommodation for the homeless or in women's shelters and people due to be released from institutions, who may be referred to as "houseless"; people in "insecure" housing such as those living under threat of eviction or under threat of violence; and people in "inadequate" accommodation, such as those living in temporary/non-standard structures, unfit housing or extreme overcrowding .In Australia, a definition of homelessness was adopted by the Australian Bureau of Statistics (2012a) defining a person as homeless if their current living arrangement:

1. is in a dwelling that is inadequate, or
2. has no tenure, or if their initial tenure is short and not extendable, or
3. does not allow them to have control of, and access to space for social relations.

4. This ABS definition includes people sleeping rough, staying temporarily with friends or relatives, using emergency accommodation and living in boarding houses.
5. Another definition, often cited in the literature, refers to.
6. primary homelessness (people without conventional accommodation, including improvised dwellings)
7. secondary homelessness (people who move frequently from one form of temporary shelter to another; includes people in supported accommodation)
8. tertiary homelessness (medium to long-term boarding house residents).

The definition developed for the purposes of the largest national program providing accommodation assistance in Australia, the Supported Accommodation Assistance Program (SAAP), is as follows:

A person is homeless if, and only if he/she has inadequate access to safe and secure housing. A person is taken to have inadequate access to safe and secure housing if the only housing to which a person has access is:

1. damaged or is likely to damage a person's health; or
2. threatens a person's safety
3. marginalises the person by failing to provide:
4. adequate personal amenities or
5. economic and social support that a home normally affords; or
6. places the person in circumstances which threaten or adversely affect the adequacy, safety, security and affordability of that housing.

There are specific considerations when defining homelessness in an Indigenous context. One of the considerations is that of spiritual homelessness when an Indigenous person is separated from their family and/or land . People reported that in order to avoid being disconnected from their family they may live in crowded conditions. Similarly, if no suitable housing was available on country, people may sleep either outside or in improvised dwellings rather than move to an adequate dwelling that is not on country. Indigenous people reported that their home is more associated with a place or area, rather than with a dwelling, and the perception of home is often tied to connection to country, and/or family and community.

While a consistent definition for homeless children does not exist in Australia, in the US, the McKinney–Vento Homeless Assistance Act defines homeless children as

“individuals who lack a fixed, regular, and adequate night-time residence” (State of Washington, 2014) and the Act gives examples of children who would fall under this definition:

1. Children and youth sharing housing due to loss of housing, economic hardship or a similar reason;
2. Children and youth living in motels, hotels, trailer parks, or camp grounds due to lack of alternative accommodations;
3. Children and youth living in emergency or transitional shelters;
4. Children and youth abandoned in hospitals;
5. Children and youth awaiting foster care placement;
6. Children and youth whose primary night-time residence is not ordinarily used as a regular sleeping accommodation (e.g., park benches, etc.);
7. Children and youth living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations;
8. Migratory children and youth living in any of the above situations

As outlined in section 9 of this review, children explain “home” in terms of their level of connectedness to family and community, and the absence of fear, instability and insecurity, rather than by their housing status . Their perceptions of home are mostly about places where they are free from the things they fear and from which they need protection, while having a home is about having a sense of permanency, stability and security. (Dr .Derek Bland & Linda shallcross, March 2015)

1.16: The cause and extent of children homeless:

While it is difficult to measure the number of homeless children in Australia precisely, some indicative data is available. In 2010-11, around 80,800 children from across Australia aged 0–14 accompanied a parent or guardian in seeking assistance from a specialist homelessness agency. In 81% of cases children accompanied an adult female, followed by 14% of cases where they accompanied a couple and 5% where they accompanied a male . This data does not include those children who were turned away due to supported accommodation not being available and, in addition, not all people who are homeless will seek homelessness assistance. In Western Australia, an estimated 19,500 people received support from a government-funded specialist homelessness agency during 2010-2011 and 41% of those, or 7,900, were children (Australian Institute

of Health and Welfare, 2011a). Almost half of these children (46.4%) were under 5 years of age and three-quarters (74.4%) were under 10 years (Australian Institute of Health and Welfare, 2011a). Aboriginal and Torres Strait Islander children were overrepresented (40.6%) and more than half of homeless Aboriginal and Torres Strait Islander families are living in outer regional, remote or very remote areas .The main reason women with children are homeless is due to domestic violence, sexual assault and family breakdown. Other commonly reported pathways are housing shortages, as well as overcrowding and poor housing conditions, particularly in Aboriginal and Torres Strait Islander communities . While in the media the issue of housing stress and housing affordability is sometimes referred to as a pathway into homelessness for families, it is not the major pathway into homelessness for children .(Dr.Derek Bland&Dr Linda shallcross,March 2015)

1.17: Risk facing street children:

Street children are exposed to a wide range of risks affecting their physical and psychological health and personal safety. These children are vulnerable to exposure to physical, verbal, psychological or sexual abuse, from passersby, from employers and supervisors, or from other street children. They face other risks due to frequent economic exploitation, including working long hours for low wages, working at night or working without health or accident insurance or belonging to a trade union. Additionally, their education is frequently in jeopardy and they may be either exposed to or directly involved in at-risk situations, such as drug use or distribution, or gang activity. Due to the harsh environment in which they are forced to survive, street children are often characterized by stubbornness, aggressiveness, apparent selfishness, unstable emotional behaviour, lack of concentration, constant rebellion against authority, mistrust of others, and, sometimes, abusive behaviour towards other children, among other characteristics. Researcher Laila Saleh suggests that all categories of street children share a group of common characteristics, such as rebellion against social patterns and systems, increased mobility, distrust of others, a lack of thinking about the future, early maturity, self-reliance, creation of subcultures. an acute awareness of personal security. Saleh emphasizes that most of these characteristics represent defense mechanisms that street children use to protect themselves from others. (Alena volpi, 2002)

1.18: Health problem of street children:

The street children phenomenon is an increasing problem in most cosmopolitan cities of the world .With the grow of the town so is increasing number of street children. It is therefore important to have collecting data on their health problem. To determine the health problem of street children by prospective or descriptive study. The most common symptoms was cough while frequent diagnosis was upper respiratory tract infection (URTI) and various skin disease. Respiratory and skin disease where the leading cause of morbidity. Drug abuse was serious among the street children but none of the school children abused any drug. Sexually transmitted infections were not prevented .Most of the shelter children were malnourished. The government should provide free health care for street children in public hospital. common respiratory tract infection include the common cold and influenza. Typical symptoms include nasal congestion, runny nose, scratchy throat ,caugh and irritability. the diagnosis is based on the symptoms. Good hygiene is the best way to prevent these infections and routine vaccination can prevent influenza. Various types health problem are given below:

A) Respiratory Tract infection

Viral respiratory tract infections are typically divided into:-

1)Upper respiratory tract infection:

Symptoms occurs mainly in the nose and throat. Viral upper respiratory tract infections may occur at any age and include the common cold and influenza.

2)Lower respiratory tract infection:

Symptoms occur in the windpipe airways and lungs. viral lower respiratory tract infections are more common among children and includes cough, bronchiolitis and pneumonia. Children sometimes have infections involving both the upper and lower respiratory tracts. common causes are:

1. Rhinovirus
2. Influenza viruses(During annual winter episode)
3. Para influenza virus
4. Respiratory syncytial virus(RSV)
5. Enteroviruses
6. Corona viruses
7. Certain strain of adeno viruses

B)Skin problem: Main skin problem are given below: Fig:1.20.1

No	Problem name	Significance
1	Ring worm	Ring worm has nothing to do with worms. the course of ring worm is a common fungus that infects the skin and causes a scaly and bumpy and patch to form on solves. the infected areas. Is is highly contagious and ringworm can be spread by contact or by sharing clothes that have also come in contact with the infected area. generally the treatment is to apply an anti-fungal cream to the area for a prolonged period until the infections resolves.
2	Fifth disease	One kind of skin problem parvo virus B19 is the virus that causes fifth virus.
3	Chicken pox	An infection with vericella,the virus that causes chicken pox .generally stars as a fever and the cold symptomps and the rash developed.
4	Impetigo	Impetigo can be confused with of the skin infection including cellulitis. the rash itself looks oozy, blistery and red initially and then may develop yellowist crust.
5	Warts	A virus causes warts. Can spread both from the person to other part of the body.
6	Heat rash	Blocked sweat gland and cause heat rash, which results in a red pimple eruption on the head and neck.
7	Contact dermatitis	Contact dermatitis appears as a collection of small red pimples or bumps or on a skin surface exposed to some sort of allergen.
8	Hand-foot mouth disease	Coxsackie virus is the cause of hand, foot and mouth disease.
9	Atopic dermatitis	Eczema also known as atopic dermatitis is common in children with allergies and asthma.
10	Hives	Hives are the result of an allergic reaction.(Alena volpi 2002)

1.19: Mental condition of street children:

Mental health workers are becoming more and more aware of the need to address all youth at risk in Dhaka. While different contexts place youths at different types of risks, of particular interest in this study is the phenomenon of street youth—a visible manifestation of a disrupted political and socio-economic society. Over time it has come to be recognized that it is not enough to simply place these children in institution, but that it would be more helpful to understand who these children are as individuals. Knowing how they function on an emotional and psychological level, their culture, their value, their dreams, has profound implications for interventions that aim at improving the quality of their lives. Moreover, understanding the needs of the youth in more depth provides them with the opportunity to be included in decision making processes pertinent of their future as contributing members of society. In view of the above, this study examines the personality development of street youths with the purpose that mental health workers combine developmental principles into their interventions. Thus it is argued that the knowledge that these youths already have of themselves and their lives and by carefully examining their developmental needs. More appropriate and responsible programs can be created. Many studies on street children have found that there is a high incidence of pathology in street children. Much of this has been attributed to the abusive, dysfunctional and neglected home environments that these youth come from and is generally exacerbated by the life style they lead on the streets. Therefore, this study examines the context from which street youth have emerged with particular emphasis on family systems, social contexts, beliefs and values and the general infrastructure of the community at a government level. (Alena volpi, 2002)

Chapter Two

LITERATURE REVIEW

2.1: The mental and physical health and Well-being of families in homeless Dublin:

In 1985, one of the largest national voluntary agencies in Ireland working with homeless people which provides a very wide range of services and housing to respond to the different needs of individuals and families at different stages of their homelessness. Since its inception, Focus Ireland has been concerned about the effects of homelessness on families and their young children. At a very early stage it became aware that if the social and personal factors that caused families to become homeless were not addressed, the families were unlikely to settle into new accommodation and would be likely to find themselves re-entering the cycle of homelessness again and again. Their children also tend to repeat that pattern. To help families resettle in the community, Focus Ireland established its first family transition unit in Stanhope Green in Dublin in 1991. Since then, it has extended its transitional housing to George's Hill in Dublin and to Waterford city. Family transitional housing is unique to Focus Ireland. Its objective is to provide participants with good-quality accommodation so that they can experience what it is like to live in a house on their own. During their time in the family transition unit they are provided with time, space and an educational and supportive programme which helps them to prepare to move to new accommodation and access local community support services. (Justin O'Brien, 1985)

2.2: The American University of Cairo-Invisible Lives:

In 2002 A UNICEF survey of the number of street children around the world estimates an average figure of 100 million, and the numbers are only bound to increase. Of the 100 million, 10 million are in Africa, 30 million in Asia, 40 million in Latin America, and the remaining 20 million in Europe, the United States, Australia and Canada (Ali 1708). As the crisis has grown over the years, it has attracted the attention of many researchers who have conducted studies in an attempt to understand such a phenomenon, its causes, symptoms. Such research, however, is extremely rare in certain developing countries such as Egypt. There are very few studies available on the issue of street children in Egypt, and those existing do not focus on the children themselves, but instead focus on the problem and the visual indicators of its existence on a surface level, viewing the

children as a “disease needing to be eliminated through, in most cases, more laws and restrictions” (Bibars 204). One of the few studies available that delves deeper into the issue is that of Iman Bibars, a former project officer with UNICEF and a founding member and Chair of The Association for the Development and Enhancement of Low-Income Women in Egypt. Because of the lack of research in the field, Bibars draws as much information from certain studies, such as Shahida el Baz’s *Children in Difficult Circumstances: Institutions and Inmates*, and more importantly relies on her primary research, namely direct interaction and interviews with a number of children living on the street or in juvenile institution. While the number of street children in Egypt has been rapidly increasing over the past decades, it was not until recently that it started to attract attention and was recognized as a problem of great magnitude requiring action. (Selim Hassan & Labib Habani 2010)

2.3: Street children of Pakistan:

In 2012, An estimated 1.2 to 1.5 million children are on the streets of Pakistan's major cities and urban centers, constituting the country's largest and most ostracized social group. These include 'runaway' children who live or work on the street, as well as the minority that return to their families at the end of the day with their meager earnings. Domestic violence, unemployment, natural disasters, and poverty are considered the major factors behind the increase in the number of street children. Other factors include unprecedented global industrialization, unplanned and rapid urbanization, family disintegration and lack of education. The problem has been further exacerbated in the wake of devastating floods that ravaged parts of Sindh, KPK and Balochistan. A study carried out by SPARC on street children revealed that 56.5% of the children interviewed in Multan, 82.2% in Karachi, 80.5% in Hyderabad and 83.3% in Sukkur were forced to move on to the streets after the 2010 and 2011 floods. (Naved H.Khan 2001)

2.4: A study on street children in Zimbabwe:

In 1996 Grier papers looks, at the street children in Zimbabwe. This paper notes that native lads aged 10 to 14 were to towns, mines and other centres. Colonial officials were concerned with the way children survived on the streets or made a living on the streets (Grier, 1996). Grier notes that many lads found wage employment in urban areas as domestic servants and gardeners in white and black homes. In mining towns, the boys were hired directly by mining companies to cook and clean for “senior” black workers in

the company's single sex compounds. Boys were also seen performing domestic services, including in some cases, sexual services, for "single" black mine workers who lived in the huts they built for themselves in native locations adjacent to the mines (Grier, op. cit.). However, the problem of children living and/or working on the streets of our urban areas appears to be a recent phenomenon in Zimbabwe. Prior to Independence (1980) it was almost impossible for children to work in the streets as vendors, car-washers, beggars, or parking boys as Municipal by-laws that restrict this, were brutally enforced. With Independence, such enforcement of the restrictions became slack and unpredictable. (Agnelli, op. cit, 1983)

2.5: Street children and gangs in African cities:

In 1996, NGO initiatives are only remedial, and provide services such as food, clothing and medical care, which is only a short-term solution. Some initiatives to rehabilitate street children have "become fashionable and a tool for increasing institutional publicity, which make it easy to solicit funds" (Dzikus & Ochola 1996). Community participation and involvement have a major role to play in a holistic approach in rehabilitating street children. Street work is the first entry point to rehabilitation, where street workers develop contact and rapport with the children. The next step is to promote community-based rescue centres, where street children are provided with food, clothing, informal education, medical treatment and counselling. These centres function as filters for further referral of children to specialized programmes of NGOs. The programmes could range from education sponsorship, vocational training to programmes for the disabled and HIV-affected. The education sponsorship programme of one NGO in Nairobi has enabled more than 10 former street children to acquire university degrees. The problem of street children is a comparatively new phenomenon in Africa. Sub-Saharan Africa is currently the least urbanized region of the developing world, with less than 30 per cent of the population living in cities. It is catching up fast, however, and is currently experiencing the highest urban growth rates in the world. The problem of street children is well documented in Latin America and South-East Asia. However, in Africa it is a comparatively new phenomenon. Sub-Saharan Africa is currently the least urbanized region of the developing world, with about 30 per cent of the population in cities. Catching up fast, Africa is currently experiencing the highest urban growth rates. Local authorities in Africa are increasingly confronted with a rising number of street children and all too often do not quite know how to deal with this growing problem. (Habitat for Humanity 2000)

2.6: International conference on street children and street children's health in East Africa:

UNICEF (1985) correctly observes that Yesterday , street children were no more than a footnote. Today, street children are a major issue. Tomorrow, if present trends continue, they could be a blight on urban civilization. For Africa, tomorrow is already here. Street children are not only blight on urban civilization; they pose a serious obstacle to overall socio-economic development in Africa. Poverty is a major cause of street children. Africa is today a continent characterized by extreme poverty. It is poverty that is resulting in children being forced to work on the streets to support themselves and their families. It is poverty that is also causing many families to break up with parents being unable to support their children. It is rural poverty that is making rural populations including children to move to urban areas with the hope of a better future. Poverty causes malnutrition and poor health and reduces a family's ability to work thus creating conditions for children to move to the streets. (Peter Anthony Kopoka, 2010)

Reduced income increases the pressure to put children to work to support the family. This means that children will have to terminate their educations. When these children grown up because they are uneducated, they are unable to find formal employment. Unemployed and without money, often petty thieves, alcoholics or drug user, they are unable to give their own children an education. Children without positive father figures to model themselves after later find it difficult to relate to their own offspring. Fathers devalued by enforced idleness, alcoholism and socially unacceptable activities cannot nature confident children. (Peter Anthony Kopoka 2010)

2.7: Street children Promising practice in south Asia:

In 2000, On April 9-14 the International Street Children Conference held in Washington D.C to provide documentation on their particularly promising interventions. Preference was given to development-oriented initiatives, aimed at increasing children's opportunities to be integrated in school, family, and labor market. When possible, the existence of positive evaluations, and evidence of replicability, were used as criteria of choice. Most interventions were implemented by NGOs, but a few were cooperative ventures by NGOs and local governments in which street children activities were integrated into municipal development programs. The report opens with a brief comment on World Bank involvement in street children issues, the conceptual challenges in

defining and measuring the street children phenomenon, its underlying and immediate causes, and the problems and resources children encounter once in the street. Children in need of protection, though not a traditional concern of the World Bank, have recently been the focus of several innovative Bank activities. ² The Bank has also supported some research and dissemination of ideas on the subject, as attested by the launch of the Child Labor Program in 1998, the Street Children Initiative initiated in the same year, and the International Street Children Conference held in Washington, D.C., on April 9–14, 2000, which brought together NGOs and experts from different regions of the world to share their perspectives and intervention models, and to discuss possible World Bank contributions in this area. (Elena Volpi 2002)

2.8: Vulnerability to sexually transmitted disease on street children in ACCARA:

In 1987 Sabatier has explained that when the AIDS virus is introduced into a society it follows the path of least resistance, among people who are the poorest, most disadvantaged, least powerful, or most stigmatized. It appears that the controversy lies only in the realm of science.

In Africa, the condition may be the result of multiple infections under conditions of poor nutrition due to poverty. It may not be a mere coincidence that AIDS is exacting its toll in the era of structural adjustments in Africa. It is notable that more serious strains of diseases thought to have been eradicated decades ago are now appearing — buruli ulcer in place of yaws for example — as are fatal diseases hitherto unknown and apparently incurable: ebol fever is the leading example. (John K. Anarfi, 1997)

2.9: The study of street children in India:

In 2007 The Ministry of Health and Family Welfare (MOHFW) and MWCD released a Policy.

Framework for Children and AIDS in India . The nature of HIV/AIDS is that it leads to violations of basic rights of children and needs to be addressed as a concerted effort by all concerned Ministries responsible for the well-being of children. Coordination and collaboration mechanisms between Ministries to operationalise the Policy are yet to be put in place. The South Asian Association for Regional Cooperation Framework for Protection, Care and Support of Children Affected by HIV/AIDS was also approved in

2006 and guidelines and core indicators have been identified for measuring progress. (Mgr.Beata Pietkiewich- pareek, 2012)

2.10: The study of street children in South Asia:

In (1992) Lusk developed four categories of children found in the street. Each group has its own psychological characteristics. First, there are poor working children returning to their families at night. They are likely to attend school and not be delinquent. Second, there are independent street workers. Their family ties are beginning to break down, their school attendance is decreasing, and their delinquency is increasing. Third, there are children of street families who live and work with their families in the street. Their conditions are related to poverty. In India, they are referred to as pavement dwellers (Patel, 1983), whereas in the United States they are the children of homeless families. Finally, there are the children who have broken off contact with their families. They are residing in the streets full time and are the "real" street children. Lusk (1992) considered this group to be about 15% of his sample of children in the streets of Rio de Janeiro. Patel (1990), in her study of street children in Bombay, had a similar categorization of children in the streets. (Lewis Aptekar 1994)

Chapter Three

AIM AND OBJECTIVE

3.Aims and objective of this study:

3.1:General objective

The objective of this study is to define and quantify the street children phenomenon in view of finding appropriate solutions to the related problems.

3.2:Specific objectives:

1. To define the socio-economic and cultural profile of a child in street situation.
2. To identify what type of support, guidance or life skills they need in order to avoid the pitfalls of delinquency, substance abuse and HIV /AIDS and to succeed in life.
3. To identify the community structures and government institutions that can contribute in their assistance and follow-up, and determine in what way they can be of help.
4. Finally to examine the mental health status of homeless street children.

Chapter Four

SIGNIFICANCE

4. Significance of this study of street children:

From the presentation above it is clear that to better address the problem concerning “children in street situation” and/or marginalized children; it is important to first understand their profile and the different categories into which they will be classified. Though in general literature the terminology of “street children” is used to describe these children living without their fundamental Rights as stipulated in the Convention of the Rights of the Child, they are not necessarily comparable to what they will represent in other countries of the world. The need for conducting a specialized study on the issue of “children in street situation” .It arose from a number of reasons, primarily:

1. The lack of specialized studies on the issue of street children and the lack of accurate statistics on the size of the problem;
2. The scarcity or total absence of data on the characteristics of children in streets situation, including, how they spend their time, why they remain in the streets, the reasons for neglect and exposure and other such information;

Chapter Five

METHODOLOGY

5: Materials and Method:

5.1: Type of study:

It was a prospective study.

5.2: Place of study:

The study was conducted in the Dhaka city. The Main place is The Kamalapur railway station, Shagbagh, Gulshan-1, Rampura bridge, Aftabnagar etc.

5.3: Study population:

Two hundred fifty Street children from different are of Dhaka city.

5.3.1: Inclusion criteria of the cases:

1. Randomly selected street children.
2. Both sexes
3. All ages ranges
4. All religion
5. Children willingly share his information

5.3.2: Exclusion criteria of the cases:

1. Unwillingly to participate
2. Unable to fulfill the protocol requirements.

5.4: Study period:

To complete the study in time a work schedule is prepared depending on different task of the study. From March 27 to September 30, 2015. Six months was used to collect data. Subsequent months spent on report writing and submission of report.

5.5: Sample size:

The objective of the study is to find out the health condition and mental behavior of street children. The data collected from 250 street children from different area of Dhaka city.

5.6: Research approach:

After getting the approval of the research proposal from the honorable faculty members for data collection. Research work was approached by collecting information from different street children and who were agreed to give the information. For collecting data, a questionnaire was prepared according to required questions.

The completed questionnaire and the research protocol were recommended by the supervisor of Department of Pharmacy, East-West University. Then the questionnaire as well as the research protocol was send to the Head of the department of Pharmacy and was getting permission for data collection.

5.7: Data collection method:

After explaining the purpose of the study to the street children randomly they were interviewed by asking question in Bengali and used thoroughly pre-tested questionnaires. The questionnaire contained general information and socio-economic status and personal question of street children.

5.8: Data analysis:

The major strategy of grounded theory employed in this research was constant comparative method. Constant comparative analysis is the process of coding data to develop concepts which are then refined by reviewing and comparing other data. On the basis of these comparisons concepts may be confirmed, discarded, refined or elaborated, and their relationships to one another are explored. After collecting all data, data were analyzed with Microsoft office excels (Pie Charts & Bar Diagrams). Then we analyze the all data by different strategies based on our target of study. The results were presented in tabulated from as well as figures and drawings.

Chapter Six

RESULTS

6: Results:

Figure:6.1:Graphical representation of school drop out point for those who started and stopped educational at some point of street children:

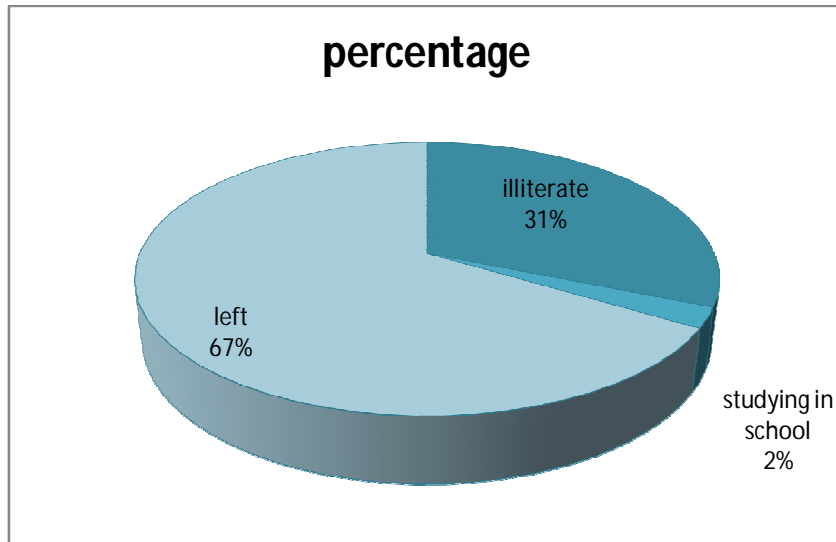


Figure:6.1.:From 250 children about 31.2% children are illiterate,2.4% are studying in school and 66.4% left school. As high of school dropouts occurred at primary level while and occurred at secondary school level and prevocational school level respectively. The rest were non---formal, pre---primary, technical or vocational training drop outs. of school drop outs interviewed manifested their desire to continue their education, while did not wish to resume school.

Table-6.1.1 : Frequency distribution of Age:

Variables	Frequency	Percentage
6-9	125	17%
10-13	75	50%
14-17	50	33%

Table:6.1.1:Among the Two hundred fifty population we get 50% about 6-9 ages,33% from 10-13 ages and 17% from 14-17 age

Figure-6.2: Percentage(%) of male and female :

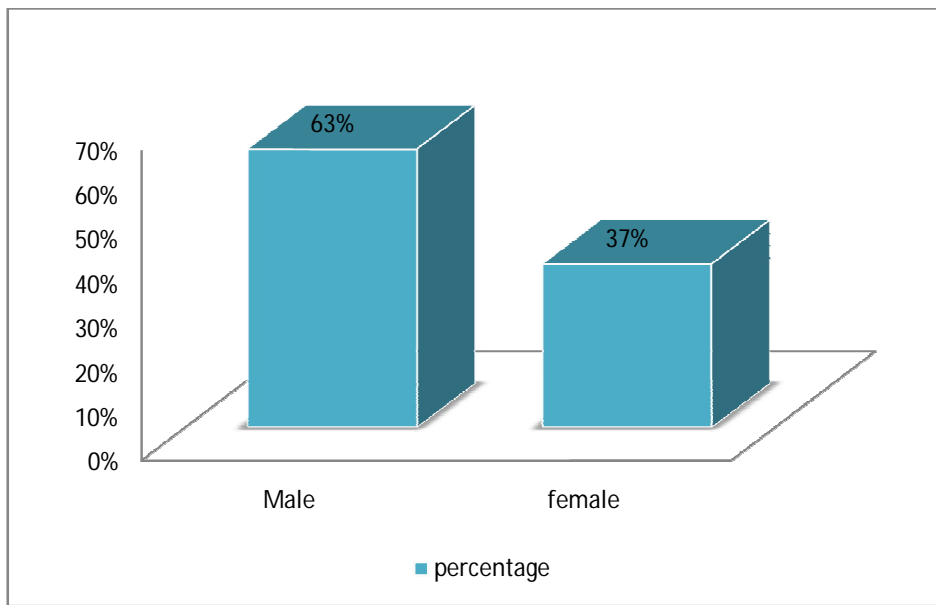


Figure 6.2:From Two hundred fifty population,63% of them are male and 37 % of them are female.

Table-6.1.2 :Daily work hours of street children:

Variables	Frequency	Percentage
8 hr	160	64%
10 hr	80	32%
12 hr	10	4%

Table 6.1.2:From 250 children,64% population works about 8 hour,32% of population works about 10 hour and 4% of population works about 12 hour.

Figure-6.3 : The type of economic activities in which the children were involve in:

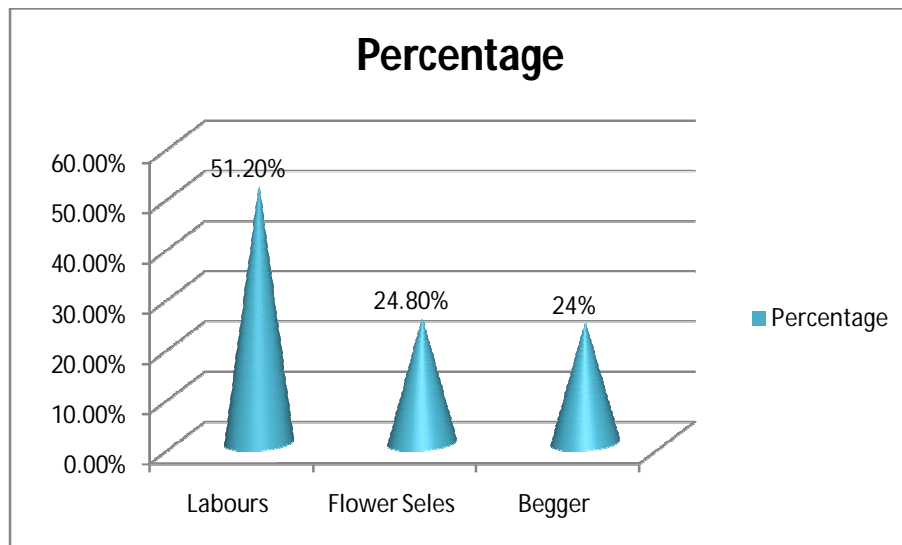


Figure:6.3:From 250 children,51.2% are child's are labour,24.8% child's are flower seller and 24% of child's are begger.

Table-6.1.3 :Percentage (%) of Gross income per months :

Variables	Frequency	Percentage
3000-5000	178	71.2%
5000-7000	60	24%
7000+	12	4.8%

Table:6.1.3:From 250 childrens,71.2% populations monthly income was 3000-5000 Tk,24% population monthly income was 5000-7000 Tk and 4.8% population monthly income was more than 7000 Tk. Regarding the use the children made of the money they earned, that they were giving all or part of the money to their parents. some using the money to buy food, some were using the money for purchasing illicit substances.

Figure 6.4 :The age at which the children started to work:

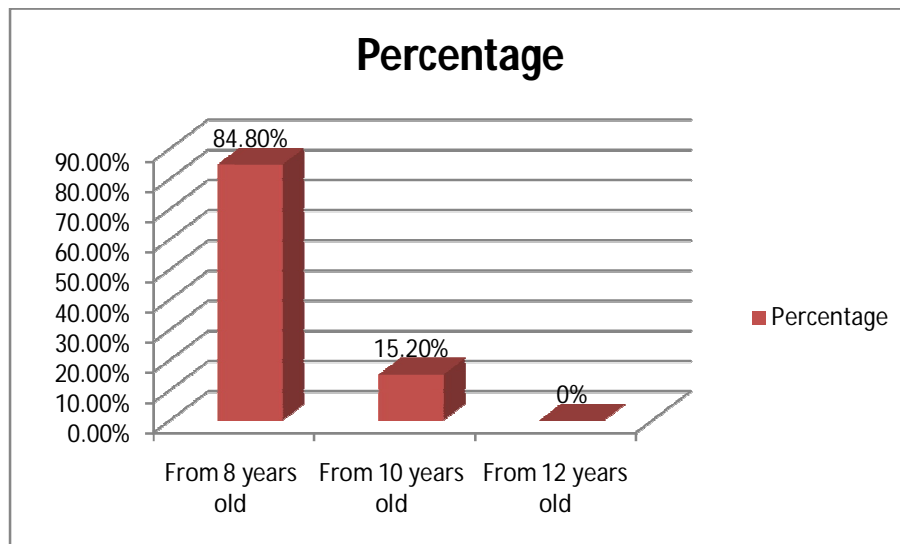


Figure:6.4:Among 250 childs,84.8% childs was start working from 8 years old,15.2% childs was start working from 10 years old and 0% of child was start working from 12 years old.

Table-6.1.4: Sleeping Place of street children:

Variables	Frequency	Percentage
Railway Plattorm	110	44%
Breeze	50	20%
Road	90	36%

Table:6.1.4:From 250 chids, About 44% of chids sleep at Railway platform, 20% of chids sleep at Breeze and 36% of children sleep at Road.

Figure 6.5 :Percentage (%) of Smoker of street children:

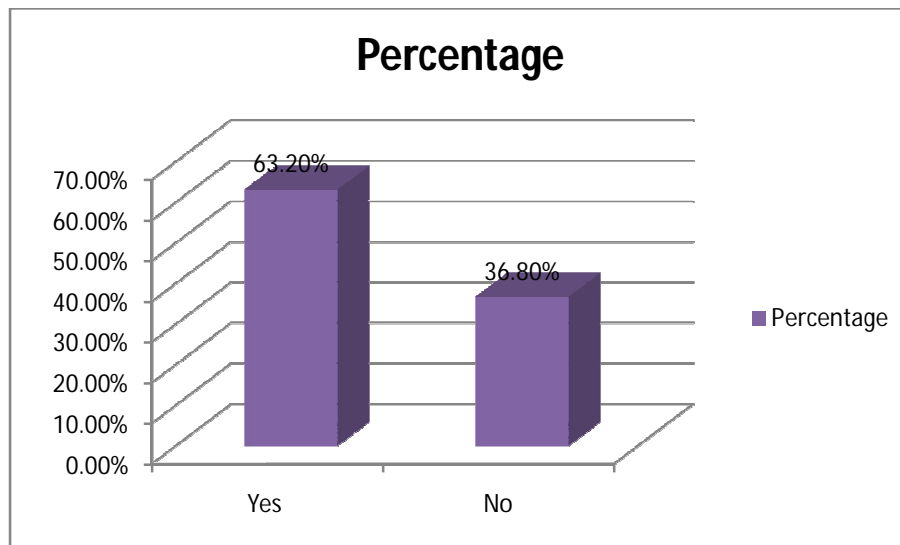


Figure:6.5:About 63.2% children are being smoker and 36.8% children are non smoker from two hundred fifty children.

Table-6.1.5:Illegal street drug consumed by various children by percentage:

Variables	Frequency	Percentage
Yes	72	28.8%
No	178	71.2%

Table :6.1.5:From Two hundred fifty children ,about 28.8% children where was taking illegal street drug and 71.2% where was not taking illegal street drug.

Figure:6.6- Parents status of street children:

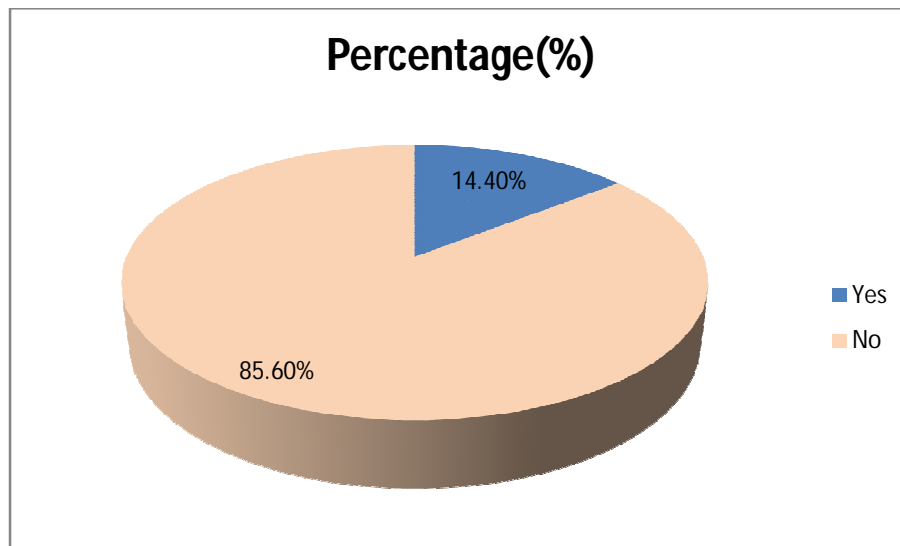


Figure:6.6:From 250 children, about 85.6% Where children have both of parents and 14.4% where have no parents.

Table:6.1.6- Sexual harassment(Female) of street children:

Variable	Frequency	Percentage(%)
Yes	0	0%
No	75	100%

Table 6.1.6:From 250 children , where children was female .In this study about 100 % of female children not ever faced any sexual harassment .

Figure 6.7- Diagonosis by Doctor:

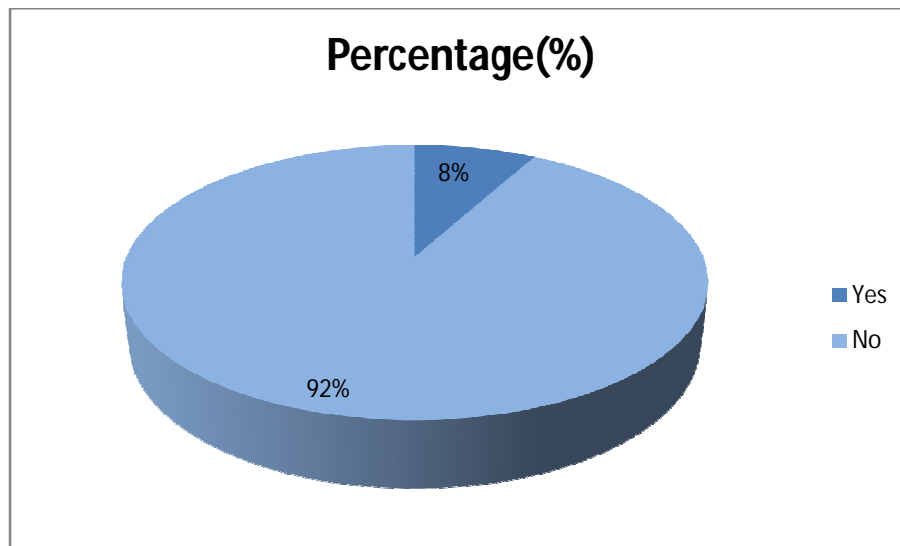


Figure:6.7:From 250 children, about 92 % of child does not ever go to doctor and about 8% of children was going to doctor for any health problem.

Table:6.1.7- Help of Organization of street children:

Variable	Frequency	Percentage(%)
Yes	16	6.4%
No	234	93.6%

Table:6.1.7:From 250 children about 6.4% of children was getting help from organization and 96.3% of children was not getting any from organization(NGO's).

6.8:Figure:- Ever Spent in police station for six night:

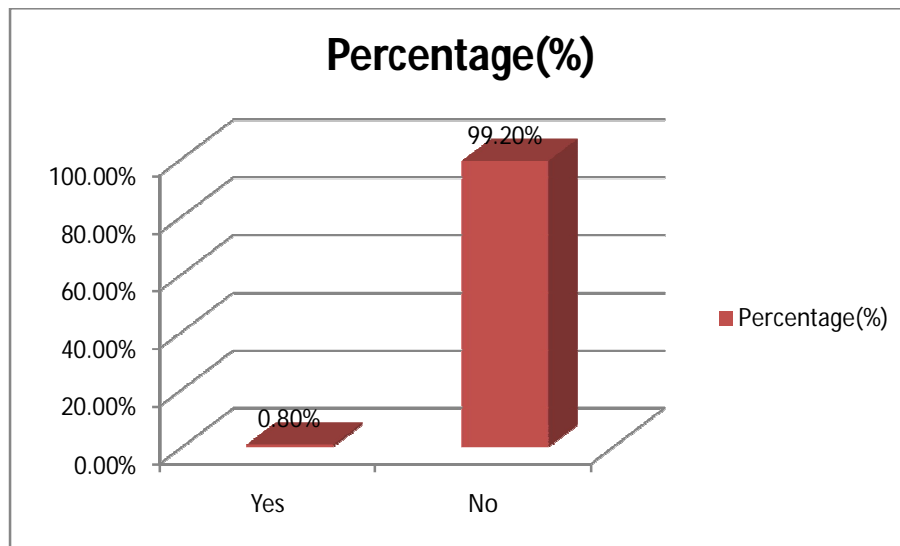


Figure:6.8:From 250 children about 99.2% of children does not ever stay in police station for one night and 0.8% of children stay in police station for one night.

Table:6.1.8- Ever admitted in Hospital for one night:

Variable	Frequency	Percentage(%)
Yes	6	2.4%
No	244	97.6%

Table 6.1.8:From 250 children about 97.6% of children does not ever stay in hospital for 1 night and about 2.4% of children stay in hospital for 1 night.

Figure:6.9-Ever Spent in hospital for six night:

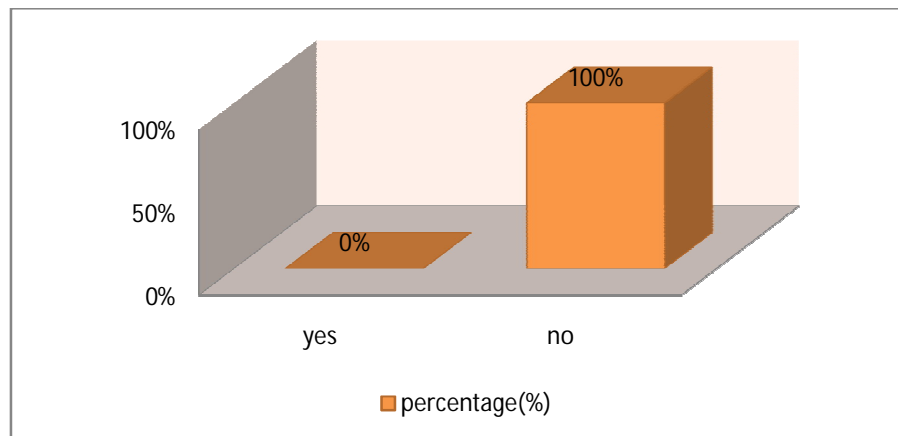


Figure 6.9:From 250 children about 0% of children does not ever stay in hospital for six night.

Table:6.1.9- Respiratory disease of street children:

Variable	Frequency	Percentage(%)
Yes	96	38.4%
No	154	61.6%

Table 6.1.9:From 250 children about 38.4% of children was suffering from Respiratory tract infection and About 61.6 % of children was not suffering from Respiratory tract infection.

6.10 figure-Gastrointestinal problem of street children:

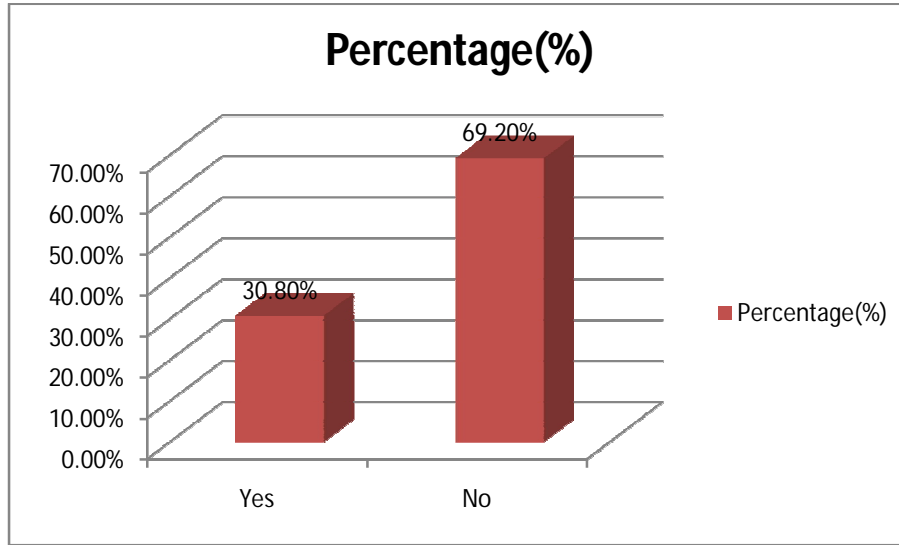


Figure:6.10:From 250 children about 30.8% of children was suffering from Digestive problem and 69.2% of children was not suffering by Digestive problem.

Table:6.1.10- Skin problem of street children:

Variable	Frequency	Percentage(%)
Yes	102	40.8%
No	148	59.2%

Table 6.1.10:From 250 children about 40.8% of children was suffering from skin disease and about 59.2% of children was not suffering from skin disease.

Figure 6.11:availability of Enough food:

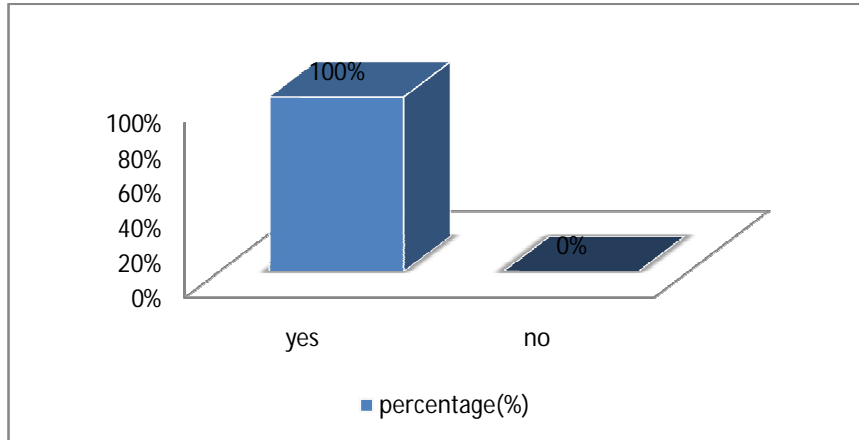


Figure 6.11:From 250 children, about 100% of children does not get enough food.

Table :6.1.11- availability of Enough cloth:

Variable	Frequency	Percentage(%)
Yes	0	0%
No	250	100%

Table 6.1.11:From 250 children ,almost 100% does not get enough cloth.

Figure 6.12-Safe place to sleep:

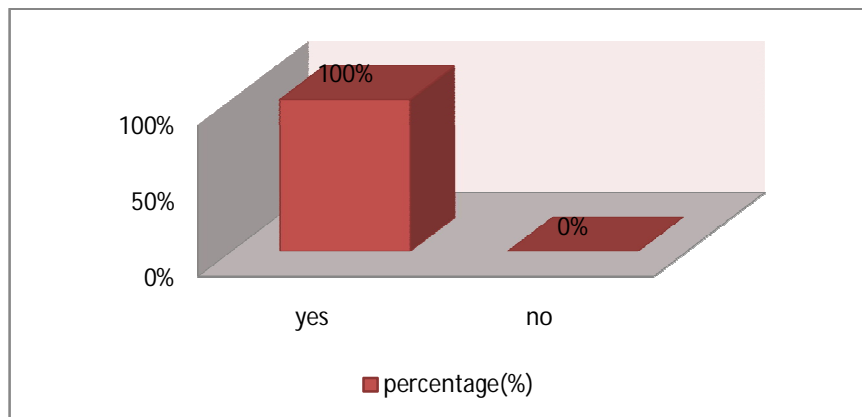


Figure:6.12:From 250 children, Almost 100% of children does not have safe place to sleep.

Chapter Seven

DICUSSION

7: Discussion of street children:

In this study was aimed to find out the health condition and mental behavior of street children in Bangladesh. It has been found that Bangladesh has the highest number of street children in the world, however the number differs on different report and most of the street children living and working in Bangladesh street. In this study our sample size was Two hundred fifty and surveyed found only in the Dhaka city of Bangladesh . The problems of street children are more significant in the developing than developed world and it was estimated that more than 100 million children live and work on the streets in the Developing countries .If we make a comparison with a Indian journal where found, Moreover, India alone is home to the world's largest population of children, estimated to be 18 million. Some estimates put the number of street children living in India's six most populous cities at 500,000 more than 100,000 may be found in Delhi alone. War, poverty, urbanization, rapid economic growth, the breakdown of families, and domestic violence are the most immediate causes of this phenomenon's growing proportion. (Narayan Sharma, 2013)

Besides this ,low income of the parents, presence of step parents .guardian other than the parents and intra family physical abuse were associated with the runaway group of street children in the Bangladesh and the mainly live on the street. On our current study ,we randomly selected 250 people from Kamalapur railway station ,Rampura bridge and from Gulshan-1.Two hundred fifty children only gets from Dhaka city rather than world wide. this is one of the limitation of this study.

In our current study about 63 % are male and about 37% are female where 50% are 6-9 ages,33% are 10-13 ages and 17% are 14-17 ages. In Western Australia, an estimated 19,500 people received support from a government-funded specialist homelessness agency during 2010-2011 and 41% of those, were children . Almost half of these children (46.4%) were under 5 years of age and three-quarters (74.4%) were under 10 years. (Dr.Derek Bland &linda shallcross, 2015)

Among these 250 children average percentage of work hour is 64% of children works about 8 hour ,32 % of children work about 10 hour and 4% of children work about 12 hour. If we create a comparison with another study we see that, hardship is a major factor in putting children at high risk, not all materially deprived children become disconnected

from the family. Evidence suggests that the quality of family relationships plays a fundamental role. In Brazil, for example, children of the street reported higher incidents of corporal punishment (63 percent) compared with children working in the street but still in contact with family (23 percent). In Ethiopia, children of the street reported significantly higher levels of abuse at home than family-based street children.¹⁸ As already mentioned, lack of communication in the family and other emotional problems are crucial factors of child disconnection in industrialized countries. In addition, peer pressure can be an important trigger. Many young children have been encouraged or even forced into the street by older siblings and friends who have already set foot on that path. (Alena volpi, 2002)

On this study we also focused on street children working pattern. Among 250 children 51.2 % children are labour, 24.8% of children are flower seller and 24% child are beggar. Vostanis and colleagues initially undertook a sample study of 19 homeless families with 50 children aged 2-15 years to identify their working pattern. A semi-structured interview with the parent. The findings indicate high levels of mental stress for the children, and high clinical CBCL scores for some of the children in the majority of the families. A more extensive study was undertaken by Vostanis in 1997 of 113 homeless families with 249 children aged 2-16 years and 29 comparison families with 83 children. A semi-structured interview, the GHQ, the CBCL, the Interview Schedule for Social Intervention (ISSI), the communication domain of the Vineland Adaptive Behaviour Scales, and height and weight percentiles were used. The findings were that the majority of homeless families constituted lone-parent families who had become homeless primarily because of domestic violence. The homeless mothers reported high rates of previous abuse, current psychiatric morbidity, and poor social support networks compared with housed controls. The homeless children were more likely to have histories of abuse, being in care, delayed communication, and higher CBCL scores than domiciled children. (Frank Houghton, 1997)

The street children are mainly home less and they always growing without parents, without careness and without any facility and they don't have safe sleeping place .in this study about 44%of children sleep at Railway station,20% of children sleep at over bridge and 36% of child sleep at road. In above study almost 100% children don't get enough food, cloth and safe living place. In another study some of the home less street children participated. The significant findings were children are without family. The majority had

been homeless for an average of 8.5 months prior to entering the family transition units and had been intermittently homeless for the preceding two years. The reasons for their presenting as homeless related to relationship difficulties with their family of origin, drug addiction and domestic violence. The families were educationally disadvantaged. While resident in the family transition unit the families increased their usage of the generic and specialist services. (Frank Houghton, 1997)

In this above study the illiterate level is 31.2%, studying in school is 2.4 % and left is 66.4%. If we compared with another study the children were found to have relatively low aspirations in the field of education. Only 40.6% of males and 50.60% of females were interested in pursuing their education compared to 42.3% of males and 32.40% of females who were interested in getting into the workforce. Other options for the future included marriage, particularly for girls. The general low level of future aspiration means that there is little motivation to make necessary efforts towards personal improvement. As child psychologists will confirm, a child is better focused on his or her personal development when he/she has a clear idea of what he/she wants to become in the future. There is the need for a dream and the desire to accomplish the dream for them to be better focused. (Dr Peter Fonkwo ndeboc, 2009)

Various reasons have observed to leaving the home by street children but poverty is the main causes about 91.2% of children leaving home for poverty. Some of the reasons reported by the boys, who forced them to leave their homes, are physical abuse, broken families, attraction to city life, peer influence, habit formation. Many of the boys reported the physical abuse as an important reason for drifting away from their family. Among boys whose parents are living together, it was found that the mother treated the boy well, compared to the father and the incidence of physical abuse of the children was more in families where the father was present while there was greater incidence of the neglect of children among female headed families. Boys reported more abuse in family's headed by responsible persons other than the parents. The respondents who are interested in group living and do not wish to return to their family, have given the following reasons to leave their homes, out of which physical abuse, broken family and peer group pressure. most of the respondents in both cities didn't know the reasons for leaving home (71.33 percent in Tehran and 37.33 percent in Hyderabad). It was further observed that below one fifth (17.66 percent) of the respondents were orphan. Missing child was

the weak reasons for leaving home in Tehran while in Hyderabad 26 present of respondents belong to the missing child group. (Ghasem Gho Javand,T.Ramesh, 2013)

UNICEF reported, children living on the streets are mostly vulnerable to abuse and exploitation even if they live with their families because for poverty and lack of services parents are not in a position to provide appropriate care to their child . These children on the street grow up without suitable accommodation, protection, education, health care, food, safe drinking water, security, supervision, recreation and guidance . Often these children work in hazardous and low-waged jobs to support their families for survival as well as doing work without education trapped them in a cycle of low-skilled, low-income employment which pushes them into the cycle of poverty . According to UNICEF these children frequently find themselves the victims of sexual abuse and risk of HIV infection, physical torture and trafficking . Criminal networks also engage street children in commercial sex work, smuggling, stealing and distribution of drugs and weapons which leaves no other options to many children . This hardship and abuse of life made the children reluctant and distrustful which later become difficult and they may do various vulnerable activities. About 0.8% of children spent 1 night in police station in 100% children.(UNICEF.2011)

In this study we mainly focused on health status and mental behavior of street children .So diagnosis is the main part of this study .Most of the street children suffered various types of health problem like respiratory tract infection, Gastrointestinal tract infection ,skin problem ,teeth problem .comparison with other study about 40.8% children was suffering in every 100%. (Narayan Sharma, 2013)

In Ghana, AIDS cases have been identified in all age groups ,but the age groups most affected are between under 18 years: about 86 per cent of all AIDS cases officially reported. Within these age groups the most affected groups are the below 15 year-olds who alone constitute over 72 per cent of the cumulative figures reported since1986. Most of these individuals had the sexual contact that infected them while they were teenagers.HIV transmission in Ghana follows a similar pattern to that in other African countries. Heterosexual contact accounts for 70 to 80 per cent of infections; infection from mother to child and contact with contaminated blood and blood products accounts for the remaining 20to 30 per cent (NACP 1996).Studies have observed that Ghanaians behave in some ways that put them at risk of getting HIV. An AIDS knowledge, attitude and practice study of young people in Ghana in1991 showed that 72 per cent were

sexually active . Most of those who were sexually active were under 18 years when they first had sexual intercourse. The same study revealed a mean number of sexual partners of five (7 for males and 3 for females) among those who had ever had sex. Street children are mainly affected by HIV virus .But in our current study we have not found any HIV patients . (John K.Anarfi, 1997)

The rapid assessment of street children in Lusaka conducted by Project Concern International Zambia (2002) found a good number of these children to be sexually active, with as much as 3.6% of boys and 9.5% of girls declaring having had a sexually transmitted infection. 14 out of 222 street girls interviewed reported having at least once been pregnant. Meanwhile, in the Zimbabwe study by UNICEF (2002), 26.2% of the street children reported they have had sex within the previous six months and 14.3% of them reported having had an STI. Over 38.5% of these children could identify at least 3 symptoms of STI's. 50% of them could identify at least 3 ways one can become HIV infected. 56.6% of the children interviewed declared having been victim of child abuse. A similar survey on street children in Rwanda by Save the Children (2005) also revealed that more than half of the boys and more than three quarters of the girls, including 35% of those under 10, admitted they were sexually active, 63% of the boys said they had forced the girl to have sex with them; 93% of the girls reported having been raped.In our current study we have not found any sexual harassment with any female child. This is the one of the positive issue for female street children. (Dr.peter Fonkwo Ndeboc, 2009)

Street children live and work in conditions that are not conducive for healthy development. They are exposed to the street subculture such as smoking, drug, alcohol and substance abuse, gambling, engaging in sexual activities or selling sex for survival . In sum, studies on the problems of street children are voluminous all over the world. Actually there are a large number of studies conducted on street children in order to understand the magnitude of the problem, causes and consequences of the problem; but there are a few studies, which also talked about these children, family background and compared those factors in different countries. In this study we found about 63.2% of child are being smoker where 28.8% of childs taking illegal street drug.(Ghasem Gho Javand,T.Ramesh, 2013)

Organization Plays a different approaches providing basic needs ,child rights and improving their career .on the other hand ,preventing substances uses, and their effect among street children implemented as preventive approach including health based

intervention as mentioned in conceptual frame work. Most of the street children are vulnerable. they need help and some time some of NGO's come forward to help the street children .In this current study about 6.45 of childs get help from NGO's. The family members and NGOs were main guardians for the respondents (57%)that indicate the important original roll of them for street children; and 12.3% of sample group reported that they don't have any body for support of them. (Elena volp, 2002)

From that above discussion we said that ,there are relatively few studies conducted in relation to substances abuse among street children in Bangladesh. Although, they comprise a significant proportion of the total population .Most of the study focused causes, Hazards effect ,lifestyle and health condition of street children.(Elena volpi, 2002)

Chapter Eight

CONCLUSION

Conclusion:

The problem of street children or children in street situation is mainly one of “children on the streets” and/or “street working children” since the greater majority of the children interviewed had a home to retire to at the end of the day. They are driven on to the streets by multiple factors, key among which are the poor parental presence in the lives of the children, and the poor socio-economic situation of their families. This is further compounded by a situation where the family unit of father, mother and children is being displaced by mono-parental child up-bringing. In some cases, the parents were actually absentee landlords or simply dead. The absentee landlords were mostly economic migrants who had left the island for greener pastures or those who have had to leave due to incompatibility with their partners. These children who are so left in the precarious conditions are exposed to a series of hazards, which go from psycho-physical abuse, to outright aggressions in the streets, drug use, exploitation for economic reasons etc. The vulnerability of the children results from their relatively little experience and ignorance in relation to the danger that they are exposed to in “street situations. Today a lot of people and the government have expressed the concern about how to take those street children away from the street in every country. (Dr.Peter Fonkwo Ndeboc, 2009)

Chapter Nine

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