

A Socioeconomic Characteristics and Health Problems of Trash Picking Children in Karachi

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Abstract

Trash picking is one of the humiliating and hazardous works which is also done by the children and now it has become a susceptible form of child labour. Present study identifies the main factors responsible for the trash picking and which kind of health issues these trash picking children are facing while picking trash from the dump of heap in the context of socio economic activities. Present study was conducted in seven towns each from two district of Karachi, district south and district central Karachi. A sample of 200 TPC aged 6-17 years was selects to investigate the objective of the study. Data was collected through well structure interview schedule questionnaire because respondents were illiterate. Non probability sampling technique was adopted for these trash picking children. Descriptive and inferential statistics were used to analyze the selected sample of the study. The present study investigated that 64% trash picking children were illiterate while 43% of these children belong to the afghan ethnic group who have migrated from the neighbouring country Afghanistan. About 63% and 51.5% of TPC responded that they belong from nuclear family structure and secondly getting meal twice a day is main factor responsible for trash picking respectively. Getting meal twice a day, forefather occupation, nuclear family structure and unemployment of father were 51.5%, 24.0%, 63.5% and 12% respectively main factors responsible for trash picking.. In present study about 32%, 20%, 4%, & 20% TPC were facing the diseases of skin problem, digestion problem, cough and respiratory problem respectively.

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Rest of the other Diseases which these TPC were facing they are back & joint pain, fever/headache and tuberculosis as well. Due to poor economic condition these TPC even cannot afford the medical treatment of their diseases so almost 36% of the respondents said that they get self medication, when they face any disease and 33% respondents explored that they get treatment from the government hospitals. It is suggested that education should be free and hunger should be addressed properly to meet their food needs.

Key words: TPC; Socio Economic; Health Issues; Karachi.

1. Introduction

Trash picking is also one of the humiliating and hazardous works which is also done by the children. Trash picker is defined as “a person who collects the recyclable and reusable items from road side dustbins, garbage heaps, drains, hospitals, clinics, houses and streets which are thrown by the others for selling to the local junkyard, nearby shops and middle man to earn something for their livelihood [13]. These trash picking children are found around the heap of trash hanging their plastic or jute bags on their shoulder and collect the waste material, which they carry from one place to another place. These trash picking children, collect bottles, syringes, broken pieces of glasses, cutlery, metal pieces, scrap, plastic, wood, shoes, clothes and also they get food for their personal consumption. Trash picking is a kind of an inferior and hazardous work, which had a bad impact on the physical and mental health of children. These trash picking children are working in hazardous environments and due to their daily practice of collecting trash from the garbage heaps and dustbins, these children are victim of several kinds of diseases. These children sit around the garbage heaps and also acquire the contaminated food which leads them to serious diseases. These trash picking children sell out their trash and waste to earn their livelihood. Most of these children are the only source of income for their family. Trash picker children; mostly belong from the rural and informal settlement areas (Katchi Abadi/slum) where they don't have enough facilities of health, education, drinking clean water, shelter and food. Mostly these people live near railway platform, bridges and pavements where there are no facility of pure drinking water and electricity. Trash picking children continue their practices of collection of recyclable and reusable items throughout the years because they think so that it is the only source of income for their family [12]. Despite all this they don't have as such any other skill to earn money for their livelihood and that's why they take this trash picking work easy and feasible for them to survive.

Development of a country merely depends upon the bright future of its children. Children are the assets and are being considered the future of every nation. In developed countries children are being well educated and treated. But unfortunately in developing countries the future of children is at risk. The trash picking profession is considered one of the dangerous works in the world, even in the countries like the United States in aspect of health issues [7]. Pakistan is also a developing country and facing a lot of social problems like terrorism, unemployment, illiteracy, poverty, low economic growth, poor quality of life and poor health facilities. Despite all these social issues, child labour has also become a menace for Pakistan because of economic decay on the one hand and rapid growth of population on the other hand but still poverty and unemployment indicators are exaggerating. By keeping in view all the existing social issues in Pakistan, these children are compelled to work in hazardous and unfavourable environment. Before introducing the phenomenon of trash picker it is mandatory

to understand the definition of child. According to United Nation any boy or girl who is under the age of 18 years in the world population is known as a child [20].

They are passing through different kinds of issues in their entire social, economic and cultural set ups of life. These children deprived of are their basic rights of health, education and recreation. These children accept the hardships and bitter reality of life by supporting their family financially [11]. Child labour figures are alarming in Pakistan and about 12 million children are working in hazardous and unfavourable conditions in the unskilled profession in different sectors, mainly in transportation, manufacturing, sales and services agriculture and industry [20]. Poverty is the main root cause of these deprived children and many relate this child labour and trash picker as a consequence of poverty in our rural areas where almost 68% population of Pakistan lives.

These children are compelled to live in unhygienic environment. Migration from rural to urban areas has become a growing tendency and that's why Pakistan's urban population has increased dramatically due to the rapid growth of industrialization and urbanization [21]. Due to this phenomenon of urbanization waste material issue has also increased. In those areas where solid waste management facilities are violated; trash picker is often found around those heaps of garbage while collecting the recyclable and reusable items which is thrown by the others to sell or for personal consumption. These children collect plastic bottles, iron, aluminium, glass and scrap pieces from the heap of garbage [14]. Due to this inferior work and economic freedom, the trash picking children becomes an addict of pan, gutka, alcohol, smoking, and involve themselves in anti social activities like theft, gambling and street crimes. There are Social and economic factors behind the phenomenon of trash picking [5].

Family background, forefather profession, quality of life, poverty and less education of parents are also the driving factors. These children are facing several kinds of diseases, physical problems and infections; because these children collect the waste material from the heap of dumps without using safety gears. That's why these children face cuts, wound and bruise on their body like hands, legs and arms while picking broken pieces of glasses and sharp metals. Mostly these children don't wear shoes and walk several kilometres in a day. Many researchers have explored that these trash picking children are working under the unfavourable conditions and it is a high risk for their physical and mental health.

These children are facing the several kinds of diseases like skin diseases, stomach ache, malaria, fever, back and joint pain and respiratory problem [4,10]). Despite all diseases these children cannot afford the medical treatment expenses due to poverty, that's why these children avoid from medical treatment of many ailments and chronic diseases. Their parents prefer self medication for their children. These children need proper care and it's an eye opener for the government and policy makers to take necessary measures for these neglected children and ensure pens in their hands instead of collecting trash from the heap of dumps. Provision of pure water, sanitation and health facilities should be ensured in informal settlements.

1.1 Statement Of The Problem

There is widely growing trend of trash picking among children all over the world especially in developing countries. Pakistan is also a developing country. Trash picking is also one of the humiliating and hazardous works which is also done by the children. According to the findings of author [9], there are almost 35000 trash picking children in Pakistan, and most of them are children at the age of between 06 to 17 years. Karachi is the biggest city of the Pakistan and a large number of children are associated with the work of trash picking. Reference [1] explored in his research that the majority of these trash picking children belongs to Afghan ethnicity. By keeping facts in view that the poverty, unemployment and hunger are those factors, which force these children to work as a trash picker.

1.2 Justification Of the Study

Trash picking is an increasing trend among poor and orphan children in mega cities of Pakistan. Poverty is assumed to be the root cause of increasing trash picking by these deprived children. In order to understand the situation of problem and analyse the reasons and consequences faced by the trash picking children in Pakistan this study has been designed. Currently there are few studies available which assessed the socioeconomic factors related with the trash picking trends in Karachi. The main objective of the study is to explore the socioeconomic characteristics and health issues of these trash picking children and those driving factors which have a great influence to trash picking in district south and district central of Karachi.

There is almost no work done on social activities and health issues of trash picking children's in Karachi. It is the ever first study of this issue in district south and district central Karachi, even in Sindh, Pakistan.

1.3 Objective of the Study and Hypothesis

The main objective of this study is to assess the socio economic conditions and health issues of trash picking children in Karachi. The study has explored the factors responsible for trash picking and examined health problems and issues faced by trash picking children. The study has been conducted to test the hypothesis that there is a significant relationship between the trash picking and deteriorated socioeconomic conditions and poor health of children. There were few limitations of this study like difficulties in communication with these children due to language barrier and fear of their parents and custodians for providing information.

2. Literature Review

The estimated population of Pakistan is almost more than 172 million people, whom 40% of the total population is that who are under the age of 15 years [5]. Population is the only form in Pakistan which is growing rapidly but on the other hand political instability, personal security and poverty has become a great menace for Pakistan in achieving development goals. According to the human rights commission, (2005) report it is explored that almost 70,000 street children are living in Pakistan. Another study breakdown these 70,000 street children according to the major cities of Pakistan as following that 8000, 7000, 5000, 3000 and 2500 street children lives in Karachi, Lahore, Peshawar, Rawalpindi and Quetta respectively [15].

According to the report of [5] Karachi is the largest city of Pakistan and it is estimated that its population is

almost 15 million, which is almost increasing at about 5 % per year which is an eye opener for the officials. Karachi is the economic hub of Pakistan and its contributing its largest share in the GDP and revenue of Pakistan. Karachi city is divided into formal and informal settlement areas according to their types of residence [8]. These informal settlements are deprived from the basic health and education facilities. Mostly population is illiterate and that's why their parents are compelled to send their children to earn for the livelihood.

Child labour is a common practice in these informal settlement areas. Behind this phenomenon of trash picking children there are push and pull factors to earn money for their families' livelihood. Poverty, poor economic condition, extended family size are categorized as push factors which compel these children to come out and earn money for their family [2]. Whereas, easiest way to earn money and financial independence are categorized as pull factors [2]. Further these two reasons are divided in three main factors which are being considered the main responsible for these trash picking children. They are as followed:

- **Economic factor**
- **Family factor**
- **Personal factor**

These children are compelled to earn money for their family and trash picking is a one of the easiest way to earn money for these children. These trash picking children are facing a lot of serious injuries and diseases due to the unfavourable environment while collecting trash from the heap of garbage [16]. Jaundice, typhoid, malaria, AIDS, TB & HIV are those chronic diseases which are commonly seen in these children. Poverty is the main route cause behind the phenomenon of trash picking children, because these children belong from the poor families [1]. Their parents cannot provide them basic health and education facilities due to the poverty, that's why their parents prefer to send their children to earn something for their livelihood. These children's families are not financially stable that's why they don't have enough facilities of nutrition, better living standards, health and education. These children belong from the slum areas. Where basic needs are insufficient, ultimately subcultures and socioeconomic characteristics are affecting the lives of these slum areas.

These children are the only bread winner for their family and helping their family financially. Social activities of these children are limited. Most of the time these children spend their time while collecting trash from the heap of the garbage. Some of the studies highlighted that these children are being forced by their family to earn for livelihood. Most of the children showed their willing to study but due to poverty & lack of education institutes in these slum areas these children are compelled to do this work. Their family cultural attributes and their family profession is also a great hurdle for these children.

All over the world hundreds of millions of children and young people are working in the labour group. These children and young people are imprisoned, not a physical locker, but their life is like a jailer's life. These children are working like a labour and they harm their body as well as harm their future. In developing countries around 250 million children are working in the labour force and their age is between 5 to 14 years old. Some of them working part time but maximum of them are working full time a day. These children are working in different categories, some of them working in the domestic / residential area, some of them are working in

industries, companies behind the wall, some of them are visible and some of them are not visible to everyone but they are working in labour market/force. Today in the world the living standard of the people is changed, and get improved, but these peoples left behind millions of people in which the children are also included. Child labour is not a new miracle; they are also too much older history. But due to international efforts that they work and inform state and forward their rule, regulation for the help and support of child labour.

In 1919 the International Labour Organization (I.L.O) presents a convention regarding the working child age, later in 1973 a wide-ranging meeting is held regarding the child labour age and again a more comprehensive meeting were held and the minimum age limit are fixed article number 138 in which the child labour age is fixed for working and this rule are still remaining.

The child who is working in minimum age, they support their families and work for the welfare of their families in different styles and different ways to solve the problems which faces by their families. But increasing in the urbanization and increasing in the economic system that the demand of child labour force in increased in markets.

Child labour is the main issue and a problem all over the world, a special united nation (U.N) session is held in 2001 regarding child labour. At this meeting the U.N they make responsible the head of states, government and groups of peoples and committed that they secure the rights of children and improving their daily life. The main purpose of this special meeting is that to reduce and minimize the problems which are faced by children. So the U.N committed that Head of states and government are creating such a vision and a clear view to determining and finish the violation which are faced by children and change the whole world with the children.

Some institute's and group of individual working for the betterment of child labour and reduce the destruction against the child labour. So it becomes possible that due to these positive effort peoples are well known about the child labour and growing global movement. So it is possible that the child labour is discussed at an international level.

3. Research Methodology

This study was designed to determine socioeconomic characteristics and problems of Trash Picking Children. Karachi is a most populous city of Pakistan and its expanding rapidly. There are a lot of informal settlement areas in Karachi, where the majority of the population resides in very poor and miserable conditions. The data were collected with the help of the well-structured interview schedule. It was most appropriate method because children were illiterate and they were not aware about the importance of this research. We have selected a particular universe for data collection, which are slums areas of Karachi. In this respect, we selected two districts and one town from each district to find out the trash picking children residing in Kharadar, Lee Market, Chakiwara, Machhar Colony, Agra Taj Colony, Boltan Market, Saddar from District South and Firdous Colony, Lalukhet, Karimabad, Mujahid Colony, Dhakhana, Paposh Nagar and Sohrab Goth of District Central of Karachi. A Sample of the trash picking children was gathered from seven areas of each District. Selected population of the study was Trash Picking Children, belonging to the age group from 6 to 17 years.

The non-probability convenient sampling technique was selected for data gathering and reason is that our population does not belonging to any definite population group. We investigated 200 cases of the trash picking children. These trash picking children were residing in each informal settlement of each selected town from the both district of Karachi.

Appropriate statistical formula through SPSS is used as data analysis tool. All the data would be processed and analyzed statistically. After data analysis, it is presented in the shape of appropriate co relation analysis and cross tabulation.

4. Data Analysis

The characteristics of these trash picking children in two district of Karachi are shown as following.

Table 4.1: Socioeconomic Characteristics of The Respondents (n=200)

GENDER		
Variable	Frequency	Percentage
BOY	188	94.0
GIRL	12	6.0
AGE		
6-8 YEARS	29	14.5
9-11 YEARS	67	33.5
12-14 YEARS	64	32.0
15-17 YEARS	40	20.0

It is indicted that according to sex wise distribution it is found that 94% of the respondents were boys and remaining 6% were found girls which were found in very low figure. In these both district of Karachi girls ratio was very low. It is found that parents are reluctant to send their girls for trash picking because they think that it's not a safe work for their girls so better they should stay at home. It is also indicated in other studies that 94% of the children were boys and remaining 4% were girl respondent associated with trash picking work.

The author [17] explored in his research that teen age boys were found much involved in trash picking work. They think that it's an easy work to earn money for their family. The ratio of these teen age boys was explored 88% in Kenya as well as in Tanzania.

Table 4.1 have shown that about 14.5%, 33.5%, 32%& 20% of the trash picking children belong to the age group of 6-8, 9-11, 12-14 and 15-17 years respectively. Educational status of these children was very poor and during the study 64% of the respondents were found illiterate. These children belong from the poor families and their parents cannot afford their educational expenses so that's why these children were compelled to work as a trash picker.

ETHNIC GROUP**Table 7**

Variable	Frequency	Percentage
PUNJABI	29	14.5
AFGHANI	86	43.0
SINDHI	28	14.0
BALACHI	7	3.5
PATHAN	48	24.0
ANY OTHER	2	1.0

In present study it is indicated that most of the trash picking children are afghan refugees. In another study [2,8] highlighted that most of the children working on the street are afghan refugees who have migrated from Afghanistan post war. In present study majority 43% of the respondents belong to the afghan ethnic group. According to the finding of [19] that almost 2 million afghan refugees were living in Pakistan in 2001 and after 9/11 incident almost 2, 00000 another afghan refugees have entered in Pakistan. Among 2 million of these afghan refugees almost 59% were children under the age of 18 years. These TPC highlighted that their parents are sitting jobless at home and they cannot come out from the houses due to the fear of the police that it may arrest them so that's why these children were compelled to do this hazardous work to earn money for their family.

EARNING PER DAY**Table 8**

Variable	Frequency	Percentage
RS 1-100	12	6.0
RS 101-200	42	21.0
RS 201-300	61	30.5
RS 301-400	61	30.5
RS 401-500	24	12.0
HOUSE HOLD MONTHLY INCOME		
UPTO RS 6000	13	6.5
RS 6001 TO RS 12000	66	33.0
RS 12001 TO RS 18000	93	46.5
RS 18001 TO RS 24000	28	14.0

According to the finding of [18] that these TPC belong to the illiterate and poor families. The earning of these

TPC per day was very low. About 6%, 21%, 30.5%, 30.5% & 12 % TPC children were earning 1-100, 101-200, 201-300, 301-400 & 401-500 rupees per day respectively. Monthly house hold incomes of these TPC families were also low. About 6%, 33%, 46%, & 14 % TPC house hold monthly income was up to 6000, 6001-12000, 12001-18000 & 18001-24000 rupees respectively.

Mostly these family lives in houses on rent which is normally consist of only one room. So in this very low earning they almost pay 3 to 4 thousand rent of the house. That's why living condition of these TPC was very miserable. Most of the respondents indicated that they even cannot sleep well at night because of the less place for sleeping.

NO OF FAMILY MEMBERS

Table 9

Variable	Frequency	Percentage
<3 MEMBERS	6	3.0
4-6 MEMBERS	50	25.0
7-9 MEMBERS	107	53.5
10 + ABOVE MEMBERS	37	18.5
FAMILY STRUCTURE		
NUCLEAR	127	63.5
JOINT	32	16.0
EXTENDED	33	16.5
ALONE	8	4.0

Above mentioned table in Present study indicates that these TPC have a large family size and mostly siblings were found in trash picking. In present study 3%, 25%, 53% & 18% TPC are consist of less than 3, 4-6, 7-9 & more than 10 family members respectively. Present study identify that significant 63% of the Trash Picking Children belong from the nuclear family. The author [12] explored that average family size of these trash picking children were found 6 to 10 members.

Table 4.2: Factors Responsible For Trash Picking (n=200)

Variable	Frequency	Percentage
AS A PROFESSION	25	12.5
FORE FATHER OCCUPATION	48	24.0
UNEMPLOYMENT OF FATHER	24	12.0
GETTING MEAL TWICE A DAY	103	51.1

Table 4.2 indicates that about 51% of the trash picking children revealed that getting meal twice a day is a main factor responsible for trash picking; while 24% of the respondents said that forefather occupation is another main factor responsible for trash picking. The author [18] explored in his studies that large family size, poverty;

illiteracy and poor economic condition are those driving factors which are the responsible for trash picking. These TPC are working in hazardous and unfavourable conditions. Injuries and cuts on the bodies of these TPC were found common while picking trash from the heap of dump sites. While picking trash without safety gears from dump hidden sharp metals, broken pieces of glass and needles injured these TPC. During this study it was found that almost each respondents were found injured while collecting trash from the heap of dumps.

Table 4.3: Health Problems and treatment patterns of TPC (n = 200)

INJURIES		
Variable	Frequency	Percentage
YES	151	75.5
NO	49	24.5
TYPE OF INJURIES DURING TRASH PICKING		
Cuts	110	55
Animal Bite	7	4.5
Bruise	22	11.0
No Injuries	61	30.5

Table 10

TYPES OF DISEASE (LAST 6 MONTH)		
Variable	Frequency	Percentage
SKIN PROBLEM	64	32.0
DIGESTION PROBLEM	41	20.5
COUGH	8	4.0
RESPIRATORY PROBLEM	41	20.5
BACK & JOINT PAIN	11	5.5
FEVER / HEADACHE	10	5.0
TUBERCULOSIS	8	4.0
ANY OTHER	17	8.5
STRESS DURING WORK		
YES	124	62.0
NO	76	38.0
GET EATING ITEM FROM TRASH/DUMP		
YES	46	23.0
NO	154	77.0

Above mentioned table 4.3 shows that a significant 75% of the trash picking children were found injured during the work of trash picking. While picking trash without safety gears from dump hidden sharp metals, broken

pieces of glass and needles injured these TPC. During this study it was found that almost each respondents were found injured while collecting trash from the heap of dumps. The present study data about the types of injuries during trash picking explored that majority of the trash picking children 55% got cuts during their work. These cuts were visible on their hands arms and feet. According to the findings of [12] these trash picking children get cuts and bruise on their body specially on their hands and feets due to hidden sharp metals.

Table 4.3 have shown that about 32%, 20%, 4%, & 20% TPC were facing the diseases of skin problem, digestion problem, cough and respiratory problem respectively. Rest of the other Diseases which these TPC were facing them are back & joint pain, fever/headache and tuberculosis as well.

Another study indicates that these TPC face different physical wound, cuts during collecting trash from the heap of the dump especially on their hands, legs and feet's [21]. Another study indicates that almost 31.2% had skin diseases, 21.9% had cough and cold, 20.1% had fever, 19.1% of diarrhoea and 3.1% suffered from jaundice.

Present study also indicate that almost one third 38% of the trash picking children responded that they feel stress during their work while 62% of the respondents said that they do not feel stress during their work of trash picking.

This study also highlights that almost 23% of the trash picking children said that they get eating items (bread, fruits) from the heap of garbage when they feel hungry while rest of the 77% trash picking children said they did not get eating items from the heap of dumps. These infectious and pollutant eating items are very healthy and dangerous for the health of these trash picking children that may cause of many diseases like diarrhoea and stomach etc. These children physical condition was not good enough to work anymore but somehow due to the poor economic condition these children were compelled to do the same job. During the study researcher asked from these TPC that which are the essential things that they think that they be should provided, so it was asked most of the respondents that food and bath facilities are much essential for them. Due to poor economic condition these TPC even cannot afford the medical treatment of their diseases so almost 36% of the respondents said that they get self medication, when they face any disease and 33% respondents explored that they get treatment from the government hospitals.

Table 11

PLACE OF TREATMENT		
Variable	Frequency	Percentage
GOVT/PRIVATE HOSPITAL	66	33
NGO	33	16.5
HAKEEM	14	7.0
SELF MEDICATION	73	36.5
NO TREATMENT	14	7.0

Table 4.4: Environmental Issues faced during Work by TPC (n=200)

ENVIRONMENTAL ISSUES DURING WORK		
Variable	Frequency	Percentage
FLIES / MOSQUITOES	85	42.5
BROKEN GLASSES / SHARP METALS	66	33.0
WASTE BURNT SMOKE	24	12.0
DUST	25	12.5

Above mentioned table 4.4 highlights that majority of the trash picking children 43% responded that flies and mosquito creates hurdles and disturbance during the work of trash picking whereas 33% and 12% trash picking children responded that broken glasses/sharp metals and waste burnt smoke respectively are the other environmental issues faced during the work of trash picking by these TPC.

Table 4.5: Use of Safety Gear during trash picking work by TPC (n=200)

USE SAFETY GEAR DURING WORK		
Variable	Frequency	Percentage
SEASONAL CLOTHING	59	29.5
SHOES	31	15.5
GLOVES	11	5.5
NOT USING	99	49.5

Table 4.5 results clearly highlights that almost 49% trash picking children are unaware about the usage of safety equipments which are essential for their safety. Whereas 29% of the trash picking children said that they use seasonal clothing by keeping in view the rainy, cold or hot season and 15% responded that they wear shoes while collecting trash from the heap of dumps with the fear of sharp metals or broken glasses may injured their feet.

The relationship between the factors responsible for trash picking and the house hold monthly income of these trash picking children shows a significant relationship, but on the other hand the Gamma value -.158 shows a negative association between these two variables.

These values indicate that these trash picking children started more work for getting meal as their family income decrease.

Table 4.6: Relationship between the socioeconomic characteristics and causes of trash picking

Household monthly income	As a profession	Forefather Occupation	Unemployment of father	Getting meal twice a day	Total
Up to RS 6000	(1) 1.4	(4) 3.1	(0) 1.6	(8) 6.7	(13)13.0
RS 6001 TO RS 12000	(9) 8.3	(13) 15.8	(2) 7.9	(42) 34.0	(66)66.0
RS 12001 TO RS 18000	(10) 11.6	(25) 22.3	(18) 11.2	(40) 47.9	(93) 93.0
RS 18001 TO RS 24000	(5) 3.5	(6) 6.7	(4) 3.4	(13) 14.4	(28) 28.8
TOTAL	(25) 25.0	(48) 48.0	(24) 24.0	(103) 103.0	(200) 200.0

Chi square: 16.217^a; Sig Level: 0.62; Gamma: -.158; Sig Level; .098

5. Conclusion & Recommendations

Present study findings concludes that poverty, low family income, large family size & less economic development are those main factors which are responsible for the trash picking. These TPC are working in unfavourable and hazardous environment. These TPC come out from their houses to collect trash from the heap of dump to earn money to full fill their house hold and their own needs.

Trash picking is a kind of an inferior and hazardous work, which had a bad impact on the physical and mental health of children. These trash picking children is working in hazardous environments and due to their daily practice of collecting trash from the garbage heaps and dustbins, these children are victim of several kinds of diseases. That's why these children face cuts, wound and bruise on their body like hands, legs and arms while picking broken pieces of glasses and sharp metals.

The rise in the number of TPC in both these two districts of Karachi is also due to the afghan refugee's migration. These Afghani children are being treated discriminately and even they don't have any job and employment opportunity in Pakistan. So that's why the parents of these children are compelled to send their children to earn money for their family livelihood by collecting trash. These children are the only bread winner for their family and helping their family financially.

Due to the high inflation rate in Pakistan these children even don't have an easy access to better food and nutrition facility that's why this adverse condition will have a bad impact on their health situation.

Injuries and cuts on the bodies of these TPC were found common while picking trash from the heap of dump sites. While picking trash without safety gears from dump hidden sharp metals, broken pieces of glass and needles injured these TPC.

5.1 Recommendations

By keeping all these facts it is identified that these TPC children health and security situation is an adverse condition. By keeping all these facts, it's an eye opener for all of us that the future of Pakistan is at risk. Right now it is the dire need of the time to eradicate this social evil of child labour properly and in right earnest from Pakistan. Civil society and NGO's should step forward and raise voice for the rights of child labour. Government, policy makers and stakeholders should take necessary measures to combat child labour and to ensure pencils in children's hands instead of tools.

It is recommended that:

- It is much needed in Karachi to know about the exact magnitude of these TPC and to assess their health status.
- Friendly laws and legislation is required for the good will of these deprived children and more over the implementation and monitoring of these laws is mandatory.
- Parents of these TPC children should be provided source of income by providing them employment opportunities
- These TPC should be provided vocational and technical training so that they could earn money with respectable profession rather than trash collecting.
- During studies these TPC should be provided a little bit pocket money so that the parents of these children prefer to send their children in schools.
- These children should be provided better food and education facilities
- Elimination of child labour should be included to the part of national poverty alleviation program

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