

The Lives and Health of Pakistani Street Children

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In Pakistan 1.2 million children and adolescents live on the street,

according to an estimate by the United Nations Children's Fund (UNICEF). In contrast to homeless youth in the United States, the major reason these children leave home is economic.

Although in the United States youth are generally not on the streets because of poverty (*see the article on homeless youth, page 8*), the health consequences of being on the street are similar in both countries since both Pakistani and US street youth are vulnerable to sexual abuse and subsequent health problems.

Pakistani street children

A study of Pakistani street children conducted by the Pakistan Voluntary Health and Nutrition Association (PAVHNA), a national non-governmental organization, reports that the most vulnerable group for leaving home are 10 to 12 year olds (54 percent), followed by 13 to 16 year olds (29 percent). Primary reasons mentioned for leaving home were poverty (26 percent), followed by influence of peers or friends (20 percent), and violence (17 percent).

The average family size in rural areas is six to seven members, and it is crucial for all members to work to supplement the family income and provide food. Children migrate alone or sometimes with their families from rural areas to urban areas looking for employment.

Employment opportunities for boys are limited due to their lack of education, skills, and training. Jobs are available only in the informal sector, where they work as apprentices in automobile workshops, vehicle cleaners at bus stands, bus or van conductors in the local



Pakistani street children in their work place.

Pakistan Voluntary Health and Nutrition Association (PAVHNA)

transport industry, massagers, garbage pickers, newspaper hawkers, shoe polishers, and tea stall workers. The majority of homeless children sleep in parks or on the pavement, in bus terminals, or before shops. They usually prefer to live in multi-age gangs for personal security.

More boys than girls live on the street because girls typically live in tent houses with their families in migrant slum communities. They work as beggars, scavengers, or flower sellers. Girls are also brought from rural areas to work as live-in domestic helpers or as commercial sex workers, living in brothels with other sex workers.

Sexual abuse and sexual health

Low status in society makes street children easy targets of emotional, physical, and sexual abuse. A participatory situation analysis, conducted by World Population Foundation with boys working in automobile workshops, shows that 57 percent of the respondents had been sexually abused. Of the abused children, 43 percent of them had been sexually abused by their employers and 13 percent by their peers.

Immaturity and dependence on their employers make both boys and girls highly vulnerable to sexual abuse and exploitation. They face pressure to please their employers or gang leaders, and in return, they get money and food. Before long they adopt prostitution as an occupation because they start making good money and are able to support their families. Eventually, they become exposed to various types of drugs, such as glue, solvents, marijuana, alcohol, and cigarettes with hashish. A study by Sahil, a national NGO working solely on child sexual abuse in Pakistan, indicates that child sexual abuse and drug addiction have a strong correlation, with 160 of 180 boys the study interviewed having been sexually abused and drug addicted. The boys said they used drugs for relief and to forget the agony of being victimized.

Street Children Defined

Children of the street consist of boys and girls who see the street as their home. They may still have some family ties or they may have completely broken ties with their families. They seek shelter, food, and a sense of family among their street companions and live on the streets. Often they have been abandoned by their parents, are orphans, or are runaways from neglectful or abusive families.

Children on the street include those who live at home, often in shacks, and sometimes even attend school, but are sent to the streets by parents or go of their own accord to supplement the family income. (*United Nations Economic and Social Commission for Asia and the Pacific, Human Resources Development, 2002*).

Unsafe sex makes both boys and girls highly vulnerable to sexually transmitted and reproductive tract infections. Unhygienic sanitary practices aggravate any infection. They do not have regular bathing habits, do not bathe after sex, and usually wear dirty clothes, which aggravates infections.

Treatment facilities are also not available to them. As a result, they normally consult uncertified practitioners who cannot treat them due to a lack of knowledge. In some cases, these practitioners also abuse them sexually. Peers are the main source of information about sex and sexuality, and most of them have poor access to accurate information.

Most street youth have lost both hope and desire to escape their current situation. Yet, they are well aware that sex work and living in abusive relationships hurts them, and they suffer low self-esteem and feel shame and guilt from being dishonored.

Interventions

Since Pakistan is an Islamic country, in the past the government assumed that Pakistani society was immune to problems of sexual abuse and exploitation. However as a result of work by the National Commission on Child Welfare and Development, in consultation with non-governmental organizations and other stakeholders, the government has begun to recognize the problem of sexual abuse. It recently approved a National Plan of Action (NPA) for children that was developed in conjunction with the Convention of Rights of Children and Millennium Development Goals (MGDs) for 2015. National goals and objectives were set in the areas of child health, education, HIV/AIDS, protection, and sexual abuse and exploitation. However the document is silent on resource allocation for the implementation of plan.

The NPA addresses sexual abuse and exploitation through four program components: prevention, protection, recovery, and monitoring.

Prevention emphasizes efforts to raise awareness of sexual abuse and exploitation issues, to advocate for change, and to mobilize communities to develop a vigilant support system against child sexual abuse and exploitation. For instance, national organizations in Pakistan, such as Sahil and the Pakistan Pediatric Association, are developing educational materials including storybooks for children, posters, messages painted on local buses, and street theater. They also have a strong media program that includes national TV, radio, and print media. Interventions such as online counseling services for children, crisis centers, healing programs for child survivors, and legal aid services to survivors are mostly directed toward school-based children.

A major role these organizations have played is highlighting the issues of high-risk street youth and bringing them to the attention of the Pakistan government. Sahil has also encouraged journalists to adopt a less sensationalized and more positive style for reporting sexual abuse cases in national newspapers, and encouraged lawyers to use respectful language when presenting sexual abuse cases in court.

Protection includes reviewing existing legislation and developing new laws relating to child protection, training law enforcement personnel including police, court officials, public attorneys, lawyers, and social welfare officers, and conducting a public campaign about laws concerning the issue.

Recovery and rehabilitation focuses on service delivery. It includes counseling as part of rehabilitation services, training of psychologists, doctors, and councilors, establishing multi-disciplinary child sexual abuse committees in major hospitals across the country, and publicizing the services available to survivors of sexual abuse and exploitation.

Government and national level non-governmental organizations, in collaboration with UNICEF, other United Nations programs, and the National AIDS Control Program Pakistan, have set up drop-in centers in major cities to provide a range of services for street children.

Monitoring. The monitoring plan links the objectives of the three other components to strategic activities and their expected outcomes.

Lessons to be learned

Lack of reproductive health services for homeless youth is a major dilemma in Pakistan. These young people will never escape the vicious cycle of poverty until and unless we initiate a collective struggle in Pakistan and globally to advocate for the fulfillment of children's fundamental rights to protection and good mental, emotional, sexual, and physical health.

Whether street children live in developed countries such as the United States or in developing countries such as Pakistan, their common suffering and low social status deprive them of their fundamental rights. For the economic development and prosperity of any country, it is necessary to address this high-risk, marginalized segment of society. If we really believe that our children are our future, then we cannot move forward unless we help them become healthy and protected citizens. ■

Snapshot of Pakistan

Pakistan's population is 150.6 million; 65 percent live in rural areas, and 35 percent live in urban areas; 40 million (26 percent) are adolescents and youth. Pakistan ranks second among the countries of the world in number of out-of-school children; of the 6.5 million out-of-school children, 80 percent were never enrolled, 10 percent dropped out, and the rest went to school at a later age. The population below the poverty level is 24 percent; 67 percent live on less than \$2 a day. Approximately 3.6 million children under the age of 15 are working; 47 percent of the male population and 34 percent of the female population start work before the age of 15.

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