

NEWS LETTER

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Rag Pickers Health: A need more than a right

With burgeoning population and rapid urbanization, India is moving towards waste generation at a higher pace. This process of waste generation will accelerate in coming future and become even worse. With the current waste management system where municipal corporations are responsible to handle the daily waste generated in Indian cities, only ~ 50% of the waste generated is collected and handled by them. The leftover unattended waste is taken care by rag pickers.

Rag-pickers, who contribute to solid waste management majorly, are the people who rummage through garbage bins to pick out useful material for their livelihood. Being the important backbone of the solid waste management system in India, their act is least recognized and considered as one of the most inferior one. The situation gets even worse when children get involved in this system. **The health risks posed by the occupation may be greater for children than for adults.** In comparison to adults, children lack judgment, experience and knowledge. They may therefore be at greater risk of occupational hazards and injuries. For instance, children may pick dangerous materials which adults would know to avoid. Exposure to hazardous materials may be more severe for a child. For instance, children have a faster rate of breathing than adults which may make them more vulnerable to airborne hazards (such as gases given off by burning waste materials). They have thinner layers of skin than adults which may make them more vulnerable to chemical absorption and burns. Furthermore, the softness of children's bones may mean any skeletal problems resulting from carrying heavy loads are greater than they would be for adults. By starting this work at an early age, have a greater potential number of years in the occupation which may put them at an increased level of risk of low level chronic exposure. They may be more susceptible than adults to the detrimental effects of this work on personality development. With less awareness about the stigma attached to the work than adults and lack of choice

associated with this work means that the children forgo other opportunities of education, health care and other childhood activities.

Society, as a whole, regards them as antisocial elements, an embarrassment to the community, and unfits to live. However their useful contribution to society and ecology is little understood and generally ignored. Without them we cannot get up every morning with cleaner surroundings. Their valuable contribution to society should not be ignored and taken for granted. The problem of child ragpickers has to be addressed from at least two angles.

The first one is the attitudinal change of the society. Secondly,



the situation that has been created due to the existing social, political, and economic pressures in society and needs to be addressed at the root of the problem, through an attitudinal change in the society. However, change is not an easy process. A change that demands a modification in attitudes, as well as change in the social, economic, and political situation, is a slower process. Policy makers, industry, society need to view the situation with compassion and sensitivity.

The future of the society depends on the quality of life of these children and there is a dire need to protect them.

"Rag picker's children: The most vulnerable category of working children"

The most vulnerable among working children are those who are engaged in rag picking. They are one of the most poor and disadvantaged ones, who are made to work in highly filthy conditions for long hours, out of their home for most of the day and even night. In addition to this, their poor working condition forced them to stay underfed most of the time, which eventually leads them to suffer from malnourishment, stunted growth and weakness. It is not only their unhygienic and disease prone working environment but their living condition is equally bad, which make them vulnerable to several severe health related problems.

Health Impacts

During rag picking, these children constantly get exposed to the danger of accidents, injuries, cuts, bruise, burns, dog-bites, allergies and disease through contacts with sharp material and poisonous substances as they scrounge with bare hands and sometimes even bare feet. The unattended infectious wounds causes septicemia and tetanus. They are also suffering from respiratory problems, back and joint pain, skin diseases and tuberculosis due to hazardous working conditions.

The risk of falling ill is very high because they consume unhealthy food and water. There is no place where they can sit and eat or keep their food safely. If they take food, it is unhealthy for them by flies and mosquitoes all around the godowns. They become susceptible to diarrhea, malaria, frequently fever and stomach ache. These children are marginalized socially and economically cannot afford health services, received no treatment for many illnesses and preferred self-medication. In absence of proper diagnosis and right treatment, their health deteriorates, which is accelerating the national burden of diseases.

There are so many issues pertaining to waste management system in our country and every issue is so complex that it has made difficult for all of us to understand from where to start. Since every small step taken here, is a step forward towards "Clean India" & "Healthy India"

With the vision of clean and healthy India, IPCA is executing the noble act of **"free medical checkup camp"** for rag pickers community under its "TetraPak collection and recycling programme since year 2011. The outcome of continuous health camps for adult rag pickers revealed that their health status has improved remarkably. However, their children were excluded from such health benefits who are equally exposed to poor working and living environment of rag pickers. Thus an urgent need was felt to protect the health of these young children.

IPCA initiated the **"Health Care Programme for Rag-Pickers**

Children" from September 2015 under its already existing **"primary education programme for rag picker's children"** (refer IPCA newsletter: volume1, issue 3). IPCA took this initiative with the support of India Development Service (IDS), USA with its objective to make these children aware about their health care, personal hygiene and sanitation. The main objectives of initiating the Health Care Programme are as follows:

- To facilitate the medical services
- To reduce malnutrition, with special attention to underweight, it is essential to first educate and create awareness programmes, and finally
- To improve their physical as well as mental health

The overall objective behind these camps was to critically examine each child and look into their current health status.

Health Survey

Health survey of total 132 children (51 boys and 81 girls), aged 5-15 years has been carried out at IPCA's primary education centers at Bhowapur, Indrapuram and Noida. The children have been surveyed for their overall physical health, which includes their body mass index (BMI), status of their skin, nails, hairs, teeth as well as their anemic condition, which are discussed in detail below.

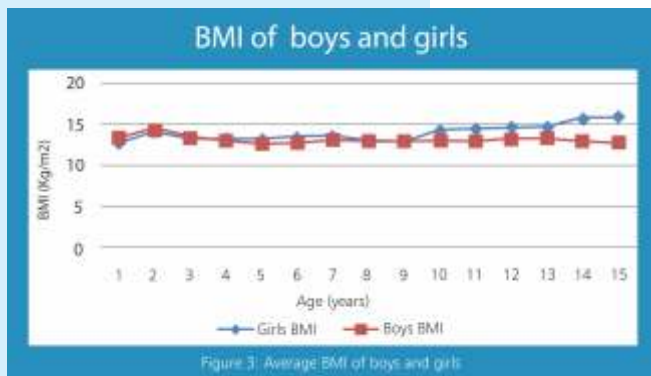
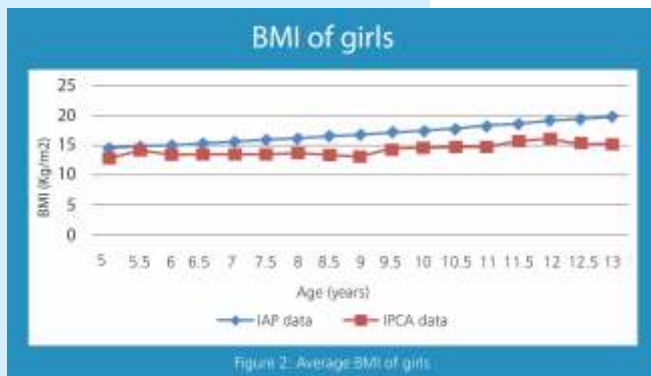
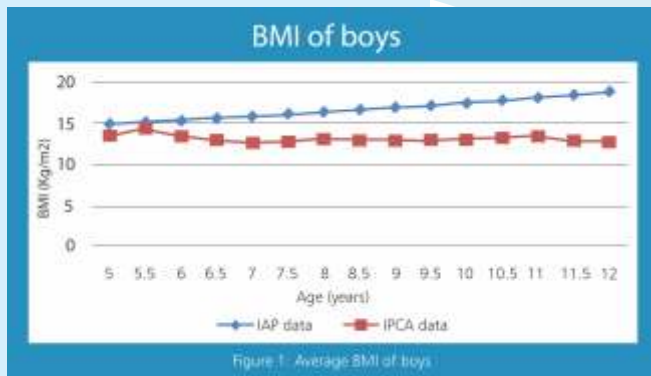


BMI

The Indian Academy of Pediatrics (IAP) graphs were taken as reference BMI curves for Indian boys and girls and later survey readings were superimposed accordingly to obtain BMI curves for the present study. The average BMI was calculated and plotted along with reference BMI to compare the BMI of children with the reference BMI curves given by IAP.

Figure 1 & 2 shows a comparison of BMI of boys and girls, respectively with the reference curves. It was observed that BMI values recorded in our study are much lower than the reference values. For e.g. in case of boys (figure 1) the BMI is 3.58 kg/m² lower than reference BMI values. Likewise in case of girls (figure 2), the BMI is 2.7 kg/m² lower than

reference BMI values. **The observations indicate that the current health status of children is very poor and expected to be deteriorated in case immediate actions will not be taken.**



Girls have better BMI than boys

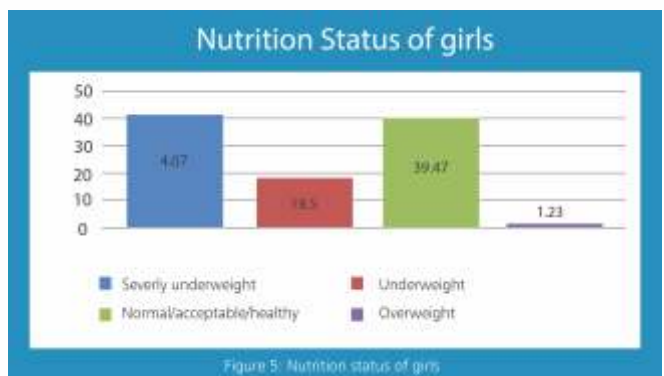
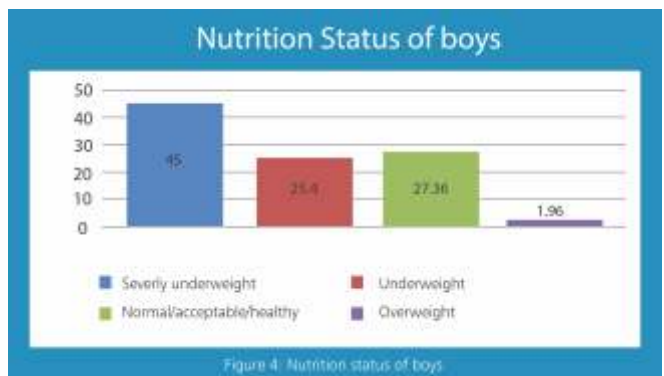
Studies say, girls are usually taller and heavier than boys in age group of 8-12 years, which is also supported by the present study. However, the BMI of boys from age group of 13-18 years should be more than the girls, which is not reflected in present study. The higher BMI of girls as compare to boys may be due to their stay at homes and getting regular meals, while boys are expected to go for rag picking, which involves physical as well as mental exertion and they are devoid of getting their meals on time. As a result their growth and development gets retarded.

The National Task force for childhood prevention of adult diseases of the Indian Academy of Pediatrics has recommended that Indian children of 10-13 years of age are to be considered overweight if the BMI is >20.5 kg/m² (>85percentile) and underweight if BMI is < 13.15 kg/m² (<3 percentile). In the present study, children

varying in age from 4-13 years, therefore five different cut offs are adopted, which are cumulative values for the sampled age group. Those are as 13.5 kg/m² (<3 percentile) for severely underweight; 14.05 kg/m² (< 3-5 percentile) for underweight; 18.06 kg/m² (5-90 percentile) as healthy; 24.7 kg/m² (90-97 percentile) as overweight; and >24.7 kg/m² (> 97percentile) as severely overweight.

Nutrition status

The prevalence of underweight and overweight among sampled boys and girls are shown in the figures 4 & 5, which indicate the higher prevalence of underweight among the children. The possible reason for the high occurrence of underweight could be traced to poverty, low dietary intake, excessive energy outflows due to hard labour, and chronic infections. However, if we compare the boys and girls, boys are more affected by both under (70.4 % and 59.2%) and overweight health problems (1.96% and 1.23%) than girls, respectively. The significant difference in case of underweight may be due to more engagement of boys in rag picking at early age than girls (mostly stays at homes), which does not allow them to take their meals regularly, as a result their growth gets



hindered. on the contrary, even the higher prevalence of overweight in boys may be due to consumption of unhealthy and junk food when they are on work.

Physical health

Children were also examined for their complete physical health (figure 6), which involves their anemic status, condition of their ear, nose & throat (ENT), nails, hair, skin,



allergy and dental health. The children were significantly affected by bad breath (~84%) and tooth cavity (~56%). Their nails were also found to be severely affected (~65%). The main reason was found to be ignorance of personal hygiene and lack of safety measures while rag picking, which we are trying to rectify through our health and education campaigns.

Most of the children were recorded to be anemic (~89%), out of which severely anemic were ~20% and moderate were ~69%. Looking at their probability to convert in severe anemic cases, Iron supplements and multi vitamins were supplied as preventive medication through our health camps. The impact of their living and working condition were also observed on the health of their skin (~20% children) and hairs (~22%), which was also take care through our activity based learning programmes at schools.

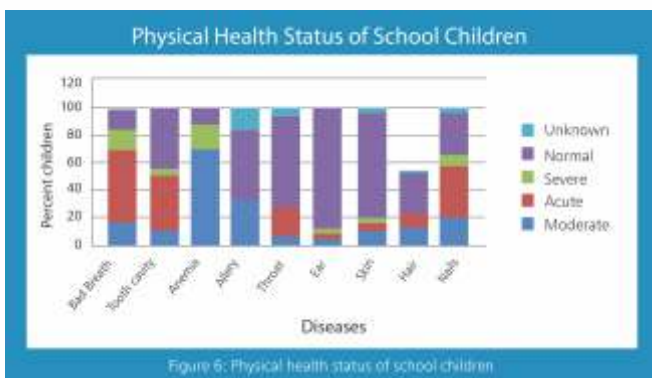


Figure 6: Physical health status of school children

Success Story

Out of total 267 children, who are enrolled under our primary education programme for rag pickers children, 50% (132 children) have been benefited from our health camps till date. The awareness level among children has been increased tremendously through our initiative. Now, they are aware about basic health and sanitation practices to adopt in day to day life. In one of our recent health camp held at Makanpur on 10th February, 2016 one of the child name "chotu" who was earlier studying in our Indrapuram school has attended this health camp. It was noticed that this child's awareness about health and related practices was quite good. When asked by one of the doctors present,

about what basic things we need to survive, why we need doctors, how to brush your teeth etc, he was in a state to answer all of them and was even awarded for the same. Last but not the least, the children started attending the schools regularly after our health camps.

Challenges and vision

Throughout our primary education and health programme, we have faced many challenges. for example, **follow up of children's health** due to their relocation as they keep on moving in search of work and livelihood; **lesser attendance/enrollment of boys** (<40%) as compare to girls (>55%). The problem lies due to their more interest in earning money through rag picking than to attend the school; **limited funds** available to conduct the health camps. To overcome the challenges, the frequency of health camps need to be increased in order to geographically cover them. The steps need to taken to encourage the boys to equally attend the schools as the girls do by inculcating the knowledge about their family business in our educational curriculum and importance of education to carry out any work, which they would like to pursue in their life in coming future.

IPCA's vision is to increase the number to schools by 5 every year in Delhi NCR and then to rest of parts in India. With increase in number of schools our objective is to reach maximum children and provide health care facilities to all. IPCA has always been associated with one of the strongest backbone of waste management system in our country- The rag pickers, and we feel it as our responsibility to ensure good health to all. With GOI's "Clean India" & "Healthy India" Mission we wish to work for the same in the coming future.

Let's save the future by securing health of such innocent children.



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