

Supporting Community Action on AIDS in India

DISCUSSION PAPER

Banking Options for Children in Situations of Vulnerability, Compounded by HIV/AIDS

December 2007

Outcomes of a Study Conducted in Delhi, Andhra Pradesh & Tamil Nadu

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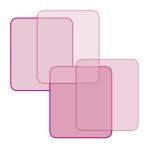
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Acronyms

AIDS	Acquired	Immuno-deficiency	Syndrome
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- HIV Human Immuno-deficiency Virus
- ILO International Labour Organization
- KYC Know Your Customer
- NACO National AIDS Control Organisation
- NGO Non-Governmental Organisation
- PWDS Palmyrah Workers' Development Society
- VMM Vasavya Mahila Mandali

Executive Summary

India is home to almost 19 per cent of the world's children. More than one third of the country's population is below 18 years. According to one assumption 40 per cent of these children are in need of care and protection¹.

There is a larger child labour force in India than anywhere else in the world. Official Indian statistics put the total number of children working at 13 million. Unofficial figures vary between 60 and 100 million².

India is facing an accelerating threat from HIV and AIDS, which is having a serious impact on the social fabric of Indian society. According to the NACO estimates of 2007, 70,000 children below the age of 15 are infected with HIV in India and 21,000 children are infected every year through mother to child transmission. In addition, the increasing number of street and working children over the last decade is a clear reflection of an emerging AIDS crisis. There is, however, no clear number of children living on the streets in India, with estimates ranging from 4-18 million³. The resulting increase in demand for the care and support of orphans and vulnerable children at the community level has stressed traditional coping mechanisms (such as support from extended families) to a crisis stage in the most heavily affected states⁴. The increase in orphaning due to AIDS will not only raise the number of orphans and number of children on the streets, but will also increase the difficulties in meeting the needs of these children⁵.

Children who are affected by HIV and AIDS (including those living with HIV positive parents, those who are HIV positive themselves, and those orphaned by AIDS), children living on the streets, or who are working have continually expressed a desire to study further, and to work in order to save money to build a future for themselves. A study in Chennai shows that many street children (45.6 per cent) would like to live in a secure place, with the vast majority of these children eager to change their present life and to do something meaningful with their future⁶.

According to the NACO estimates of 2007, 70,000 children below the age of 15 are infected with HIV in India and 21,000 children are infected every year through mother to child transmission.

¹ National Study on Child Abuse, April 2007

² http://www.savethechildren.net/india/key_sectors/child_labour.html

³ Veena Johari, 2002, Silent Cries and Hidden Tears, Lawyers collective

⁴ FHI, 2001, Care for OVC, A strategic framework

⁵ www.worldbank.org/sp/safetynets/ovcworkshop_5-03/Handout_India.pdf

⁶ A Study by N.S.Manihara, SKCV, http://www.skcv.com/street%20children%20in%20india.htm

The current labour laws in India permit children who are 14 years of age and above to work, with no requirement for a guardian's consent for employment. Moreover, irrespective of any statutory provisions, the reality is that children of all ages are often employed, and those orphaned are forced to work in order to survive. Official Indian statistics put the total number of children working at 13 million. Unofficial figures vary between 60 and 100 million⁷. Children under the age of 14 constitute around 3.6 per cent of the total labour force in India⁸. The current bank practice allows minors, defined as those under the age of 18, to open joint bank accounts with their guardians. In practice, minor saving schemes apply only to those children who are not orphaned and whose parents are account holders, thus, completely closing off the option to children orphaned by AIDS and street children.

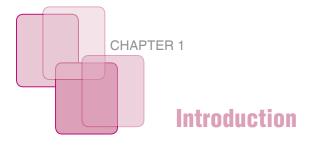
The India HIV/AIDS Alliance's (Alliance India) experience with vulnerable children has shown that they are eager to get back into society if they are provided with the necessary support. While support varies from child to child, most children require psychological support and linkages with organisations that can help them secure a better future. As poverty increases the vulnerability of these children, access to educational and financial institutions are key to the process of reintegration into society. Alliance India, along with its partner agencies has been working in selected states to address the issues of children affected and living with HIV and AIDS, working children, particularly street children and those involved in hazardous occupations. Taking into account these issues, Alliance India commissioned a study to explore the need for institutional banking facilities among children orphaned by AIDS and children made vulnerable to HIV, and those children who lives in un-organised colonies, have no fixed address or guardian/parents, no birth certificates. The study was carried out with two categories of children: 1) below 14 years who are prohibited to work and; 2) children above 14 years who are allowed to work but can not access banking services as per the policies. This study is built upon a review of existing legal and banking frameworks in order to asses the barriers and feasibility of banking options for orphans and vulnerable children in light of existing Indian child labour laws and banking policies.

While the present study has shown that a reasonably high proportion of children want to build upon their savings, mostly in the short-term, a growing number of children coming into contact with NGOs have started thinking about long-term savings to invest in the establishment of a business or for educational purposes. The study has also clearly brought out that these children are earning substantial amounts, but in the absence of any savings options, many children are drawn to negative coping mechanisms such as drug use.

Currently, there are not many institutional savings options available to children. This fosters uncertainty about the security of their savings. Many children, therefore, have opted for short-term savings either with NGOs, The current labour laws in India permit children who are 14 years of age and above to work, with no requirement for a guardian's consent for employment. Official Indian statistics put the total number of children working at 13 million.

⁷ http://www.savethechildren.org.uk/scuk_cache/scuk/cache/cmsattach/4516_ICDW.pdf ⁸ http://www.savethechildren.org.uk/scuk_cache/scuk/cache/cmsattach/4516_ICDW.pdf

local shopkeepers, employers or other individuals known to them. However, uncertainty around the safety of their savings has emerged as a key barrier as several children have had negative experiences with local shopkeepers that have stolen their earnings. The study has also clearly identified the urgent need to empower children, by bringing them into the mainstream, either through education and/or vocational training. By strengthening these areas and building awareness around savings options, not only would these children become financially independent, they would do so in a way that catalyses self-confidence and builds a positive outlook for the future. Until the issue of poverty is tackled and a comprehensive socio-economic programme for street children and families affected by HIV and AIDS is formulated, the whole gamut of children's issue will remain unresolved. The larger question before us today is devising a roadmap where issues of poor, marginalised and vulnerable children are seen in its entirety and the overarching agenda of addressing their citizenship rights are addressed.



1.1 Rationale of the Study

Banking is an important tool that not only allows an individual to save, but it is also an important process of socialisation that builds confidence and solidifies self-belief in an individual's standing and worth in society. Current legislation, however, in India does not permit children under the age of 18 years to open and/or operate bank accounts unless they have a guardian. Given the existing and increasing number of children living outside of family care in India, access to banking options among these children is an issue that requires greater attention.

While the Indian Government has banned child labour, young children are continuing to work in a variety of situations and are often earning substantial amounts, often up to 100 rupees per day with limited means of saving. Also children between the age group of 14–18 years, who are allowed to work as per the Child Labour act, have no access to banking services without their guardian. Consequently, they often spend their money on alcohol and drugs, or are subjected to forceful extortion by their peers or older children, and are unable to set aside money for their future. A majority of children who live with their parents but are working give their savings to their parents.

Similarly, children affected by HIV and AIDS who are in school, have no means to access loans or other bank facilities to support and continue their education if their parents die. In fact, access to social institutions that help secure a future, such as banks and educational institutions, are often closed to children living on the street and those who are orphaned by AIDS. The growing number of these children is expected to translate into a loss of manpower, an increased strain on social structures, with increasing numbers of children and young people becoming increasingly marginalised and thus also vulnerable to HIV.

This study has been built on the successful existing initiatives of the Lead Partners (the intermediary non-governmental organisations) of Alliance India, their implementing NGOs and other NGOs out side the Alliance partners' network to promote savings schemes for children orphaned by AIDS and made vulnerable to HIV and AIDS. The results of this study aim to facilitate further discussion with various key stakeholders on the feasibility of banking for orphans and vulnerable children (both below 14

Children have no access to banking. Consequently they spend their money on alcohol and drugs, or are subjected to forceful extortion by their peers or older children, and are unable to set aside money for their future. years of age who are prohibited to work but are engaged in work & earning money and below 18 years of age who can not access banking services without a guardian).

1.2 Goal and Objectives of the Study

Within the context of orphans and vulnerable children, this study aimed to:

- Explore the need for institutional banking facilities for those children who have no fixed address, guardian or parent;
- Review the existing legal and banking barriers for orphans and vulnerable children;
- Recommend policy and legal changes that may facilitate the provision of banking options for orphans and vulnerable children.

1.3 Study Approach

With the involvement of three Lead Partners – Vasavya Mahila Mandali (VMM), Palmyrah Workers' Development Society (PWDS) and MAMTA – and technical assistance provided by Alliance India, the study adopted the following approaches:

- A literature review to understand the situation and needs of orphan and vulnerable children in India;
- Field visits to Delhi, Tamil Nadu and Andhra Pradesh, states where Alliance India is working through its partner NGOs addressing various child-related issues.⁹

⁹ A complete list of the locations and organisations visited during the course of the study are given in Appendix 1.

CHAPTER 2

Children in the World of Poverty and HIV and AIDS: Issues and Challenges

2.1 Introduction

According to sentinel surveillance data gathered under the guidance of the National AIDS Control Organisation (NACO), there are an estimated 2.0 - 3.1 million people living with HIV and AIDS in India, giving a national adult prevalence of 0.36 per cent. According to national estimates women account for almost 39 per cent of all HIV infections¹⁰.

While the impact of HIV and AIDS has not begun to fully emerge in India and AIDS-related orphaning is not yet occurring on a large scale, it is believed that India will soon account for the largest number of children orphaned by AIDS in the world. Currently, there are more children living with HIV-positive parents than children already orphaned, posing an immense future threat. As such, it is quite likely that the number of children who have lost both their parents will rise, increasing the number of dependents in households fostering children without parents. It is also believed that social institutions, as well as the streets, will be put under greater pressure as the number of children orphaned by AIDS increases. Another equally important issue is that of the children themselves, whose vulnerability to HIV and AIDS is expected to escalate as they come into contact with sexually exploitative situations.

In addition to the growing threat of HIV and AIDS, India is also estimated to have the largest population of street children. Within the Indian context, street children are defined as those children living on the streets, railway platforms, bus stands/addas or other areas, which are usually non-livable, but as these children often have no other options, they are forced to live in such places. In the majority of cases, these street children come from rural areas and different places from within the district or state they originate from or from an outside state. While street children come to cities due to various reasons, these may include:

- Poverty
- Quarrel with parents, siblings and/or other family members
- Lure of work in the cities
- Attraction to work in film industry or to become rich overnight
- Forced entry into sex work through trafficking
- Migrate with families who settle in hutments

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¹⁰ Policy Framework for Children and AIDS, India – July 2007

Street children suffer from destitution, neglect, abuse and exploitation. As these children constitute a marginalised group in the society, they consequently lack adequate relationships and access to major childhood institutions such as family, education, and health. Due to the nature of their transitory lifestyle, these children are continuously exposed to variables that increase their vulnerability to physical injury, health problems, substance abuse and sexual exploitation, which threatens their mental, physical, social and spiritual well-being. These children are also confronted with discrimination in numerous settings, and as a result, view health and social services with suspicion.

While street children face a spectrum of issues and challenges, a study¹¹ conducted in Chennai showed that 46 per cent of street children surveyed would like to live in a secure place, while 71 per cent were eager to change their present life. An additional 63 per cent of children expressed an ambition to do something meaningful with their future. While the vast majority of street children have a survival instinct and tenacity for survival among the day-to-day hardships of street life, this however, does not guarantee them a future.

Children affected by HIV and AIDS are often discriminated against in multiple environments such as schools, health facilities and orphanages, pushing them onto the streets and into the worst forms of child labour. As the Committee on the Rights of the Child has noted, children affected by HIV and AIDS may be pushed into sex work or other hazardous forms of labour "for money to survive, support sick or dying parents, or to pay for school fees¹²," thus leaving them vulnerable to discrimination due to their parents' HIV status and their work environment. According to the *Human Rights Watch Report: Future Forsaken,* "children and youth living on the street also face discrimination in public hospitals. Public hospitals refuse to treat them. They can't walk into the hospital and access health services. Even in an emergency situation, they are dependent on Childline, a helpline for children in distress run by NGOs and supported by the government and other NGOs to access health services in public hospitals."

To address the needs of street children, the Department of Social Welfare and the Department of Women and Child Development have undertaken initiatives to address issues such as resettlement and to build the capacity of these. Despite the work of these departments, in collaboration with numerous NGOs, the problems faced by street children continue to escalate. Coupled with the trend of falling into criminal and unsocial activities, the majority of these street children are also exposed to drug use, alcohol consumption, unsafe sexual practices such as multiple sexual partners, potentially leading to sexually transmitted infections (STIs) and HIV and AIDS. In addition, female street children often face the threat of sexual abuse including exploitation in sex industry, which exacerbates their vulnerability to STIs and HIV and AIDS. Consequently, a high percentage

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¹¹ http://www.skcv.com/street%20children%20in%20india.htm

¹² Committee on the Rights of the Child, General Comment 3: HIV AND AIDS and the Rights of the Child, para. 36; see Human Rights Watch, Police Abuse and Killings of Street Children in India (New York: Human Rights Watch, 1996), http://hrw.org/reports/1996/India4.htm).

of street children, estimated at 30-50 per cent, are reported to have suffered from STI at some point. While few cases of HIV and AIDS have been reported among street children, this is likely indicative of a low awareness of HIV and AIDS and inadequate access to testing services.

2.2 Child Labour and the Indian Child Labour Act: Theory vs Reality

2.2.1 Definition of Children

While the Convention on the Rights of the Child, which has been ratified by the Government of India, defines children as persons below the age of 18, several other definitions also exist. These multiple definitions on the one hand help expand the 'coverage' of children but on the other also blur the parameters.

Outside of this basic definition of a child, the legal conception of a child also varies, particularly on gender basis. More specifically, the age of majority is 18 years for girls and 21 years for boys under the Indian Majority Act. On the other hand, under the Indian Penal Code, the age of sexual consent for girls is 16 years, while no age is specified for boys. The Committee on the Rights of the Child detailed in its concluding observations of January 2000, "in light of Article 1, the Committee is concerned that the various age limits set by the law are not in accordance with the general principles and other provisions of the Convention. Of particular concern to the Committee is the very low age of criminal responsibility under the Penal Code, which is set at seven years; and the possibility of trying boys between 16 and 18 years as adults. The Committee is concerned that there is no minimum age for sexual consent for boys. The Committee is further concerned that minimum-age standards are poorly enforced (e.g. the 1929 Child Marriages Restraint Act)."

As such, these different gender and age specific criteria under various laws confound the very definition of a child. While there are several legislative measures and definitions in place, these often do not mirror the ground realities in India, leaving the overall population of children subject to a void of various social and economic scenarios that perpetuate their vulnerability to HIV and AIDS.

2.2.2 Brief Overview of Policies Related to Children

Over the years, the Indian Government has enacted several policies and legislative measures against child labour. Article 24 of the Indian Constitution clearly states that "no child below the age of fourteen years shall be employed to work in any factory or mine or employed in any hazardous employment" (Constitution of India cited in Jain 1985, 218). Article 39 (e) directs State policy such "that the health and strength of workers ... and the tender age of children are not abused and that citizens are not forced by economic necessity to enter vocations unsuited to their age or strength" (Constitution of India cited in Human Rights Watch 1996, 29). The Bonded Labour System Act of 1976 fulfills the Indian Constitution's directive of ending forced labour and "frees all bonded labourers, cancels any outstanding debts against them, prohibits the creation of new bondage While few cases of HIV and AIDS have been reported among street children, this is likely indicative of a low awareness of HIV and AIDS and inadequate access to testing services. agreements, and orders the economic rehabilitation of freed bonded labourers by the state" (Human Rights Watch 1996, 30). In regard to child labour, the Indian Government implemented the Child Labour Act in 1986 to "prohibit the employment of children who have not completed their 14th year in specified hazardous occupations and processes" (Narayan 1988, 146). However, the International Labour Organization (ILO) Convention Number 138 suggests that the minimum age for employment should not be less than 15 years, and thus the Child Labour Act of 1986 does not meet this target (Subrahmanya 1987, 105).

The Elimination of Child Labour Programme, is supported by a budgetary allocation by the government of 6,020 million rupees (about US\$ 131 million) during the Tenth Five-Year Plan 2002-2007 to cover 250 districts out of the total 601 districts in the country during the plan period.

In August 1994, the then Prime Minister of India announced a proposal for the Elimination of Child Labour Programme, pledging to end child labour for two million children in hazardous industries (as defined in the Child Labour Act of 1986) by the year 2000. The programme revolves around an incentive of a 100 rupee payment and the provision of one meal per day for children to quit work and enter non-formal schooling (Human Rights Watch 1996, 119-120). The programme is supported by a budgetary allocation by the government of 6,020 million rupees (about US\$ 131 million) during the Tenth Five-Year Plan 2002-2007 to cover 250 districts out of the total 601 districts in the country during the plan period. The project, in line with the ILO's International Programme on the Elimination of Child Labour (IPEC), seeks to develop an integrated multisectoral approach through strengthening public education as a measure to prevent child labour, providing vocational skills training to adolescents in the age groups of 14-17 years and income generating opportunities to the families of child labour.

In another effort geared to reduce child labour, in October 2006, the Indian Government elected to prohibit the employment of children as domestic servants or as workers in dhabas (roadside eateries), restaurants, hotels, motels, teashops, resorts, spas or in other recreational centres. As an amendment to the Child Labour (Prohibition & Regulation) Act, 1986, the Ministry of Labour has warned that anyone employing children in these categories would be liable to prosecution and other action under the Act.

While a spectrum of policies against child labour are in place within India and are in accordance with the Constitution of India, the issue of child labour still remains. This problem will likely remain if adequate alternatives are not provided to those families and children living within the realm of poverty and subsequently have limited means for generating income. In the current situation when HIV and AIDS is increasingly becoming a major threat to the country's sustained growth by affecting people in the age group of 15-40, the primary income generating segment, it is critical for government-based initiatives to provide care, support and treatment programmes to affected families, which will lessen both the physical and financial burden on children.

The National Plan of Action for Children 2005 has identified 12 key areas in regard to rights and entitlements of children. These include:

Addressing and upholding the rights of children in difficult circumstances

- Monitoring, reviews and reform of policies, programmes & law to ensure protection of children's interest and rights
- Ensuring child participation and choice in matters of decisions affecting their lives.

The National Charter for Children 2003 also state that "All matters and procedures relating to children, viz. judicial, administrative, educational or social, should be child friendly. All the procedures laid down under the juvenile justice system for children in conflict with law and for children in need of special care and protection shall also be child friendly".

2.2.3 Child Labour

It is estimated that India has the largest number of working children, ranging from approximately 11.28 million (Census of India, 1991) to 23.2 million as estimated by the ILO, with other unofficial sources stating there are 100 million working children in the country. These figures, however, strongly contradict that given by the Government of India, which estimates about two million children who are employed in hazardous industries, and other occupations and processes.

While child labour is a complex problem, it is inherently rooted in poverty. Taking into account the fact that 26 per cent (260 million) of India's population lives below the poverty line, child labour is often deemed a necessity by families to augment family income. A study conducted by the ILO Bureau of Statistics found that "children's work was considered essential to maintaining the economic level of households, either in the form of work for wages, of help in household enterprises or of household chores in order to free adult household members for economic activity elsewhere" (Mehra-Kerpelman 1996, 8). In some cases, the study found that a child's income accounted for between 34-37 per cent of the total household income, thus concluding that a child labourer's income is important to the livelihood of a poor family. This study, however, was based on responses given by the parents of child labourers whose answers may reflect a bias to substantiate their decision to send their children to work. Again, given the limited alternatives for income generation among poor families, this decision likely reflects the reality families are faced with, including the nonexistence of a social welfare system and inadequate access in obtaining financial loans.

Additionally, with the growing number of HIV cases and AIDS deaths, children from the affected families are forced to enter the labour force. Despite the existence of several policies against child labour, children in India continue to work in various environments, many of which increase their vulnerability to HIV and AIDS. And while many earn a comparably reasonable income, due to limited secured saving options, they tend to spend these savings on drugs, alcohol, and sex workers, making them more vulnerable to HIV and AIDS.

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Banking Options for Children Orphaned by AIDS and made Vulnerable by HIV and AIDS

The majority of street children tend to spend the earnings on a daily basis, allocating half for food and the other half on harmful activities such as smoking, gutka (chewing tobacco), alcohol, drugs (mostly ganja and whitener)

3.1 Introduction

Over the course of this study, discussions with several NGOs, social workers, field workers and children revealed that these children were typically engaged in petty jobs in order to earn a living. In fact, a significant proportion of children earned a substantial income, ranging between 50-200 rupees per day, depending on the work they were engaged in. The children in this study were characteristically employed in the following roles:

- Rag pickers (collect and sell waste papers, plastic material, scrap metal, and empty bottles)
- Hotel boys
 - Dhaba assistants
 - Loading/Unloading
 - Cleaning of cars and autos
 - Shoe polishing
- Selling water, sweets, and biscuits
- Selling newspapers and flowers
- Coolies
- Casual workers
 - Mechanic shops
 - Match making factories
 - Fire work factories
 - Diamond cutting industries
 - Carpet making
- Rickshaw pullers
- Begging
- Theft/pick-pocketing

The above list of various occupations is by no means exhaustive. Curiously, in all these occupations children are subjected to sexual abuse and exploitation.

Characteristically, the majority of these street children tend to spend the earnings on a daily basis, allocating half for food and the other half on harmful activities such as smoking, gutka (chewing tobacco), alcohol,

drugs (mostly ganja and whitener) and sex workers (children aged above 12). Typically, these children do not have perception of savings, especially for long-term savings – as they believe in "daily earning, good eating and enjoying." However, a large number of children try to save their money when employment is not available, often depositing their earnings with those people who buy the goods collected (bottles, rags, etc), with friends or peers, or with the shop keepers whom they purchase their food from. Again, these deposits are typically on a short-term, day-to-day basis, but may extend to several weeks. There are occasions, however, where the children are not returned a portion or all of their savings, due to deceptive acts by those individuals with whom their earning are deposited. While accounting for a smaller population of street children, some also save money to send back home or to give to their parents when returning home.

Sorry, I don't need to save anything! – Who knows the future?

Azam Khan, a 15 year old boy from Samastipur district, ran away from home after quarrelling with his parents. Azam belonged to a very poor family with three siblings, and with both of his parents working as casual labourers in agriculture sector, they where without a job for nearly 60 per cent of the time. With no other source of income to meet their daily needs, the family often went without food, resulting in daily fights between the parents and Azam and his siblings subject to physical abuse.

One day, Azam was again beaten by his father, which led him to board a train for Delhi. After arriving in Delhi, Azam had nowhere to go and roamed the city for days begging. He later joined a group of children living on a railway platform, who supported themselves as rag pickers, earning between 50-70 rupees per day.

Unfortunately, Azam was sexually abused by the elders in this group and started taking drugs (whitener), spending 50-60 rupees of his daily earnings on this. The remainder of his money was spent on food. At one point, he came into contact with the Salaam Baalak Trust children's pick-up point at New Delhi Railway Station. Here, Azam started attending counselling sessions and was soon spending 4-5 hours per day at day shelter run by the NGO, while sleeping at a nearby night shelter.

Azam continues to work at the runway station collecting empty plastic bottles. Although he is happy with his present life, Azam still holds uncertainties about his future and consequently doesn't believe in savings. Azam also continues to use drugs, but does not engage in sexual activities. With the continued support of Salaam Baalak, there still is hope for Azam to continue to build a secure future for himself. While smaller girls are also found engaged in rag picking, they also face the threat of sexual abuse by the boys with whom they move in with or with boyfriends. It was mentioned by most NGOs and the girls with whom the study team interacted with, that as soon as they attain puberty, not many girls are visible on the streets, largely indicative of their shift to being sexually exploited. In addition, this is not limited to young girls; young boys are also forced into sexual exploitation.

3.2 The Range of Existing Saving Options

3.2.1 Savings and NGOs

Another savings option utilised by a number of children was through the shelter home where they lived, the majority on a short-term deposit/savings basis, with a few children depositing money on a regular basis. Generally there are three types of child care homes:

- Child care and shelter homes
- Day care homes, and
- Addas or meeting points

Both national and international donors have begun supporting children throughout their education and in securing employment. The NGOs open a joint bank account in the name of the child and the NGO, with the unspent money given to him/her when they become an adult, and/or the money being used for further education or settlement.

The children in child care and shelter homes and who are registered with these homes, are provided with shelter, food, and clothing with other needs also being taken care of. Those children, who have shown interest for further studies and have expressed a desire to secure a brighter future for themselves, are admitted after being observed by staff in the day care centres, night shelters or during counselling sessions. These children are then enrolled in formal schools and attend counselling sessions to develop various skills. These children are not allowed to go out of these centres unless for special occasions or other urgent needs. After passing out of their matriculation, these children are sent for vocational trainings, such as tailoring, computer operating, driving, and repair work, or are encouraged to pursue further studies. While the NGO may in some cases help a child to secure a job, others may receive loans from banks or other financial institutions, which can be put towards opening a small business. The children are permitted to stay at these homes until the age of 18, with their experiences hopefully having contributed into building responsible citizens. With retention rates of more than 90 per cent, these homes have demonstrated to be a valuable option for street children. However, only a small portion of street children are interested in these homes, leaving a large number of children on the streets.

The probability of savings for these children, however, is limited as they do not work and/or receive money directly. Increasingly, both national and international donors have begun supporting children throughout their education and in securing employment. In such cases, the NGOs open a joint bank account in the name of the child and the NGO, with the unspent money given to him/her when they become an adult, and/or the money being used for further education or settlement.

Those children who either visit day care centres, night centres or meet at addas, encounter the greatest difficulty in saving money. While these

Doing what they can: An example of a NGO's encouragement and assistance

Three girls orphaned by AIDS - Jayanthi (16 years), Navya (15 years) and Sunitha (16 years) - having completed their 10th standard were encouraged by VMM to attend Auxiliary Nurse Midwife courses. The three girls were admitted to the course, but as the training is financed through scholarships, this requires the girls to have their own bank account. As it is difficult for minor to open a bank account without a co-signature of a parent/guardian, these girls found it difficult to open an account for their scholarships. However, with the assistance of VMM signing as their guardians, the girls are now able to secure the funding needed for their training.

children earn good money, their savings is spent on day-to-day needs, with a large portion allocated to habits such as drug use or going to sex workers. Some of this money may be deposited with local shop keepers or peers, or in a secret place known to them. As mentioned previously, these street children end up losing a part or all of their savings and consequently, several NGOs have developed ways for children to safely deposit their money.

Several donors have indicated the value in programming initiatives that allow a child to save and responsibly spend money, often after the age of 14 years. Such successful endeavours are being implemented by several NGOs including PWDS (Madurai), IRDS (Hyderabad), Care and Share (Vijayawada), and Arthik Samata Mandal (Suryapeth), with children earning and saving money from pocket money, and making and selling small crafts such as jute bags and paintings while staying at child care homes. Additionally, NGOs such as VMM and Pragathy have printed their own passbooks, providing one passbook to each child who are encouraged to enter their deposit and withdrawal details. After the money from these deposits has accumulated, it is then deposited in a bank account, which is opened separately in the name of NGO. Most NGOs keep some money on hand, with the understanding that these children may come at any time requesting part of their deposited money. If the savings exists, the NGOs return the money to the child, and if a large sum (more than Rs. 500/-) is withdrawn, the child is asked the reason for the withdrawal and receives the cash if a satisfactory answer is given. Such projects have resulted in increasing savings habits among children. For example, Salaam Baalak Trust (New Delhi) has implemented a similar method for depositing money by keeping a register for each child's financial activities. The balance of money left on a weekly basis is then deposited into a bank account opened in the name of Trust with two signatories. However, as mentioned by a majority of NGOs, in most cases the deposits being made by the children are aimed to meet their short-term needs, with very few children considering savings on a long-term basis.

Several donors have indicated the value in programming initiatives that allow a child to save and responsibly spend money, often after the age of 14 years.

Helping to build the capacity of children affected by HIV and AIDS to work and save

After losing their father to AIDS, two sisters Laxmi (14 years) and Seetha (12 years), along with their mother moved in with their aunt and uncle. The family was supported by the uncle, a truck driver who also died of AIDS. Because of additional financial constraints after the death of their uncle, the two sisters were forced to find work after school at a match stick factory, which provided the family with minimal earnings. Soon, the girls had no time for any recreational activities.

Through regular home visits, a local NGO, Blossom, became aware of the plight of these girls. As a result, Blossom initiated a sustainable income generating programme for Laxmi and Seetha and other children in similar circumstances. This involved door-to-door sales of detergents, washing powder, and bath soaps. Blossom had arranged the initial amount required for an interest free loan, which the girls are now returning on monthly basis, depending on their savings. Blossom is also helping other children, including those affected by HIV and AIDS, with similar activities and is also managing their accounts, and also suggested alternative ways for these children to earn a livelihood. They also encourage children to continue their education through to the high school level, and depending on their interest, refer them to suitable vocational trainings in an effort to allow these children to stand independently. Blossom's efforts to improve the financial security of children have now led the NGO to encourage funding from local banks and post offices in the form of loans to help additional children.

In some cases NGOs such as VMM are experimenting with different ways to cultivate saving habits in children. One such example is the formation of groups of children (typically 4-5 children) who have expressed interest in savings and wish to enter some vocation once they have saved the necessary amount. These children are asked to save money while completing some form of educational training. When the saved amount reaches Rs. 5,000, the NGO then loans an equal amount to the child, encouraging them to open a small business. Once the amount is more than Rs. 5,000, a lottery is held and the child's name that is picked is provided with the first saved money with an equal amount loan. The group of children continues to deposit money and when the savings are again more than Rs. 5,000, and the loan amount is repaid by the first beneficiary, another child gets a chance to obtain a loan and open a new business. Thus far, three children have benefited under this scheme, which is referred to as P3 or "Pragathy Parivartan Prayas".

In some of the day care centres and shelter homes (e.g. Vidiyal Shaki Project, Madurai), peer groups are formed among the different age

brackets of children, coming together to perform various activities. Depending upon their age, these groups deposit 2-10 rupees per day with a care centre employee, and on special occasions such as festivals, these children can collect several thousand rupees, which may be used to buy clothing, toys and sweets. The children decide as a group as on how much money should be spent and on what. Within these groups, deposits are typically done on a regular basis. Some NGOs are also working with other vulnerable children, particularly those children affected by HIV and AIDS. These NGOs also run schemes to help encourage saving habits and the utilisation of such money in meaningful ways to the children.

3.2.2 Need for Banking Options: Some Observations

Having discussed the various methods children and families are adopting as saving options, it is clear that the absence of reliable options and the lack of confidence among children that their money will be safe are two difficult barriers to overcome. Even though NGOs have played a major role in encouraging children to consider mechanisms for long-term savings, there are many hurdles present which have prevented them from doing so. Regardless, it was felt that access to banking options would empower children to utilise their savings more effectively, while building their confidence and attitude toward a better future. Some of the reasons given during discussions with children and NGO staff as to why banking options are required are highlighted below.

Increasing confidence: Those children who deposit their money with NGOs and/or the people whom they know, lack the certainty in knowing they would get their money back. Through opening a bank account, children would not only be given assurance and guarantee of their money, but also will gain confidence in the skills needed to maintain their savings. This will also catalyse an interest in future savings, which can be built upon through the education of such children towards using saved money for future prospects, which will help bring about positive changes in their thinking processes, understanding, behavior and perceptions.

Paying for education: Those children receiving scholarships are often required to open a bank account as the money they receive is in the form of cheques. Allowing children access to banking privileges will therefore help simplify this process, allowing children to manage their scholarships and accounts on an independent basis and building self-confidence.

Building a future: With increasing numbers of orphans, partially due to AIDS in states such as Maharashtra, Tamil Nadu and Andhra Pradesh, there is a growing population of children becoming independent who want to have savings for their future. Having access to a banking account and the ability to receive loans are two ways in providing children with the resources in building their independence.

A mother's desire to save for her child

Gayatri, a woman living with HIV, has lost her husband to AIDS and is now working to support her child. Gayatri, an educated woman, has secured a job through the help of the NGO, Blossom, and earns 1,500 rupees per month. Of this amount, she is able to save 800 rupees on a monthly basis, which is deposited in a bank account. Unfortunately, Gayatri and her son do not have the support of their husband's family, who have refused to take care of the child. She has become increasingly worried about the future of her son, wanting to provide a financial base that permits him to stay off the streets and build a future for himself. While Gayatri has managed to save money for her son, there is still a great amount of uncertainty around whether he will be able to access these funds after her mother.

Savings for children: An important tool to foster confidence and secure a brighter future

Jeenetha, an eight year old boy, lost both of his parents to AIDS. Fortunately, Jeenetha is not HIV positive, but now has no one to take care of him. When his parents died, he was studying in class III, but soon had no money to pay for schooling and was forced to work in a tea stall as assistant. He was earning 15-20 rupees per day, which was hardly sufficient for his daily food expenses. On occasion, Jeenetha would visit a day care home run by a local NGO to get free lunch. He soon expressed his interest in further studies to the NGO, and convinced by his behaviour, the NGO arranged for his schooling. While studying, Jeenetha continued working at the tea stall to save money.

Today, he is studying in class VI and wants to graduate. To work towards this goal, he saves 20-30 rupees on a daily basis and deposits the money with NGO through passbook, taking money back for educational needs or for festivals. Jeenetha's confidence is growing day-by-day and he has now started working as a peer educator with the NGO where he helps counselling other children. With his hard work and determination, Jeenetha has saved about 2,000 rupees, which he wants to utilise for further studies to become a teacher.

At present many street children are opening bank accounts jointly with local NGOs through a passbook. However, as the NGO project may be for a limited period, this may mitigate the feasibility of long-term savings options for those children who have expressed a desire to build upon their savings. In addition, parents living with HIV and AIDS have also expressed a desire to set aside money in an account for their child's marriage and/or education, but cannot open a bank account in their child's (a minor) name. These parents often then open an account in a relative's name, but in several instances, the money is not returned to the child. Increasing the banking options for parents to open an account in their child's name is yet another way to help ensure that their children are provided for in the future.

Long-term savings: At present many street children are opening bank accounts jointly with local NGOs through a passbook. However, as the NGO project may be for a limited period, this may mitigate the feasibility of long-term savings options for those children who have expressed a desire to build upon their savings.

Other options for street children: In case of school-going children, they have an option to open an account at the local post office under the "Sanchiyika" scheme through the schools. However, such options are not available for street children, whose only option for savings is to deposit their money with local shop-keepers or a person known to them. As they rarely keep a record of their savings, they often lose the major part of their savings when the shop-keepers return only a part of the deposited money or refuse to return the money to the children. The implementation of similar schemes for street children in similar local organisations

will likely provide a safe option for street children to save money. Another alternative option is to adapt a scheme similar to the Provident Fund within the un-organised working sector, encouraging both adults and children to open accounts and cultivating their habit to save on a regular basis.

3.2.3 Counters for Banking Options

While there are several factors favouring the need for banking options among street children, there are also several ground realities that may make such options impractical. During discussions with some of the NGOs, several staff also identified that the majority of street children are too young to take on the responsibility of opening and maintaining their own bank account. Also, the need for basic education was felt to be an essential foundation to provide children with the essential tools needed for savings. However, most of the NGO employees also agreed that such savings options should be made available once the child is over the age of 14, and as commented by one NGO representative, "at this age they become more responsible and start understanding the usefulness of saving and are also in a position to handle their bank accounts independently."

From the bank perspective, it may not be feasible for the banks to keep records of the deposits and withdraws of petty amounts, coming out of such accounts on a daily basis. Consequently, the banks may need to increase their staff and implement certain criteria in regard to the transaction amount and number of account withdrawals/deposits.

In the case where the child is grown and literate, there may exist a possibility that he/she would prohibit the joint account holder (guardian) to withdraw money once he/she becomes the major holder of the account. However, in the case where the child is young, and having lost their parent(s) to HIV and AIDS, there exists a substantial risk in the ability of the child being able to withdraw the money from a joint account.

In addition, there is a limited understanding of banking procedures among many of the people living in smaller villages, including children and adolescents. There is not only a need to simplify the bank account opening and operating procedures, but there is also a need to generate awareness among people about the availability of such facilities. The procedures involved in people obtaining loans also require simplification.

3.3 Existing Legal Framework

Current bank practice allows minors, defined as those under the age of 18, to open joint bank accounts with their guardians. In rare circumstances, some banks are allowing minors above 12 years of age to open and operate a savings account. In practice, minor saving schemes apply only to those children who are not orphaned and whose parents are account holders, thus, completely closing off the option to orphans and street children.

Although there is no official study available on banking services available to orphans, the general response of some of the banks to such requests has been negative. Keeping in mind the constitutional objectives to provide children opportunities to develop in a healthy manner, with conditions In practice, minor saving schemes apply only to those children who are not orphaned and whose parents are account holders, thus, completely closing off the option to orphans and street children. of freedom and dignity, and to protect them against moral and material abandonment, there is a need to provide access to banking services to orphans who are engaged in income generation activities. Within this context, it is worthwhile to note the following observations of the Supreme Court in the case of Bandhua Mukti Morcha vs. Union of India (1977,10 SCC 549):

"Pragmatic, realistic and constructive steps and actions are required to be taken to enable children belonging to weaker sections of society to enjoy their childhood and develop their personality. Child labour, therefore, must be eradicated through well-planned and focused poverty alleviation, programmes and through imposition of trade sanctions in employment of children, etc. Total banishment of employment may drive children into destitution and other mischievous environments, making them vagrants, hardened criminals and prone to social risks, etc. Therefore, while exploitation of the child must be progressively banned, other simultaneous alternatives to the child should be evolved including providing education, health care, nutritious food, shelter and other means of livelihood with self-respect and dignity of person."

Although not in the context of orphans, exclusions of large sections of the population from banking services have been noted by the Reserve Bank of India. In the recent monetary policy announcement by the Governor of the Reserve Bank of India, the following statement was made:

"Financial Inclusion: The annual policy Statement of April 2005, while recognising the concerns in regard to the banking practices that tends to exclude rather than attract vast sections of population, urged banks to review their existing practices to align them with the objective of financial inclusion. In many banks, the requirement of minimum balance and charges levied, although accompanied by a number of free facilities, deter a sizeable section of population from opening/maintaining bank accounts. With a view to achieving greater financial inclusion, all banks need to make available a basic banking 'no frills' account either with 'nil' or very low minimum balances as well as charges that would make such accounts accessible to vast sections of population. The nature and number of transactions in such accounts could be restricted, but made known to the customer in advance in a transparent manner. All banks are urged to give wide publicity to the facility of such a 'no-frills' account so as to ensure greater financial inclusion."

Given these views, it is hoped that current financial policy will continue to evolve, aligning itself with the growing needs of orphan and vulnerable children to save and invest in a future for themselves.

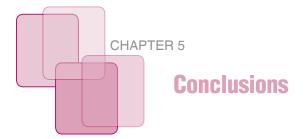


The study findings have led us into an important area of saving options and opportunities for the most vulnerable and marginalised sections of society – the children living in difficult conditions. The study findings have indicated a strong potential and need for small savings among the most vulnerable of children. On the strength of the findings, some key recommendations for deeper deliberations and action are suggested here:

- There is a need to create enabling mechanisms in order that commercial banks are able to modify their internal rules regarding opening the accounts of minors and permit opening deposit accounts of minors who are orphans without insisting on a guardian becoming a joint account holder and other requirements such as ration card and proof of permanent residence.
- As a social welfare measure a scheme needs to be formulated by the government for "Banking Service to Orphans" and all the banks need to be given targets to provide access to banking services to certain minimum number of orphans. Such scheme can be given a status on par with Priority Sector Schemes of the government. While formulating the scheme, it can be left to the discretion of the banks to decide whether any loan facility may also be extended to the minor. It may be noted that opening deposit accounts by relaxing relevant rules does not pose any perceivable risk to the banks.
- It is imperative to make suitable moderation in the 'Know Your Customer' (KYC) norms prescribed by the Reserve Bank of India to facilitate opening of accounts of orphans; (production of proof of residence, ration card, age, birth date etc.). While moderating the KYC norms, it is important to take into account that children in difficult circumstances can be introduced by some NGO working for the welfare of orphans, destitutes, street or pavement children.
- The commercial banks need to devise a special product of safecustody services to parents/guardians of working children and also adopt liberalised norms for opening accounts of minors jointly with guardians.

These suggestions will be in conformity with the Directive Principles of State Policy as enshrined in the Constitution of India and need focused attention as a welfare measure for destitute and orphan children many of There is a need to create enabling mechanisms in order that commercial banks are able to modify their internal rules regarding opening the accounts of minors and permit opening deposit accounts of minors who are orphans without insisting on a guardian becoming a joint account holder and other requirements such as ration card and proof of permanent residence.

whom are afflicted by AIDS and are HIV positive. Any policy or procedural impediments or systemic constraints in existing banking practices and know your customer norms need to be addressed for achieving the primary objective of child welfare. The commercial banks need to take up this task as a social responsibility and provide access to the banking services for the orphans.



Poverty and the increasing burden children are facing in the light of HIV and AIDS are resulting in an escalating number of child labourers and street children. As such, this study has clearly sought to reconfirm the link between child labour and the challenges this poses to children in securing a solid future. Over the course of the study, it was observed that a large population of orphan and vulnerable children in India are working and earning substantial incomes despite the presence of a newly amended Child Labor Act, with a growing number of orphan and vulnerable children considering the option of savings. While the majority of children observed in this study have opted for short-term savings, the means of this spending varied, with children spending their earnings on various day-to-day needs, drug and alcohol use, festivals, or money to be sent back home.

In absence of saving options with banks and other financial/commercial institutions, these children have identified either their own way of savings or have sought support from local NGOs. With both of these situations, children are faced with some uncertainty in regards to receiving their savings back, as and when they want. Such doubts have dissuaded children in coming forward to secure a means for savings, often resulting in the spending of daily earnings on misguided expenditures such as unprotected sex, which may also increase their vulnerability to HIV and AIDS.

It is time now to consider amendments to certain provisions of banking laws in order to reflect the existing needs of children and be in tune with Children are faced with some uncertainty in regards to receiving their savings back, as and when they want. Such doubts have dissuaded children in coming forward to secure a means for savings, often resulting in the spending of daily earnings on misguided expenditures such as unprotected sex, which may also increase their vulnerability to HIV and AIDS.

A lesson learned, but left with limited alternative options

Surya (10 years) and Rama Krishnan (11 years) attend a day care shelter and work as rag pickers in Madurai, depositing their earnings in a 'chit' started by a shopkeeper, where many other children also deposit their earnings. To lure children and even adults, he printed account sheets containing numerous squares representing a deposit of five rupees, keeping one sheet for himself and giving the other to the child. With every five rupees deposited,

the child would cross out one square so that he/she could track their savings with 'alleged' interest to be paid by the shopkeeper. This shopkeeper, however, disappeared one day, leaving approximately 100 children without savings that individually amounted up to 3,000 - 6,000 rupees. Many of the children have lost confidence in saving their earnings with local individuals, leaving them with limited savings options.

the ground realities.. One issue to be addressed is further determining the need and feasibility of implementing access to banking services to minors 14 years of age and above, which have secured employment. Another area which requires attention is the formulation of scheme related to banking options for orphans and vulnerable children by the Government of India as part of its social welfare measures. Such focused and targeted schemes need to be accorded highest attention. To help achieve successes, it is important that commercial banks are not only given targets to provide access to banking services to a minimum number of orphans but also create incentives for desired results. Such a scheme can be given a status on par with Priority Sector Schemes of the government. Making suitable relaxations and moderations to the 'Know Your Customer' norms keeping in mind the special conditions of orphan, destitute and vulnerable children would be another step in the right direction. In this instance, NGOs could

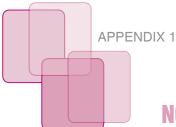
Looking forward to a bright future

At the age of eight and with two friends, Surjeet ran away from his home in Uttar Pradesh to New Delhi to earn money. Surjeet, however, reached New Delhi alone as his two friends either exited the train earlier or were picked up by the police. He remained in Delhi without food for two days until he was approached by 2-3 boys living on a railway platform who provided him with food. Along with them, Surjeet started to earn money as a rag picker, earning about 40-50 rupees per day. From the beginning, Surjeet thought of saving money to send back home to his family. After saving 10 rupees per day for year, Surjeet went to collect his money from the individual he sold empty bottles to. Initially, the man refused to give Surject any of his money back, but finally gave Surject only a portion of savings, only 200 rupees of the 3,000 rupees he saved.

After about four years of spending his life on streets he came in contact with Salaam Baalak Trust's pick-up centre. There, Surjeet attended counselling sessions and was taking his daily meal at the centre. He later started working at a tea shop as attendant for 6-8 hours, earning 500 rupees per month in addition to the money he was earning by rag picking. In the meantime, Surjeet also started to learn how to read and write while attending the day centre run by Salaam Baalak Trust. With the encouragement of the day care centre workers, he started maintaining savings from his daily earnings, which he deposited with the NGO. On a weekly basis, Salaam Baalak Trust deposits this money into a bank account, with the child having the ability to withdraw the money when needed. The NGO also encouraged him to have a life insurance scheme for 30,000 rupees, which Surjeet was able to invest 2,000 rupees towards per year. With the remaining amount of his earnings, Surjeet sent a portion back to his family.

Today, at 19 years of age, Surjeet, with the help of Salaam Baalak Trust, has been able to secure a loan from the bank to purchase an auto rickshaw and get his driver's license. Surjeet now earns 150-200 rupees per day and has now moved into a room that he pays for on his own. He said, "Trust people helped me a lot in changing my life. Helped me to save money. Today I have my own auto rickshaw and a driving license. I have taken a room on rent and living their nicely. I am sending some money back to my home to help them meet their expenses. I intend to marry after 3-4 years and have my own family. Thanks to Salaam Baalak Trust and to the in-charge, I still save my money. Without their help I would still have been on the streets".

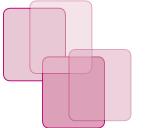
serve as intermediaries working to link and introduce orphans to local banking facilities. The issues of banking among vulnerable and orphan children must be done in line with the Directive Principles of State Policy with an increased focused on welfare measure for children, many of whom are affected by HIV and AIDS and living with HIV. Any constraints in the implementation of such banking practices must be resolved in order to achieve the primary objective of child welfare, with banks giving considerable importance to the task of 'social responsibility' while providing access to banking services for orphans and vulnerable children.



NGOs Visited by the Consultant

In addition to holding detailed discussions with staff of Alliance India, several NGOs, both partners of Alliance India and others working independently or with other donors, were visited where staff and children were interviewed. The following list provides the NGOs, locations and individuals contacted during the visits.

S. No.	Name of NGO/Institution	Places
1	Salaam Baalak Trust	New Delhi (pick-up point, children's home, railway
		station)
2	Navjyoti Delhi Police Foundation	New Delhi
3	Child Survival of India	New Delhi
4	Sahara	New Delhi
5	Pragathi	Hyderabad, Andhra Pradesh
6	IRDS	Hyderabad, Andhra Pradesh
7	Divya Disha	Hyderabad, Andhra Pradesh
8	VMM	Vijayawada, Andhra Pradesh
9	Arthik Samata Mandal	Vijayawada, Andhra Pradesh
10	Care & Share	Vijayawada, Andhra Pradesh (children's home)
11	CHILDLINE	Vijayawada Shelter Home, Andhra Pradesh
12	Arthik Samta Mandal	Suryapet, Algonda District, Andhra Pradesh
13	PWDS – Alliance Project	Madurai, Tamil Nadu
14	Vidiyal – Shakti Project	Madurai (bus stand, day care centre), Tamil Nadu
15	ICCW – Alliance Project (Blossom Project)	Shiv Kashi, Tamil Nadu
16	Cracker / firework factory	Shiv Kashi, Tamil Nadu
17	Printing factory	Shiv Kashi, Tamil Nadu
18	Houses (2 orphan girls)	Shiv Kashi, Tamil Nadu
19	1 single parent (mother)	Shiv Kashi, Tamil Nadu
20	2 girls (cracker factory home based workers)	Shiv Kashi, Tamil Nadu
21	Premises of different NGOs	
	street children	
	day homes	Now Dalhi, Andhra Bradaah, Tamil Nadu
	night shelters	New Delhi, Andhra Pradesh, Tamil Nadu
	villages	
	HIV positive children	
22	Blossom (HIV positive women who have lost	Shiv Kashi, Tamil Nadu
	their husbands to HIV and AIDS)	



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