

Developing a Coordinated Response to Counter the Public Health Menace of Street Children

Saurabh RamBihariLal Shrivastava*, Prateek Saurabh Shrivastava and Jegadeesh Ramasamy

Department of Community Medicine, Shri Sathya Sai Medical College and Research Institute, Kancheepuram, India

*Corresponding author: Dr. Saurabh RamBihariLal Shrivastava, Assistant Professor, Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Ammapettai village, Thiruporur - Guduvancherry Main Road, Sembakkam Post, Kancheepuram - 603108, Tamil Nadu, India, Tel: +919884227224; E-mail: drshrishri2008@gmail.com

Received date: September 6, 2014, Accepted date: September 10, 2014, Published date: September 17, 2014

Copyright: © 2014 Shrivastava, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Editorial

Street children refer to a vulnerable population of children and adolescents / youth for whom the street has become home and/or source of income for their as well as their family's survival [1,2]. On a worldwide scale, a remarkable rise in the number of street children has been detected, as evidenced by the recent estimates which suggest that within the range of 100-150 million children are either living or working in the street [1,3,4]. Furthermore, most of them have to deal with multiple obstacles; including different forms of abuse which itself questions the integrity of their survival [5,6]. Acknowledging the global presence, enormous burden and involvement of dependant population, negative influence on the quality of life, and long-term impacts, the public health professionals have realized street children as a marginalized group of the society which needs immense attention and care [7].

A broad range of socio-demographic, familial and health care delivery system associated factors such as wars and civil unrests [8], literacy status of parents [7,9], urbanization [3], absence of psychosocial support in the family [7], housing standards [4], financial stability in the family [3,9,10] large-sized families [10], familial conflicts [3], child abuse and neglect by the parents / relatives [3] either experiencing and/or witnessing domestic violence [1,9], negligible exposure to recreational activities [1,8] gender of the child [11], non-enrollment or drop-out from schools [1,3], peer pressure, media role [7] and hostile behavior of police [12,13] have been recognized which augments the problem of street children. From the perspective of rehabilitation / child placement center, which is established to safeguard the interests of children, parameters like lack of care, attitude of the workers, strict rules within the centre itself, etc. have been identified, owing to which children prefer to stay on streets [14,15].

Street children are often exposed to multiple social and health concerns like exposure to different types of abuse [11] indulging in high-risk behavior like substance abuse or early unsafe sexual activity [2,11,12,16] health related concerns like malnutrition or dermatological infections, etc. [16,17] surge in adolescence pregnancy [2] delayed milestones [18], emotional problems [19] psychiatric disorders [7] and child trafficking and their employment in hazardous circumstances [2,12].

Furthermore, the public health menace of street children or its associated consequences is on the rise because of the negligible sensitization of the health workers to the needs of street children [20] absence of a strategic plan to employ / rope-in outreach workers or non-governmental agencies [19,20] inequitable distribution of the

child welfare centers [15] and no framework to monitor functioning of the placement centers [14,15].

As living on the street tends to cast negative impact on variable aspects of a child life, there is an immense need to develop a multi-pronged strategy based on the identified potential determinants, involving multiple stakeholders, in order to meet their special needs [16]. In addition, implementation of other measures like orienting authorities including police about the magnitude and consequences [12,13] training nursing staff / outreach workers [20] facilitating strong familial bonds [1,3,7] implementing strategies to ensure enrollment and retention of children in schools [1,7] providing psychosocial assistance to the children & the family members [7] restricting family size by promotion of family planning measures [10] establishing child placement centers in an organized way & sensitizing the workers regarding the needs of the children [14,15] building a mechanism to ensure continuous monitoring on the functioning of the centers [14,15] ensuring strict action against the offenders [13] developing linkages with non-governmental / national / international agencies working for the welfare of street children [19] and promoting to gain the perspectives of the stakeholders on how to address these issues within the socio-economic context of the local settings [6,7].

In conclusion, as the future of human generation depends on today's children, it is of utmost importance that policy makers and the society work in a coordinated way to improve the health and living standards of children living on street.

References

1. Moura YG, Sanchez ZM, Opaleye ES, Neiva-Silva L, Koller SH, et al. (2012) Drug use among street children and adolescents: what helps? *Cad Saude Publica* 28: 1371-1380.
2. Roncevic N, Stojadinovic A, Batrnec-Antonic D (2013) (Street children). *Srp Arh Celok Lek* 141: 835-841.
3. UNICEF (2014) The state of the world's children 2014 in numbers: Every child counts. Revealing disparities, advancing children's rights.
4. Rachlis BS, Wood E, Zhang R, Montaner JS, Kerr T (2009) High rates of homelessness among a cohort of street-involved youth. *Health Place* 15: 10-17.
5. Olley BO (2006) Social and health behaviors in youth of the streets of Ibadan, Nigeria. *Child Abuse Negl* 30: 271-282.
6. Embleton L, Atwoli L, Ayuku D, Braitstein P (2013) The journey of addiction: barriers to and facilitators of drug use cessation among street children and youths in Western Kenya. *PLoS One* 8: e53435.
7. Taib NI, Ahmad A (2014) Psychiatric morbidity among street children in duhok. *Clin Med Insights Pediatr* 8: 11-16.
8. Khan S, Hesketh T (2010) Deteriorating situation for street children in Pakistan: a consequence of war. *Arch Dis Child* 95: 655-657.

9. Sayem AM, Kidd SA (2013) The levels and patterns of resilience among male street children in Dhaka City. *Int J Adolesc Med Health* 25: 39-45.
10. Abdullah MA, Basharat Z, Lodhi O, Wazir MH, Khan HT, et al. (2014) A qualitative exploration of Pakistan's street children, as a consequence of the poverty-disease cycle. *Infect Dis Poverty* 3: 11.
11. Mathur M, Rathore P, Mathur M (2009) Incidence, type and intensity of abuse in street children in India. *Child Abuse Negl* 33: 907-913.
12. Nada KH, Suliman el DA (2010) Violence, abuse, alcohol and drug use, and sexual behaviors in street children of Greater Cairo and Alexandria, Egypt. *AIDS* 24 Suppl 2: S39-44.
13. Ribeiro MO (2008) Street children and their relationship with the police. *Int Nurs Rev* 55: 89-96.
14. Leyka MB, Baum MB (2009) [Taking charge of street children in the Democratic Republic of the Congo: an ethical alternative]. *J Int Bioethique* 20: 119-129, 168.
15. Gurung AS (2013) Why do the street children of Kathmandu do not want to live in rehabilitation homes? *J Med Assoc Thai* 96 Suppl 5: S146-152.
16. Thapa K, Ghatane S, Rimal SP (2009) Health problems among the street children of Dharan municipality. *Kathmandu Univ Med J [KUMJ]* 7: 272-279.
17. Mthembu S, Ndateba I (2012) Exploration of knowledge, attitudes and behaviours of street children on the prevention of HIV and AIDS in the Huye district, Rwanda. *East Afr J Public Health* 9: 74-79.
18. Greksa LP, Rie N, Islam AB, Maki U, Omori K (2007) Growth and health status of street children in Dhaka, Bangladesh. *Am J Hum Biol* 19: 51-60.
19. Kerfoot M, Koshyl V, Roganov O, Mikhailichenko K, Gorbova I, et al. (2007) The health and well-being of neglected, abused and exploited children: the Kyiv Street Children Project. *Child Abuse Negl* 31: 27-37.
20. Legrand S, Pichon C (2012) On the road to hope with street children in Madagascar. *Rev Infirm* : 35-37.