

## SUPPORTING STREET AND WORKING CHILDREN IN INDIA



### Context

India is home to nearly a fifth of the world's people. In 2017 the United Nations Department of Economic and Social Affairs reported that the population is now over 1.3 billion and that by 2024 it is likely to be the most populous country in the world. It has a fast-developing

economy with IT, business, culture and tourism all booming. Alongside extreme wealth there is also extreme [poverty](#). India has more children forced to work in hazardous conditions and children living and working on the streets than any other country in the world.

## The problem

Just over a quarter of India's 440 million children are working on the streets. The common understanding of the term 'street children' is that a child is without parental care. Many children who live and work on the streets of India have run away from dysfunctional families where there are problems of domestic violence, substance-abuse and poverty. However, many more are still with their families. They may work on the streets but they return to their family at night or every few days. These children are often referred to as '[street-connected](#)'.

Many of these children are from migrant families who have left rural areas because of poverty. The agriculture sector in India is suffering through climate change and many farmers are in debt after taking loans to cover the high cost of seeds and fertilisers. Traditional trades such as weaving, pottery, carpentry and blacksmithing have declined due to modern technology and competition from overseas. Men and women who do not have alternative skills have lost their livelihoods as a result.

Other street-connected children have been born into urban poverty or are from tribal backgrounds that are discriminated against.

Parents work on construction sites and as porters, rickshaw pullers and domestic workers. Children do odd jobs, such as rubbish picking or working in markets and street vending, or they get involved in petty crime to get by. Their lives are rough and insecure and they are harassed by the police. These children experience abuse and exploitation, they have poor nutrition and limited access to healthcare and most do not attend school.



## Project objectives

We have an ongoing partnership that aims to support children to get out of crisis situations and develop the skills and resilience they need to build their future. We do this through developing programmes that are led by children and supporting our partner to strengthen its own systems and processes.

## Our local partner

Butterflies has been working with street-connected children since 1989. They have been a ChildHope partner for over a decade. Their focus areas are education and vocational training, development of life skills, financial management and health. Butterflies also has a research, advocacy and training wing and is an active participant in national and international networks for advocating and promoting policies, programmes and actions to protect the rights of children. Children are given their own prominent voice in the advocacy work through the children's media projects Butterflies runs.

## Our donor

Comic Relief was our donor partner between 2011 and 2017. Through their support we were able to significantly scale up the work of Butterflies and develop their organisational sustainability. We are actively seeking donor partners for these new projects so if you are interested in investing in this area, please [get in touch](#).



## Our activities

Butterflies has a range of activities from mobile education, vocational skills training, research, broadcasting, support for children in trouble with the law and night outreach. Its two flagship programmes are the Children’s Development Khazana and the Children’s Health Cooperative.

The **Children’s Development Khazana** is a life skills and financial management programme which at its heart has a community bank run by children for children. The programme’s primary objective is to impart life skills education and to teach children and adolescents how to prioritise needs, budget and save. The bank was the idea of a group of children who told Butterflies that one of their biggest challenges on the street was people stealing the small amounts of money they managed to earn.

Children aged 9-21 years are the members, volunteer managers and promoters, under the guidance of adult facilitators. Members nominate their own child volunteer bank managers and committee members and these children receive training in basic book-keeping and accountancy, communication skills and how to work in a team. Being able to save keeps the money safe and helps the children to think about the future and plan. Children can take loans and grants from the bank to support their own development and many are choosing to use the money to pay for books and uniform so they can return to school.

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### Children’s Health Cooperative

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promotes safe and healthy living among children and communities. The cooperative has regular workshops where the children discuss health, nutrition, hygiene and environment issues and learn about how to prevent disease and sickness. By contributing a very small fee every month, transferred from their Children’s Development Khazana account, children become members and learn the importance of budgeting for health care too. Child Health Educators are trained to promote healthy behaviour among their peers and community. The children undergo training which includes administering first aid and addressing minor health issues and are taken on hospital visits so they can understand how they work and no longer be intimidated by them.

Because both initiatives are based on a cooperative model, children lead the activities and are at the heart of decisions that affect their lives. They are also experiencing the power of collective action. These programmes have been so successful they now operate through 23 associate partners in eight countries - across India and in Sri Lanka, Afghanistan, Nepal, Tajikistan, Madagascar, Kyrgyzstan and Ghana. We know that the members of these cooperatives have improved self-confidence and now understand how to stay healthy and plan for their future. However, we also know that their employment options are still limited. That is why the next stage of our work with Butterflies is to take this highly successful cooperative model and build a new programme with a strong vocational and entrepreneurship element.



### In numbers

As of 2017, we have:

- Butterflies directly intervened into the lives of **19,224** children.
- **1,296** out of school children were enrolled in formal education.
- **163** out of school children were enrolled in open schooling programmes.
- The Children’s Development Khazana and Child Health Cooperative reached **15,466** children
- from eight countries.
- Members of the Children’s Development Khazana saved **£62,570**.
- **194** children and adolescents took welfare and development grants.
- **543** Child Health Educators addressed **1,875** medical cases.
- A total of **1,330** children were in leadership positions and working as peer educators.

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In their words

## Rohit's story

"Prior to my involvement with Butterflies, I was addicted to smoking. I was quite unaware of the bad effects of my habit until I was a participant in one of the health sessions by Butterflies. I decided to distance myself from smoking and although it was quite difficult in the beginning, within three months I was able to overcome my habit. This was only possible because of the counselling, support, encouragement and guidance of the child health educators and the staff of the Children's Health Co-operative.

"My membership in the Children's Health Cooperative had a huge effect on my unhealthy behaviours. It has helped me not only to stop smoking but was instrumental in promoting several healthy habits. With my parents' meagre income, it was always difficult for them to take care of us. Our clothes were torn and we were unclean as we played in filthy surroundings near our jhuggi (shacks). We rarely took a bath and rarely wore clean clothes. There was an open nala (drain) in the village, which I often fell into but never bothered to clean myself afterwards. It risked my health and I fell ill frequently. Now I take regular baths, I change my clothes when they are unclean and wash my clothes regularly, I cut my nails, I brush my teeth every day and also comb my hair. I no longer play in unhygienic surroundings anymore.

"At a community level, Butterflies taught us that we should not litter our surroundings. There used to be heaps of garbage in various places in the community, including right in front of my house. I never bothered about it - my attitude was 'if others litter, why should I clean it?' Through Butterflies I have realised that it is the responsibility of each one of us to keep our surroundings clean. It prompted me to clean the garbage in front of my house and I asked my friends to do the same around their houses.

"Along with other children in the community I help educate people about health and hygiene with door to door campaigns, rallies and street plays. Recently we performed a street play on dengue fever and malaria. Whatever I have learned and done to myself and to the community is because of the Children's Health Cooperative. Looking back I can name a number of remarkable changes in my life that happened because of my involvement with Butterflies."

**This story is edited from a book of stories produced by Butterflies and ChildHope. You can read more of them [here](#).**