



ISSN: 2395-7476  
IJHS 2022; 8(1): 255-257  
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www.homesciencejournal.com  
Received: 26-09-2021  
Accepted: 29-10-2021

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## Child labourers and substance addiction

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### Abstract

India leads the world in the number of child labourers. Lack of basic amenities and education is the primary reason for children to work. This study aims at identifying the impact of age, gender, and circumstances on substance addiction among child labourers in the state of Uttar Pradesh, India. The results showed a considerable difference between the number of males and female addicts. Furthermore, smoking and chewing pan and pan masala was found to be the primary form of addiction in males and females, respectively. For males, influence of friends was the key cause of addiction while for females, it was the family environment. There are numerous regulations to prevent child labour however, an ever-increasing number of child labourers is evidence that regulations alone cannot eradicate this practice. A tailored approach based on sex, age, and circumstances surrounding the child labourers is needed.

**Keywords:** Child labourers, basic amenities and education, India

### Introduction

India is home to the largest number of working children in the world (Kim *et al.*, 2020) <sup>[1]</sup>. 'Child labourers' define as children between the age of 5 and 14 accounted for a population of 4.35 million in India in 2011 (Kim *et al.*, 2020) <sup>[2]</sup>. A considerable number of children in India go to work instead of going to school, to earn their livelihood and to help their parents. Poverty, desire to gain some semi-skilled knowledge and lack of opportunities for basic education are some of the reasons which compel children to enter in labour force.

Among others, one of the ugliest consequences of child labour is the considerable waste of national talent. Given adequate opportunities and facilities, some of them might have turned to be great scientists, educationists, technocrats and bureaucrats, philosophers and so on (Mohanty and Jena, 1991) <sup>[5]</sup>.

Child labour not only affects the health of children but also creates a problem of delinquency, especially in children who work in street trade and domestic services. Economic freedom at an early age may encourage them to develop bad habits. Under "Moral deterioration," the children may be encouraged to play prank and truant, they may fall prey to cheap thrills on the street and drift into delinquency and be led into the world of crime. (Clopper, 1970) <sup>[6]</sup>.

Child labour is an inhuman practice which adversely impacts the children because most of them are employed in sub-human conditions. Prolonged work under unhealthy conditions exerts a negative influence on children's personality and well-being. The unsuitable, unhygienic surroundings where children work for long hours have injurious effect on their health. Child workers are exposed to social evils, even crime, such as addiction of drugs and prostitution (Mehta, 1985) <sup>[4]</sup>.

The state of Uttar Pradesh, in 2011, had the largest number of child labourers (2.1 million) followed by the state of Bihar (1.1 million; Kim *et al.*, 2020; Samantroy *et al.*, 2017) <sup>[1, 2]</sup>. A few attempts have been made to study the problem of child labour in India. However, studies on child labour in Uttar Pradesh appear to be uncoordinated and scanty. Furthermore, studies related to risk factors for substance use among child labourers are few (Bhattacharjee *et al.*, 2016) <sup>[3]</sup>. This study is an effort towards fulfilling the gaps in understanding of factors impacting substance use/addiction in child labourers. Specific objective was to develop an understanding of the impact of age, sex, and circumstances on substance addition in child labourers in Uttar Pradesh.

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## Methods and Materials

Multistage stratified sampling technique was used for sample selection. The study was conducted in the state of Uttar Pradesh, India. Out of 75 districts in Uttar Pradesh, two districts namely Saharanpur and Firozabad were selected in the first stage. Urban areas of both head quarter towns were divided in five zones namely north, south, east, west, and central. Each zone consisted of 15-20 mohallas and 2 mohallas from each zone were selected at random in the second stage. In the third stage, 25 families were chosen at random from each of the selected mohallas resulting in a selection of 250 families in each district. Out of the selected 250 families in the Saharanpur district, 176 had one or more child labourers aged between six and 13 years and one working child was selected randomly from these families in the fourth stage. Thus, a total of 176 child labourers in Saharanpur constituted the unit of information for the study. Similarly, in the Firozabad district, 178 families had one or more child labourers aged between six and 13 years. One child labourer from each of these families was selected at random in the fourth stage thus making a total sample of 178 children. Thus, out of 500 families, 354 child labourers, both from Saharanpur and Firozabad, were interviewed and the required information was recorded.

The methodology used to collect information for the present study consisted of interview-based structured schedule. The schedule was based on available authentic literature. It was

further verified by subject experts and was prepared in Hindi as the sample was drawn from Hindi speaking belt. All the socio-economic and demographic information about working conditions and addiction of each subject child was also collected.

A data collection plan was formulated to get reliable information and answers to interview questions. The researcher went to every selected house and established rapport with them. Establishing the rapport also included explaining the purpose of study to each household and in turn gain their confidence. Respondents were requested to give unbiased and frank answers. Data collected were compiled into simple and complex tables, interpreted and necessary conclusions were drawn. Percentages and averages wherever necessary were computed.

## Results and Discussion

Table 1 shows the distribution of child labourers involved in substance addiction in both districts. As shown in Table 1, out of all child addicts, majority of male child labourers (53.4%) were addicted to smoking. Numerical comparison showed that among female child labourers, majority (35.0%) were addicted to pan and pan masala. Furthermore, percent of male child labourers addicted to smoking was found to be statistically higher than the percent of females addicted to pan and pan masala ( $\chi^2=6.649$ ,  $df=3$ ,  $p < 0.05$ ).

**Table 1:** Sex of child labourers and types of addiction

Sex	Types of Addiction								Total
	Smoking		Tobacco Chewing		Pan and Pan Masala		Betel chewing/ whitener Smelling		
	No.	%	No.	%	No.	%	No.	%	
Male	39	53.42	4	5.48	17	23.29	13	17.81	73
Female	6	30.00	2	10.00	7	35.00	5	25.00	20
Total	45	48.39	6	6.45	24	25.81	18	19.35	93

Different types of addiction and their relationship with age of child labourers has been tabulated in Table 2. Highest number of child labourers (48.39%) were found to be addicted to smoking in the 9-13 age group. Smoking was followed by pan and pan Masala (25.81%), betel chewing/whitener smelling (19.35%), and tobacco chewing (6.45%).

Among the 12-year-old children, there were equal number addicted to smoking and those to pan and pan masala (37.5%). Number of addicts increased with age which was to be expected. It is also noteworthy that none of the child labourers among studied population were found addicted to alcohol, bhang, drugs and ganja.

**Table 2:** Age of child labourers and type of addiction.

Age in years	Types of Addiction								Total	
	Smoking		Tobacco Chewing		Pan and Pan Masala		Betel chewing/ whitener Smelling		No.	%
	No.	%	No.	%	No.	%	No.	%		
9	3	75.00	-	-	1	25.00	-	-	4	4.30
10	7	43.75	1	6.25	3	18.75	5	31.25	16	17.20
11	4	36.36	3	27.28	2	18.18	2	18.18	11	11.83
12	9	37.50	1	4.17	9	37.50	5	20.83	24	25.81
13	22	57.89	1	2.64	9	23.68	6	15.79	38	40.86
Total	45	48.39	6	6.45	24	25.81	18	19.35	93	100.00

Table 3 depicts a spectrum of circumstances responsible for addiction. It denotes that in majority (65.59%) cases friends were responsible for introducing children to different addictions. Family environment was the second most common reason for addiction (17.20%) followed by excessive work (15.05%). In a few cases (2.16%), the cause of addiction was

none of the aforementioned reasons. It is noteworthy that addiction causes differed among males and females. Among male child labourers, 79.45% of subjects started addiction in the company of their friends. However, majority of female labourers became addicts due to environment of their family.

**Table 3:** Sex of child labourers and circumstances responsible for addiction.

Sex	Responsible Circumstances								Total
	Friends		Environment of family		Excessive work		Others		
	No.	%	No.	%	No.	%	No.	%	
Male	58	79.45	6	8.22	7	9.59	2	2.74	73
Female	3	15.00	10	50.00	7	35.00	-	-	20
Total	61	65.59	16	17.20	14	15.05	2	2.16	93

The data analyzed through Table 4 revealed that among all ages between 10 to 13, influence of friends was the main

cause of addiction. Group of 9-year-olds was an exception with family environment being the main cause of addiction.

**Table 4:** Age of child labourers and circumstances responsible for addiction.

Age in years	Friends		Environment of family		Excessive work		Others		Total	Percentage
	No.	%	No.	%	No.	%	No.	%		
	9	1	25.00	2	50.00	1	25.00	-		
10	8	50.00	3	18.75	5	31.25	-	-	16	18.28
11	8	72.73	1	9.09	-	-	2	18.18	11	10.75
12	15	62.50	5	20.83	4	16.67	-	-	24	25.81
13	29	76.32	5	13.16	4	10.53	-	-	38	40.86
Total	61	65.60	16	17.20	14	15.05	2	2.15	93	100.00

Psychologically speaking, imitations and suggestions are effective mechanisms of socialization as far as the children are concerned. When children work with adults or with their peer group, they imitate them and sometimes become addicts. Present investigation reveals that 26.27% (93 out of 354) working children were addicted to some form of substance. Friends, among males and family environment among females was the main reason for addiction. Phillips (1994)<sup>[7]</sup> reported that 48% of child labourers in their study indulged in different types of addictions. Phillips (1994)<sup>[7]</sup> also reported that maximum number of subjects in their study were addicted to smoking and in 32% of the cases, friends were responsible for the addiction. It is noteworthy that in the presented study area, considerably less percentage of child labourers indulged in some form of addiction. However, influence of friends being the primary cause of addiction holds true to the present study as well.

### Conclusion

Out of 354 study subjects, 20.62% (73) were males who indulged in substance addiction. Compared to males, only 5.64% (20) females were addicted. Up to the age of 8 years no child was found to be an addict and as the age increased addiction increased. Addiction to smoking was found to be the highest among male child labourers and among female, percentage of pan and pan masala addicts was the highest. Among male child labourers, friends and among female child labourers, environment of family were responsible factors for addiction. Complete eradication of child labour through legislation is not possible. All occupations of child labourers should be identified and employment of children in these occupations should be prohibited. Furthermore, attention should be paid to positively impact the conditions of poor households, so the children are not forced to earn. More studies to identify and eradicate the reasons due to which children are still working in subhuman conditions are needed.

### References

1. Kim J, Olsen W, Wiśniowski A. A Bayesian Estimation of Child Labour in India. *Child Indicators Research* 2020;13:1975-2001.
2. Samantroy E, Sekar HR, Pradhan S. State of Child Workers in India. V.V. Giri National Labour Institute.

2017.

3. Bhattacharjee S, Kumar R, Agarwal A, O'Grady KE, Jones HE. Risk Factors for Substance Use Among Street Children Entering Treatment in India. *Indian Journal of Psychological Medicine*. 2016;38(5):419-423.
4. Mehta P. The Major Sectors of Employment of Children and their Working Conditions. In: *Child Labour and Health Problems and Prospects*, ed. by Naidu, U. S., and K. R. Kapadia. TATA Press Limited. 1985, 93.
5. Mohanty A, Jena BM. Problems of the Triable of Child Labourers in India, ed. by Patil, R. N. Ashis Publishing House, New Delhi. 1991, 114.
6. Clopper EN. *Child Labour in City Streets*. Garrett Press, New York. 1970, 128.
7. Phillips WSK. *Street Children in India*. Rawat Publications, New Delhi. 1994, 71.