Child labour is a hazard to a child’s mental, physical, social, educational, emotional and spiritual development. Broadly, any child who is employed in activities to feed self and family is being subjected to “child labour”.

According to the report of UNICEF, one in six children in 5-14 years range or about 16 percent of all children in this age group is involved in child labour in developing countries. In the least developed countries, 30 percent of all children are engaged in child labour. According to International Labour Organisation (ILO) and other official agencies, 73 million children between 10 to 14 years of age are employed in economic activities all over the world. In India 14.4 percent children between 10 to 14 years of age are employed as child labour. World Day against Child Labour was declared on 12 June 2010 and the theme was “Go for the goal... end child labour”.

Definitions
UNICEF defines child labour as work that exceeds a minimum number of hours, depending on the age of a child and on the type of work. Such work is considered harmful to the child and should therefore be eliminated.

Ages 5-11: At least one hour of economic work or 28 hours of domestic work per week
Ages 12-14: At least 14 hours of economic work or 28 hours of domestic work per week
Ages 15-17: At least 43 hours of economic or domestic work per week

Child labour may be defined as employment of children in gainful occupations even at the expense of their physical, emotional and social well-being.

Patterns of Child Labour
In unorganised sector the child labours are found as domestic servants, as helpers in shops, dhabas & restaurants, as vendors, as agriculture worker, as shoeshine boys, rag pickers, etc.

In organised sectors only a small portion of working children are found.

Semi-organised sector employing children includes carpet weaving, saree embroidery, precious stone polishing, bidi making, bangle manufacturing, leather industry, match & fireworks factory, balloon factory, building construction, petrol pumps, automobile workshops and garages.

Bonded labour: In this category the child is sold to the loaner like a commodity for a certain period of time. His labour is treated like security (or collateral security) and cunning rich men procure them for small sums at exorbitant interest rates.

Aetiology
In addition to poverty, other factors such as economic & political instability, discrimination / casteism, migration, criminal exploitation, exploitation by selfish and lazy parents, bad company, begging-gang, school drop-out, maladjustment in the family, broken family, death of parent(s), child of unmarried pregnancy, exploitation by the employers, child-out-of-wedlock, juvenile delinquency, large family size, low levels of education and inadequate social protection, child trafficking, parental illiteracy, social apathy, ignorance, lack of education and exploitation, exploitation of cheap and unorganised labour. The family practice to inculcate traditional skills in children will never provide the opportunity to learn anything else, orphaned or abandoned children, parental ignorance regarding the bad effects of child labour, the ineffectivity of child labour laws in terms of implementation, non-availability and non-accessibility of schools, boring and unpractical school curriculum, over population, adult unemployment & urbanisation and child are some of the major factors that come into play for child labour in India.

Health Hazards in Relation to Type of Labour
Working children are vulnerable to several health hazards. These include hygienic problems, drug addiction, smoking, STDs, accidents and injuries, malnutrition, juvenile delinquency, affecting emotional development. High morbidity is related to respiratory infections, tuberculosis, diarrhoeal diseases, parasitic infestations, scabies & pyodermas.

Agriculture - Injuries from accidents, heat induced problems, dermatitis from fertilizers, pesticides or herbicides, snake bite, etc., parasitic infections.

Carpet making- Lung problems from inhalation of fibre dust, poisoning from colouring agents.

Balloon factory - Lung problems including pneumonia, heart failure.

Bidi industry- Nicotine poisoning in the form of easy
fatigability of muscles, nausea, headache, blackouts, blindness.

Power loom Industry - Lung problems like byssinosis & tuberculosis; fireworks / match industry - lung problems, burns, muscle fatigability, deformities.


Lock industry - Lung problems, including asthma, acid burns, headache.

Brass industry - Lung problems, acid burns.

Slate industry - Silicosis, pneumoconiosis, tuberculosis.

Domestic work - Fatigability, child abuse and neglect (CAN), drug abuse.

Prostitution - Venereal diseases, AIDS, hepatitis

**Control & Prevention**

A great deal of effort is needed to eliminate basic causes. It is felt that instead of proliferating the laws relating to children, all statutory provisions of various Acts relating to children should be grouped in one comprehensive code of children.

It is obligatory for all countries to set a minimum age for employment according to the rules of ILO written in Convention 138 (C.138). The stipulated age for employment should not be below the age for finishing compulsory schooling, which is not below the age of 15. Developing countries are allowed to set the minimum age at 14 years in accordance with their socioeconomic circumstances.

Government of India has taken many initiatives to control and prevent child labour. The Indian Constitution enshrines that:

- No child below the age of 14 years shall be employed to work in any factory or in any hazardous employment (Article 24).
- Childhood & youth are to be protected against exploitation & against moral & material abandonment (Article 39(f)).
- The state shall endeavour to provide within a period of 10 years from the commencement of the constitution free and compulsory education for all children until they complete the age of 14 years (Article 45).

Through a notification dated May 26, 1993, the working conditions of children have been regulated in all employments which are not prohibited under the The Child Labour (Prohibition & Regulation) Act. Recently, government has prohibited employment of children below 14 years of age as domestic worker or servant, employment in roadside eateries, restaurants, hotels, motels, tea shops, resorts, spas or other recreational centers. Disillusioned by the worsening child labour scenario in India, the Supreme Court of India on 8 December 1996, directed all State Governments & Union Territories to take concrete steps to abolish child labour. It identified nine industries for priority action & directed setting up of Child Labour Rehabilitation Welfare Fund. The offending employers are supposed to pay a compensation of Rs. 20,000 to be deposited in the Fund.

The Indian Academy of Paediatrics (IAP) Committee on Child Abuse, Neglect & Child Labour (CANCL) is now engaged in formulating an ambitious country wide strategy to fight the malady.

**Legislations & Programmes pertaining to Child Labour in India**


**Child health programmes:** Integrated Development Services (ICDS), the Universal Immunisation Programme (UIP), the Reproductive Child Health Programme (RCH), Integrated Management of Childhood Illnesses (IMNCI), National programme related to mother & child health (MCH), Child Survival & Safe motherhood programme (CSSM), School health programme, Mid-day meal programme, Supplementary nutrition programme
Reporting Child Labour

The social malady of child labour can be brought under control, if each individual takes responsibility of reporting about anyone employing a child below the age of fourteen-years. The government has a special cell to help children in exploitative circumstances. These cells comprise of social inspectors, as well as other administrative personnel, employed specifically to deal with child labour issues. Apart from that even the media is known to help in such circumstances. Yet, if one fears the system then they should ideally take a social worker into confidence and report about the child exploiter and leave it to this person to deal with the entire issue.

Conclusion

In the present situation of our country, it is difficult to abolish child labour. However, the thrust on eliminating child labour from exploitative and hazardous works and bringing health services where they work can bear desired results in a phased manner. A strategy involving the parents, employees, community, non-governmental, governmental and voluntary agencies needs to be evolved. Strict implementation of child labour laws and practical and healthy alternatives to replace this evil can mitigate the problem of child labour.

References


TNAI Workshop on
Patient Safety for Quality Nursing Care
11-18 April 2012
at TNAI Headquarters, L-17, Florence Nightingale Lane, Green Park, New Delhi-110016

A National Workshop on Patient Safety for Quality Nursing Care will be held during 11-18 April, 2012 at TNAI Headquarters, L-17, Florence Nightingale Lane, Green Park, New Delhi-110016. The overall purpose of the workshop is to build in a culture of high standards of patient safety among the nursing personnel and thus providing quality nursing services.

Request for registration will be considered on a first-cum-first served basis as there are only limited seats 40. All costs for attending the Workshop will be borne by the sponsoring authorities (Institutions/Governments) or by concerned individuals as the case may be.

Participation fee:

(1) Outstation participants those who require accommodation (fee package for Registration, Boarding and lodging for 8 days including Sunday) Rs. 13,000.00

(2) Local participants those who do not require accommodation (fee package for Registration, lunch and refreshment) for 7 days Rs. 6,400.00

Please note that in case of any cancellation, an amount of Rs. 5000/- will not be refunded. No outstation cheque will be accepted. For Registration forms, write to: The Coordinator (CEP), TNAI Headquarters, L-17, Florence Nightingale Lane, Green Park, New Delhi - 110016, Phone: (011) 26566665, (011) 26966873, Telefax: (011) 26858304, Email: tnai_2003@yahoo.com ; tnai@vsnl.net along with the request for registration form.

Kindly enclose a self addressed envelop (9"x4") with a postage stamp of Rs. 5/- affixed. Last date for receiving filled registration form and Participation fee is April 9, 2012. However, seats can be booked tentatively by Phone/Fax/ E-mail etc.

Mrs Sheila Seda
Secretary-General, TNAI