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# PROMOTING SAFE COMMUNITIES

## Mapping with children in Mumbai



**Pratham**

Every Child in School and Learning Well...





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## **Promoting Safe Communities: Mapping with children in Mumbai**

**By Action for Children's Environments**

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# Promoting Safe Communities: Mapping with children in Mumbai

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Shared space at the entrance.  
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Photo Journalist

# Acronyms

<b>ACE</b>	Action for Children's Environments	<b>M RTP</b>	Maharashtra Regional and Town Planning Act, 1966
<b>API</b>	Assistant Police Inspector	<b>MUIP</b>	Mumbai Urban Infrastructure Project
<b>BASS</b>	Bal Adhikar Sangharsh Sangathan	<b>MUTP</b>	Mumbai Urban Transport Project
<b>BEST</b>	Brihanmumbai Electricity Supply and Transport Undertaking	<b>NBC</b>	National Building Code
<b>BJP</b>	Bharatiya Janata Party	<b>NCPCR</b>	National Commission for Protection of Child Rights
<b>BMC</b>	Brihanmumbai Municipal Corporation	<b>NCRB</b>	National Crime Records Bureau
<b>BPL</b>	Below Poverty Line	<b>NCRS</b>	National Crime Recording Standard
<b>BU DP</b>	Bombay Urban Development Project	<b>NDZ</b>	No-Development Zone
<b>CBO</b>	Community Based Organization	<b>NGO</b>	Non-Governmental Organization
<b>CCDT</b>	Committed Communities Development Trust	<b>NOC</b>	No Objection Certificate
<b>CCPC</b>	Community Level Child Protection Committee	<b>NPAC</b>	National Plan of Action for Children
<b>CHS</b>	Cooperative Housing Society	<b>NSS</b>	National Sample Survey
<b>CPC</b>	Child Protection Committee	<b>OC</b>	Observation Checklist
<b>CRC</b>	Child Resource Centres	<b>ODPM</b>	Office of the Deputy Prime Minister
<b>CRZ</b>	Coastal Regulation Zone	<b>PAH</b>	Project Affected Households
<b>DCPU</b>	District Child Protection Unit	<b>PAN</b>	Permanent Account Number
<b>DCR</b>	Development Control Regulations	<b>PAP</b>	Project Affected Persons
<b>DP</b>	Development Plan	<b>PMAY</b>	Pradhan Mantri Awas Yojana
<b>DRR</b>	Disaster Risk Reduction	<b>PMEI</b>	Pratham Mumbai Education Initiative
<b>ECCE</b>	Early Childhood Care and Education	<b>PMGP</b>	Prime Minister's Grant Programme
<b>ELU</b>	Existing Land Use	<b>POCSO</b>	Protection of Children from Sexual Offences Act, 2012
<b>EWG</b>	Economically Weaker Groups	<b>PPP</b>	Public-Private Partnership
<b>EWS</b>	Economically Weaker Section	<b>PSI</b>	Police Sub-Inspector
<b>FGD</b>	Focus Group Discussion	<b>R&amp;R</b>	Resettlement and Rehabilitation
<b>FSI</b>	Floor Space Index	<b>RTE</b>	Right of Children to Free and Compulsory Education Act, 2009
<b>GDCR</b>	General Development Control Rules	<b>SC</b>	Slum Cluster
<b>GDP</b>	Gross Domestic Product	<b>SCLR</b>	Santacruz Chembur Link Road
<b>GIS</b>	Geographic Information System	<b>SCPCR</b>	State Commission for the Protection of Child Rights
<b>GOI</b>	Government of India	<b>SCPS</b>	State Child Protection Society
<b>GWP</b>	General Washing Place	<b>SEC</b>	Section
<b>HDI</b>	Human Development Index	<b>SGNP</b>	Sanjay Gandhi National Park
<b>HH</b>	Households	<b>SLL</b>	Special and Local Laws
<b>HIG</b>	Higher Income Group	<b>SPA</b>	Special Planning Authorities
<b>HIV</b>	Human Immunodeficiency Virus	<b>SPARC</b>	The Society for the Promotion of Area Resource Centres
<b>ICDS</b>	Integrated Child Development Services	<b>SRA</b>	Slum Rehabilitation Authority
<b>ICPS</b>	Integrated Child Protection Scheme	<b>SRD</b>	Slum Redevelopment Scheme
<b>IEC</b>	Information Education and Communication	<b>SRS</b>	Slum Rehabilitation Scheme
<b>INR</b>	Indian National Rupee	<b>STP</b>	Sewage Treatment Plant
<b>IPC</b>	Indian Penal Code	<b>SUP</b>	Slum Upgrading Programme
<b>IPP</b>	India Population Project	<b>SWM</b>	Solid Waste Management
<b>JJ</b>	Juvenile Justice	<b>TB</b>	Tuberculosis
<b>JJB</b>	Juvenile Justice Board	<b>TDR</b>	Transfer of Development Rights
<b>JNPT</b>	Jawaharlal Nehru Port Trust	<b>UA</b>	Urban Agglomeration
<b>JVLR</b>	Jogeshwari Vikhroli Link Road	<b>UDPFI</b>	Urban Development Plans Formulation and Implementation
<b>LIG</b>	Lower Income Group	<b>ULCRA</b>	Urban Land (Ceiling and Regulation) Act, 1976
<b>LPCD</b>	Litres per Capita per Day	<b>UN</b>	United Nations
<b>MCGM</b>	Municipal Corporation of Greater Mumbai	<b>UNCRC</b>	United Nations Convention on the Rights of the Child
<b>MHADA</b>	Maharashtra Housing and Area Development Authority	<b>UNDP</b>	United Nations Development Programme
<b>MLA</b>	Member of Legislative Assembly	<b>UNICEF</b>	United Nations Children's Fund
<b>MMC</b>	Mumbai Municipal Corporation Act, 1888	<b>UP</b>	Uttar Pradesh
<b>MMR</b>	Mumbai Metropolitan Region	<b>URDPFI</b>	Urban and Regional Development Plan Formulation and Implementation
<b>MMRDA</b>	Mumbai Metropolitan Region Development Authority	<b>WHO</b>	World Health Organization
<b>MMR-EIS</b>	Mumbai Metropolitan Region-Environment Improvement Society	<b>YUVA</b>	Youth for Unity and Voluntary Action

# Glossary of Terms

<b>Abuse</b>	<p>Different forms of abuse that children are subjected to include but are not restricted to:</p> <ul style="list-style-type: none"> <li>• Child Abuse - Any form of physical, emotional and/or sexual mistreatment or lack of care that causes physical injury or emotional damage to a child (Pinheiro, 2006)</li> <li>• Child Sexual Abuse - Child sexual abuse occurs when a person (younger or older than the child, male or female) involves the child (a boy or a girl) in sexual activities. The Protection of Children from Sexual Offences Act, 2012 defines child sexual abuse as “the inducement or coercion of a child to engage in any unlawful sexual activity, the exploitative use of children in prostitution or other unlawful sexual practices and in pornographic performances and materials.” As per this special law child sexual abuse includes [i] penetrative sexual assault [ii] aggravated penetrative sexual assault [iii] sexual assault [iv] aggravated sexual assault [v] sexual harassment [vi] using child for pornographic purpose and [vii] trafficking of children for sexual purposes.</li> <li>• Emotional abuse / Psychological abuse – Emotional abuse is intended to control victims by limiting resources and social contacts; creating actual and emotional dependence; and reducing the victim’s sense of self-worth, competence, and value. Emotional maltreatment can include verbal abuse, such as insults, criticism, ridicule, name calling, discounting, and discrediting; isolation of the victim; control of social and family contacts; denial of access to finances or transportation; demonstration of extreme jealousy and possessiveness; the monitoring of behaviour; accusations of infidelity; threats of harm to the victim’s family, children, or friends; threats of abandonment or infidelity; and damage to or destruction of personal property (Lakshmi Devi, n.d.). In the context of this research, emotional or psychological abuse is defined as behaviour, speech, and/or actions of parents, caregivers, or other significant figures in a child’s life (such as teachers) that have a negative mental impact on the child. Such forms of abuse may include (but are not limited to) name-calling, insults, threats violence, rejection, degradation, isolation, terrorization, ignoring, exploitation, etc.</li> <li>• Physical abuse - When someone abuses or neglects children by inflicting harm, or by failing to act to prevent harm. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to children.</li> </ul>
<b>Accessibility</b>	<p>Used with reference to accessibility to services and mechanisms. In this context, accessibility means the ability for this service to be physically reached and does not denote actual use.</p>
<b>Adequate / Adequacy</b>	<p>Availability of a service, space, or housing in a quantity and quality sufficient to satisfy the needs of individuals in a given culture. From a human rights perspective, an adequacy standard is set as the level of enjoyment of different human rights necessary to live with dignity (Eide, 2006).</p>
<b>Adequate housing</b>	<p>Standards of adequate housing are established within discussions of human rights with functional parameters set under Article 11(1) of the International Covenant on Economic, Social, and Cultural Rights: legal security of tenure; availability of services, materials, facilities and infrastructure; affordability; habitability; accessibility; location and cultural adequacy.</p>
<b>Anti-Social</b>	<p>Anti-social behaviour is characterized by covert hostility and aggression towards others and manifests in acts such as bullying, hitting, theft, and vandalism amongst others (Encyclopedia.com, n.d.)</p>
<b>Bullying</b>	<p>A form of aggressive behaviour in which someone intentionally and repeatedly causes another person injury or discomfort. Bullying can take the form of physical contact, words or more subtle actions (American Psychological Association, n.d.) Types include name-calling, teasing, taunting, inappropriate sexual comments and threatening to cause harm among others (stopbullying.gov, n.d.)</p>
<b>Child</b>	<p>As defined under Section 2 subsection 12 of the Juvenile Justice (Care and Protection of Children) Act 2015, “child” means a person who has not completed eighteen years of age.</p>
<b>Child Labour</b>	<p>Work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development. It refers to work that is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling by depriving them of the opportunity to attend school; obliging them to leave school prematurely; or requiring them to attempt to combine school attendance with excessively long and heavy work (International Labour Organization, n.d.).</p> <p>As per Section 3 of the Child Labour (Prohibition and Regulation) Amendment Act 2016, no child shall be employed or permitted to work in any occupation or process other than where the child;</p> <ol style="list-style-type: none"> <li>Helps his family or family enterprise, which is other than any hazardous occupations or processes set forth in the Schedule, after his school hours or during vacations;</li> <li>Works as an artist in an audio-visual entertainment industry, including advertisement, films, television serials or any such other entertainment or sports activities except the circus, subject to such conditions and safety measures, as may be prescribed:</li> </ol> <p>Provided that no such work under this clause shall affect the school education of the child.</p>

<b>Community</b>	In the context of this research, a community is defined as a group of people sharing a common geographical location as their residence.
<b>Conflicts</b>	A serious disagreement or argument of either a physical or verbal nature.
<b>Crimes Committed against Children</b>	<p>Two categories under Indian law as cited by the NCRB (National Crime Records Bureau):</p> <ul style="list-style-type: none"> <li>• Crime committed against children which are punishable under the Indian Penal Code (IPC)</li> <li>• Crime committed against children which are punishable under Special and Local Laws (SLL).</li> <li>• Crimes against children punishable under Indian Penal Code (IPC) are as follows: <ul style="list-style-type: none"> <li>• Murder</li> <li>• Foeticide</li> <li>• Infanticide</li> <li>• Abetment of suicide (abetment by other persons to the commission of suicide by children)</li> <li>• Exposure and abandonment</li> <li>• Childnapping and abduction for ransom, murder, marriage, begging, slavery, selling of girls, prostitution and rape,</li> </ul> </li> <li>• Crimes against children punishable under 'Special and Local Laws' are covered under these laws: <ul style="list-style-type: none"> <li>• Immoral Traffic Prevention Act, 1956 (where minors are abused in prostitution)</li> <li>• Child Labour (Prevention and Regulation) Act, 1986.</li> <li>• Prohibition of Child Marriage Act 2006.</li> <li>• Protection of Children from Sexual Offences Act 2012.</li> </ul> </li> </ul>
<b>Crime hotspots</b>	Areas with a high crime propensity and density. In this report, these are areas perceived by respondents to be places where many criminal incidents occur.
<b>Domestic Violence</b>	<p>As defined in the Protection of Women from Domestic Violence Act, 2005, "any act, omission or commission or conduct of the respondent shall constitute domestic violence in case it—</p> <ol style="list-style-type: none"> <li>a. harms or injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the aggrieved person or tends to do so and includes causing physical abuse, sexual abuse, verbal and emotional abuse and economic abuse; or</li> <li>b. harasses, harms, injures or endangers the aggrieved person with a view to coerce her or any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or</li> <li>c. has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b); or</li> <li>d. Otherwise injures or causes harm, whether physical or mental, to the aggrieved person." </li></ol>
<b>Drop out</b>	In the context of this research, this term refers to out of school children who are unable to attend school for a sustained period of time due a host of factors not necessarily in the control of the child.
<b>Emergency Shelter</b>	Typically, a safe and secure place people can go when they cannot go to their place of residence in times of serious, unexpected and/or dangerous situations.
<b>Family Head</b>	In the context of this research, the primary breadwinner for the family is the family head.
<b>Formal / Informal Play Spaces</b>	Formal spaces are designated and created spaces such as parks and playgrounds. Informal spaces are any spaces that children use to engage in play regardless of what the space is used for or what it is supposed to be used for.
<b>Forced Migration</b>	A migratory movement in which an element of coercion exists, including threats to life and livelihood, whether arising from natural or man-made causes (e.g. movements of refugees and internally displaced persons as well as people displaced by natural or environmental disasters, chemical or nuclear disasters, famine, or development projects) (International Organization for Migration, n.d.).

<b>Protection Mechanisms</b>	<ul style="list-style-type: none"> <li>Formal Protection Mechanisms - Child Protection mechanisms designed and implemented by the government at the national, state or district level. Some have either a statutory basis or arise out of a social protection scheme driven by the government. Formal protection mechanisms as under the Juvenile Justice (Care and Protection of Children) Act 2015 include the Child Welfare Committee, the Juvenile Justice Board, the State Juvenile Police Unit, the District Child Protection Unit, and Child Protection Committees.</li> <li>Informal Protection Mechanisms - Those that exist outside of formal mechanisms; mainly community based indigenous mechanisms such as the family, caregivers, peer networks and community-based mechanisms.</li> </ul>
<b>Habitability</b>	Adequate housing must be habitable, in terms of providing the inhabitants with adequate space and protecting them from cold, damp, heat, rain, wind or other threats to health, structural hazards, and disease vectors. The physical safety of the occupants must also be guaranteed.
<b>Hazard</b>	A process, phenomenon or human activity that may cause loss of life, injury or other health impacts, property damage, social and economic disruption or environmental degradation. (United Nations Office for Disaster Risk Reduction, 2017)
<b>Hazardous work</b>	<p>The Schedule of the Child Labour and Prohibition Amendment Act, 2016 provides a list of hazardous occupations and processes prohibited under the Child Labour and Prohibition Act are as follows;</p> <ol style="list-style-type: none"> <li>Mining</li> <li>Explosives or inflammable substances</li> <li>Hazardous processes</li> </ol> <p>Clause 2 (cb) of the Factories Act 1948 defines 'hazardous processes' as any process or activity in relation to an industry specified in the First Schedule where, unless special care is taken, raw materials used therein or the intermediate or finished products, bye-products, wastes or effluents thereof would:</p> <ul style="list-style-type: none"> <li>Cause material impairment to the health of the persons engaged in or connected therewith, or</li> <li>Result in the pollution of the general environment: Provided that the State Government may, by notification in the Official Gazette, amend the First Schedule by way of addition, omission or variation of any industry specified in the said Schedule (the definition of this is taken from the Factories Act which states as above – cause material impairment to health or result in the pollution of the general environment)</li> </ul>
<b>House</b>	<p>A house is a building or part of a building having a separate main entrance from the road or common courtyard or staircase etc., used or recognized as a separate unit, it may be inhabited or vacant and may be used for residential or non-residential purposes. Census of India defines pucca, semi-pucca and kutcha houses as follows (Census of India, 2011):</p> <ul style="list-style-type: none"> <li>Pucca Houses - Pucca building may be treated as one which has its walls and roof made of the following materials: Wall material: Stones (duly packed with lime or cement mortar), G.I./metal/asbestos sheets, Burnt bricks, Cement bricks, Concrete. Roof material: Machine-made tiles, Cement tiles, Burnt bricks, Cement bricks, Stones, Slate, G.I./Metal/Asbestos sheets, Concrete.</li> <li>Kutcha Houses - Buildings, the walls and/or roof of which are predominantly made of materials other than those mentioned above such as unburnt bricks, bamboo, mud, grass, reeds, thatch, plastic/ polythene, loosely packed stone, etc., may be treated as Kutcha buildings.</li> <li>Semi-Pucca Houses- Houses which do not fall within the pucca/ kutcha category. Generally, such houses will have either the wall or roof of pucca material.</li> </ul>
<b>Migrant</b>	Any person who is moving or has moved across an international border or within a State away from his/her habitual place of residence, regardless of (1) the person's legal status; (2) whether the movement is voluntary or involuntary; (3) what the causes for the movement are; or (4) what the length of the stay is. In the state of Maharashtra, however, a migrant is entitled to apply for a domicile after having lived for 15 years in the state, post which s/he ceases to be a migrant.
<b>Participation</b>	Taking part in an activity, event, organization or group.
<b>Perceived prevalence</b>	Refers to the respondent's interpretation regarding the spread of a certain condition, attitude or activity. i.e. if it is common/widespread or rare.
<b>Proof of stay</b>	Documentary evidence that a household has been staying at a particular slum prior to a cut-off date, which in the case of Mumbai is 1.1.2000. This documentary proof determines whether a household qualifies for a new house if the slum is taken up for redevelopment or resettlement by the government. The documents typically include voter ID card, ration card, school admission papers, bank documents, electricity or telephone bills and passport.
<b>Public Sexual Harassment</b>	Generally, refers to physical or verbal unwanted and/or unwelcome advances of a sexual nature directed primarily against women in public. This includes harassment, molestation, groping, name-calling or making comments that are sexual. The legislative basis for this lay largely in the Indian Penal Code but also the Prohibition of Sexual Offences Against Children Act 2012 that serves specifically to protect children.

<b>Resilience</b>	The capacity to recover quickly from difficulties and setbacks, adapt well to change and continue in the face of adversity, (Harvard Business Review, n.d.) trauma, tragedy, threats and significant stress (American Psychological Association, n.d).
<b>Responsiveness</b>	Usually used to denote how well or quickly a person or organizations responds to a query. In this context, it is also used to mean the quality of the service delivered and if it is delivered at all.
<b>Risks</b>	A situation involving exposure to danger. A possibility that something unwelcome or unpleasant may happen. (Oxford Dictionary, n.d.) This could be a physical or social hazard and the threat could be either real or perceived.
<b>Slums</b>	<p>Under Section 3 of the Slum Area Improvement and Clearance Act, 1956, slums have been defined as mainly those residential areas where dwellings are in any respect unfit for human habitation by reasons of dilapidation, overcrowding, faulty arrangements and designs of such buildings, narrowness or faulty arrangement of streets, lack of ventilation, light, sanitation facilities or any combination of these factors which are detrimental to safety, health and morals. (Census of India, 2011)</p> <p>According to Census 2011: "Slums have been earmarked in all the statutory towns irrespective of their population size based on the same definition as in 2001. Three types of slums have been defined in the Census, namely, Notified, Recognized and identified: -</p> <ul style="list-style-type: none"> <li>• Notified Slums - All notified areas in a town or city notified as 'Slum' by State, Union territories Administration or Local Government under any Act including a 'Slum Act' may be considered as Notified slums.</li> <li>• Recognized Slums - All areas recognized as 'Slum' by State, Union territories Administration or Local Government, Housing and Slum Boards, which may have not been formally notified as slum under any act may be considered as Recognized slums.</li> <li>• Identified Slums - A compact area of at least 300 population or about 60-70 households of poorly built congested tenements, in unhygienic environment usually with inadequate infrastructure and lacking in proper sanitary and drinking water facilities. Such areas should be identified personally by the Charge Officer and also inspected by an officer nominated by Directorate of Census Operations. This fact must be duly recorded in the charge register. Such areas may be considered as Identified slums"</li> </ul>
<b>Stress</b>	Stress is a physical, mental or emotional factor that causes bodily or mental tension. Stress can influence psychological conditions such as depression or anxiety and can also cause a flight or fight response if faced with adversity (American Psychological Association, n.d. ).
<b>Substance Abuse</b>	Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs (World Health Organization, n.d.).
<b>Unpaid Labour</b>	Work that produces goods or services but is not remunerated. It includes domestic labour, subsistence production and the unpaid production of items for market (Swiebel,1999).
<b>Violence</b>	<ul style="list-style-type: none"> <li>• The intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development or deprivation (World Health Organization, n.d.).</li> <li>• Violence against children- All forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation including sexual abuse (Unicef, n.d.).</li> </ul>
<b>Workforce participation</b>	Percentage of adults who are engaged in or looking for paid work.



Lanes in  
Lallubhai Compound.  
Photo Credit - Paula Bronstein,  
Photo Journalist

# EXECUTIVE SUMMARY

The quality of the living environment has deep implications for children's human capital and development

UNICEF and its partners, Action for Children's Environments (ACE), Pratham Mumbai Education Initiative (PMEI), Youth for Unity and Voluntary Action (YUVA), and Committed Communities Development Trust (CCDT) have been engaged in an urban program in Mumbai called "Promoting Safe Communities" since 2014. This report presents the mapping undertaken in this program to understand the vulnerabilities, coping and resilience of children living in three urban poor settlements in the city of Mumbai: Shivaji Nagar in R North ward, Rafi Nagar and the Resettlement & Rehabilitation (R&R) site of Lallubhai Compound in M East ward. All three communities are located in the suburbs of Mumbai, which is part of the Mumbai Suburban District. The report looks at seven dimensions – safety & security, protection, environment, health, education, play & recreation,

and participation & empowerment for which indicators were developed to understand the risks as well as the existing protective factors in children's lives. Through this program an attempt has been made to reduce the risks and vulnerabilities of children and adolescents and build their resilience by creating safe urban communities.

## Background

Mumbai, India's second largest city is its financial capital generating 6.16 per cent of India's GDP and 40 per cent of the GDP of Maharashtra (Municipal Corporation of Greater Mumbai 2009). Mumbai comprises two administrative districts (Mumbai City and Mumbai Suburban), 24 administrative wards and 227 electoral wards. In public perception Mumbai is India's biggest, fastest and richest city—India's Maximum City.

Consequently Mumbai has

attracted migrants from the late 19th century onwards, a trend that continues today except that the pattern of migration has changed with respect to place of origin and destination within the city. In reality, however, Mumbai is a divided city, with the highest number of billionaires and millionaires among all Indian cities as well as being one of the most slum-filled cities with 49.38% of the city's population living in slums (Census 2011).

The first Human Development report on Mumbai extensively commented on the wide physical and social disparities between the slum and non-slum populations, which impacts literacy, sex ratio, morbidity rate, family space, and mental stress. The Mumbai HDI (2009) states: The contrasts in living standards are of a magnitude not

seen anywhere else in the country. Two distinct cities exist within one.

## Key findings

### A. Environment

The quality of the living environment has deep implications for children's human capital and development. Growing up in slums can typically rob children of many of their future prospects and put them at a developmental disadvantage today.

#### The five deprivations of a slum include:

(1) access to improved water, (2) access to improved sanitation facilities, (3) sufficient living area that is not overcrowded, (4) safe structural quality and durability of dwellings, and (5) security of tenure.

#### Location and security of tenure:

Slums, which are the default housing of the poor, are invariably located on vacant land with high environmental risks. Slum formation and regularization in Mumbai does not follow a homogeneous pattern but is governed by a dateline policy which regularizes/legalizes settlements before a specified cut-off date (1.1.2000). Slum residents who can produce proof of stay prior to this cut-off date are supposedly assured of resettlement in case of evictions, while those without such proof remain vulnerable.

- All three settlements are located in low-lying areas in outlying wards; exposed to hazards such as unsanitary surroundings, garbage-filled open spaces, roads with heavy traffic, unguarded railway tracks, deep ditches and proneness to flooding.

- All three settlements have seen high rates of migration [53% intra-city, 33% inter-state, and 14% intra-state], with Rafi Nagar seeing the highest migration, as the non-regularized part of Baba Nagar offers easily encroachable land near the Deonar dumping ground, thereby providing cheap shelter for new migrants.



Garbage filled open space below the residential buildings in Lallubhai Compound.  
Photo Credit - ACE Trust

- Overall, 16% of households do not have any proper proof of stay thus, putting them at risk of eviction. The remaining 84% though are relatively safe from eviction.

#### Habitability:

- All houses have insufficient living space with spaces within the house being used interchangeably for different functions. With 4 to 6 members per family in a single space, overcrowding is inevitable.
- Houses in the non-regularized settlements are built using non-durable materials incapable of withstanding harsh climatic and weather conditions.

- The majority of the houses have unhygienic living conditions with pest infestation and poor ventilation causing serious health concerns.

#### Basic services and community level infrastructure:

- All regularized settlements have access to piped water, either through individual connections or shared water taps. In Rafi Nagar, there are no legal provisions for piped water supply even in the regularized part; giving rise to a parallel illegal system incurring high costs. Due to an erratic water supply schedule and timings, families have to ration water for daily use. A reduction in the

water supply to fewer than the stipulated hours leads to fights between people/families within the community.

- Across the three communities, the water pipelines are in close proximity to open drains, gutters, and sewerage lines resulting in contamination of potable water.

#### Sanitation and drainage:

- In settlements without in-built toilets, open defecation is a problem due to the acute shortage of public toilets. Free public toilets are neither clean nor well maintained and lack basic infrastructure such as piped water. Paid toilets are



Garbage filled open space below the residential buildings in Lallubhai Compound.  
Photo Credit - ACE Trust

expensive to use and create a strain on subsistence incomes earned by families engaging in daily wage work. Untreated waste water from the toilets flows directly into the open drains and gutters.

- Lack of proper lighting in and around the public toilets invites anti-social activities such as public sexual harassment, alcoholism, and substance abuse making access to these toilets unsafe for women and children.
- Open drains clogged with garbage are present across the three communities. They often overflow, especially during the monsoon, resulting in water logging as well as health problems.

### Streetlights:

Lack of adequate lighting in the by-lanes within the settlements makes several spaces inaccessible and unsafe after sunset, especially for women and children.

### Community spaces:

Lack of formal community spaces for the residents to gather for meetings and celebrations. The community makes use of informal open spaces, the by-lanes, or the main road as their community space.

### Garbage collection and management:

Though there is a system for daily garbage collection in the authorized settlements through the Dattak Vasati Yojana, there are no fixed provisions for adequately disposing of the collected garbage; open spaces and drains hence becoming informal sites for garbage dumping.

### Disaster risk reduction:

Disease outbreaks and household fires are major disaster risks. However, by virtue of the settlements' low-lying location, seasonal waterlogging, especially during the monsoon, is a major disaster risk, impacting children's schooling, leading to loss of work and daily wages by restricting mobility within the neighbourhood and due to the breakdown of the public transport system. There is a lack of clean hazard-free open spaces across the 3 settlements. No DRR activities have been initiated or undertaken at the household, school, community, or ward level.

## B. Safety and security

### Income security and access to credit:

Though every household reported at least one earning member, inadequate education

and lack of vocational skills training among adults leads to low subsistence incomes through work in the informal sector. The lack of childminding support systems ensures low workforce participation among women. Given these inadequacies, households borrow from both formal and informal sources for health concerns and consumption loans.

### Social security:

Not all children have birth certificates with only 74% of children in Shivaji Nagar, 37% in the authorized part of Rafi Nagar and 54% in the unauthorized part called Baba Nagar possessing a birth certificate. Children without birth certificates are deprived of protection from child marriage, sexual exploitation and child labour, and lack access to social protection schemes.

### Safe / unsafe spaces:

Children perceived their home as an unsafe space due to a host of physical and social factors. Children reported feeling unsafe at home around the cooking space, around open electric wires, while bathing in makeshift bathrooms, due to the presence of pests, alcohol consumption by adult men at home, use of profanity by parents, domestic violence, fights between parents, and the

presence of male relatives.

- The route to school is unsafe as children are subjected to public sexual harassment (for girls) from anti-social elements and bullies (boys and girls), and are exposed to high risks of injury and ill health from several different physical hazards along the route.
- Boys and girls across the three settlements perceive their neighbourhoods as unsafe on account of rampant public sexual harassment, substance abuse, older boys and youths engaging in street fights, the presence of small gangs, and police inaction to check and prevent these activities.
- Delinquent behaviour is perceived as an everyday occurrence by both children and adults, typically involving male youths who do not have paid work and/or adequate education. Abandoned, isolated, dark and dingy spaces across the three settlements often invite anti-social activities and crimes. However, no collective action is being taken by the police or the community to prevent, address, or monitor such crimes and anti-social acts.
- Children reported feeling unsafe in public places such as large open spaces, streets, and markets, where a large number of unknown people are

present. Children also reported the following as unsafe: dirty, unmaintained, and dark spaces with open sewers, garbage, stray animals, open wells, unguarded railway tracks, etc.

### C. Health

Unhealthy, unhygienic, and cramped housing conditions coupled with poor sanitation, lack of potable water, and environmental hazards pose serious health risks for the residents across the three settlements.

Quality affordable public health services are highly inadequate across the three settlements. With their limited ability to pay for healthcare, and overcrowding in government hospitals, residents are forced to consult quacks and private medical practitioners that are more affordable.

There is a high prevalence of stress among adults and children due to scarce resources, overcrowding, unhygienic and unsafe living conditions, financial constraints, academic pressure, and vulnerability due to public sexual harassment among others. Such stress manifests itself through frequent illness, domestic violence, in rare cases suicide, substance abuse, and meting out harsh physical punishments to children.

Alcohol, tobacco, and drug use is pervasive, with children as young as 6 years of age being inducted into substance use and abuse. A complete lack of formal support systems for managing stress, and government de-addiction centres further exacerbate the problem.

### D. Education

#### Availability and access:

There is a shortage of anganwadis and government run primary and secondary schools across the three settlements. Consequently, parents enrol children in expensive private schools, which do not necessarily offer better quality education.

#### Enrolment, retention, and provisions:

Though school enrolment is high at the primary level, there is a gradual fall in enrolment from the upper primary level onward with not much of a gender difference. There are no provisions for special needs education in any of the public primary schools across the three settlements. Primary schools across the three settlements do not have basic facilities for children such as safe drinking water and clean, gender segregated toilets.

### School dropout:

Children tend to drop out between standards five and seven, around age 14, which also marks the end of free and compulsory education under the RTE (2009).

### Adult education and provisions for higher education:

With only basic literacy, parents are not able to either supervise or assist in their child's learning. As a result children attend expensive private coaching classes to get assistance for their schoolwork. There are no government run colleges in the two wards making college education expensive and inaccessible.

## E. Protection

### Violence:

Children reported feeling unsafe at home, at school, and in the neighbourhood. Children living across the three settlements are exposed to varying forms of violence, abuse, and neglect in everyday settings, both within the family and in their daily interactions with the systems that surround and serve them. Children experience extreme forms of punishment both at home and at school; bullying at school, on the route to school, and within the community;

and are victims and witness to domestic violence within the home. Children also feel unwelcome and unsafe across the three settlements due to rampant public sexual harassment, frequent violent fights among adults, name-calling/labelling of the differently abled, and due to instances of molestation and rape.

### Child labour:

Child labour is perceived to be more prevalent in the partly authorized settlement of Rafi Nagar with children engaging in rag picking and working in the many small-scale manufacturing units within the community. Most of these children are migrants and do not have families living in the community. As these are mostly older children, between 14 and 18 years of age, they work legitimately in hazardous jobs without being labelled child labourers.

### Protection mechanisms:

- Residents are not aware of the various government protection systems and mechanisms other than the police, possibly a result of poor outreach and lack of information. Though the police are the most accessed and responsive system, the residents do not perceive them as a protection system, indicating a lack of trust and dissatisfaction with service

delivery. Efforts made by the Partner Organisations have helped bridge the gap between the police and the community.

- There are no clear formal or informal protection mechanisms at the community level for the protection of children. However, the children shared that they can approach the local NGOs and Childline to report issues and seek help. Since the mapping, the field teams from the Partner Organisations have facilitated the processes of establishing Community Child Protection Committees (CCPCs), which are now actively engaged in issues related to child protection and child rights.

## F. Play and recreation

No organized play and recreational spaces/facilities exist for girls and boys of different ages, or for disabled children within the community.

Conflict over common space between children belonging to different age groups and gender, and between children and adults, often prevents younger children and girls, in particular from playing outdoors.

The common open spaces in the community have turned into places to dump garbage and hot spots for substance abuse and public sexual harassment

For families to create protective environments, characterized by the qualities of caring and opportunities for participation for young people, they, in turn, must exist in communities that also provide support and opportunities for families, children and adolescents

due to the lack of everyday maintenance. In the absence of other spaces, children are forced to play in these unsafe environments. Efforts have been made by the field teams from the Partner Organisations and the CCPCs to transform such spaces into safe play spaces that can be accessed by all groups of children.

### **G. Participation and empowerment**

There is a complete lack of formal or informal platforms across the three settlements for the residents, including children, to organize themselves and discuss local issues that affect them. Children and women lack opportunities for participation at home. Gender stereotypes shape their limited participation opportunities in the day-to-day and important decisions taken at home.

### **Recommendations**

The last chapter presents the outline of a Safe Community model underpinned by Safe Community indicators, which are developed to address three levels of deprivation: child-specific, family/household specific and community/neighbourhood specific. The Safe Community indicators, similar to the research indicators, are based on the transactional-ecological model of human development,

and move beyond the identification of risk factors in children's lives to identify protective factors that are essential for positive outcomes for children. This approach is in line with the positive measures outlined in the JJ Act and other relevant literature. It firmly believes that for families to create protective environments, characterized by the qualities of caring and opportunities for participation for young people, they, in turn, must exist in communities that also provide support and opportunities for families, children and adolescents (Benard, 2004 & 1991). Some recommendations for action at the government, NGO and community levels to develop a plan of action to create a safe community based on the key findings of this research are discussed. A brief overview of key recommendations is given below:

- Strengthening norms and values that support non-violent, respectful, nurturing, positive and gender equitable relationships for all children and adolescents at home, school and in the community, via different channels and programs such as positive parenting programs.
- Awareness generation about relevant social security schemes, eligibility criteria and points of access.
- Advocacy for accelerating and

## Communities to meet regularly and apprise their local corporators of local civic and infrastructural issues

improving the birth registration service delivery system and registering all births and procuring birth certificates.

- Promoting poverty alleviation schemes, specifically targeting vulnerable families, where children are at-risk of child labour and early child marriage.
- Promoting affordable and accessible quality education

up to the secondary level for all children.

- Advocacy for a central legislation banning corporal punishment and for strict action to be taken against abusive teachers and principals.
- Setting up and training Community Child Protection Committees (CCPC) in every urban poor settlement, Child Protection Committee (CPC) and Child Friendly Police Stations in every ward.
- Training the police, health workers, teachers and others who are in contact with children to adopt non-violent and child-friendly behaviour while interacting with children.
- Mapping of facilities in all government schools in and around urban poor settlements with a view to implementing a strategy to upgrade basic infrastructure, including provision of clean toilets, proper sanitation and safe drinking water, play space/sports grounds.
- Community monitoring of areas intended for play and recreation to deter individuals or groups who threaten children's safety.
- Demanding funds from the MCGM Gender Budget and other relevant slum redevelopment budgets to develop

community designed and built play spaces in the slums and at R&R sites.

- Advocate the eradication of drug dealing and usage within the community and implement the scheme for the prevention of Alcoholism and Substance (Drug) Abuse.
- Advocate government run free de-addiction centres as an essential social amenity in each ward in the city's Development Plan.
- Communities to meet regularly and apprise their local corporators of local civic and infrastructural issues to help them prepare their agendas and push these in a planned manner at the Ward Committee meetings. Issues that fall within the powers and functions of ward committees should be monitored and followed up by the community and the local corporator.



Unprotected railway tracks  
bordering Lallubhai Compound.  
Photo Credit - YUVA

# 1.

# INTRODUCTION

A 'safe community' reduces the risks and vulnerabilities urban children and communities face and builds their resilience by creating social safety and security nets

## 1.1 Background

UNICEF and its partners, Action for Children's Environments (ACE), Pratham Mumbai Education Initiative (PMEI), Youth for Unity and Voluntary Action (YUVA), and Committed Communities Development Trust (CCDT) have been engaged in an urban programme in Mumbai called "Promoting Safe Communities" since 2014. A Safe Community reduces the risks and vulnerabilities urban children and communities face and builds their resilience by creating social safety and security nets. This programme is an attempt to develop demonstrable, evidence-based models to integrate or mainstream the protection concerns of children in vulnerable urban areas.

The "Promoting Safe Communities" programme consists of three phases:

- Mapping risks and vulnerabilities of urban children in select

wards and slums in two cities: Mumbai and Bhopal

- Developing a Safe Community model at the ward level with the participation of communities and local stakeholders
- Implementing and monitoring the roll-out of the Safe Community Model

This report presents an integrated analysis of the findings of the mapping phase of the program across the three selected urban poor communities –Shivaji Nagar in R-North ward, Rafi Nagar in M-East ward, and the resettlement and rehabilitation site of Lallubhai Compound also in the M-East ward of the city of Mumbai.

## 1.2 Objectives of the study

- To conceptualize the protection of urban children within their local communities through a participatory approach.



Household survey in Shivaji Nagar  
Photo Credit - CCDT

- To involve children, according to their age and ability, in mapping, programme development and monitoring, to reduce risks and build resilience in their lives and urban communities.
- To understand the current protection and safety provisions available to the community and the degree of awareness, accessibility and actual utilization by the community members.
- To include child-specific

indicators for a safe community that lend themselves to disaggregation in order to track locality-based inequalities in cities.

- To identify gaps and opportunities in creating safe communities so that these can be factored into the programme development phase.

### 1.3 Approach and methodology for developing mapping indicators

Phase one of this programme was mapping. A participatory

process was adopted to develop the indicators for mapping the safety and protection concerns of children in urban slums from a perspective convergent with the involvement of local partner NGOs, children and adolescent representatives from the selected slums in Mumbai, representatives from DCPU and UNICEF state offices. The following theoretical frameworks were used for developing indicators:

1. The ecological model of child development

**Table 1–1. Framework for Developing Mapping Indicators**

Spatial hierarchy corresponding to systemic levels	Physical vulnerability	Socio-economic Vulnerability	Politico-legal vulnerability	Systemic levels based on ecological model
Family/Home				Microsystem
Community/Neighbourhood/Slum				Mesosystem
Ward				Exosystem
City/District				Macrosystem

(Bronfenbrenner, 1979; Wachs and Shpancer, 1998; Chatterjee, 2006)<sup>1</sup>

2. Vulnerability domains (Moser et al, 2010)<sup>2</sup>

The search for mapping indicators that highlight the vulnerability of children at different systemic levels, led us to adopt a modified version of the Bristol approach (Rustogi, 2012). Our framework orders

<sup>1</sup> An ecological model of child development first developed by Bronfenbrenner (1979) and adapted for the urban context by Wachs and Shpancer (1998) and Chatterjee (2006), sees the child's environment as a multi-level dynamic system (microsystem, mesosystem, exosystem and macrosystem) where each physical level is nested within higher levels (home within community within ward within city) and combines a set of physical, environmental and social structures that directly and indirectly influence children's development. It represents a transactional-ecological model of human development in which the human personality is viewed as a self-righting mechanism that is engaged in active, ongoing adaptation to its environment (see Bronfenbrenner, 1979).

<sup>2</sup> The well-known 'assets/vulnerability' framework (Moser C. (1998)) categorizes vulnerability into physical (external) and social (internal) categories. Social vulnerability was subsequently expanded by Roy, Hulme and Jahan (2013) to include politico-legal and socioeconomic vulnerability. This was done to more fully capture the range of the community's physical, economic, social or political susceptibility to risks. The "Promoting Safe Communities" project adopts this expanded conceptualization of vulnerability domains to discuss urban resilience.

indicators across seven dimensions and two sub-indices of home and community wherever applicable:

- Safety & security
- Protection
- Environment
- Health
- Education
- Play & recreation
- Participation & empowerment

**1.4 Mapping Indicators**

The indicators developed for mapping move beyond and away from an identification of risk factors in children's lives to define protective factors that are essential for positive outcomes for children.

**1.5 Methodology**

The mapping was designed to be participatory involving children, youth, and adults residing

in the three selected slums and having the dual role of respondents as well as trained researchers. The mapping used mixed methods and many different tools such as household surveys; observation checklists; focus group discussions; transect walks; mapping of homes; key informant interviews among others to collect empirical data including the respondents' perceptions of the mapping indicators (described in 1.4 above) at the individual, family and community level. The mapping data forms the evidence base for developing the Safe Community model.

**1.5.1 Mapping context and partners**

Since 2014, the 'Promoting Safe Communities' programme is implemented in two administrative wards of Mumbai – R-North and M-East. Due to the vastness of these wards in terms of population, three urban poor settlements were selected for mapping: the regularized slum of Shivaji Nagar in R-North,

the semi-regularized slum of Rafi Nagar located around the city garbage dumping grounds in M-East, and the Resettlement & Rehabilitation (R&R) site of Lallubhai Compound, also in M-East ward (UNICEF). The project is implemented by UNICEF Maharashtra in partnership with Mumbai NGOs — the Committed Communities Development Trust (CCDT), Pratham Mumbai Education Initiative, Youth for Unity and Voluntary Action (YUVA)—and Action for Children’s Environments (ACE) Trust, the technical partner from UNICEF, Child Protection Section, Delhi.

### 1.5.2 Ethical protocols followed

Research with children needs to be anchored in strong ethical protocols that range from maintaining confidentiality on sensitive issues to ensuring that children are safe and not exposed to different forms of abuse. The researchers anonymized the data to protect the identities of children and community members. Due consideration was given to involving different groups of children or individual children, taking age, gender, disability and other aspects of identity and inclusion into account.

Considering the sensitivity of issues relating to children’s experiences of growing up in slums, each local research team included staff experienced in listening to and providing psychosocial support to children. The local teams were also aware of referral services in the area in case of disclosure of abuse or other significant concerns during the mapping.

The data generated by any of the methods, especially those that are visual and which were time consuming for the children to create, are clearly owned by the children. The researchers ensured that the data was

**Table 1–2. Mapping Indicators across Seven Dimensions**

Dimension	Sub-index	Indicators
<b>1. Safety and security</b>	Home	Sufficient living area (offering privacy to adults and adolescents)
		Kitchen separate from sleeping/living space and use of raised platform for cooking
		In-house toilet
		Safe materials (from fire/other hazards) and for protection from extremes of climatic conditions
		Adequate storage spaces
		Affordable house and basic services
	Community	Availability of security of tenure
		Adequate street lighting
		Safe public toilets when in-house toilets are not available
		Public water supply, when domestic piped water supply is not available
		Community awareness of crime hotspots and proactive actions to monitoring safety in unsafe spaces
		Safe and child friendly spaces available within the community
		Safe mobility options available for work, school and other common everyday routes
		No retail sales of alcohol and other abusive substances particularly to adolescents and children within the community

**Table 1–2. Mapping Indicators across Seven Dimensions**

Dimension	Sub-index	Indicators
<b>2. Protection</b>	Social Equity	% of children having birth certificates
		% of BPL population at slum level
	Violence	Violence (actual abuse or the threat of abuse whether physical, sexual, verbal, emotional or economic) within the family, perceived prevalence (%), and coping
		Violence and conflict within the community, forms, perceived prevalence (%) and coping
		Violence (harsh disciplining through corporal punishment, bullying etc.) in school, perceived prevalence (%) and coping
	Child marriage	Perceived prevalence (%) and coping
	Child Labour	% of children and adolescents engaged in labour – perceived prevalence
		Children living and working in streets (numbers) – perceived prevalence
	Child protection within families	Whether children are able to directly communicate with family members about difficult issues
		Whether children are able to directly communicate with teachers about difficult issues
Community level protection	Formal and non-formal community based protection mechanisms to safeguard children are available	
	Child protection training available for designated school staff	
Government protection systems	Presence of accessible and efficient government protection/prevention/service provision systems	
	Awareness about and satisfaction with protection systems (level) within families	
<b>3. Environment</b>	Home	Availability of water, sanitation and electricity
		Affordability and adequacy of home and basic services
	Community	Physical structure of neighbourhood that influences children’s mobility and outdoor activities through location and nature of :
		1. open spaces
		2. streets
		3. community facilities
		4. adequate infrastructure and basic services:
		5. garbage
		6. water supply
		7. sanitation
		8. streetlights
		Land use characteristics:
		1. conformity with designated land use of the settlement
		2. supportive land use in adjoining areas
		Hazards/disasters: natural and man-made:
		1. traffic
		2. pollution
		3. mobile phone tower radiation
		4. railway tracks
		5. road safety measures: signals, speed-breakers
6. dumping grounds		
7. fire		
8. flooding		
9. proximity to retail sales of alcohol and other abusive substances		
<b>4. Health</b>	Healthcare facilities	Availability of a facility where parents can consult professionals for children’s health and development
		Availability of health check-up centres in or around the neighbourhood
		Availability of counselling centres for mental health
		Availability of emergency care facilities in the ward
	Environmental health	Population with access to adequate water supply and good quality water (%)
		Population served by garbage collection (%)
		Population with access to adequate sanitation (%)
		Cleanliness initiatives at neighbourhood level

**Table 1–2. Mapping Indicators across Seven Dimensions**

Dimension	Sub-index	Indicators
<b>5. Education</b>	School enrolment	Students completing primary education (%). Gender segregated data.
		Students completing secondary education (%). Gender segregated data.
		Male population enrolled in school (%)
		Female population enrolled in school (%)
	Quality of education	Perception of quality of teaching and guidance by school teachers
		Children’s voices are heard in school
	Provisions	Availability of quality early childhood education facilities (Anganwadi)
		Affordable schools in proximity to the home – both primary and secondary
		Availability of vocational courses with enrolment in secondary and higher secondary schools respectively
	Retention	Adolescents regularly attend school – perceived prevalence (%)
		% of adolescents age 10-19 who are currently beneficiaries of a social protection scheme to stay in school or delay marriage
	Inclusive education	Availability and accessibility of education for special needs children (developmental issues, behavioural issues, medical issues, mental health issues, learning disabilities).
		Equal treatment for children with disabilities
Gender equality in school		
No discrimination based on caste, religion, etc.		
<b>6. Play and Recreation</b>	Provisions for play, games and sports	Availability and accessibility of spaces for play, games and sports within the neighbourhood and ward
		Availability and accessibility of play spaces for boys and girls of different ages
		Play spaces designed keeping in mind disabled children
		Availability of spaces in the community where children can connect with nature
		Playing at school and in the community tolerated and supported
		Informal Play by children in public spaces tolerated and supported
	Culture and recreation	Children are a part of cultural celebrations and festivals
		Recreational opportunities (passive and active) for adolescents present within the ward
		Cultural/recreational programs or age-appropriate group activities for children are organized within the community
<b>7. Participation and Inclusion</b>	Family	Participation/decision-making opportunity for children within the family
		Family associated with political parties/formal and informal community-based associations and groups
	Community	Children’s groups are connected to and participate in local area-based and community structures
		Participation opportunities at ward and municipal level for adolescents

For a detailed discussion of the SDGs with respect to the mapping indicators see appendix 1.



Transect walk with children in Shivaji Nagar  
Photo Credit - CCDT

**Table 1–3. Tools and sampling**

Cumulative sample size across three communities for household survey	
Total Sample Size	1811 HHs
Total Sample Population	9,478
Total Adult Males	2,661
Total Adult Females	2,632
Sex Ratio	989 females per 1000 males
Total Boys (0-18)	2,308
Total Girls (0-18)	1,877
Average household size	5.28

recorded, leaving the original outputs at the Child Resource Centres in the custody of the partners, where the children can easily access their work (this safekeeping was necessary so as not put the children at risk if they had taken these home or to other community settings).

The partner organizations that mobilized the communities for mapping are child-centred organizations with established trustful relationships with children and families in the selected communities. They were responsible for running the Child Resource Centres (CRCs) with UNICEF support in the selected communities, as a pilot initiative under this programme, and were thus able to create a safe enjoyable environment in which the children

felt free to speak out and share their views.

### 1.5.3 Tools and Sampling

A purposive representative sampling strategy was adopted to obtain as wide a representation of the community as possible.

Tools were developed for each of these methods in a participatory manner, with all the research partners covering all the mapping indicators. The focus for each tool and sample size is mentioned in table 1-6.

FGDs on various topics were conducted by a professional researcher after the administration of the five tools shown above. The FGDs were a means of validating emergent findings and plugging data gaps.

After the community level mapping, ACE carried out a ward and city level mapping by analysing Census of India 2011 data, NCRB data, the draft development plan (DP) for Mumbai 2034, relevant historic, economic, political, cultural, planning and governance related texts from secondary sources and through expert interviews.

### 1.5.4 Children's participation in mapping

In each location, 20-40 adolescent researchers aged 10-19 years (some children under 10 years participated in surveys involving OC2 and OC3 tools as discussed below), along with adults from the community and facilitators from partner organizations, participated in documenting local safety conditions

**Table 1–4. Details of Phase I Mapping Tools and Corresponding Sample Size across 3 Slums**

Sl. No.	Mapping Tool	Focus	Sample size
1	Adult Administered Questionnaire	Family profile, social safety nets, protection and protection systems (community conflicts & violence, resolution mechanisms, child marriage), neighbourhood environment, health, education, participation and environment	1811 HHs
2	Child Administered Questionnaire	Housing, utility services, protection and protection systems (child labour, emergency shelter options, safe unsafe spaces, children without family, protection mechanisms for children)	1307 HHs
3	Observation Checklist I	Safety and security of home	303 HHs
4	Observation Checklist II	Safety and security of neighbourhood	Project-based research with children and adults on selected issues that threaten safety and security
5	Observation Checklist III	Perceptions of safety in everyday settings through safe/unsafe place mapping	216 children belonging to three age groups (below 10, 11 to 14 years and 15 to 18 years) with equal gender representation.

**Table 1–5. Details of Phase II FGD Mapping tools and Corresponding Sample Size across the 3 Slums**

a. Perception of Safety in the Community			
	Group 1	Group 2	Group 3
	Adolescents 13-15 years	Adolescents 16-18 years	Parents
Male	17	8	10
Female	10	15	15
b. Violence and Abuse			
	Group 1	Group 2	Group 3
	Adolescents 13-15 years	Adolescents 16-18 years	Parents
Male	13	13	9
Female	14	10	12
c. Perception of life in a slum			
	Group 1	Group 2	Group 3
	Adolescents 16-18 years	Fathers	Mothers
Male	15	25	0
Female	12	0	22
d. Participation and Empowerment			
	Group 1	Group 2	Group 3
	Adolescents 13 -18 years	Adult women	Adult Men
Male	12	0	25
Female	13	27	0
e. Disasters, Hazards, Risks and Impact			
	Group 1	Group 2	Group 3
	Adult men	Adult women	Youth
Male	21	0	12
Female	0	21	11

for children and adolescents. Over a period of six months, they applied the following methods:

**Household surveys:**

The household survey questionnaires were of two types – one was administered by child/adolescent researchers to one adult respondent/household and the other was administered by adult community volunteers to one

adult respondent/household. The setting for administering the questionnaire was the respondent’s house. These instruments were designed to help child/adolescent and adult researchers to interact with their peers and other adults in their community. With a view to building the capacity of the community, including children and adolescents, the research methodology provided them an opportunity to understand

the safety issues of concern to children and adolescents and the community, as well as to develop a general understanding of the relative importance of different issues among the residents of their respective communities.

Facilitators trained separate groups of adult volunteers and adolescent researchers to administer the relevant questionnaire to 10% of the



Children showing unsafe places during the transect walk  
Photo Credit - YUVA

community households, minus households with no children or adolescents. Facilitators divided the area up geographically, and accompanied each young person for the first few interviews to answer questions about the administration and ensure quality.

### Systematic observations:

To help children make analytic observations at the home and neighbourhood levels and to map safe and unsafe spaces and practices, three observation checklists were developed. The children used these observation checklists while visiting people's homes, different community settings and common facilities, undertaking transect walks

in the community, and by working in groups in the CRCs, which offer a space for child participation.

- Observation Checklist 1 (OC1) for home observations: Using a clipboard and checklist, adolescent researchers visited 100 homes in each location to identify physical features and uses of space that could be harmful to children's health, privacy and learning at home. Adult facilitators helped each young person become familiar with the instrument and went along on the first few house visits to ensure that the young researcher was comfortable with the process, and to check on quality.

- Observation Checklist 2 (OC2) for neighbourhood observations: Using a similar checklist procedure, adolescents formed small groups to observe their neighbourhood environment, including streets and public spaces, garbage disposal, sanitation facilities, water collection points, street lighting, fire safety, transportation, and schools. Each group was assigned a different aspect of the community to observe and document. They could supplement the checklist with photographs and informal interviews with service providers and users. To check the consistency of the information and obtain viewpoints about three age groups (less than 10 years, 10-14, and 15-18), this checklist



Marking safe and unsafe spaces on local maps  
Photo Credit - YUVA

(OC2) was administered repeatedly in different parts of the community and at different moments in time.

- **Observation Checklist 3 (OC3) for safe/unsafe spaces:** This is a sequential three-step tool. Based on their house and neighbourhood observations, and the other methods that they used, the children and adolescents worked in their age groups to map safe and unsafe spaces in their community. Each age group involved 20 to 24 children, in groups of no more than 12 at a time, with equal representation of boys and girls, with the goal of arriving at a sample of 60-72 children. The children and adolescents used coloured markers, sticky pads, pens and pencils to label a large community base map and placed green and red dots on safe and unsafe spaces. Facilitators recorded their discussions and the data generated was tabulated to generate a list of safe and unsafe spaces to be visited during the transect walks, which was the second step of OC3.

- **OC3 Transect walks:** A subsample of 36 children and adolescents were divided by age into three groups, of six boys and six girls. In advance, facilitators prepared a list of the safe and unsafe spaces that the children and adolescents

had marked on the base maps. They then accompanied each group on a child-led walk through the community. Along the walk they took photographs of safe and unsafe spaces, which the facilitators helped them annotate.

- **OC3 Focus group discussions:** The photographs taken during the transect walk were used as prompts during focus groups with the children and adolescents, which was the third and last step of OC3. In each group a facilitator explained the purpose of the group and how the information collected would be used. The children and adolescents were encouraged to discuss the issues that the photographs raised. The transect walks and focus groups helped validate the data gathered from the safe and unsafe space mapping. ACE then integrated the map data into a GIS platform for further analysis.

- **Mental maps of homes:** As many of the emergent issues of child safety and abuse were directly linked to the habitability of homes, children were asked to draw mental maps of their homes to explore issues such as density and overcrowding, cooking practices, toilet access, and privacy. This method was chosen because it was as unobtrusive as possible with respect to the private domain

of the home.

- **Interviews:** Many key informant interviews were conducted within the community to piece together the history of the settlement and verify the ownership of homes. Experts were also interviewed to understand the politics of service delivery and local governance in slums in Mumbai.

- **Issue-based case studies:** Once the first phase of data was analysed, it was apparent that some protection issues were not adequately captured, such as child abuse and child labour. The local NGO partners who regularly worked on these issues developed a few case studies to highlight the depth and dimensions of these issues.

## 1.6 Limitations of the study

This study has three main limitations. First, as the research tools, developed in collaboration with local implementing partners, explore seven different themes through the lens of child protection, data gathered on services such as healthcare and education (schools and anganwadis) only focused on proximity, ease of access, condition and quality of infrastructure and a basic perception of the service. In-depth research on quality of service and impacts on children did not form part



of the scope of this research and should be addressed in future research.

Second, data for many of the indicators presents the perceptions of the respondents as opposed to factual information. Perceptual data along with facts would have helped in conducting a more detailed analysis and presenting the actual extent of the prevalence of each of the issues discussed. For example, in the section on ‘parents’ perception of crimes in the community’, only perceptual data is available and this could have been reinforced with relevant data from the local police records. Also, issues such as child labour, child marriage, violence and abuse could have been understood and presented in greater detail if case studies and police statistics were available.

Third, although adequate in terms of numbers, the sample could have been more stratified across some variables to better represent different vulnerabilities linked to them. For example: through the study we found that there are certain variables — such as in the case of the Resettlement & Rehabilitation (R&R) site at Lallubhai Compound, the buildings by different developers (e.g.: SV Patel vs. Hiranandani), people living on the lower floors

vs. those living on the higher floors; tenant households vs. owners; and people living in buildings with and without housing societies — have an effect on the quality of the residents’ lives. If the sampling had consciously been stratified across these variables, the data could have been analysed in greater detail to understand how these variables interact with the vulnerability of children and families. Future research could take these variables into account in the context of the R&R sites.



Slums against the backdrop of a high value real estate in Mumbai.  
Photo Credit - ACE Trust

## 2.

# MUMBAI: THE DIVIDED MAXIMUM CITY

Mumbai is a divided city with the highest number of billionaires and millionaires in the country. It also has the most slums where 49.38% of the city's population lives

Mumbai - called Bombay until 1995 - is India's second largest city. It is India's financial capital generating 6.16 per cent of India's GDP and 40 per cent of the GDP of Maharashtra. In public perception Mumbai is India's biggest, fastest and richest city — India's Maximum City.

Consequently, Mumbai has attracted migrants from the late 19th century onwards, a trend that continues today except that the pattern of migration has changed with respect to place of origin and destination within the mega city. Earlier migrants mainly came from other parts of Maharashtra and Gujarat; over the last 50 years, there has been a considerable increase in the share of migrants from Uttar Pradesh and to some extent, Bihar. Within the city too, there had been a decline in migration within the core of Mumbai with migration shifting to the

peripheral areas of Mumbai Urban Agglomeration (Bhagat and Jones, 2013).

As in the eponymous book — Maximum City (Mehta, 2017) — the reality of Mumbai is that it is a divided city, with the highest number of billionaires and millionaires among all Indian cities, as well as being one of the most slum-filled cities with 49.38% of the city's population living in slums (Census of India, 2011). There are also some 15,274 homeless households in Mumbai who live on pavements and in other public places of the city.

The first Human Development report of Mumbai (2009) extensively commented on the wide physical and social disparities between the slum and non-slum populations, which impacts literacy, sex ratio, morbidity rate, family space, and mental stress. The Mumbai HDI states —

The contrasts in living standards are of a magnitude not seen anywhere else in the country.... Two distinct cities exist within one.

## 2.1 What type of city is Mumbai?

According to the Census of India 2011, Greater Mumbai is part of an Urban Agglomeration (UA) in the Mega City category. Along with the neighbouring regions of the Mumbai Metropolitan Region (MMR),

Category	Value
City Population	12,442,373
Children (0-6 years)	1,203,770
Average Literacy	89.73 %
Sex ratio	853
Child Sex ratio	913
Slum Population in Greater Mumbai	4,620,654
Slum population as % of city's population	49.38%

it is one of the most populous urban regions in the world and the second most populous metropolitan area in India after Delhi, with a population of 20.7 million in 2011. Because of the mega-scale of the urban area, and the interdependencies of the spatial dynamics of its different parts, Mumbai needs to be understood across its

mega urban regional spectrum. For example, Greater Mumbai is closely linked to the cities and settlements within the MMR. Some cities in the MMR function largely like suburbs of Greater Mumbai, with millions of workers using the suburban railway networks to commute to work in Greater Mumbai from their homes in the MMR (and beyond). Geographically Mumbai's mega urban region is made up of three distinct entities (Bhagat and Jones, 2013), which are (see figure 2.1): Greater Mumbai (the core area of MMR), Mumbai UA (comprising Greater Mumbai and other adjoining cities and towns) and Mumbai Metropolitan Region

(the area beyond the municipal boundaries).

## 2.2 How is Greater Mumbai governed?

Greater Mumbai is the core city of the MMR. The Brihanmumbai Municipal Corporation (BMC) also called the Municipal Corporation of Greater Mumbai (MCGM) governs Greater Mumbai, which includes its two revenue districts: Mumbai City and Mumbai Suburban. The BMC is responsible for administering and providing basic infrastructure (roads, schools, hospitals, water and electricity supply, sewage treatment and so forth) to the city and suburbs of Mumbai (see table on the

Task
The 12th Schedule of the 74th Constitutional Amendment Act of India defines 18 new tasks in the functional domain of the Urban Local Bodies, as follows:
1. Urban planning including town planning.
2. Regulation of land-use and construction of buildings.
3. Planning for economic and social development.
4. Roads and bridges.
5. Water supply for domestic, industrial and commercial purposes.
6. Public health, sanitation conservancy and solid waste management.
7. Fire services.
8. Urban forestry, protection of the environment and promotion of ecological aspects.
9. Safeguarding the interests of weaker sections of society, including the handicapped and mentally retarded.
10. Slum improvement and upgradation.
11. Urban poverty alleviation.
12. Provision of urban amenities and facilities such as parks, gardens, playgrounds.
13. Promotion of cultural, educational and aesthetic aspects.
14. Burials and burial grounds; cremations, cremation grounds; and electric crematoriums.
15. Cattle pounds; prevention of cruelty to animals.
16. Vital statistics including registration of births and deaths.
17. Public amenities including street lighting, parking lots, bus stops and public conveniences.
18. Regulation of slaughter houses and tanneries.

Twelfth Schedule of the Indian Constitution which outlines the responsibilities of Urban Local Bodies).

The BMC is India's richest corporation with an annual budget of rupees 37,000 crores (1 crore = 10 million rupees or approximately 155,000 USD), which exceeds the budgets of some of the small states of the country. The administrative structure is very complex with no proper coordination between the various departments. There is also a lack of coordination between functionaries at the corporation and the ward level. For example, water and sewerage are central departments but they do not coordinate with the ward where these services have to be provided.

### 2.2.1 Provisions for women and children

Gender Budget: In 2009 - 2010, the MCGM introduced a gender budget to focus on schemes and issues concerning women and children. The MCGM recognized that life in a slum settlement is particularly stressful for women and children as:

- a. Slums lack proper infrastructure due to their unauthorized development.
- b. There are no individual toilets and water supply is intermittent.
- c. Drainage facility is very basic.

d. Households in slums are economically weaker.

The gender budget makes provisions under the following categories:

- a. Economic and social upliftment
- b. Educational upliftment
- c. Health and sanitation
- d. Development of children's parks with modern equipment and recreation facilities.

There have been no major changes in any of these categories ever since the inception of the gender budget.

Women and Child Welfare Committee: There is just one statutory committee within the MCGM to work on women and children's issues. Under Section 38A (1) of the M.M.C. Act, it appointed the Women and Child Welfare Committee drawn from its own body consisting of 36 members. All matters and questions pertaining to the domain of work regulated by this committee have to be submitted to the Corporation accompanied by the Committee's recommendations. The domains of work include:

- a. Museums, Swimming Pools and Sports Complexes.

b. Maternity Homes, health posts, Family Planning,

c. IPPV

d. Pre-primary Education.

e. Supply of Nutritious food in Municipal Primary Schools.

f. Preventive Measures to control venereal diseases.

However, this Committee's deliberations are not informed by the ground reality and it has no say in planning the gender budget.

### 2.2.2 The ward: the lowest unit of decentralization of urban governance

Mumbai has 24 administrative wards and 227 electoral wards. The distribution of electoral wards (based on population) within administrative wards is uneven as some administrative wards consist of three electoral wards while others in the suburbs may have as many as 17, making administration difficult. Currently the BMC is studying the need to reorganize administrative wards to make the distribution more equitable.

One councillor (called a corporator in Mumbai) is elected from each of these electoral wards to constitute the Corporation Council of 227 councillors. These corporators, along with the Mayor who is elected from

among the corporators and the Municipal Commissioner, wield the executive powers that govern Mumbai. The corporators are responsible for ensuring that their constituencies have basic civic infrastructure, and for monitoring the relevant authorities to pursue the development of the ward. The 2017 BMC election was won by the Shiv Sena when 181 corporators from across the political spectrum voted for the Shiv Sena nominee Vishwanath Mahadeshwar.

The BMC has an overall annual budget of 37,000 crores but municipal councillors receive only Rs. 60 lakhs (1 lakh or lac equals 100,000) as discretionary funds for local area development. Residents of a ward can directly approach their councillor with complaints, suggestions and requests for development work. The councillor puts these suggestions before the ward committee, which consists of members elected from the wards who are supposed to meet at least once a month. Mumbai has 17 ward committees for its 24 administrative wards.

The powers and functions of Wards Committee in general are:

- Maintenance of sanitation, solid waste management, water supply and drainage / sewerage



**Legend: Mumbai Metropolitan Region**

**Authority**

- Municipal Corporation
- Municipal Council
- New Town Development Authority
- Special Planning Authority

Source: Bombay Metropolitan Region Development Authority (1995).

**Figure 2-1. Local governance structure and planning authorities in the MMR**

- Maintenance of roads and street lighting
- Maintenance of markets, parks and playgrounds
- Maintenance of school buildings, dispensaries and maternity and child welfare centres
- Review of revenue collection
- Preparation of a draft annual budget for its jurisdictions, which is

forwarded to the council for consideration and incorporation in the municipal budget

Approval of capital and maintenance works within certain limits

## 2.3 Planning and Development and the Urban Poor in Mumbai

Planning in Mumbai is governed by the Maharashtra Regional and Town Planning (MRTP) Act of 1966. The Act provides for development plans (DP) for individual cities, town planning schemes for the reconstitution of plots for parts of cities, plans for new towns and proposals for the development of land in undeveloped areas through special planning authorities. Within the Act, development is typically understood as developing the real estate of the city and not much else (Indorewala, 2017).

The biggest criticism of Mumbai's new Development Plan (with a perspective up to 2034), which is under preparation, is that it is a static plan and it "draws exclusively from technical expertise, distanced from people's lived experiences and needs, and actively excluding large numbers of people, places, activities and practices that are an integral part of the city" (Kamath and Joseph, 2015, p.54).

### 2.3.1 Vision for the poor in Mumbai's DP 2034

Mumbai DP 2034 sees Greater Mumbai as a "Competitive, Inclusive and Sustainable City" although, in reality very little is actually proposed to enable the transformations described. The Development Plan (DP), different stakeholders contend, addresses the concerns of the upper and middle classes, while the issues of the urban poor remain unaddressed (Why should we, 2017).

A stakeholder network of 250 NGOs and citizens, consisting of approximately 2500 persons, became actively involved in the DP process. These different stakeholders came together in a collective campaign called Hamara Shehar Vikas Niyojan Abhiyan Mumbai to facilitate a participatory process involving even the lowest ward level, using the preparation of the DP as an opportunity to democratize urban planning and governance (Kamath and Joseph 2015). They forced the MCGM to disclose and share with the public the Existing Land Use (ELU) directives, on which the draft DP is to be based. This was an unprecedented achievement, as the Act only requires the Draft Plan to be made public. The group's scrutiny of the ELU revealed about 3,000 errors, including the omission of

areas under slum clusters (SC) and Special Planning Authorities (SPA) and public amenity plots (open spaces, public dispensaries, municipal schools, Baal Wadis).

Some of the omissions and approaches in the DP that provoked a great deal of protest, include but are not restricted to:

- Proposing roads that are not aligned with existing roads but cut through existing residential colonies and gaothans<sup>3</sup> and threaten the destruction of existing neighbourhoods
- Being developer friendly and unfriendly towards common citizens: liberalizing the floor space index (FSI) limit (raising FSI to a maximum of 8) and zoning (emphasizing mixed zones), reducing open-space norms, and opening up development in "no development" zones
- Shift from reserving lands for specific purposes like "public housing" to awarding development rights to developers to produce affordable housing via "resettlement and rehabilitation.

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<sup>3</sup> Gaothans are urban villages that housed Mumbai's original inhabitants, mainly farmers with livestock. The history of gaothans can be traced as far back as the 6th century. There are 128 gaothans in Mumbai (Boom live 2015). The draft DP 2034 classified gaothans as slums and was highly criticized for this.

### 2.3.2 Critiquing provisions in the DP from the perspective of provisions that impact children

Planning decisions directly impact children. The indicators in this study focus particularly on provisions related to housing for the urban poor, open spaces, water and sanitation, environment, health, education, play and recreation. We will look below at the provisions in the draft DP and at other recommendations made by civil society groups in these sectors and domains.

Draft DP 2034 states that most of the residential areas in Greater Mumbai already have basic amenities such as primary education and open spaces within walking distance, and 60% of the residential neighbourhoods have municipal dispensaries within walking distance. This is however not true for the two wards selected for this study: M-East and R-North. It is also important to note that distance-based criteria establish proximity and not accessibility, which is a more complex concept linked to the politics of control and management of a space/facility and the maintenance and quality of the service provided.

#### Housing

At present 41.85% of the slum population occupies only 8.18% (33.96 sq. km) of the total Planning Area of 415.05 sq. km. The present DCR contains provisions for the rehabilitation of existing slums but there are no provisions for ensuring affordable housing. Moreover, under the current SRA model existing slum dwellers are to be accommodated in less than 50% of the current slum area making slum rehabilitation extremely dense with far-reaching implications for play and recreation opportunities for children.

The housing recommendations made by civil society and the 'People's Vision Document for Mumbai's Development Plan' include:

- Promoting the idea of 'Housing for All' and increasing affordable housing
- Reservation of land under the Public Housing category for existing informal settlements
- Improvement of slums and the provision of adequate services and amenities to slum/pavement dwellers
- Reservation of 60% of houses for the EWS and LIG in any housing development in Mumbai [instead of the current 10%]

- Slum development to be undertaken by State bodies as against private developers
- Regulating standards for SRA
- SRA schemes proposed in the respective constituencies to be included in the DP

#### Water and Sanitation

##### Water:

The MCGM supplies about 268 LPCD of water (ex-treatment), which is far higher than the adequate standard. However, the water supply network coverage remains an issue. Of the total domestic connections, on average 8 households are served by a single connection whereas in the case of slums a single connection serves 15 households. Moreover many slums, which have developed post 1995, are not provided with water connections.

Also, as per the MCGM water supply department regulations, water services are provided to informal settlements in the form of a common connection in a General Washing Place (GWP) for a minimum group of 5 households. The citizens in slums who have proof of existence prior to 01.01.2000 are eligible for water connections under the present policy (MCGM, 2016).

### Sewerage system:

Currently 60% of the Greater Mumbai area, 42% of the population and about 2% of the slum population, is connected to piped sewer lines. Nearly 40% of Greater Mumbai lacks a sewerage network up to the last mile (Municipal Corporation of Greater Mumbai, 2034). Recommendations by civil society to address these issues include:

- Provisioning Sewage Treatment Plants (STP) and water recycling units in all major outfall locations
- Treatment of sewage by housing societies
- Ensuring adequate toilet facilities
- Providing public toilets
- Connection of sewer lines either to a sewer network or to underground septic tanks
- An NBC code for slum sanitation
- Allotment of an area of at least 2,000 sq. m. for sorting waste in every ward of the city

### Open Space

Mumbai has less than 1.24 square meters per person of open space; the per capita

availability of open spaces in the Eastern Suburbs is 1.09 sq. m per person, and in the Western Suburbs, 1.18 sq. m per person. The URDPFI guidelines recommend 10-12 square meters per person. So clearly the availability of open space amenities is lower than planning standards. Recommendations by civil society include:

- UDPI guidelines should be followed for open space development
- Tapping untapped resources such as making waterfronts and waterways accessible for public use. Currently Mumbai has 70 km of waterfront but only 10 km is accessible to the public.
- Make a clear distinction between natural areas and open spaces in the DP. Beaches are accessible to the public but need to be treated as natural areas.
- Clear mapping of private and public open spaces and a policy to open the public spaces that belong to private clubs and gymkhanas to the public
- Designating a hierarchy of open spaces and their degree of accessibility at the local, ward and city level.
- Freeing up the 6% of land reserved under open spaces in

the DP from encroachments

- Public spaces such as notified open spaces, water edges, paths, urban squares and plazas shall be sacrosanct and not be built upon.

For a detailed discussion of ward level open spaces see Chapter 3.

### Health

The current average space per capita across the city for health amenities is 0.15 sq. m. However, in most wards the actual provision is much lower. The recommended minimum space norm to meet all levels of the population's health care needs (primary, secondary and tertiary) is 0.385 sq. m per person for Greater Mumbai.

It should be noted that this area-based analysis does not describe the number or type of facility needed to serve the population size, or access conditions for vulnerable populations in underserved areas.

Civil society groups demanded that the DP should ensure affordability and equitable access to healthcare facilities for a comprehensive range of curative, symptomatic, preventive, promotive and rehabilitative health services for all at the primary, secondary and tertiary levels.

## SOCIAL VULNERABILITY | HEALTH & EDUCATION

### ENVIRONMENTAL HEALTH:

- ▶ **Food, water, and vector borne diseases** are quite common
- ▶ **Skin infections** are common among adults and senior citizens
- ▶ The diseases are indicative of **unhygienic living conditions and poor sanitation**



### ACCESS TO HEALTHCARE FACILITIES:

- ▶ Accessing treatment through government as well as private hospitals is very common
- ▶ The residents also rely on small private clinics/dispensaries and charitable institutions
- ▶ Quite a sizeable number of households also approach quacks or resort to self-prescription for treating illnesses



### SUBSTANCE ABUSE:

- ▶ Very high perceived prevalence
- ▶ Children as young as 8 years getting inducted into the use and abuse of substances
- ▶ Absence of free quality deaddiction services in and around the community



### PROVISIONS FOR EDUCATION:

**SCHOOL ENROLMENT FOR CHILDREN** Highest at the primary level but gradually falls from the upper primary level onward

#### SHORTAGE OF GOVERNMENT PRIMARY AND SECONDARY SCHOOLS

**Just 2 government primary schools and 1 government secondary school for a planned population of 52000**

- ▶ Grossly inadequate, DP regulation mandates 1 primary school/ 6000 persons and 1 secondary school/ 9000 persons

#### EDUCATIONAL FACILITIES PROVIDED IN HIGH-RISE APARTMENTS IN R&R COLONY

MMRDA provided apartments to the BMC to run schools and Aanganwadis in Lalubhai Compound-

- ▶ **Difficulty in access** These facilities run in varied apartments across different buildings in the community
- ▶ **Difficulty in access for young children (3-5years)** The Aanganwadis too, are located in different buildings

#### INADEQUATE PLAY FACILITIES

- ▶ Except 1 private school, none of the many other schools that Lalubhai Compound children attend have any playgrounds

#### INADEQUATE TOILETS IN SCHOOLS

- ▶ Some of the government schools do not have toilets
- ▶ Toilets in both private and government schools are unclean and children are often prevented from using them



### SAFETY AT SCHOOL:

#### Unsafe feeling at school due to

- ▶ Fear of teachers - 53% boys, 66% girls
- ▶ Getting bullied by seniors
- ▶ Facing eve teasing on the route to school
- ▶ Punishments received at school (girls are let off with lesser punishment) for not completing homework/not doing well academically/being late / not wearing proper uniform
- ▶ Scary instances of suicides among students at school because of scoring low grades or failing an exam
- ▶ Schools and classrooms not safe for boys (anyone could come in and beat anyone)



Figure 2-2. Social vulnerability due to inadequate health and education in Lalubhai Compound

## Education

The DP assessment of education is majorly a spatial one, governed by land demand, per capita land requirement and FSI, and not based on the number of schools needed to serve the population size, or the type of school (primary, secondary etc.) needed in a particular area, issues that are directly linked to school dropout rates. Most of the standards highlighted are obsolete (DP 1991 Standard) and the URDPFI guideline has not been considered. Standards established for educational facilities by the URDPFI Guidelines are generally twice as high as the standards established in the DP 1991 for Greater Mumbai.

Also, an area of 853.81 ha is allotted to all Educational Amenities in Greater Mumbai. The average per capita space availability in the Mumbai suburbs for Municipal Primary educational facilities is 0.11 sqm per person as compared with the DP 1991 standard of 0.552 sqm per person. The average per capita space for secondary educational uses is 0.20 sqm per person in the suburbs. This indicates that the suburb is grossly underserved as far as primary and secondary education is concerned, even when compared with the DP 1991 standards.

Studies by civil society groups

have concluded that Greater Mumbai is in urgent need of an Education Master Plan based on the RTE parameters. They demand that:

- The number of secondary schools should be increased
- More municipal schools are needed to make schools accessible to all classes of society
- There should be integrated schools from pre-primary till 12th standard
- Integrated schools in informal settlements should be located in consultation with the community
- There is a need for Integrated Child Development Services (ICDS) compliant balwadi and anganwadis
- Reservations are needed for both primary and secondary schools in the DP (as per the existing standard) with requisite infrastructure, facilities and safety standards.
- Primary and secondary schools should be located within a walking radius of 1 to 3 km

### Other facilities for children

Certain legally mandated provisions for children were missing in the draft DP.

The People's Vision Document for Mumbai's Development Plan points them out and recommends the following:

- Reservation and implementation of ICDS centres within informal settlements.
- Setting up one Children's Home and one Observation Home according to the JJ ACT 2016 in every ward.
- The DP needs to consider spaces for child learning centres where children can explore their skills. One such centre should be created for 10,000 people.

### 2.4 How safe is Mumbai?

This section briefly discusses the statistical crime data available for the city of Mumbai.

According to statistical data available in the NCRB report (2015), a total of 7,326,099 cognizable crimes comprising 2,949,400 Indian Penal Code (IPC) crimes and 4,376,699 Special & Local Laws (SLL) crimes were reported, showing an increase of 1.3% over 2014. Mumbai had a total of 42,940 incidences of cognizable crimes under IPC in 2015, contributing 6.4% of 676,086 cases recorded nation-wide. It ranked second in the country after Delhi (173,947 cases). Under the SLL category Mumbai had a total of 23,737 incidences of

cognizable crimes, contributing to 1.7% of 1,380,043 such incidences reported All-India. Mumbai ranked 15th for incidences of cognizable crimes under SLL for the year, with Chennai ranking the highest with 155,671 reported cases.

### **Cognizable crimes in Mumbai under the Indian Penal Code**

Cognizable offenses are those offenses that are serious in nature. For example - Murder, Rape, Dowry Death, Childnapping, Theft, Criminal Breach of Trust, Unnatural Offenses. According to the NCRB reports, in 2015 there were 9,140 cases reported under 'Other IPC Crimes', with 9,196 victims in Mumbai.

### **Cognizable crimes in Mumbai under Special & Local Laws**

Many of the cases reported in Mumbai in 2015, under different Acts, saw that the number of victims exceeded the number of incidences reported. The Juvenile Justice (Care and Protection of Children) Act had 178 victims for 30 incidences.

### **Narcotic Drugs & Psychotropic Substances Act**

Mumbai (14,274 cases) recorded the highest number of cases, 38.2%, followed by Amritsar 14.3% (1,382 cases) of the total number of such cases

reported during the year 2014. The high rate of narcotic drug abuse is often accompanied by exposure of children to these substances at a very young age, especially in vulnerable living environments.

### **Crime against Children and Women in Mumbai**

An analysis of the statistical data available (2013-2015) for crimes against women and children shows the following trends:

- **Against Women:** The number of crimes against women reported in Mumbai in 2015 is also indicative of how unsafe the city is for women. In 2015, in Mumbai, 2,008 cases of assault on women, with 2,025 victims, were reported under the accusation Intent to Outrage her Modesty. Forty-three cases with 43 victims were reported under the accusation Childnapping & Abduction of Women to compel her for Marriage. There were 412 accusations in total of Insult to the Modesty of Women, with 414 victims representing a crime rate of 2.2%.
- **Against Children:** A staggering number of 5,035 crimes against children and 1,585 cases of rape were reported in Maharashtra from January to May 2015. In Mumbai alone, according to crime statistics

available on the Mumbai Police's official website, cases of sexual crimes reported against children rose from 146 in 2012 to 447 in 2015, a more than three-fold increase. Maharashtra ranked 5th in crimes reported under POCSO for the year 2015 with 1,687 cases. According to a media report, sex crimes against children have risen and 11,123 cases are pending in courts in Maharashtra (The Indian Express, August 14, 2016).

- **Child Labour:** According to Census of India 2011, there are 185,235 children in Child Labour in Mumbai (urban). However, there are no reports of child labour in the city in the NCRB records.
- **Child Marriage:** According to the NCRB report for the year 2014, one case was reported under the Prohibition of Child Marriage Act in Mumbai (urban). But according to Census of India 2011, 799,026 persons (585,700 boys and 213,326 girls) were married before the legal age.

While the emerging crime trends in Mumbai for the last three years, are visible in these statistics, it is vital to note that crime data in police records does not represent all crimes occurring in society.

The shortage of police



Child in Rafi Nagar sneaking out to play on the dumping ground.  
Photo Credit - ACE Trust

personnel is a major hurdle to creating a safe, resilient, crime-free city as well as to administering timely justice to the victims. In July 2014, the Mumbai police force had a strength of 37,159 officers out of the sanctioned 41,643, a gap of 11%.

- The gap for investigating officers (API and PSI) is 32%.
- This severely affects not only the quality of investigations but also causes delays in completing investigations.
- There is a shortage of officers in the control room to man the helpline numbers 100/103.

- The Control Room is short of 126 officers (again a gap of 47%).

According to the survey conducted by the NGO Praja, only 46% of those who faced or witnessed a crime have used the police helplines (100/103).

The under-reporting of crime or the lack of representation of the data in the NCRB reports is evident. It should be noted that only those crimes that can be registered under the IPC or SLL are recorded by the NCRB. Corporal punishment, the use of children for the creation of pornography, exposure etc. are not reflected in the NCRB data as they are not offences under the IPC. The gross under-reporting of crimes against children is in itself indicative of the low priority accorded to children by parents, care givers, the police and the state (Chopra, 2015).



Deonar dumping ground in  
M-East ward.  
Photo Credit - ACE Trust

# 3.

# OUTLYING WARDS WITH A FOCUS ON M-EAST AND R-NORTH

The open space required in M-East ward is 8,884,920 sq.m. The existing accessible open space only represents 23% of this requirement

In nine of the twenty-four wards in Mumbai the majority of the population lives in slums: F/N, P/N, P/S, R/N, R/S, L, M/W, N, and S.

As the slums under this mapping were located in M/E and R/N wards, we will focus our analysis on these wards.

### 3.1 M/E (M-East)

This is an outlying ward in the Eastern suburbs. M/E ward also has the lowest human development index (0.05) (Mumbai Human Development Report, 2009) amongst the 24 administrative wards of Mumbai. The city's largest solid waste dumping ground is situated in this ward, exposing the residents to numerous environmental hazards. About 65 % of Mumbai's infrastructure

development induced resettlement has also taken place in this ward (Nainan, 2008). The decade between Census 2001 and 2011 saw much urban infrastructure development in Mumbai under two projects partly financed by the World Bank: the Mumbai Urban Transport Project (MUTP) and the Mumbai Urban Infrastructure Project (MUIP). The implementation of both these projects led to large-scale relocation of slum-dwellers. Housing for the project-affected persons (PAPs) was constructed with the participation of the private sector, using the transfer of development rights (TDR) mainly in the M wards. M/E ward had large chunks of relatively cheaper industrial land, a mix of poor and middle-class housing along the main roads,

and bungalows near Chembur railway station. It also had Mumbai's single largest Dalit population that migrated to Mumbai in 1972 to escape the drought in rural Maharashtra (Nainan, 2008) as well as the largest number of households living in poverty (Baud, Pfeffer, Sridharan and Nainan, 2006).

The MUTP resettlement was located in Mankurd in M-East ward despite the obvious environmental challenges presented by the dumping ground, as well as the social challenges of the ward being a site of severe poverty. The choice of resettlement sites in this ward were attributed to "a chance combination of low land prices, TDR market dynamics, and availability of ULCRA (Urban Land Ceiling and Regulation Act) lands along with structured activities of politicians to increase FSI has led to PAP housing clusters emerging in the M-East ward of the city" (Nainan 2008, p.32). As a result, six PAP townships, two each in Anik, Lallubhai Compound and Gautam Nagar, were created on land exempted from land acquisition under the Urban Land Ceiling and Regulation Act of 1976 (ULCRA) for construction of low-income housing. The drop in the slum population in M/E from 77.55 per cent in 2001 to 30.37 per cent in 2011 can be directly attributed to the resettlement colonies for the urban poor, which are no longer classified as slums but continue to register multiple deprivations and low human development.

### 3.2 R/N (R-North)

Located at the Northern tip of the western suburbs of the city, the R-North ward has 46.6% (Mumbai Human Development Report 2009) of its population living in slum settlements. The ward is home to migrant families who have moved from different parts of the city in search of affordable housing. The ward has approximately 15 large slum settlements, only 5 of which have been regularized by the Municipal Corporation of Greater Mumbai.

**Table 3–1. Census of India 2001 Data for M/E and R/N**

	M-East	R-North
Population of ward	674,850	363,827
Area	31.77 sq. km (GIS by ACE)	22.99 sq. Km (GIS by ACE)
Density of ward	21,241 persons per sq. km	15,825 persons per sq. km
Slum Population	523,324	169,662
Slum Percentage in the ward	77.55%	46.63%

**Table 3–2. Census of India 2011 Data for M/E and R/N**

	M-East	R-North
Population of ward	807,720	431,368
Area	31.77 sq. km (GIS by ACE)	22.99 sq. Km (GIS by ACE)
Density of ward	25,423 persons per sq. km	18,763 persons per sq. km
Slum Population	245,300	221,500
Slum Percentage in the ward	30.37%	51.35%

### 3.3 Mapping M/E and R/N wards

#### 3.3.1 Livelihood

**Table 3–3. Livelihood Data for M/E and R/N**

	M-East	R-North
Number of Employees (in thousands)	200	91
Mean Income	INR 8,000 per household	Not available
Unemployment	51.87%	Not available

*Source: Tata Institute of Social Sciences, 2015*

### 3.3.2 Education

Table 3–4. Education Data for M/E and R/N							
Literacy Rate		M-East (Population. 807,720)			R-North (Population. 431,368)		
		66% (Municipal Corporation of Greater Mumbai, 2010)			78% (Municipal Corporation of Greater Mumbai, 2010)		
URDPFI /NBC Standard		Existing	Reqd. as per standard	Gap	Existing	Reqd.	Gap
Municipal Primary School	1 for a population of 5,000	72	161	89	22	86	64
Municipal Secondary School	1 for a population of 7,500	6	107	101	0	57.51	57.51
College	1 for a population of 1.25 lakh	6	6.46	0.46	5	3.45	-

### 3.3.3 Health

Table 3–5. Health Care Facilities Data for M/E and R/N			
Facility	Guidelines and Standards*	M-East (8,07,720 population)	R-North (4,31,368 population)
General Hospitals	1 hospital for 2,50,000 population	1 government, 4 municipal and 8 private hospitals present (adequate)	3 municipal and 5 private hospitals present (adequate)
Nursing home, child care welfare and maternity centre	1 for 45,000 to 100,000 population	13 present (adequate)	15 present (adequate)
Dispensary	1 for 15,000 population	4 present (50 more required)	4 present (25 more required)
Specialty Hospital	1 for 100,000 population	6 present (2 more required)	6 present (adequate)

\* National Building Code (NBC) and Urban Development Plan Formulation and Implementation (UDPFI) Guidelines & Standards

### 3.3.4 Open Space

The per capita availability of open space in Mumbai (only considering open spaces that are completely public and accessible to all) is 1.09 sq. m (DP 2034). This falls far short of the URDPFI guidelines of 10-12 square metres per person. We will analyse the open space requirements and gaps for Mumbai based on two main data sources: 1) the detailed open space map prepared for a project called “Open Mumbai” by a well-known Mumbai planning firm, PK Das and Associates and 2) an inventory of open spaces, water bodies, water courses, coastline features and large urban greens for Greater Mumbai, prepared by the Mumbai Metropolitan Region – Environment Improvement Society (MMR – EIS) to provide inputs into the revisions for the DP for Greater Mumbai (2014-2034).

The ‘Open Mumbai’ project defined the following objectives to create an evidence-based open space plan:

- To redefine the ‘notion’ of open spaces going beyond gardens and recreational grounds to include the vast, diverse natural assets of the city, including rivers, creeks, lakes, ponds mangroves, wetlands, beaches and the seafronts.
- To redefine land use and development, placing people and community life at the centre of planning and not real estate and construction.

### R-North

Table 3-6. Open Space Data for R/N		
Type of open space	Nos.	Area (sq. m)
Gardens	16	135,152
Gardens (Encroached open spaces)	16	175,200
Recreation Grounds	21	105,251
Recreation Grounds (Encroached open spaces)	3	37,891
Playgrounds	50	274,790
Playgrounds (Encroached open spaces)	23	145,024
<b>Total open space available</b>	<b>873,308 sq. m</b>	

*Source: Mumbai's Open Spaces (PK. Das & Associates, 2011)*

As per the recommended standard (URDPFI standard of 10 to 12 sq. m per person), the open space required in R-North ward is 4,745,048 sq. m. The existing accessible open space is only 18.4% of what it should be.

## M-East

**Table 3–7. Open Space Data for M/E**

Type of open space	Nos.	Area (sq. m)
Gardens	31	660,388
Gardens (Encroached open spaces)	2	12,190
Recreation Grounds	25	959,980
Recreation Grounds (Encroached open spaces)	6	144,557
Playgrounds	33	266,225
Playgrounds (Encroached open spaces)	2	5,703
Total open space available	2,049,043 sq. m	

*Source: Mumbai's Open Spaces (P.K. Das & Associates, 2011)*

As per the standard (URDPFI standard of 10 to 12 sq. m per person), the open space required in M-East ward is 8,884,920 sq. m. The existing accessible open space is only 23% of the recommended area.

The open spaces categorized by P.K. Das and Associates do not follow the categories set by the URDPFI guideline. It is hence not possible to calculate adequacy by different categories of open space as recommended by planning standards based on population figures.

Also, since both the wards have large areas under the open space category (not inhabited by people), the total open space available in each ward appears to be very high and portrays a misleading picture. The open spaces should be linked to the settlement cluster and can be calculated against the residential land use proposed in each ward.

The Mumbai Metropolitan Region – Environment Improvement Society (MMR – EIS) has undertaken a project to prepare an inventory of various environmental features in the Mumbai Metropolitan Region (MMR). The first phase of this project involved preparing an inventory of open spaces, water bodies, water courses, coastline features and large urban greens for Greater Mumbai.

One of their major objectives is to provide useful inputs for the preparation of the Revised Development Plan for Greater Mumbai (2014-2034), which is currently in progress.

**Table 3–8. Analysis of Available Open Space and the Existing Gap Based on the MMR-EIS Survey and URDPFI**

	Area of Ward (Hectares)	Population (as per 2011 Census)	Area of open spaces available as per 2010 survey (ha)	Per capita open space available as per 2010 survey by MMR EIS (sq. m.)	Per capita open space standard as per URDPFI	Open space required based on URDPFI	Gap
M-East	3177 Ha	8.07lac	46.29*	0.69	10-12 sq. m or 0.001 Ha per person	888.5 Ha	842.21 Ha
R-North	2299 Ha	4.31lac	78.32	2.15		474.5 Ha	396.18 Ha
* 1 lac=100,000							

The area of open spaces available does not imply that all of it is developed to become accessible to the public. The MMR-EIS 2010 survey shows that only 31.75% and 46.20% of the open spaces in M/E and R/N wards respectively are developed and available for public use. But according to the URDPFI guidelines, the total available open space is only 5.2% and 16.5% of the recommended area in M/E and R/N wards respectively.

### 3.3.5 Habitability

**Table 3–9. Habitability Data for M/E**

Type of house	Pucca	Semi pucca	Kutcha	Missing value
M-East ward	44.77 %	42 %	12.58 %	0.65 %
<i>Source: Tata Institute of Social Sciences, 2015</i>				

Standards of adequate housing are established within discussions of human rights with functional parameters set under Article 11(1) of the International Covenant on Economic, Social, and Cultural Rights: legal security of tenure; availability of services, materials, facilities and infrastructure; affordability; habitability; accessibility; location and cultural adequacy. Conditions that maybe adequate for adults are not necessarily optimal for children’s physical, emotional and intellectual development as children are disproportionately affected by environmental stressors, have a lower tolerance for toxins and pollutants, and are more vulnerable to disease and injury. But decent affordable, secure housing is fundamental to the realization of a number of rights of children and in supporting parents and caregivers to provide within the framework of their culture a caring, nurturing, safe and healthy environment for children (Bartlett, Hart, Satterthwaite, del Barra and Missiar, 1999).

More than half the population of the ward lives in inadequate or substandard housing, which may be vulnerable to flooding, fires and other disasters. This puts children living in such housing at great risk not only in terms of physical safety, but also emotional security, stability and the comfort of daily routines.

**Table 3–10. Duration of Stay Data for M/E ward**

Duration	Last 10 years	11 to 16 years	More than 16 years	Refused	Missing Value
M-East Ward	37.05 %	11.97 %	50.56 %	0.31 %	0.11 %

*Source: Tata Institute of Social Sciences, 2015*

### Duration of stay of the households in M-East Ward

Half the population are long-term residents, while the other half arrived after the 1.1.2000 cut-off date for slum notification and hence has reduced access to secure and adequate housing. The impacts of evictions from insecure housing are enormous, with both immediate and long-term effects on children’s development, ranging from loss of livelihoods, schooling and social networks to being pushed into the labour market. Violent evictions, in particular, put children at risk of real trauma with significant long-term effects on their psychological health (Bartlett et al. 1999).

### Percentage distribution of households in areas surveyed by type of house ownership

**Table 3–11. Percentage Distribution of Households by Type of House Ownership for M/E ward**

Type of ownership	Own house	Rented house	Others	Missing value
M-East ward	76.32 %	20.63 %	2.10 %	0.94 %

*Source: Tata Institute of Social Sciences, 2015*

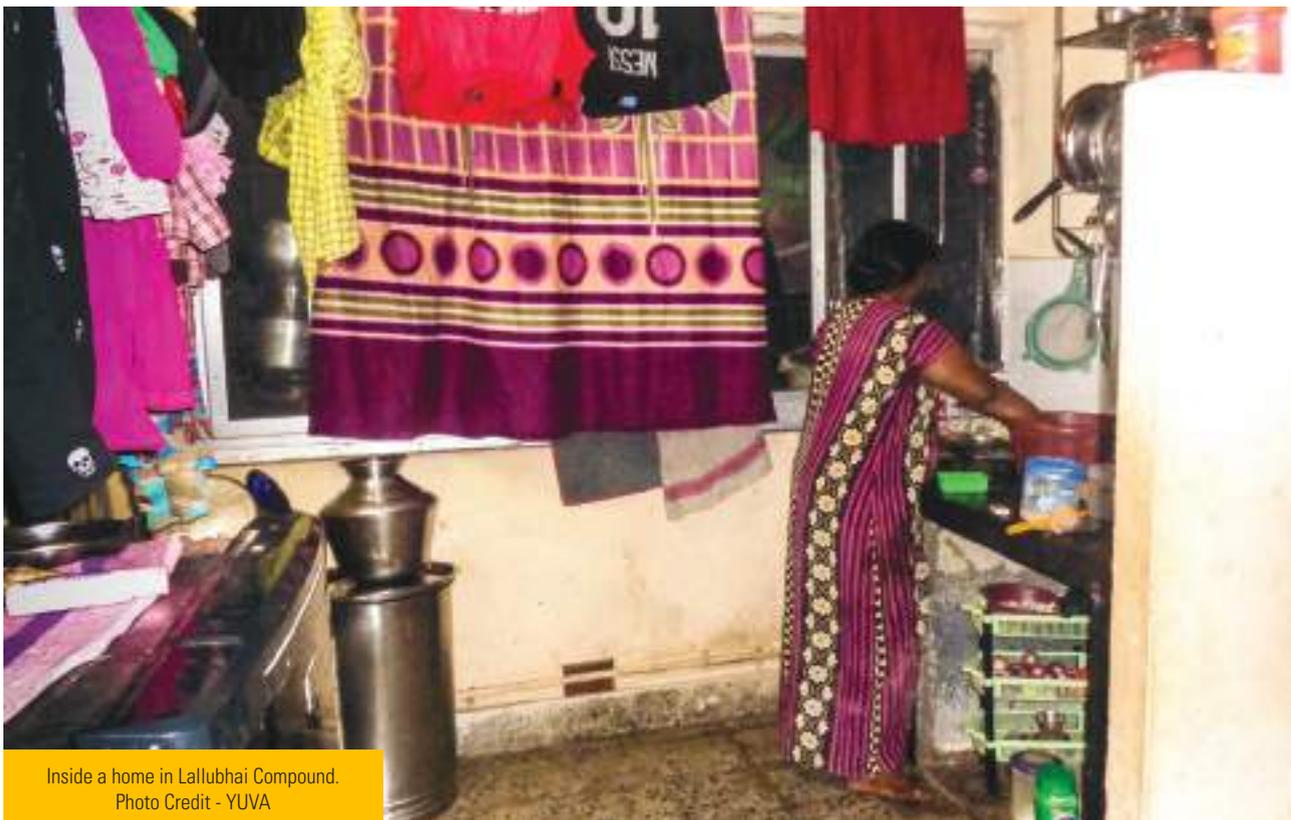
Even though the majority of the residents considered themselves to be home owners, this is a perception based partly on legal documents and partly on having built their own houses with their own resources, irrespective of the legality of such action.

### Percentage distribution of households in areas surveyed by number of rooms

Table 3–12. Percentage Distribution of Households by Number of Rooms for M/E ward				
Type of ownership	1 Room	2 Rooms	More than 2 Rooms	Missing value
M-East ward	63.20%	30.49%	4%	2.3%

*Source: Tata Institute of Social Sciences, 2015*

The majority live in one-roomed houses. Typically with family sizes of five people or more, these houses would be considered over crowded. Research on housing quality and abuse from both the global North and South has identified an association between crowding and violence towards children (Bartlett, 2018). Though the notion of “crowding” may be culturally mediated, research also demonstrates that high residential density is physiologically stressful regardless of culture or location (Evans, Lepore & Allen, 1998).



Inside a home in Lallubhai Compound.  
Photo Credit - YUVA

### Slum Pockets in M East Ward - Mumbai



Figure 3-1. Slum pockets in M-East Ward

The above figure shows the various slum pockets spread across the M-East ward. The two communities under study, Rafi Nagar and Lallubhai Compound are highlighted in red.

## Social Amenities in M East Ward - Mumbai

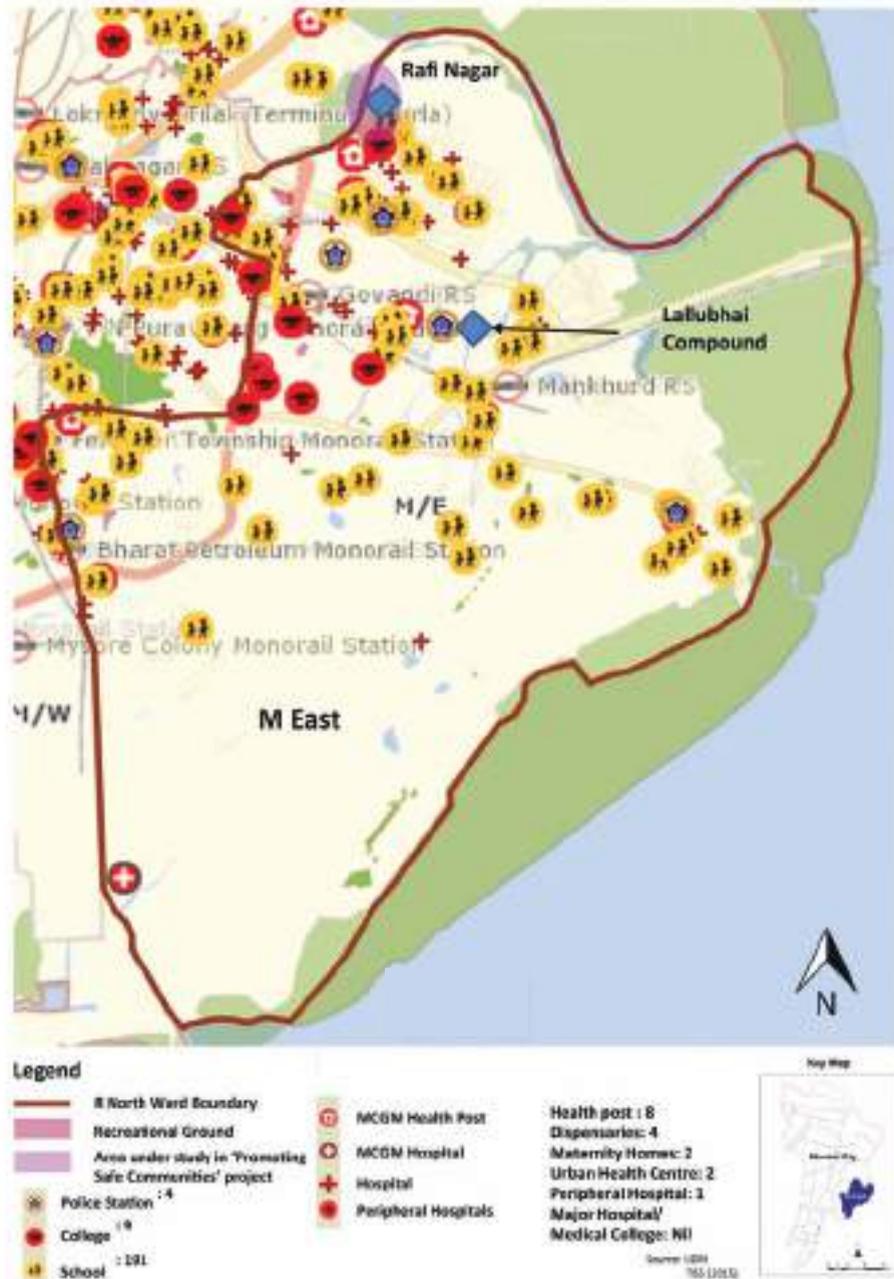


Figure 3–2. Social amenities in M-East Ward

The figure above shows all the police stations and education and health facilities available in M-East ward. Even though several of the facilities are nearby, proximity does not guarantee access, as there are several hazards along the routes linking the facilities to the communities.

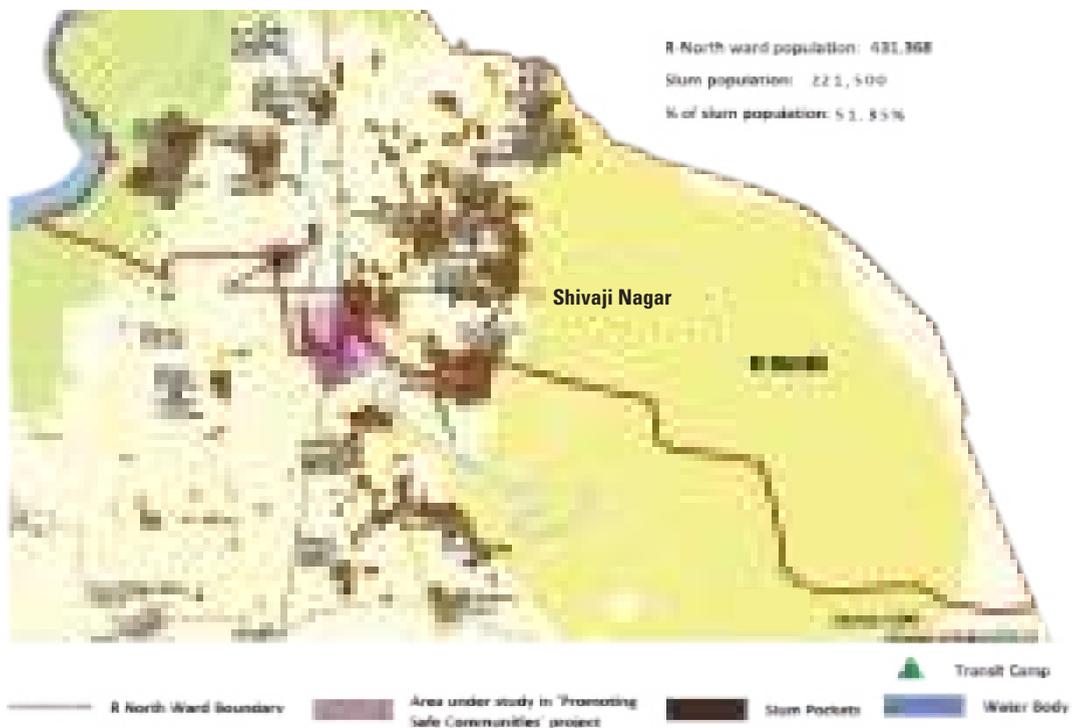


Figure 3-3. Slum pockets in R-North Ward



Figure 3-4.: Social amenities in R-North Ward



Road to dumping ground in  
Rafi Nagar.  
Photo Credit - ACE Trust



# 4.

# SLUMS IN MUMBAI AND IN THE MAPPING

Slum population  
in  
Greater  
Mumbai:  
4,620,654

Percentage  
of City's  
Population:  
49.38%

In an urbanizing India with the non-agricultural sectors playing an expanding role in economic growth, rural to urban migration is inevitable. An increasing urban population needs housing, which in the case of Indian cities, is produced both through formal (legal) and informal (typically illegal) means. In a city like Mumbai, which had historically attracted millions of migrants, the demand for housing far outstrips the supply and this has resulted in the proliferation of slums and other forms of informal housing as well as homelessness. There are several slum pockets within Greater Mumbai, especially concentrated along the railway tracks in the western and Eastern suburbs. These slums house nearly half of Mumbai's population

Slums have existed in Mumbai since before independence in 1947. But the majority of the

city's slums (estimated to be about 15-18%) at that time actually comprised obsolete or unsafe buildings and only about 1% of slum dwellers were squatters who put up their huts on encroached land (Bombay Municipal Corporation, 1964). However, by 1976 slums had become much more widespread in Mumbai as recorded in the first Slum Census of Mumbai: 1680 slum pockets with 6,30,003 hutments and a population of 831,385 dwellers (Indorewala & Wagh, 2016). The Slum Census was a turning point in slum governance as all enumerated slum households were given photo-passes, which entitled them to basic services and alternate accommodation in case of eviction. The cut-off date policy was also introduced for the first time excluding households who came after 1976 from the entitlements of legitimate slum dwellers. The

cut-off date has been revised many times to 1985, 1995 and 2000 (Bhide, 2017).

#### 4.1 How are slums defined in Mumbai?

The Primary Census Abstract for Slums adopts the definition of the slum from the Slum Area Improvement and Clearance Act, 1956 and from UN-Habitat as (Office of the Registrar General & Census Commissioner India, 2011):

- Under Section-3 of the Slum Area Improvement and Clearance Act, 1956, slums have been defined as mainly those residential areas where dwellings are in any respect unfit for human habitation by reasons of dilapidation, overcrowding, faulty arrangements and designs of such buildings, narrowness or faulty arrangement of streets, lack of ventilation, light, sanitation facilities or any combination of these factors which are detrimental to safety, health and morals.
- As per UN Habitat a slum is characterized by lack of durable housing, insufficient living area, lack of access to clean water, inadequate sanitation and insecure tenure.

There is no definition of 'slums' in the Maharashtra Slum Areas (Improvement, Clearance and Redevelopment)

Act, 1971. However, section 2 (ga) defines a 'Slum Area' as:

Slum area means any area declared as such by the Competent Authority under sub-section (1) of section 4. As per the provisions of sub-section (1) of section 4, to declare an area as slum area, it must satisfy the following conditions:

1. It must be an area that is or may be a source of danger to the health, safety or convenience of the public of that area or of its neighbourhood, by reasons of the area having inadequate or no basic amenities, or being insanitary, squalid, overcrowded or otherwise.

2. It must be an area having buildings, used or intended to be used, for human habitation that are, in any respect, unfit for human habitation or that are, by reasons of dilapidation, overcrowding, faulty arrangement and design of such buildings, or narrowness or faulty arrangement of streets, or lack of ventilation, light or sanitation facilities or any combination of these factors, detrimental to the health, safety or convenience of the public of that area.

3. To decide whether the buildings are unfit for the purpose of human habitation,

the following conditions should be considered:

- Repairs
- Stability
- Freedom from damp
- Natural light and air
- Provision for water supply
- Provision for drainage and sanitary services
- Facilities for disposal of waste water

#### Notified vs. non-notified slums

In India, recognition of rights in urban slums is based mainly on tenure status. People living in non-regularized slums have no rights to public services, either at the household or neighbourhood level. An informal settlement must be notified (declared) as a slum under the Maharashtra Slum Areas (Improvement, Clearance and Redevelopment) Act, 1971, for it to legally qualify for the provision of basic amenities such as water, toilets, streetlights and drainage. Nearly half of Mumbai's slums are non-notified (National Sample Survey, 2012). The divide between notified and non-notified slums in Mumbai is tied to the cut-off dates, which the Maharashtra

**Table 4–1. Distribution of Slum by Land Ownership**

Land Ownership	Percentage of total slums
Private	48%
State Government	21%
Municipal	17.6%
Central Government	4.7%
Indian Railways	0.7%
Municipal and private	2.5%
State government and private	2.2%
Other mixed ownership	3%

*Source: Sarkar, S., Moulik, S. G., Sen, S 2006*

government has revised from 1.1.1995 to 1.1.2000. Slum households who can prove that they have been living in a slum located on state or municipal land prior to the year 2000 can obtain notified status, while households who settled after the year 2000 remain non-notified (see Table 4.1 for distribution of slum by land ownership). In addition, slums located on land in Mumbai owned by the central government do not benefit from this policy and remain non-notified despite having been established – in some locations – several decades ago. The government also only considers pre-2000 slums for rehabilitation and redevelopment projects.

An analysis of four waves of NSS data by Nolan, Bloom and Subbaraman (2017) shows that non-notified slums have lagged in access to every basic service provided by municipalities, widening disparities in deprivation between notified and non-notified slums (Nolan et al., 2017). The disparities in access to water and sanitation services increased the most: the per cent of non-notified slums without piped water increased from 1993 to 2012, while the per cent of notified slums without piped water declined. Similarly, the per cent of non-notified slums without sewer infrastructure remained essentially unchanged, while the per cent of notified slums without sewer infrastructure decreased substantially. This study found that the longer a slum has been notified, the greater the impact on decreasing deprivation. Previous studies suggested that legal recognition motivates slum residents to improve the quality of their homes, due to lower threat of eviction (Field, 2005; Gandelman, 2010; Nakamura, 2016). The findings of this study suggest that the benefits of legal recognition extend well beyond improvements in housing quality; notification enables access to entitlements and government provision of services that are vital for life including water, sanitation, electricity, schools, and health centres.

### **Other predictors of deprivations in slums (Nolan et al., 2017):**

**Slums on central government land** (e.g.: certain areas including railways, airports, and seaports) experience greater deprivation as the central government has no official policy for providing slums with legal recognition (Gangan, 2010) even when they predate cut-off dates (Juneja, 2001; Subbaraman et al., 2012).

**Slums with no community associations** are more deprived as they have less collective negotiating power to demand services from the local governments (Appadurai, 2001; Patel & the SPARC team, 2015).

**Smaller slums and fringe locations of slums** also play an important role in moderating the level of deprivation: Smaller slums, slums on city fringes, and slums in industrial areas suffer from greater deprivation. Slums in the city's periphery or in industrial areas are more attractive to newer migrants due to the lower costs and easier availability of work. But as new migrants are far less politically empowered than longer established populations, these slums typically register high levels of deprivation.

### **Right to Water Judgement delinks basic service from tenure**

The Bombay High Court, in 2014, ordered the city

government to provide access to Mumbai's water supply to residents living in non-notified slums (*Pani Haq Samiti v Brihan Mumbai Municipal Corporation*, 2012). This ruling used a human rights-based framework of right to water which is directly linked to right to life as guaranteed by the Constitution of India and cited the United Nations International Covenant on Economic, Social, and Cultural Rights, which is the key basis of the human right to safe drinking water and sanitation under international law. Very importantly the court delinked security of tenure from the right to water saying that water access should not be tied to the property rights of a slum. This is a landmark judgment for access to basic services in non-notified slums in Mumbai. To implement this ruling, the city government has developed a new policy for supplying water to non-notified slum residents but has excluded slums on central government land saying that they have no jurisdiction and asking slum dwellers to obtain a NOC from the relevant department to secure access to water. There are however some more loopholes in the judgment as it states that in non-notified slums water need not be provided via individual home connections or at the same price as elsewhere in the city. The court also emphasizes that the government remains

obliged to eventually remove non-notified slums erected after the year 2000, in accordance with existing law but till that happens inhabitants should be provided with access to the city water supply (Subbaraman & Murthy, 2015)

### **4.2 History of slum redevelopment strategies in Mumbai**

Mumbai, a prime magnet for migrants, had a difficult history of providing housing for the proliferating population within its limiting peninsular geography. 1956 saw a major slum clearance initiative in Mumbai with the support of the national government that aimed to relocate slum dwellers in offsite new modern housing and free up slum sites for profitable development. The many hardships faced by slum dwellers who were lucky enough to be relocated prompted resistance to slum clearance by slum dwellers and civil society which paved the way for more moderate approaches of improving housing conditions, infrastructure and services within existing slums (Mukhija, 2016). Consequently, the State government of Maharashtra set up the Slum Improvement Board and launched a Slum Improvement Program in 1971. Around the same time the World Bank had pioneered in situ improvements with a formalization of slums through tenure legalization as

part of their Slum Upgrading Programs (SUP) in Chennai and Kolkata.

### **The Bombay Urban Development Project (BUDP)**

Mumbai joined this program in 1985 when the World Bank, in partnership with the Central Government and the Government of Maharashtra, started the Bombay Urban Development Project (BUDP). The project abandoned its initial goal of providing private entitlements to households and instead gave thirty-year renewable leasehold tenure to cooperatives of slum dwellers. An evaluation of this project in 1994 showed that less than a quarter of the target households availed the opportunity of tenure legalization, as they were unwilling to pay even a nominal amount towards crucial housing security (Mukhija, 2016).

### **The Prime Minister's Grant Project (PMGP)**

A parallel approach to slum redevelopment and rehousing was adopted in Mumbai in 1985 through the Prime Minister's Grant Project (PMGP), which focused on Mumbai's largest slum Dharavi. It offered residents the choice of opting for a World Bank style slum upgrading programme or a new program of slum reconstruction where residents will be housed

in self-owned medium-rise apartments of 180 square feet. Both options offered a thirty-year cooperative lease. Funded by a Rs. 1 Billion grant from the GOI, the Project could finance the resettlement of only 3,800 units in its first phase (Jagdale, 2014). This project was the test case for subsidized in-situ redevelopment and paved the way for other projects along similar lines, by subsequent governments across the political spectrum.

### **Slum Redevelopment Scheme (SRD)**

This was a citywide slum rehousing scheme that was initiated by the Congress-led government in 1991. The government invited private developers to redevelop slum sites to rehouse slum dwellers in 180 square foot apartments, for which slum dwellers would give consent and pay for part of the construction cost. The government increased the F.A. R. of each site to 2.5 (a 100% increase) to allow the developer to build market-rate houses to cross-subsidize the project. The government also capped the developer's profit at 25 per cent of their investment. This was a deterrent for many private developers who were unsure of the viability of the projects, especially when the project approval procedures were unduly complicated and unclear.

### **Slum Rehabilitation Scheme (SRS)**

When the Shiv Sena won back Maharashtra in the 1995 State Assembly elections, they largely did so on the back of a promise to provide free housing to all slum dwellers in Mumbai within the next five years. They formed a committee under Shri Dinesh Afzulpurkar (Chief Secretary of Maharashtra) in 1995 to devise a scheme to rehabilitate slum dwellers in slums existent as of 01/01/1995. The Committee estimated that 80% of slum rehabilitation was possible in situ, and believed in the ideology that slum dwellers deserve free housing as a preferential unequal treatment to bring them into the mainstream of the social, cultural and economic fabric of the city. The new government retained the cross-subsidized approach to public housing but replaced the SRD scheme with the SRS. In this cross-subsidized housing scheme built by developers after securing the consent of at least 70% of the households in the redevelopment area, all slum dwellers before the cut-off date of January 1, 1995 were eligible to a flat of 225 square feet carpet area.

Though the SRS superseded all the previous schemes, its implementation was difficult with a success rate of less than one-third houses delivered based on

approved projects. A mere 1.53 lakh families have been rehabilitated against the approved number of flats for 4.9 lakh households by 2014 (PRAJA).

### **Resettlement and Rehabilitation (R&R) policy:**

The Mumbai Urban Transport Project (MUTP) was initiated by the Government of Maharashtra in the mid 90's, in partnership with the Indian Railways, MMRDA, MCGM, and BEST. Partly funded by the World Bank (49%), the MUTP was mandated with improving the physical infrastructure of rail and road transportation within the city in order to ease the traffic congestion and improve connectivity between the different parts of the city.

The project received approval from the World Bank in 2002, with work beginning the same year (Mumbai Metropolitan Region Development Authority, 2017). The MUTP projects are significant as they represent the first and largest case of urban displacement that the World Bank or the government have undertaken in India. Though the projects vary in their nature and scope, they all involve the massive displacement of those in the "right of way" (RoW), and displaced people are being relocated in 33 R&R sites scattered across the city (Modi 2009) following the R&R policy of the

Government of Maharashtra.

The MMRDA was appointed as the nodal agency for the project as well as the implementation agency for the Rehabilitation and Resettlement component (R&R) (Modi, 2009). Development rights and cash incentives were offered to developers who proposed to build new resettlement sites in the Eastern suburbs of the city. The MMRDA also engaged NGOs such as the Society for Promotion of Areas Resource Centres (SPARC) to consult and negotiate with the project affected persons (PAPs) as well as conduct baseline socio-economic surveys.

### **4.3 Citizen recommendations for slums in DP 2034**

Citizens' groups rejecting the proposals for slums in the draft DP had several concrete suggestions to offer to plug the lacuna in the plan, particularly with regard to housing for the poor. These were<sup>4</sup>:

1. All existing tenable slum land to be a DP reservation for affordable housing only
2. Slum redevelopment of tenable land through creation of

<sup>4</sup> Based on the 'People Brief' prepared by UDRI through a participatory process to inform the formulations of the revisions to the Development Plan for Mumbai 2014-2034. See <http://www.udri.org/pdf/MCGMWorkshop/06-Stakeholder-Planning-Principles/Housing.pdf>

Cooperative Housing Societies

3. For slum dwellings located on Non-tenable land such as railway/airport reservations, NDZ, CRZ land) or those persons displaced by projects, housing is to be provided by MHADA on rental or ownership basis using the lottery system.

4. New Construction to provide 50% of all floor space for inclusive housing.

5. For redevelopment projects - half of all new units to be developed as sale component and to be EWG and LIG housing. These are to be handed over to MHADA who will pay the cost of construction of these units. MHADA is to sell these units through its lottery system or assign them to a non-profit rental agency for management.

6. Administration of affordable rental housing to be managed by non-profit agencies

Based on the interim findings of the Safe Communities mapping study, UNICEF sent some recommendations in 2017 to the MCGM for inclusion in DP 2034, which opened up the Draft DP for comments and suggestions in an unprecedented manner. The recommendations included the following:

1. Care centres for children as this study found that most



R&R housing at Lallubhai Compound.  
Photo Credit - ACE Trust

children (71%) were growing up in the three study communities in nuclear families, which made workforce participation for their parents difficult while also raising protection concerns for children when parents were at work.

2. Linking Adhar Kendras with skill centres for skilling women to enhance their participation in the workforce, as only 18% women in the three communities were engaged in gainful work.

3. Emergency shelter options for women and children during crises, as 18% of households were women headed and 80% of the respondents said that they had no option but to seek

refuge with relatives in crisis situations.

4. Multi-purpose community centres with a library, reading room and study room for children in slum communities would greatly improve learning outcomes and provide a safe afterschool space for children, most of whom (77%) were living in small and crowded homes of less than 250 sq feet.

5. Land allotment for parks, gardens, leisure spaces, as data across the communities showed very few safe spaces for children to play outdoors within their communities.

6. Increased allocation for safe public amenities, as there is a

severe shortage of toilet seats in the slum communities.

#### 4.4 Slums under study

Three slums – Lallubhai Compound, Shivaji Nagar (Dahisar) and Rafi Nagar have been chosen for the study and to understand the different features that affect the lives of children in these communities and make the community safe/unsafe.

##### 4.4.1 Lallubhai Compound

Lallubhai Compound is located on the Eastern suburbs of the city of Mumbai, in the M East ward. It was one of the 20 resettlement sites commissioned by the MMRDA. Created under the Slum Rehabilitation Act (SRA) in 2003,

Lallubhai Compound is an off-site R&R site housing MUTP displaced people who lived near the Chembur, Matunga and Kurla railway stations, as well as slum and pavement dwellers. Consisting of a dense cluster of 70, seven and five storied buildings, Lallubhai Compound currently houses an approximate population of 29,843, recording a high density of 653 persons per acre. There are many vacant apartments, which when occupied will push up the density to 1,120 persons/acre. It is thus often referred to in development parlance as a “vertical slum”.

#### 4.4.2 Shivaji Nagar

The community under study – Shivaji Nagar, is located in Dahisar, the Northernmost suburb of the city, which until 1956 was a part of the Thane district. Around 1976, Shivaji Nagar comprised only tribal populations, housing around 12 to 15 kuccha households. By 1984, it witnessed the arrival of a large number of migrants who set up base in the area. Situated on a low-lying patch across the Mandapeshwar Caves, and surrounded by middle-income residential high rises, today Shivaji Nagar is a regularized slum settlement with three generations having lived in the community. Shivaji Nagar is an authorized slum with basic amenities like water supply and electricity. Most of the families have a land

tax receipt making them legal occupants of the area.

#### 4.4.3 Rafi Nagar

Rafi Nagar is located on the Eastern suburbs of the city of Mumbai, in the M East ward. It is an authorized slum, located in the Shivaji Nagar area in the M- East Ward of the Brihan Mumbai Municipal Corporation Area. The Shivaji Nagar area, located near the abattoir and the Deonar dumping ground, was allocated for city and State resettlement projects, and comprises many neighbourhoods including Rafi Nagar, Baba Nagar, Lotus Colony, Gajanand and Baiganwadi among others. This is a low-lying area that drains into Thane Creek; the area used to be submerged during high tide. The creation of the dumping ground was a strategy to raise the level of land to the south and west of the nallah to stop tidal flooding. Slum dwellers from Matunga Labour Camp were moved there in 1968. Additional neighbourhoods within the area were officially registered in 1982. The entire Shivaji Nagar area consists of 135 hectares. Part of it has a grid layout (69 hectares) and the other half (64 hectares) is “organic”, meaning that it was an unplanned development. Rafi Nagar and Baba Nagar, where this research was conducted, are located in the organic unplanned section. Over the years, shops, educational

institutions, religious structures and commercial enterprises have developed in the area.

Baba Nagar, an unauthorized slum extending into the dumping ground to the North of Rafi Nagar, is predominantly Kutch. It is much smaller than Rafi Nagar in area but is expanding as new waves of migrants continue to find shelter here. Anecdotal evidence from community elders suggests that some people found precious metals like gold, silver and copper in the dumping ground during the inception years, and this evolved into a myth of wealth to be found in the area, boosting the rag picking business and attracting more migrants to settle here.

See Appendix 2 for the fact file of Slums included in the mapping.





Children playing cricket in  
Lallubhai Compound  
Photo Credit - Paula Bronstein,  
Photo Journalist

# 5.

# SUMMARY OF FINDINGS

Slums are the default housing option for most poor households in Indian cities with 13.7 million slum households, comprising more than 17% of the total urban households in the country

This chapter presents an integrative analysis of the research findings across the three settlements; Shivaji Nagar in R-North, Rafi Nagar in M-East, and the Resettlement & Rehabilitation (R&R) site of Lallubhai Compound, also in M-East ward. This research looks at the issues of safety, security, protection, environment, education, health, play, and participation through the lens of resilience, and aims at understanding the various child protection risks, as well as the existing protective factors that enable children's positive coping and resilience.

## 5.1 Environment

The Census of India 2011 shows that over 65 million people live in informal settlements or slums in India, which is an increase of 13 million from the 2001 figures. Slums are the default housing option for most poor households in Indian cities with 13.7 million slum households, comprising more than 17% of

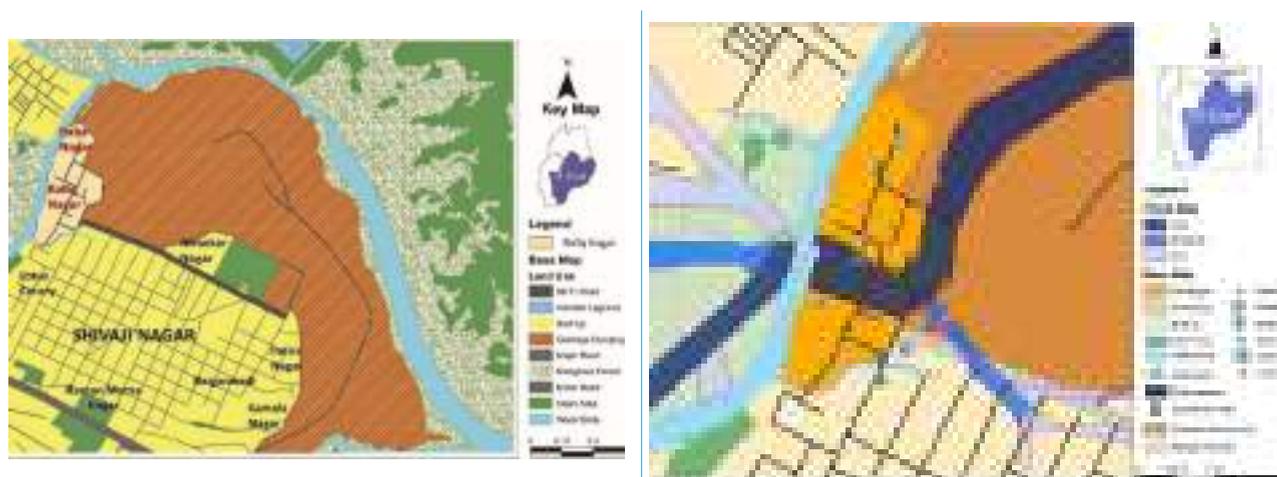
the total urban households in the country (Census of India, 2011). The five deprivations of a slum include: (1) access to improved water, (2) access to improved sanitation facilities, (3) sufficient living area that is not overcrowded, (4) safe structural quality and durability of dwellings, and (5) security of tenure' (Un-Habitat, 2014).

Mumbai scored near the bottom on the health security indicator (which measures how cities maintain the physical environment and the level of care available to their citizens); and the infrastructure safety indicator, which considers another aspect of the physical environment — the safety of a city's buildings and roads and its resilience against disasters, in the Safe Cities Index for assessing urban security in the digital age (2015) created by the Economist Intelligence Unit ranking 50 cities. The low rank of Mumbai 44/50 was to a large extent

due to an inadequate and unhealthy living environment, particularly for the urban poor who live in Mumbai's slums (62% of Mumbai's population).

### 5.1.1 Location and security of tenure

The location of a slum is an important indicator of the level of deprivation experienced by its residents, as discussed in Chapter 4. Slums located in the periphery of the city attract newer migrants, due to the availability of low cost housing and land for squatting. But the inhabitants also suffer greater deprivation, isolation, and exclusion, as they are cut off from proximity to affordable and quality basic services, safe public transport, and marketable livelihood opportunities and are often at locations which have multiple environmental hazards. Other than the location, the 'legality' or 'illegality' of a settlement, which is linked to the cut-off date of January 1, 2000, also has a direct impact on the level of deprivation.



**Figure 5–1. Rafi Nagar slum located on the western edge of the Deonar dumping ground (left); as it is low-lying, Rafi Nagar is at high risk of flooding as the water from the dumping ground flows through the heart of the slum (right). (GIS map by ACE Trust 2017).**

**Table 5–1. Settlement Location, Status, and Security of Tenure**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Location	Eastern suburb of the city surrounded by a nallah, an unguarded railway crossing, and other slum settlements. Located close to the Deonar abattoir.	Northern suburb of the city on a low-lying patch surrounded by middle-income residential high rises.	Eastern suburb of the city bounded by the city dumping ground on the North-Eastern side, a garbage filled creek along the western side, and the 90-foot road with heavy traffic on the Eastern side. The non-regularized part of Baba Nagar is built on the dumping ground itself.
Slum Status	Resettlement and Rehabilitation site	Regularized, built on Collector's land	Partly regularized

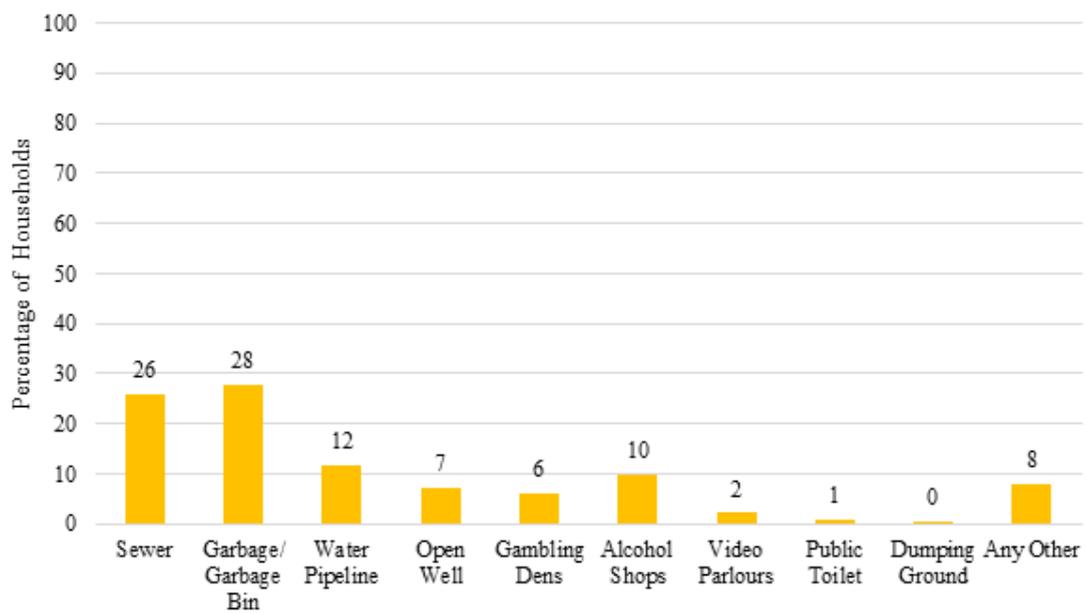
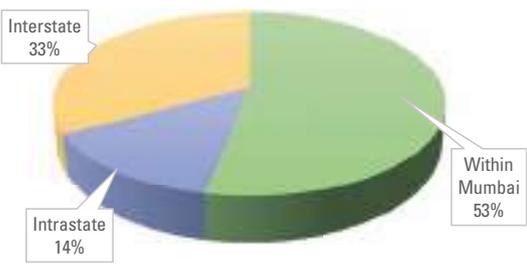


Figure 5-2. Immediate surroundings of the houses across the three communities



Deep open drain in Lallubhai Compound  
Photo Credit - ACE Trust

**Table 5-2. Overall Migration Profile**

Table 5-2. Overall Migration Profile														
<p>Migration trends across all communities</p>  <p>Interstate 33%</p> <p>Intrastate 14%</p> <p>Within Mumbai 53%</p>	<p><b>Lallubhai Compound</b></p> <ul style="list-style-type: none"> <li>• 65% migrated from different slums within the city.</li> <li>• 63% of those who migrated reported being forcefully evicted from their slums to make way for MUTP projects.</li> <li>• 12% reported migrating within the past 5 years.</li> </ul>													
	<p><b>Shivaji Nagar</b></p> <ul style="list-style-type: none"> <li>• Settled community with migrants.</li> <li>• 50% intra-state migration.</li> <li>• 98% migrated to the city in search of better economic opportunities.</li> </ul>													
	<p><b>Rafi Nagar</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Authorized section</th> <th style="width: 50%;">Unauthorized section</th> </tr> </thead> <tbody> <tr> <td>Relocation: 28%</td> <td>Relocation: 39%</td> </tr> <tr> <td>Migration:</td> <td>Migration:</td> </tr> <tr> <td>Interstate: 43% (Uttar Pradesh, Bihar, Tamil Nadu, Kerala, Karnataka, West Bengal, Telangana, Gujarat, Rajasthan and Punjab)</td> <td>Interstate: 32% (Uttar Pradesh, Tamil Nadu, Karnataka, West Bengal, Telangana and Delhi)</td> </tr> <tr> <td>Intrastate: 4% (Akola, Aurangabad, Deval Ghat, Solapur)</td> <td>Intrastate: 4% (Aurangabad, Solapur, Titwala)</td> </tr> <tr> <td>Since birth: 25%</td> <td>Since birth: 23%</td> </tr> <tr> <td></td> <td>International migrant: 1% (Bangladesh)</td> </tr> </tbody> </table>	Authorized section	Unauthorized section	Relocation: 28%	Relocation: 39%	Migration:	Migration:	Interstate: 43% (Uttar Pradesh, Bihar, Tamil Nadu, Kerala, Karnataka, West Bengal, Telangana, Gujarat, Rajasthan and Punjab)	Interstate: 32% (Uttar Pradesh, Tamil Nadu, Karnataka, West Bengal, Telangana and Delhi)	Intrastate: 4% (Akola, Aurangabad, Deval Ghat, Solapur)	Intrastate: 4% (Aurangabad, Solapur, Titwala)	Since birth: 25%	Since birth: 23%	
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Since birth: 25%	Since birth: 23%													
	International migrant: 1% (Bangladesh)													



Migrant Community in Rafi Nagar  
Photo Credit - ACE Trust

**Table 5-3. Overall House Status**

<p><b>Status of the house</b></p> <p>0.44% 27% 73%</p> <p>■ Self owned ■ Rented ■ Squatting</p> <p><b>Availability of proof of stay</b></p> <p>84% 16%</p> <p>■ Yes ■ No</p>	<p>Lallubhai Compound</p> <ul style="list-style-type: none"> <li>• 83% live in self-owned houses and possess allotment letters as proof of ownership.</li> <li>• 17% live in rented housing, of which 10% do not have a rental agreement.</li> </ul>	
	<p>Shivaji Nagar</p> <ul style="list-style-type: none"> <li>• 74% live in self-owned houses and possess a photo pass issued by the municipal corporation.</li> <li>• The residents are entitled to rehabilitation under the various government housing rehabilitation schemes.</li> <li>• 26% live in rented homes and do not possess a legal rental agreement.</li> </ul>	
	<p>Authorized section</p> <p>59% live in self-owned and 40% in rented housing. 32% have no documents as proof of stay. 50% living in rented homes have no rental agreements. Those with ownership papers have a photo pass issued by the municipal corporation.</p>	<p>Unauthorized section</p> <p>67% live in self-owned and 32% in rented housing, 1% in squatter settlements. 49% do not have any ownership documents while others possess documents that are not legal proof of stay.</p>

**Key findings: Environment**

- All three settlements are located on the city fringes with Lallubhai Compound and Rafi Nagar standing on untenable locations. The location of the settlements poses hazards caused by lack of proper sanitation, roads with heavy traffic, unguarded railway traffic (Lallubhai Compound), proneness to flooding, and adjacency to a garbage filled dumping ground (Rafi Nagar).
- Though all three settlements have seen high rates of migration, Rafi Nagar has seen the highest migration as the non-regularized part of Baba Nagar offers easily encroachable land near the dumping site, thereby providing cheap shelter for the new migrants. However, these residents are vulnerable to forced eviction as the land they occupy has not been designated residential land in the Mumbai DP, and they have no legal documents as proof of stay.
- Across the three settlements, persons living in houses without any proper proof of stay are at risk of being evicted.

## Impact of an inadequate living environment on children

- A hazardous living environment affects children’s overall health and safety. Across the three settlements, children have to cross major roads with heavy traffic to access school, play spaces, health facilities, and the local market. As pedestrians, children account for 30–40% of all road traffic deaths in low-income and middle-income countries (WHO, 2008). In Lallubhai Compound, children have to cross the unguarded Govandi-Mankhurd railway line on the shortest route to their schools. A November 2014 study on trespassing by the Mumbai Railway Vikas Corporation Ltd., states incidence of 9 deaths and 13 accidents on the Govandi-Mankhurd rail track in 2013-14.
- Children and families living in adequate housing with insecure tenure, regularly face the threat of forced eviction, which can lead to homelessness, loss of livelihood and education (Bartlett, 1999). The youngest children, particularly pre-verbal children, are most seriously affected; girls also suffer disproportionately. Children under the age of ten who experience forced evictions are more likely to be afflicted with long-term psychological disturbances (Garbarino & Bedard, 1996). A vast body of research in the field has established the positive impact that security of tenure has on improving the living conditions of families including children (Bartlett et. al., 1999).

### 5.1.2 Habitability

Adequate housing must be habitable, in terms of providing the inhabitants with adequate space and protecting them from cold, damp, heat, rain, wind or other threats to health, structural hazards, and disease vectors. The physical safety of occupants must be guaranteed as well. The WHO housing Health Principles, view housing as the environmental factor most frequently associated with conditions for disease in epidemiological analyses; i.e. inadequate and deficient housing and living conditions are invariably associated with a higher mortality and morbidity rate (CESCR General comment 4,1991).

**Table 5–4. Habitability of Homes**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
<b>Dwelling unit</b>	225 sq. ft. Family size: 4-6	100 to 225 sq. ft. (60% of houses) Family size: 5	Less than 250 sq. ft. (53% having area < 150 sq. ft.) Family size: 4-6
<b>Number of spaces</b>	One large space, which in some houses has been partitioned to create two spaces + 1 toilet +1 Bathroom + cooking area. In the Hiranandani buildings, access to flats is from a shared balcony outside. In S. V Patel, access to flats is from a common internal corridor.	One large space, which in some houses has been partitioned to create two spaces or more + 1 Bathroom (a makeshift arrangement in one corner separated from the rest of the house using a curtain) + cooking area. No toilet.	One large space, which in some houses has been partitioned to create two spaces (where sleeping, studying, eating and other activities take place) + 1 Bathroom (in most cases a makeshift arrangement in a corner separated from the rest of the house using a curtain) + cooking area. No toilet.
<b>Cooking arrangements</b>	96% houses – cooking takes place on a raised platform. 4% houses – cooking takes place on the floor.	94% of houses – cooking takes place on a raised platform. 6% of houses – cooking takes place on the floor.	74% of houses – cooking takes place on a raised platform. 26% of houses – cooking takes place on the floor.
<b>Ventilation</b>	Every house has at least one window. In 12% of houses, windows remain closed all the time. In most houses, windows open onto lanes filled with garbage and water logging.	90% of houses have at least one window. Almost 50% of houses have windows with grilles and remain closed all the time. Almost 10% of houses have no windows.	76% of the houses have a window. In 17% of houses, windows open inwards eating into vital domestic space. In 4% of houses, windows remain closed all the time. 24% of houses have no windows.

**Table 5–5. Status of Housing**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Housing materials	Masonry roofs, walls and floors.	Mostly masonry structures.	Regularized: Masonry roofs and floors with some houses having roofs made of asbestos sheets. All pucca houses are ground plus one. Non-regularized: All kutcha houses made of materials picked up from the dumping ground such as plastic sheets, tin sheets, carpets, etc.
Storage	No in-built storage. 75% of houses have either a cupboard or shelves for storage made at their own expense. In 64% of houses, poisonous substances are stored on a high shelf while in 35% of houses they are stored in locked cupboards out of children’s reach.	97% of houses have either a cupboard or shelves for storage. In 54% of houses, poisonous substances are stored on a high shelf, in 27% they are stored in locked cupboards, and in 18% they are stored under the bed.	No in-built storage. 67% of houses have either a cupboard or shelves for storage made at their own expense. In 33% of houses, poisonous substances are stored on a high shelf while in 25% they are stored in locked cupboards.
Pests	Pests and rodents reported in 75% of houses.	Pests and rodents reported in 97% of houses.	Pests and rodents reported in 76% of houses.

**Key findings: Habitability**

- All houses have insufficient living space with spaces within the house being used interchangeably for different functions such as cooking, cleaning, washing, bathing, sleeping, eating, socializing, and studying. With 4 to 6 members per family in a single space, overcrowding is inevitable. The resource centres run by local NGOs offer some alternative spaces for children to sit and study.
- Houses in the non-regularized settlements are built using materials that are not durable and incapable of withstanding harsh climatic and weather conditions. With cooking taking place on the floor and inside the house in a considerable number of houses, there is the risk of the houses catching fire.
- The majority of the houses have unhygienic living conditions with pest infestation and poor ventilation causing serious health concerns such as skin infections, food, water, and vector-borne diseases.
- Other than in Lallubhai Compound, the majority of the houses in Rafi Nagar and Shivaji Nagar use a makeshift arrangement within the limited housing space for bathing. This space is separated from the rest of the house only by a curtain, leading to a complete lack of privacy for women and girls, which may give rise to protection concerns.

**Impact of habitability on children**

- Overcrowding in houses leads to a complete lack of privacy, which may raise protection concerns, and lead to stress. Crowded housing harms children’s school achievement, physical health (respiratory

insufficiency and pulmonary problems), hinders social emotional development, heightens vulnerability, leads to behavioural difficulties, and impaired parent-child relationships. (Evans & Cohen, 1987). Early experiences of stress could play a role in perpetuating health inequalities over the life course (Evans & Kim, 2013).

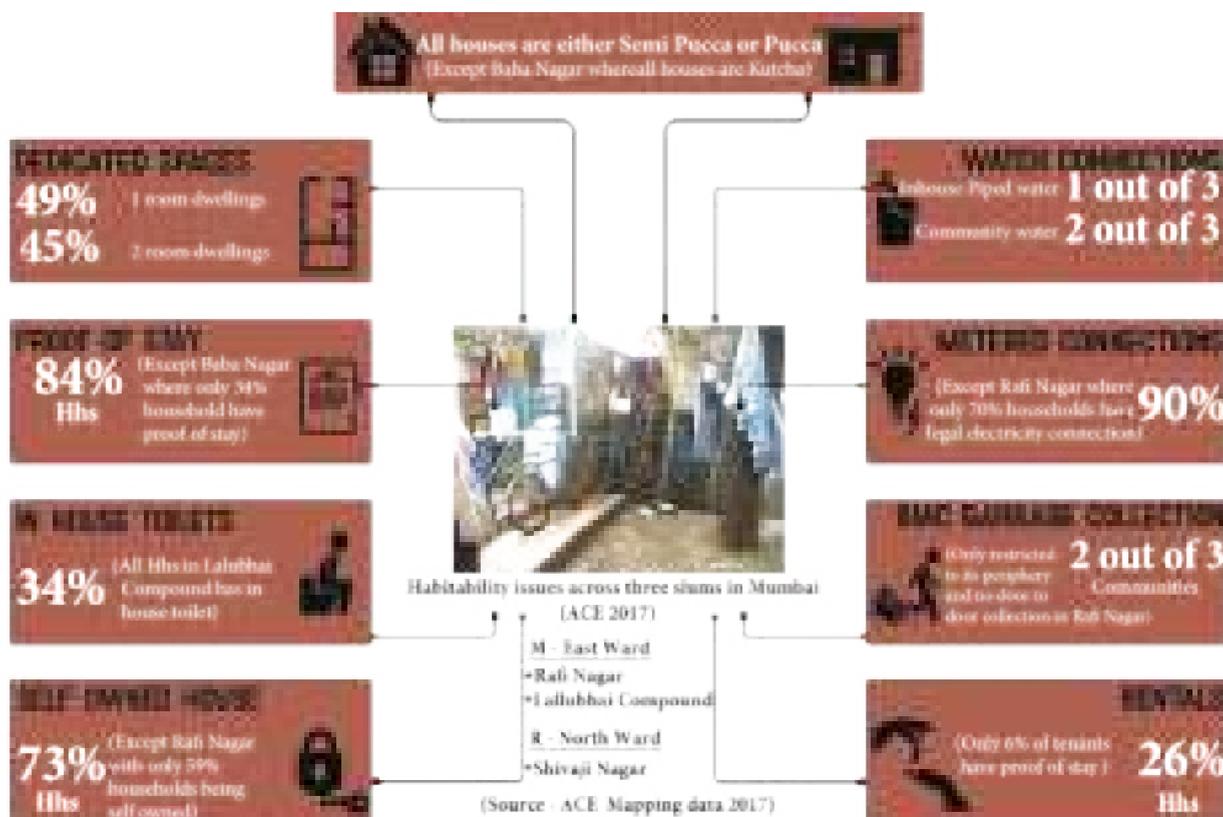


Figure 5-3. Summary of habitability issues

- Living in tight overcrowded spaces with high levels of noise and environmental chaos, caregivers (WHO, 2001) are more prone to using harsh discipline and children are more prone to problem behaviour (Fiese & Winter, 2010). A high prevalence of domestic violence and harsh physical punishments inflicted on children at home were reported across all slums
- Children are exposed to multiple health risks from birth due to poor housing, lack of infrastructure and access to basic services, which make all residents, and particularly children, vulnerable to communicable diseases such as respiratory and gastrointestinal illnesses, malaria, accidents and injuries (Sverdluk, 2011) and tuberculosis infection (ODPM, 2004).
- Living in poor housing results in constant repairs and maintenance incurring high costs, inducing poverty for daily wage earners, and reducing life chances. Further, living in bad housing as a child results in a higher risk of low educational achievement, which in the long run has implications for economic wellbeing (Harker, 2006).

- Houses with temporary, dilapidated structures and made from inferior non-durable building materials are more susceptible to domestic fires causing accidents and serious injury.

### 5.1.3 Basic Services and Community Level Infrastructure

The benefits of legal recognition for a slum settlement extend well beyond improvements in housing quality; notification enables access to entitlements and government provision of services that are vital for life including water, sanitation, electricity, and health centres. Though a 2014 Bombay High Court judgement orders the city government to provide access to Mumbai’s water supply to residents living in non-notified urban poor settlements, delinking tenure security from the right to water; irrespective of their legal status, slums continue to experience multiple vulnerabilities including lack of basic services and infrastructure.

#### a. Water supply & storage

Table 5-6. Water Sources across the Three Communities			
	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Common Water Taps	✗	✓	✗
Tanker	✓	✗	✓
Individual Connection	✓	✗	✗
Private Water Source	✗	✗	✓
Well	✗	✓	✗

**Table 5-7. Status of Water Supply System in the Communities**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
<b>Limited and erratic supply of water across all settlements</b>	<p>All houses have individual taps connected to water tanks built in several places within the community.</p> <p>Each tank caters to 4 buildings/3,000 persons approx. These tanks receive water supply from the MCGM at 2:00 am for 15 to 20 minutes daily.</p> <p>83% store water in drums and buckets.</p>	<p>All houses have access to piped water though not through individual connections.</p> <p>Each lane has 2 to 3 taps and each tap is shared by three families. Water is supplied by the municipal corporation and is accessible to the people between 9:30 pm to 12:00 am. In addition, there are 5 wells but the water is not potable.</p> <p>98% store water in drums while 72% in pots.</p>	<p>Access to water only through:</p> <p>A. 28 illegal water taps: a few residents have paid a lump sum amount to the BMC for illegal water connections where water is supplied twice a day for 2 to 3 hours. This water is further sold by the tap owners to other residents, for 10 to 15 minutes daily, for a monthly fee of 400 rupees, or 200 rupees a month if accessed on alternate days. Each tap caters to 15 to 20 families. The water is unfit for drinking.</p> <p>B. Tanker: Tankers purchased by water agents cost 1,200 to 2,000 rupees each. One tanker can fill around 25 drums. Residents pay 70 rupees a month for one drum of water.</p> <p>C. Jeevan Dhara: A water outlet run by the NGO Apnalaya, through a PPP arrangement, provides purified, potable water to the residents at the rate of 20 rupees for 20 litres of water.</p>



Water drum in Shivaji Nagar  
Photo Credit - ACE Trust

## Key findings: Water Supply

● In Lallubhai Compound, though all houses have individual water taps they do not have access to individual water tanks and have to rely on shared tanks mostly built at the ground level in several places across the community. Though the municipal corporation provides a regular supply of water, the supply to houses from these tanks is rationed by the different housing societies, with only some buildings receiving water on alternate days. Moreover, in buildings where water does not reach the upper floors due to low water pressure, residents take water directly from the tanks and carry it up to their apartments, in some cases climbing multiple flights of stairs as elevators are either not working or not installed.

● Due to the erratic water supply schedule and timings across the three communities, families have to store water in large drums and buckets and ration their water for daily use. Reduction in the water supply to fewer than the stipulated hours leads to fights between people/families within the community.

● Though Rafi Nagar is a partly regularized settlement, there are no legal provisions for piped water supply, even in the regularized section of the settlement. This has given rise to a parallel illegal system whereby a few residents have gained access to illegal water connections by paying bribes. This water mafia controls the water supply chain within the community, selling water for daily use at high prices, which are a burden to most households

that earn subsistence incomes through daily wage work. However, this water is not potable. Residents have to additionally purchase potable water from Jeevan Dhara, a PPP initiative. Some residents purchase water from Jeevan Dhara, then repackage and sell it in small packets at 2 rupees a packet to generate additional income.

● Across the three communities, the water pipelines are in close proximity to open drains, gutters, and sewerage lines resulting in contamination of potable water provided by the municipal corporation.

## Impact of inadequate water supply on children

● In the absence of a regular water supply or a complete lack of piped water supply (as in the case of Rafi Nagar) and erratic timings, children are often responsible for fetching water from public sources, which adversely impacts school attendance as well as eating into their play time. Children are also subject to harassment during fights between the community residents over water collection.

● Also, families have to store water for daily use in large drums and buckets, which reduces the already limited space available in the houses,



Storage of Water in Shivaji Nagar  
Photo Credit - ACE Trust

resulting in insufficient space for children. The youngest children are also at risk of falling in and drowning. Open water storage also breeds mosquitoes and other disease vectors causing frequent illness in children. This, in turn, weakens the immune system, reduces life expectancy, results in irregular school attendance; reducing children’s chances of living a fulfilling life.

- The quantity of water is as important as, or even more important to health, than quality. Contaminated water contributes to outbreaks of disease, but too little water makes it impossible to maintain sanitary conditions, and contributes to levels of endemic disease that are a major cause of child mortality (Bartlett et al., 1999; Cairncross, 1990).

### Sanitation

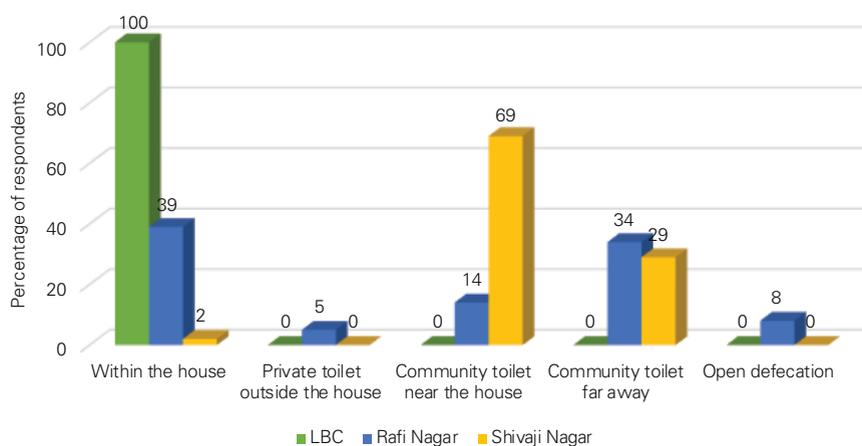


Figure 5-4. Location of Toilet

Table 5-8. Status of Sanitation across the Three Slums			
	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
2 out of 3 settlements are dependent on community toilets with a considerable gap between the required number of seats and users.	Each house has an in-built toilet and bathroom with running water.	<p>Total of 42 units. 7 public toilets in the periphery of the community. There are 6 units per toilet with 3 units for men and 3 for women. No separate units for children.</p> <p>Ratio of people per toilet – 1 toilet for 595 people; i.e. only 8% of the total demand.</p> <p>Water is provided only in the paid toilets, which incurs a user fee of 30 rupees per family per month or 2 rupees per use per person.</p> <p>The BMC has appointed workers to clean the paid toilets every two hours.</p>	<p>6 toilet blocks located across the slum, out of which 3 are paid and 3 are non-paying. Only the paid toilets have the facility of running water. Residents need to pay 2 rupees per use or get a monthly pass for 150 rupees per family.</p> <p>Each toilet block has 10 units of which 5 are for men and 5 for women. No separate units for children.</p> <p>Ratio of people per toilet – 1 toilet for 290 people; i.e. only 10% of the total demand.</p> <p>Paid toilets are maintained by private contractors and are cleaned from time to time on a daily basis. The unpaid toilets are managed by the BMC and are cleaned once a day.</p>

**Table 5-9. Status of Public Toilets Across the Three Slums**

Public Toilet	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Total Population	All households have an in-house toilet facility	20460	17487
Existing number of public toilet seats		70	60
Total seats required as per WHO standard		818	700
Gap (no. of seats)		748	640



Public toilet in Rafi Nagar  
Photo Credit - ACE Trust

## b. Drainage

**Table 5–10. Status of Drainage Across the Three Slums**

Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Dirty, untreated water from the toilets flows out into the open drains through broken rusted sewage pipes.	Open gutters are present throughout the community and are strewn with garbage.	Dirty, untreated water from the toilets flows out into the open drains through broken rusted sewage pipes

### Key findings: Sanitation and Drainage

- Due to the acute shortage of public toilets open defecation is a problem in both Rafi Nagar and Shivaji Nagar. In addition, there is no provision for toilet seats for children in any of the toilet blocks. During rush hours, the adults do not allow the children to use the toilets and they are thus left to defecate in the open, in unhygienic locations such as the dumping ground.
- Free public toilets are neither well maintained nor cleaned on a regular basis. These toilets lack basic infrastructure such as piped water, and users have to bring their water from home for use. The toilets have broken doors and damaged bolts, inadequate lighting, often not in working condition, and have inappropriate graffiti on the inner walls.
- Lack of proper lighting in and around the public toilets invites anti-social activities such as public sexual harassment, alcoholism, and substance abuse, making access to these toilets unsafe for women and children.
- Paid toilets, which have better infrastructure and amenities, are expensive to use and create a strain on subsistence incomes earned by families engaging in daily wage work.
- Dirty water from the toilets flows directly out into the open drains and gutters without any treatment.
- In Shivaji Nagar and Rafi Nagar, public toilets are located either on the periphery of the community or far away from home. Thus, residents have to walk through narrow unlit by-lanes to be able to access these toilets. While community members feel safe to access these toilets during the day, at night children and women either do not access these toilets or access them in groups (with their friends or family) to ensure their safety.
- To counter the problem of the lack of in-house toilets and public toilets being too far away, residents from the non-regularized part of Rafi Nagar have got together and built 'floating toilets' on the creek behind their homes. There is one floating toilet in each of the 13 lanes in the non-regularized part; each toilet is shared by 40 to 50 households. Though these toilets provide an alternative solution for these residents, dirty water from these toilets flows directly into the creek. Houses built right next to the creek are often flooded with this dirty water. Also, children swim and play in this water.
- Open drains are present across the three communities and they often overflow, especially during the monsoon. Garbage accumulated around these drains leads to clogging of drains, resulting in water-logging, which makes movement across the community difficult. It also creates a breeding ground for mosquitoes resulting in health problems.
- In Lallubhai Compound and Shivaji Nagar, there are large open drains running around the periphery of the community. Children and adults alike have

reported cases of children falling into these open drains causing injury.

### Impact of water, sanitation and drainage on children

- Lack of toilets at home coupled with the lack of public toilet seats for children forces children to engage in open defecation by squatting in lanes, gutters or any other open space, exposing them to unclean and unhygienic environments resulting in ill health (Bartlett et al., 1999). Children in Rafi Nagar reported that they fear municipal garbage vehicles suddenly arriving at the city dumping ground, interrupting and/or injuring them while they defecate in the open dumping ground.
- Open drains with sewerage water act as a breeding ground for mosquitoes and other vectors leading to serious health implications for children. In the case of open defecation, due to their proximity to the ground and frequently unsanitary habits of children, their excreta tend to be a

particularly potent source of infection (Boyden & Holden, 1991).

- As public toilets, especially unpaid toilets are rarely cleaned; children are exposed to disease vectors and germs resulting in infections and ill health. Public toilets also present a safety hazard for older children, particularly girls who may be victims of harassment (Bartlett et al., 1999). Unhygienic living conditions such as lack of availability of clean water, poor sanitation and hygiene practices in childhood are linked to long-term health problems such as stunting, which could affect employment opportunities and result in decreased life expectancy. 39 per cent of India's children are stunted (Water Aid, 2016). Stunting can have long-lasting harmful effects such as diminished mental ability and learning capacity and poor performance at school (UNICEF, 2017). The loss in average adult income from stunting is estimated to be 22 per cent (Grantham-McGregor, Cheung, Cueto, Glewwe, Richter & Strupp, 2007).



Community space for children in Shivaji Nagar.  
Photo Credit - Paula Bronstein, Photo Journalist

### c. Street Lights

**Table 5–11. Status of Street lights across the Three Slums**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
94% of the major streets across the three communities have streetlights.	<ul style="list-style-type: none"> <li>• 233 external building lights of which 43 are streetlights.</li> <li>• Street lights have been installed only on the main road by the government</li> <li>• Switched on from 7:00 pm to 7:00 am.</li> </ul>	<ul style="list-style-type: none"> <li>• 20 streetlights present mostly on the main road outside the community.</li> <li>• Of these only 16 to 17 are in working condition.</li> <li>• Switched on from 7:00 pm to 6:00 am.</li> <li>• Installed by the government.</li> </ul>	<ul style="list-style-type: none"> <li>• 50 streetlights within the community out of which 20 are in working condition.</li> <li>• The lights were installed by a private sector power utility company TATA.</li> <li>• Switched on from 7:00 pm to 6:00 am.</li> </ul>

#### Key findings: Street lights

Even though the main roads have streetlights, there is a lack of adequate street lighting in the by-lanes within the community. The only lights in the by-lanes are privately owned and they are switched on and off as per the discretion of the owners. This makes several spaces inaccessible and unsafe after sunset, especially for women and children.

#### Impact of street lights on children

Spaces that are abandoned due to lack of proper street lights invite anti-social activities such as public sexual harassment, substance abuse, alcoholism, gambling, etc. which makes independent mobility unsafe for women and children; especially post sunset. Having to walk on uneven and broken roads in the dark makes children susceptible to accidents and injuries.

### d. Community spaces

**Table 5–12. Status of Roads and Spaces across the Three Slums**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Paved roads	Present	Present	Present mostly in the regularized part.
Community spaces	None	None	None

#### Key findings: Community spaces

There are no formal community spaces available for the residents to gather for meetings and celebrations. The recommendations for such community socialization spaces in the URDPFI guidelines include: one community room of 660 sq. m for every 5,000 population and one community hall/library for every 15,000 population of an area of 2,000 sq. m. No such planned facilities exist in any of the communities. The communities make use of informal open spaces, the by-lanes, or the main road as their community space.

#### Impact of community spaces on children

When large and small, safe, pleasant local spaces are available interspersed within the settlement, both adults and children have the possibility of escaping from household tensions and accessing different community networks. Such possibilities and encounters build and nurture social capital and their lack weakens the community (Bartlett, 2018).

e. Garbage collection

Table 5–13. Status of Garbage Collection, Disposal and Management			
	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Door to door collection through Dattak Vasati Yojana <sup>5</sup> in all three slums though the quality of service varies and centralized collection by BMC not regular.	<p>Door to door garbage collection through Dattak Vasati Yojana for residents living in buildings with registered societies. They have to pay a monthly fee for the cleaning services.</p> <p>The collected garbage is dumped near the railway track or near the public toilet.</p> <p>The BMC is responsible for removal of garbage from the community but it is irregular.</p> <p>People living on the higher floors of buildings without societies dump their daily garbage in the open areas around the buildings.</p>	<p>Door to door garbage collection through Dattak Vasati Yojana for a monthly fee of 30 rupees per family.</p> <p>Collected garbage is transported to the public dustbins installed on the main road.</p> <p>The BMC is responsible for removal of garbage from these dustbins.</p>	<p>Door to door garbage collection takes place through the Dattak Vasati Yojana for a fee of 20 rupees per month per family.</p> <p>Garbage is transported to the public dustbins on the periphery of the community.</p> <p>However, the BMC is not very regular with removal of garbage from the bins.</p> <p>No door to door garbage collection in the non-regularized part.</p>

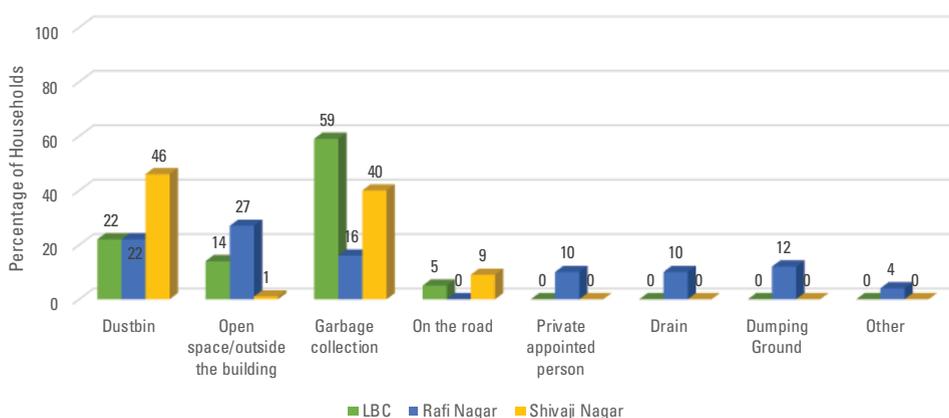


Figure 5-5. Garbage disposal mechanism across all the communities

**Key findings: Garbage collection and management**

- In the flatted development (Lallubhai Compound), the residents living on the upper floors do not have a sense of ownership over the open spaces between the buildings at ground level and they throw their garbage into these spaces.

<sup>5</sup> Dattak Vasati Yojana: Initiated by the MCGM, the Dattak Vasati Yojana is a community led sanitation programme involving the active participation of slum dwellers in the informal settlements where cleanliness services are provided. The DVY is a departure from the traditional contract system for the provision of cleanliness services in slum areas. Instead of entrusting cleanliness activities to a single outsider entrepreneur, it is carried out by Community Based Organizations formed by local slum dwellers and registered with the competent authorities. Financial and other support takes the form of subsidies.

- Though there is a system of daily garbage collection in the authorized settlements, there are no fixed provisions for adequately disposing of the collected garbage.
- Even though families pay for daily door to door garbage collection, they still tend to throw garbage into the open drains and gutters, which leads to clogging of these drains resulting in overflow and waterlogging.

### Impact of inadequate garbage collection and management on children

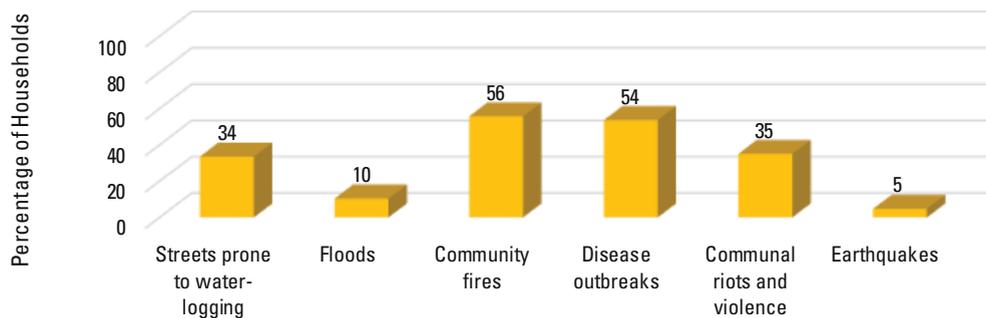
- Open dumping of garbage on the streets and open spaces limits the availability of open spaces thereby reducing spaces for children’s independent mobility and play. In both Lallubhai Compound and Shivaji Nagar, two open grounds had been turned into informal garbage dumping plots, thereby preventing children from playing in these open spaces. These have since been cleaned and transformed into safe spaces for children to play.
- The uncollected garbage accumulates and blocks the drainage making these communities impassable, especially during the monsoon. This, in turn leads to an increase in breeding sites for mosquitoes, filth, foul smells, and diseases such as diarrhoea, malaria, dengue, and various kinds of skin infections.

### 5.1.4 Disaster Risk Reduction

Urban poor settlements are often located on the most vulnerable land, unfit and undesirable for residential use, putting children living in such settlements at a particularly high risk of natural and man-made disasters. Big natural disasters can drive reform and the allocation of resources, leading to improvements in public safety (Lepore, 2016). Everyday hazards such as kitchen fires and water logging, which are ordinary have no such power but can have as great or sometimes greater impact on children’s lives over the long run (Bartlett, 1999). The crisis of growing up in poverty, inadequate living environments not only threatens the individual child but entrenches and even exacerbates inequality in society (Ortiz, Daniels & Engilbertsdóttir, 2012).

**Table 5–14. Situational and Environmental Hazards across the Three Slums**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Locational characteristics	Located on low-lying land with moderate to high flood zones. Surrounded by an open nallah on the western edge and an unguarded railway line on the Eastern edge.	Located on low-lying land with low flood zones. Surrounded by the Dahisar river on the Eastern edge. The main approach road to the community is a very busy major road with heavy vehicular traffic.	Located on low-lying land right next to the city dumping ground and with mostly high flood zones. The non-regularized Baba Nagar stands on the dumping ground, right beside a choked garbage-filled creek. The 90 foot road covering the Eastern side of the community is a busy with heavy vehicular traffic.
Everyday hazards and risks	Problems experienced during monsoon and water shortages	Problems experienced during monsoon and water shortages	Problems experienced during monsoon and water shortages



**Figure 5-6. Frequently experienced hazards in the past 5 years**

### Key findings and impact of disasters on children

- As is the case with most urban poor settlements, all three communities are located on low-lying land. The locational characteristics of the communities puts them at risk due to frequent episodes of flooding, waterlogging, and in the case of Rafi Nagar, disease outbreak. Children living in settlements exposed to environmental hazards experience frequent bouts of illness as discussed earlier.
- Fire was reported as a major hazard across the 3 communities. Both Rafi Nagar and Shivaji Nagar have low-lying exposed electric wires and open meter boxes, which could cause fire or lead to major accidents in case of a community fire.
- In addition, there is a lack of clean, hazard free open spaces across the 3 communities. Moreover, the dense layout of Shivaji Nagar and dark unlit stairways and corridors in Lallubhai Compound make access to the available open spaces a challenge in case of a fire accident.
- Also, though all 3 communities have fire stations within a radius of 4 to 5 kilometres, the physical characteristics of the communities make it next to impossible for the fire engines to gain access to all pockets and buildings. There is no provision of fire extinguishers even in the flatted housing.
- Across the three communities, monsoon plays havoc with the environment every year, resulting in children having to cross slushy waterlogged grounds and roads to get to school. At home, they deal with stagnant water, leakages, and mould, and outbreaks of disease. However, no concrete monsoon preparedness or DRR activities have been initiated or undertaken at the household, school, community, or ward level.
- Water mixed with mud and garbage forms slush in and around the community, causing stains on school uniforms, spoiling shoes and causing skin infections. Open spaces where children play are also filled with water leaving the children with no outdoor spaces to play in. Moreover, waterlogging between and outside the community lanes, gives rise to mosquito breeding and the spread of diseases such as dengue, malaria, typhoid, coughs and colds, etc.

- There is a complete lack of emergency shelter options for women and children forcing the residents to rely on indigenous mechanisms such as accessing a friend's or relative's house during emergencies.

## 5.2 Safety and security

The Slum Almanac 2015-16, published by UN Habitat, records one in eight people living in slums or over a billion people around the world living in slum-like and often hazardous conditions in cities. (UN Habitat, 2016). However, 62% of Mumbai's population lives in slums (Census of India, 2011) or informal settlements. The advantages that cities typically offer include better access to water, sanitation, education, health services and economic opportunities. However, these advantages generally bypass children in slums.

There is embedded structural violence in the infrastructural deprivations that threaten slum residents on a daily basis; children in particular are profoundly impacted by the deprivations in their physical environments. The material world, which is often left out of child development discourses, vitally determines children's safety as it states "where our bodies take shelter, what they lie on, where they clean themselves, how they are heated or cooled, the means by which they move from place to place, the distances they are required to move, the boundaries, real or symbolic, that define where they may or may not go, what they can or cannot get access to" (Bartlett, 2018, p.5). Crowding, lack of privacy, unhealthy garbage-filled streets and open spaces, stench in the air, flooding etc., which often define the environmental quality of informal settlements, are fundamental to health, well-being, sense of worth and identity, the capacity to enjoy and endure, to engage, cooperate, love and learn.

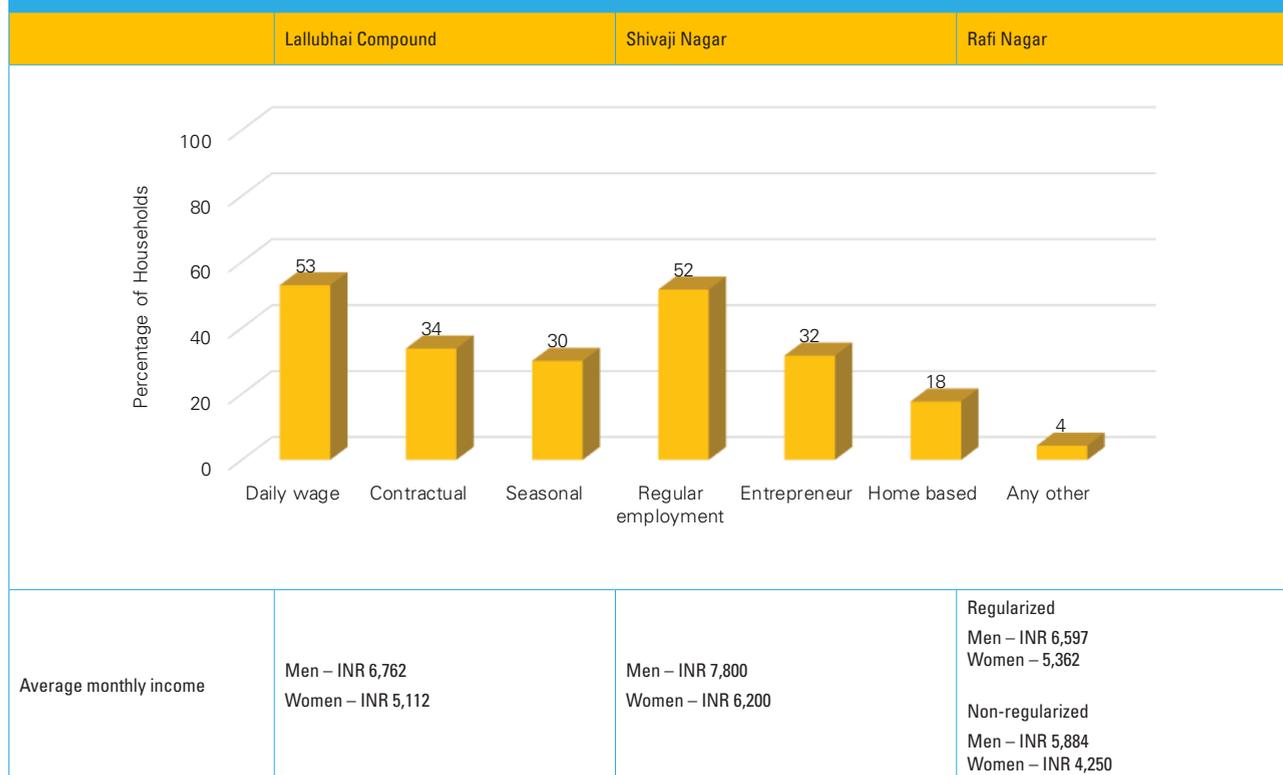
Discourses on urban safety typically focus on prevention of crime and violence. But safety also includes the enhancement of individual rights, including the physical, social and psychological integrity of a person. It is now widely acknowledged that inadequate urban development and poor local governance that inevitably generate social and territorial exclusion patterns encourage crime and violence (UN Habitat, 2015). Similarly, people's lack of control in designing and managing their housing areas lead to mental stress and loss of social well-being (Turner & Fichter, 1972).



**Table 5–15. Status of Education and Workforce Participation**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar															
Educational attainment (adults) <b>Average education is up to secondary level</b>	Men – mostly secondary level or lower. Women – mostly secondary level or lower.	Men – mostly secondary level or lower. Women – mostly secondary level or lower.	In both regularized and non-regularized: Men – mostly secondary level or lower. Women – mostly upper primary or lower.															
Workforce participation:  Mumbai Suburban data shows: Male: 55.87% Female: 16.28% (Census of India 2011)	Men – 52.55% Women – 15.34%	Men – 43.9% Women – 15.01%	In both regularized and non-regularized:  Men – 31.35 and 37.68 respectively, Women – 5.86 and 5.14 respectively															
<p><b>Work Force Participation Rate</b></p> <table border="1"> <caption>Data for Work Force Participation Rate Chart</caption> <thead> <tr> <th>Location</th> <th>Female (%)</th> <th>Male (%)</th> </tr> </thead> <tbody> <tr> <td>Shivaji Nagar</td> <td>15.01</td> <td>43.9</td> </tr> <tr> <td>Rafi Nagar (non-regularized)</td> <td>5.14</td> <td>37.68</td> </tr> <tr> <td>Rafi Nagar (regularized)</td> <td>5.86</td> <td>31.35</td> </tr> <tr> <td>Lallubhai Compound</td> <td>15.34</td> <td>55.25</td> </tr> </tbody> </table>				Location	Female (%)	Male (%)	Shivaji Nagar	15.01	43.9	Rafi Nagar (non-regularized)	5.14	37.68	Rafi Nagar (regularized)	5.86	31.35	Lallubhai Compound	15.34	55.25
Location	Female (%)	Male (%)																
Shivaji Nagar	15.01	43.9																
Rafi Nagar (non-regularized)	5.14	37.68																
Rafi Nagar (regularized)	5.86	31.35																
Lallubhai Compound	15.34	55.25																
Work opportunities	<p>Employment in the informal sector such as</p> <p>Regular employment (89%) Daily wage work (93%), Contractual work (86%), Seasonal work (85%), and Home based work (17%). Self-employment /entrepreneurship (85%)</p>	<p>Regular employment – 51% Daily wage work – 12% Contractual work – 9% Seasonal work – 1% Home based work – 2% Self-employment /entrepreneurship – 23%</p>	<p><b>Regularized</b> Regular employment – 17% Daily wage work – 46% Contractual work – 2% Seasonal work – 2% Home based work – 7% Self-employment /entrepreneurship – 15%</p> <p><b>Non-regularized</b> Regular employment – 12% Daily wage work – 58% Contractual work – 9% Seasonal work – 2% Home based work – 1% Self-employment /entrepreneurship – 10%</p>															

**Table 5–15. Status of Education and Workforce Participation**



### Emerging issues due to income insecurity

- The average education level for a male is up to the secondary level or lower, while the average for females is the same in two of the communities and only up to upper primary level or lower in the case of Rafi Nagar. Though every household reported at least one earning member, due to low levels of education, employment in the informal sector is the main source of income for both males and females, resulting in low subsistence income generation.
- Due to a lack of childminding support systems such as day care centres, crèches, and play schools in the community, women’s participation in the workforce is low.
- Given the inadequacies of their incomes, households reported borrowing from both formal and informal sources for health concerns and consumption loans. However, for a relatively older and legal settlement such as Shivaji Nagar, the majority of the households reported mainly accessing non-consumption loans (for education and housing) from formal sources such as banks, micro-finance organizations, and local credit societies.
- In the absence of completion of formal education, vocational skills training programmes help in gaining marketable skills, which could result in employability. However, the lack of such programmes offered either by the government or the private sector, in and around the three communities, has resulted in a lack of marketable skills and subsistence incomes leading to a vicious cycle of poverty. The major occupations are

driver, factory worker, porter, lower grade government jobs, rag picker, hawker, labourer, domestic worker, and home-based work.

### 5.2.1 Social Security

The UNCRC not only acknowledges the primary role of parents and caregivers in the growth and development of children (Article 18) but also lays emphasis on the obligation of the State to support families by providing assistance, developing institutions, facilities, and services for child care, as well as to put in place appropriate measures to ensure that children of working parents have access to child-care services and facilities for which they are eligible. The Convention also recognizes “the right of every child to a standard of living adequate for the child’s physical, mental, spiritual, moral and social development” (Article 27). Though the primary responsibility to secure these rights lies with the parents and family, the State is also responsible for providing assistance and “in case of need provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing.” Children have the right to benefit from social security on the basis of their circumstances (Article 26).

**Table 5–16. Status of Social Security and Identity Documents Across the Three Slums**

Document	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
<p><b>Ration Card</b> 92% of the households reported possessing a ration card</p> <p>Types of Ration Card</p> <p>99% have ration cards of which 96% are orange<sup>6</sup>, 3% are yellow<sup>7</sup>, and 1% are white<sup>8</sup>.</p>	<p>99% have ration cards of which 96% are orange<sup>6</sup>, 3% are yellow<sup>7</sup>, and 1% are white<sup>8</sup>.</p>	<p>94% have ration cards of which 95% are orange and 3% are yellow .</p>	<p>Regularized – 79% have ration cards of which 89% are orange, 10% are yellow, and 1% are white .</p> <p>Non-regularized – 67% have ration cards of which 84% are orange and 16% are yellow cards.</p>
<p><b>Birth Certificates</b> 67% of the children possess a birth certificate</p>	92%	74%	<p>Regularized – 37%</p> <p>Non-regularized – 54%</p>
<p><b>Aadhaar Card</b> Other important documents</p>	66% of children have an Aadhaar Card	62% of children have an Aadhaar Card	<p>Regularized – 58% of children have an Aadhaar Card</p> <p>Non-regularized – 57% of children have an Aadhaar Card</p>
<p>Access to social protection schemes</p>	None have access to any social protection schemes	Only 3% have access to any social protection schemes	<p>Regularized – Only 1% have access to any social protection schemes</p> <p>Non-regularized – Only 2% have access to any social protection schemes</p>

6 Total annual family income of more than INR 15,000 and less than 1 lakh.

7 Total annual family income up to INR 15,000.

8 Total annual family income above 1 lakh.

## Emerging issues due to social insecurity

- Over 90% of the households reported the possession of an orange ration card (annual income of more than INR 15,000 and less than 1 lakh) while only 3% of households in Lallubhai Compound, and none in Shivaji Nagar, reported the possession of yellow ration cards (annual income below INR 15,000) for an income below the BPL level. In comparison, only 79% of households in Rafi Nagar reported the possession of a ration card. 10% of them from the authorized section and 16% from the unauthorized section fall under the BPL category.
- Not all children have birth certificates, with only 74% of children in Shivaji Nagar and 37% in the authorized part, while 54% in the unauthorized part of Rafi Nagar possess a birth certificate.
- Despite the majority of the households reporting the possession of important documents such as a voter identity card, a PAN card, or an Aadhaar card, only a few households reported access to social protection schemes.

## Impact of social insecurity on children

- Children in low-income

families often experience pressure to work and supplement the family income. The family's inability to pay school fees and their expectation that the children will work and supplement the family income were reported as the primary reasons for children dropping out of school.

- With both parents working to earn a subsistence, children, especially girls, work at home helping to run the household, which in turn cuts into their time for schoolwork, play and recreation, leading to stress and a lack of development opportunities.
- Due to the lack of child support services, working women have to take their children along with them to ensure their safety. This may result in the child being drawn into unpaid labour helping his/her mother on the job.
- The lack of education coupled with a lack of opportunities for vocational and skills training ensures that young adults work in the lowest paid jobs exacerbating the cycle of poverty.
- As the parents have not completed a formal education themselves, they are unable to supervise and support their child in their school work, leaving the child with no

support systems within the home to cope with academic demands and pressures.

- In the absence of important identification documents such as a birth certificate, children are deprived of protection from child marriage, sexual exploitation, child labour, and lack access to social protection schemes.

## 5.2.2 Safe and Unsafe Spaces

Sustainable Development Goal 11.7, talks about providing universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities. Broadly, seven planning attributes of safer communities that are particularly relevant for crime prevention are (Davies, 2004):

- Access and movement: places with well-defined routes, spaces and entrances that provide for convenient movement without compromising security
- Structure: places that are structured so that different uses do not cause conflict
- Surveillance: places where all publicly accessible spaces are overlooked
- Ownership: places that

promote a sense of ownership, respect, territorial responsibility and community

- Physical protection: places that include necessary, well-designed security features
- Activity: places where the level of human activity is appropriate to the location and creates a reduced risk of crime and a sense of safety at all times
- Management and maintenance: places that are designed with management and maintenance in mind, to discourage crime in the present and the future

### Safety at home and safe mobility options

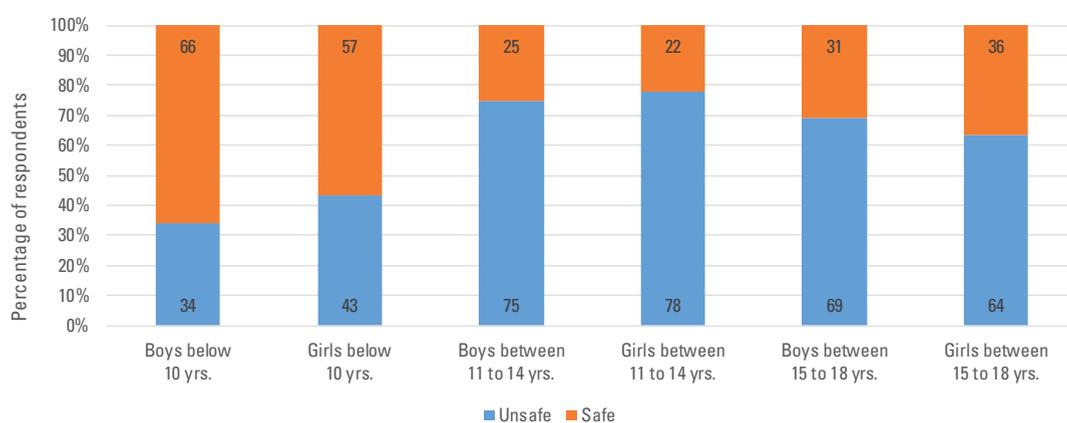


Figure 5-7. Perception of safety at home across all the communities

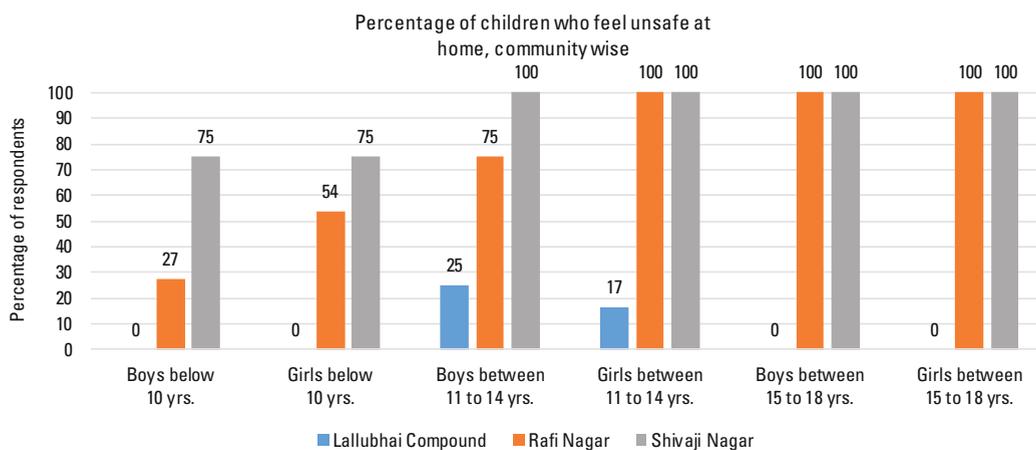


Figure 5-8. Safety at home and in the community

The home appears to be an unsafe space for many children under 10 years and for the majority of the adolescents across the three communities.

The communities where adolescents feel most unsafe at home are Rafi Nagar and Shivaji Nagar. More boys under 10 years reported feeling unsafe at home than girls in these two communities.

### Emerging trends related to feeling safe at home

In Rafi Nagar and Shivaji Nagar, the majority of the children perceived their home as an unsafe space due to a host of physical and social factors. Children reported feeling unsafe at home around the cooking space, around open electric wires, while bathing in makeshift bathrooms, due to the presence of pests, alcohol consumption

by adult men at home, use of profanity by parents, domestic violence, fights between parents, and the presence of male relatives. Children are also victims of violence at home (for a detailed discussion please see Section 5.5).

### Emerging trends related to safe mobility options

Though most essential services can be accessed from the community on foot, by public transport or para-transit systems, children mostly walk to school. However, the route to school is not safe as children face public sexual harassment (for girls) and bullying from anti-social elements, have to cross dirty footpaths, which are waterlogged during the rainy season, get stuck in traffic and as a result are late to school, encounter overcrowded trains, unguarded railway crossings, desolate

spaces, garbage dumps, alcohol shops, drains and ditches, high traffic roads, and feel threatened by stray animals on the way to school.

### Feeling safe within the community

An in-depth analysis was conducted across all three communities on the reasons provided by children against the spaces they had marked safe/unsafe. The nominated spaces were sorted into 12 planning categories namely:

- City Level Infrastructure
- Neighbourhood
- Local Level Infrastructure
- Educational Institutions
- Commercial/Small Retail
- Formal Open Space
- Informal Open Space
- Law Enforcement
- Recreational Amenities
- Sacred Space
- Resource Centre
- Public Amenities





Figure 5-9. Top five types of spaces nominated as safe spaces

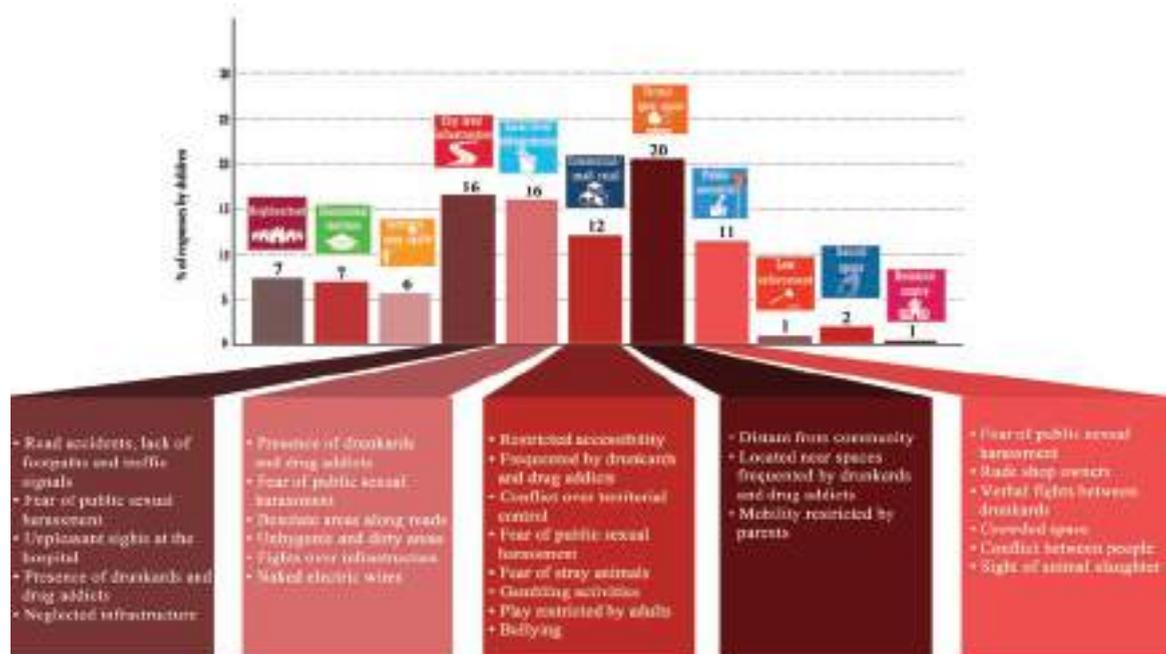


Figure 5-10. Mapping of safe spaces by boys and girls

# RISK MAPPING

## PARENT'S PERSPECTIVE

Perception of insecurity amongst parents

Road Accidents



Eye-teasing



Alcohol



Gambling



Drug abuse



Crime

No Streetlight



## CHILDREN'S PERSPECTIVE

14% boys and 30% girls (11-14 yrs) feel unsafe within the community

### WHY CHILDREN FEEL UNSAFE



Deep Nallah



Stray Dogs



No playground

### WHY CHILDREN FEEL SAFE



Presence of trusted familiar adults



Learning opportunity with peers



Hanging out with friends

Lalubhai Compound - Crime Hotspot (Mothers)



### CRIME HOTSPOTS ACCORDING TO MOTHERS

- ▶ Road to the workshop
- ▶ Empty grounds
- ▶ Alleys
- ▶ Market places
- ▶ Empty buildings



Lalubhai Compound - Crime Hotspot (Fathers)



### CRIME HOTSPOTS ACCORDING TO FATHERS

- ▶ Water Tank
- ▶ Market Road
- ▶ Railway Track
- ▶ Open space near Shivam School
- ▶ Behind bldg. no. 20 and 21



Lalubhai Compound - Girls between 11 to 14 Years



Lalubhai Compound - Boys between 11 to 14 Years

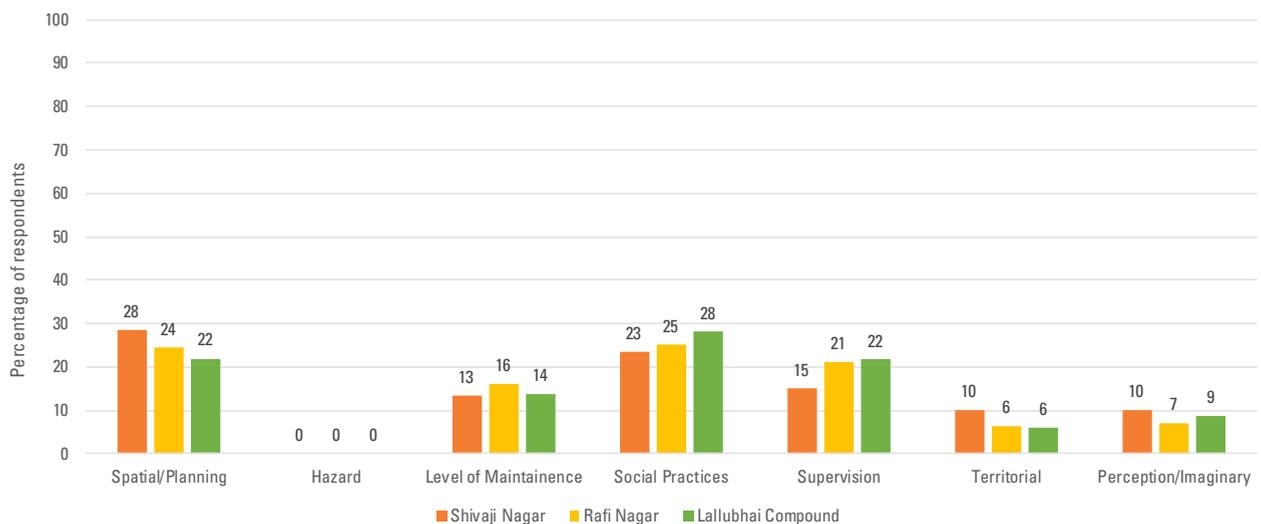


The top safe spaces are schools, sacred spaces, community gathering spaces, and facilities at the heart, or within walking distance, of the communities. These spaces offer known surroundings with familiar adults and opportunities for play, recreation and participation in community activities.

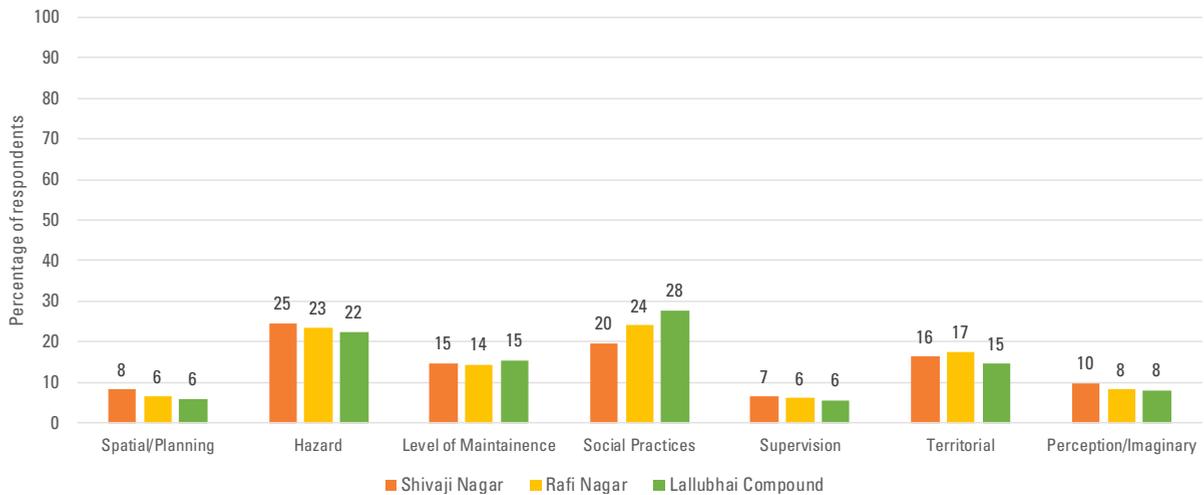
The top unsafe spaces are open spaces in the neighbourhood, utility points for water, public toilets etc., high risk infrastructure such as busy roads around the slums, and the shops in and around the community which often become sites of fights and violence.

The reasons the children mentioned for feeling safe or unsafe were analysed and categorized under three dimensions: Physical, Social and Perceptual. Each dimension is further disaggregated into several sub-dimensions as suggested by the data.

Dimension	Sub-dimension	Examples of reasons
Physical	Spatial/Planning	Proximity to residence, ease of independent mobility, environmental opportunities for play etc.
	Hazard	Movement of heavy vehicles, risk of accidents due to unguarded railway tracks, etc.
	Level of Maintenance	State of infrastructure in school, cleanliness of everyday outdoor spaces, street lights, etc.
Social	Social Practices	Public sexual harassment, conflict or fights in the area, presence of drunks or people gambling, gathering space for community, etc.
	Supervision	Presence of parents/known adults, not desolate space, etc.
	Territorial	Presence of dominant groups (typically older boys and men) in everyday spaces leading to unwanted behaviour such as bullying by older boys. Conversely, the presence of familiar children and adults allows the children to lay claim to the territory, etc.
Perceptual	Perception/Imagination	Fear of being kidnapped, fear of harassment and beatings.



**Figure 5–11. Safe spaces nominated by children**



**Figure 5-12. Unsafe spaces nominated by children**

Some reasons can overlap such as sexual harassment, which falls into the category of ‘social practice’ and ‘perceptual’. Generally physical reasons are tied to the place itself such as the Railway track, which presents a hazard (risk of accidents) making it unsafe but children also consider it safe as it is familiar and they visit it every day.

### Key findings for safety within the community

- Both boys and girls across the three settlements reported feeling unwelcome and unsafe within their neighbourhood on account of rampant public sexual harassment, substance abuse, boys and youth engaging in street fights, the presence of small gangs, and police inaction to check and prevent these activities.

- Parents shared that crime is an everyday phenomenon within the community and typically involves male youth who do not have paid work and/or adequate education. The prevalence of public sexual harassment, presence of gambling dens, drug abuse, road rage, street fights, and petty theft make most public places unsafe according to the parents. Abandoned, isolated, dark and dingy spaces across the three settlements often invite such anti-social activities and crimes.

- Though the community is aware of crime hotspots within their area, no collective action is initiated to prevent, address, or monitor such crimes and anti-social acts.

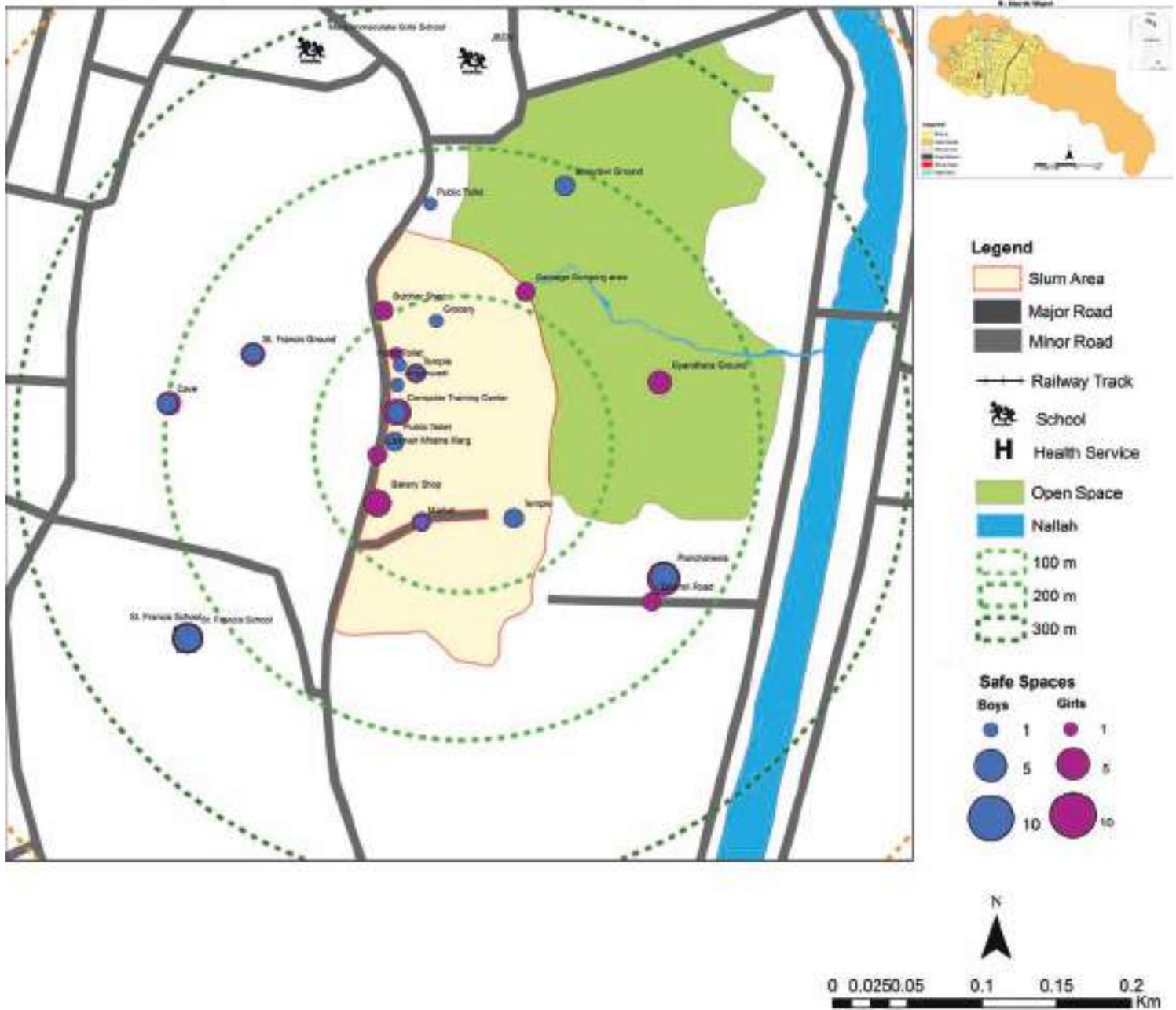
- Other than in spaces that invite crime and anti-social activities, children reported

feeling unsafe in public places such as large open spaces, streets, and markets where a large number of unknown people are present. Children also reported dirty, unmaintained, and dark spaces with physical hazards as unsafe as they present the risk of accidents and injury. Some examples of these hazards are open sewers, garbage, stray animals, open wells, unguarded railway tracks, etc.

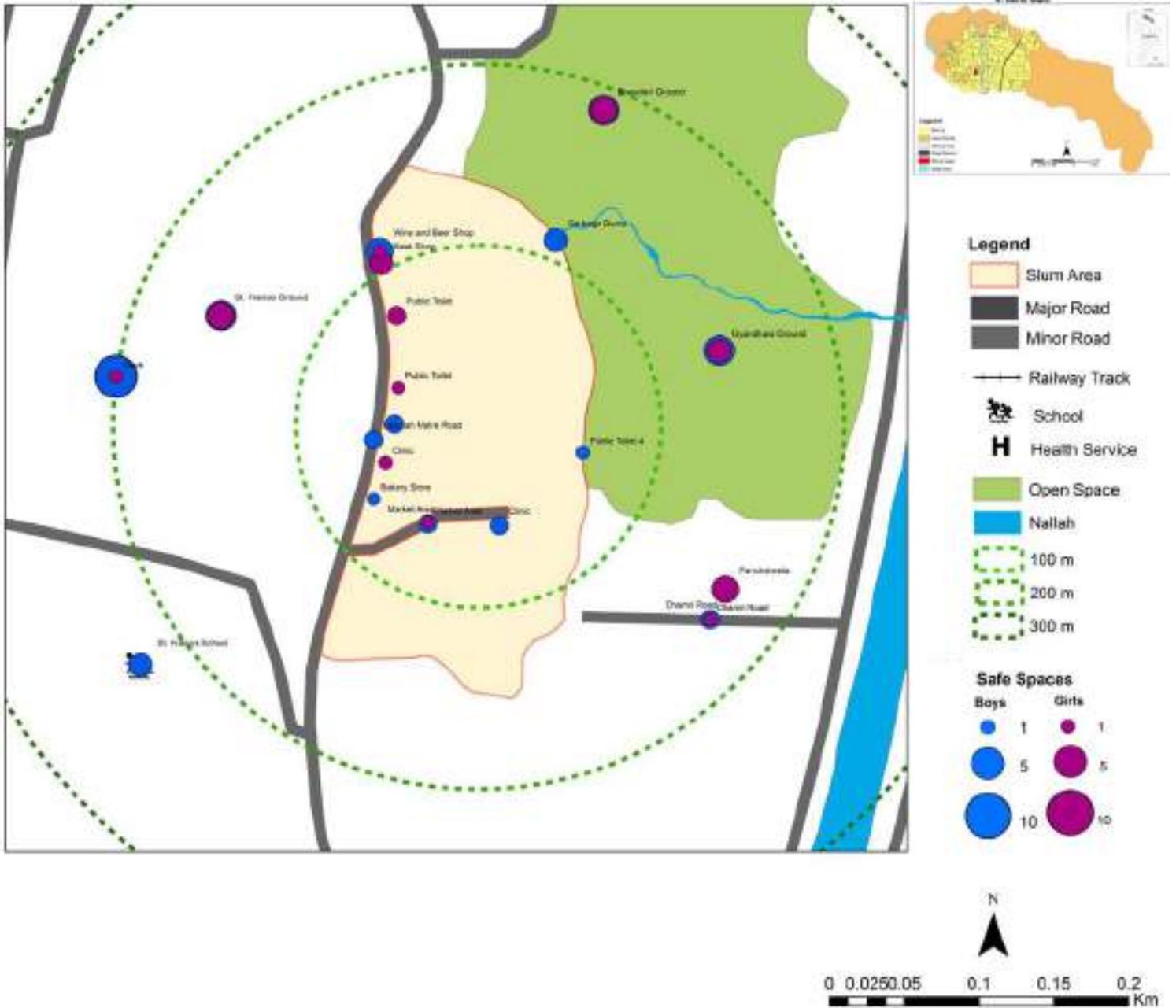
### Impact of an unsafe living environment on children

- An unsafe route to school may result in children missing school or dropping out altogether. Fear of experiencing public sexual harassment on the route to school was cited as one of the reasons for children, especially girls, dropping out of school.

# Shivaji Nagar - Safe spaces identified by children below 10 years of age



# Shivaji Nagar - Unsafe spaces identified by children below 10 years of age



• Home is the most important environment for children and a safe and emotionally supportive home environment increases resilience and reduces the possibility of children coming into contact with the juvenile justice system. Exposure to alcoholism or domestic violence, and being subjected to neglect, deprivation, and abuse, often leads to school dropout and psychosocial health issues in children.

• Poverty, low-quality sanitary facilities, the widespread sale of alcohol, and an urban environment that lacks street lighting, secluded, un-policed spaces, inadequate waste removal encourage open

spaces to be taken over for drug dealing and gambling, thus limiting children's options to use these sites for play, and are more likely to trigger violence and insecurity among children and their parents (McIlwaine, 2013; Kruger, Swart & Chawla, 2005).

### 5.3 Health

Recent research has shown that while urbanization is typically associated with income, there does seem to be an additional advantage associated with living in cities—the health advantage (Vlahov et al., 2007) as more health facilities and professionals are concentrated in cities.

However, disaggregated data on child health indicators show that the urban poor are especially vulnerable to health risks due to the interplay of multiple factors such as poor socio-economic conditions, sub-optimal living environment, poor access and use of public health facilities, illegal status, rapid mobility and poor negotiation capacity (PwC & Save the children, 2015).

The city level data for Mumbai show a high prevalence of substance abuse with the highest number of cases under the Narcotic Drugs & Psychotropic Substances Act being reported during the year 2014 in Mumbai, accounting for 38% of all such cases in India.

#### SAFETY AT HOME:



**Domestic Violence**

**Alcoholics in the lanes**

#### WHY CHILDREN FEEL UNSAFE?



**Punishments**

**Presence of male relatives**

**Punishments Include Beating, Slapping, Restricting The Child's Mobility, Withdrawal Of Television Time And Pocket-Money, Giving The Child Tasks Around Household Chores, Etc.**

#### STRESS

Reported causes of daily stress by adolescents

- ▶ **Not being able to go out and play**
- ▶ **Academic pressure**
- ▶ **Being bullied at school**
- ▶ **Being eve teased**
- ▶ **Fights between parents**
- ▶ **Overcrowding at home**



**UNSAFE HOME**

*Our homes are small and it's difficult to study...it causes stress. Also, there are fights and verbal abuse between husband and wife over children's studies or household matters.*



16 - 18 year old adolescent boys and girls from the community

**Table 5–18. Summary of Findings on Health Across the Three Communities**

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Common health concerns	<p>96% of households reported frequent illness among family members.</p> <p>Cough &amp; cold, fevers, and food, water, and vector borne diseases are common across all age groups. Skin infections, diabetes, heart disease, and mental disorders were reported as prevalent among adults.</p>	<p>98% of households reported frequent illness among family members.</p> <p>Cough &amp; cold and fevers are common across all age groups. Vector borne diseases such as dengue and malaria are common, with 20% reporting a prevalence of these diseases, especially during the monsoon.</p>	<p>Regularized section – 77% reported frequent illness among family members.</p> <p>Non-regularized section – 73% reported frequent illness among family members.</p> <p>Cough &amp; cold, fevers, food, water, and vector borne diseases are common among children, whereas skin infections and TB are common among all age groups.</p>
Risks to health	<p>Unclean and unsanitary living environment</p> <p><b>Water storage in open vessels</b>      <b>Open defecation</b>      <b>Dumping garbage on streets or in open areas</b>      <b>Nature of work [eg. Rag picking]</b>      <b>Open drains</b></p>		
	<p>High stress levels among all age groups.</p> <p>Substance abuse is a major concern with children being inducted by age 8. Alcohol, <i>gutka</i>, smoking cigarettes and <i>bidis</i> are very common. Other substances such as <i>charas</i>, <i>ganja</i>, <i>chillum</i>, buttons (Mandrax), cough syrups, and whiteners/solution are easily available.</p>	<p>High stress levels among all age groups.</p> <p>Substance abuse is a major concern with children being inducted by age 6 to 7. Alcohol, <i>gutka</i>, betel containing tobacco, smoking cigarettes and <i>bidis</i> are very common. Other substances such as <i>charas</i>, <i>ganja</i>, <i>chillum</i>, buttons (Mandrax).</p>	<p>High stress levels among all age groups.</p> <p>Substance abuse is a major concern with children being inducted by age 5. Alcohol, <i>toddy</i>, <i>gutka</i>, smoking cigarettes and <i>bidis</i> are very common. Other substances such as <i>charas</i>, <i>ganja</i>, <i>chillum</i>, buttons (Mandrax), and whiteners/solution are easily available.</p>

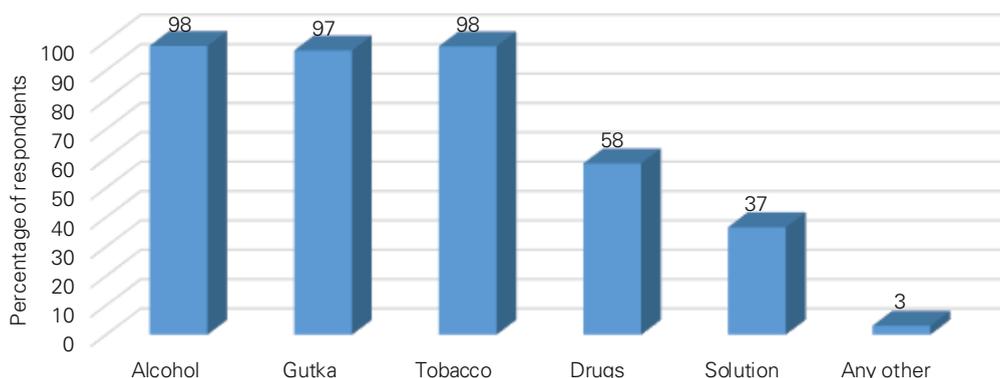


Figure 5–13. Type of substances used and prevalence of abuse by respondents in all three slums

Table 5–19. Available Healthcare Facilities Across the Three Communities

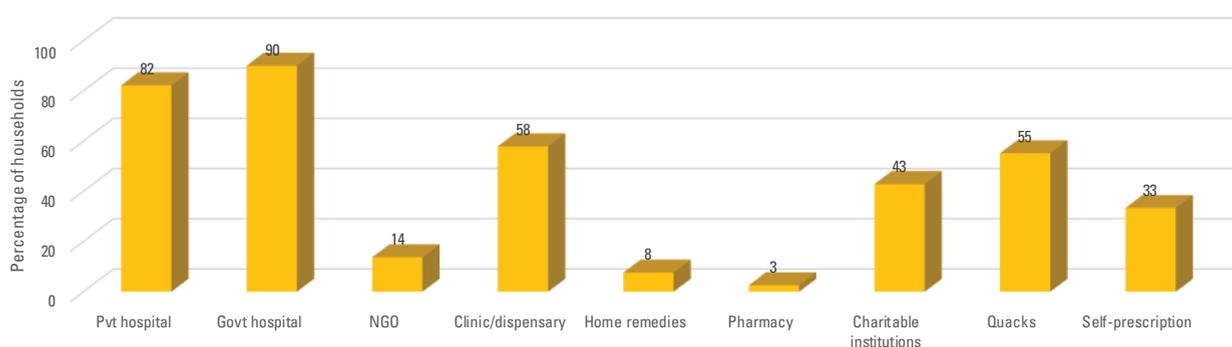
	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Available healthcare facilities	<ul style="list-style-type: none"> <li>• Shatabdi Government hospital at a distance of approximately 5 kms.</li> <li>• 1 health post at a walking distance of 1 km in Deonar.</li> <li>• Multiple private hospitals and clinics within walking distance.</li> </ul>	<ul style="list-style-type: none"> <li>• Bhagwati Government Hospital 1 km away from the community. It is currently under renovation and has been temporarily shifted to Kandivali (over 3 kms).</li> <li>• 1 (Shastri Nagar) health post at a walking distance of 10 minutes.</li> <li>• There are small private clinics and a charitable hospital in and around the community.</li> </ul>	<ul style="list-style-type: none"> <li>• Shatabdi Government hospital and Raja wadi hospital – about 30 minutes travel time by bus.</li> <li>• Shivaji Nagar health post at a walking distance of 10 minutes.</li> <li>• Small private clinics available within walking distance of the slum.</li> </ul>

Table 5–20. Preferences for Delivery/Child Birth

Maternal health: preferences for delivery/child birth	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Equal preference for government and private hospitals	96% - govt. hospitals 90% - pvt. hospitals 1% - assisted home delivery	91% - govt. hospitals 85% - private hospitals 80% - govt. maternity home 63% - pvt. maternity home 1% - assisted home delivery	<b>Regularized</b> 74% - govt. hospitals 45% - private hospitals 55% - govt. maternity home 36% - pvt. maternity home 14% - assisted home delivery 5% - unassisted home delivery  <b>Non-regularized</b> 86% - govt. hospitals 60% - private hospitals 52% - govt. maternity home 44% - pvt. maternity home 25% - assisted home delivery 7% - unassisted home delivery

**Table 5–21. Access to Immunization for Children (multiple response questions and respondents typically chose more than one option)**

Accessing immunization for children	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
ICDS and health posts typically accessed in the slums, while dispensaries and private doctors availed in the R&R colony	89% - health post 70% - dispensaries 69% - private doctor 22% - ICDS centres	80% - ICDS centres 69% - health post	<b>Regularized</b> 71% - ICDS centres 55% - health post <b>Non-regularized</b> 90% - ICDS centres 66% - health post



**Figure 5–14. Health facilities accessed**

### Key findings: Health

- Unhealthy, unhygienic, and cramped housing conditions coupled with poor sanitation, a lack of potable water and environmental hazards pose serious health risks for the residents across the three settlements.
- Quality affordable public health services are highly inadequate across the three settlements. The residents rely on untrained private doctors for minor illnesses. With their limited ability to pay for healthcare, and overcrowding in government hospitals, the community residents are forced to access untrained private doctors that are more affordable.
- Environmental stressors such as erratic water supply, overcrowding and lack of privacy at home, high levels of noise, not having enough money, fights with neighbours over garbage, being forced to make monetary contributions for the celebration of festivals, unhygienic living conditions, lack of basic amenities, having to travel long distances every day for work, not being able to find enough work, having to navigate through dark unlit by-lanes to access the public toilets at night, take a toll on the community. This is manifested in frequent illness, domestic violence, and harsh physical punishments inflicted on children.
- For children; academic pressure, not being able

to go out and play, being bullied at school, experiencing public sexual harassment, fights between parents, and overcrowding at home are the main stressors. Though suicides are not very common, there have been reported cases of suicides due to failing in examinations, failed love affairs, addictions, domestic violence, and failure to cope with demanding living conditions.

- There is a complete absence of formal support systems such as counselling centres for adolescents as well as adults. As a result, children rely mainly on their peers or trusted adults, such as parents and teachers, to share

their feelings and problems, while adults generally keep their problems to themselves, leading to health and other psychosocial problems.

- To deal with stress children seek social support from friends, distract themselves with household chores or studies, and manage their hostile feelings by engaging in physical activity such as jogging or running. Adults and children alike also resort to coping mechanisms, such as distancing or avoidance, to deal with stress. Although such emotion focused coping mechanisms, may have alleviating outcomes over a short period of time, they can be detrimental when

used over an extended period.

- Alcohol, tobacco, and drug use is pervasive, with children as young as five being inducted into substance use and abuse. Adults and children attributed the use and abuse of alcohol, tobacco, and drugs to easy access to such substances within the community. At times parents send children to fetch alcohol and tobacco for themselves, and they also experience bad peer group influences, bullying by drug addicts and drunken men, and a curiosity to experiment with substances. Lack of government de-addiction centres exacerbates the problem.

### Impact of health issues on children

- The lack of access to stable and adequate shelter and basic services, and an unsafe living environment adversely impacts the health and well-being of families, especially children, thereby reducing their chances of participating in the social, economic, educational, and community aspects of their lives.

- In the absence of any support systems such as counselling centres to help cope with stress, and exposure to negative peer influences, bullying, etc. children and adults alike take to negative coping mechanisms such as substance abuse or in some cases, suicide.

- Substance abuse affects the well-being of children and youth by adversely impacting their health and creating an environment of stress in their homes. Further, it manifests itself in the later stages of life in the form of a dysfunctional lifestyle marked by an array of problems such as academic difficulties, health-related problems (including mental health), poor peer relationships, and involvement in criminal/anti-social activities, which could lead to involvement with the juvenile justice system.

- By accessing treatment through untrained private doctors families put themselves and their children at higher risk of a wrong diagnosis as well as poor treatment, which in turn impacts children in the long run possibly resulting in weakened immunity leading to irregular attendance and poor performance at school. (IOM & NRC, 2011)

## 5.4 Education

In the last decade, though the population of children in urban areas has increased by 12.8%, neither school enrolments nor the number of educational facilities and their infrastructural and human resource capacities have shown a proportional growth (Census of India, 2011). Thus, children living in urban slums mostly access overcrowded public schools or low cost private schools, which are deficient in terms of infrastructure and quality.

The Right to Education Act 2009 mandates that the government provide equitable education of satisfactory quality to children. However, it only focuses its attention on children between the ages of 6 to 14 years. The National Plan of Action for Children (2016) also focuses on providing universal and equitable access to quality early childhood care and education, and ensuring that every child in the age group of 6 to 14 years enjoys the fundamental right to education enshrined in the Indian Constitution.

Educational achievement, especially for persons living in urban poor settlements, is fundamentally linked to economic opportunities. However, education up to the age of 14 years does not ensure gainful employment. As there are no government secondary schools, school dropouts are imminent as families earning subsistence incomes are unable to afford expensive private education. Thus, overall, the lack of quality education and the deficiencies in adequate provisions and educational infrastructure leave children living in urban poverty with little motivation to stay at school.



A private school near Lallubhai Compound  
Photo Credit - ACE Trust

## Key findings: Education

### a. Availability and access

- As per the ICDS norms of 1 ICDS centre for a population of 1,000/250 households, there is a shortage of anganwadis in both Rafi Nagar and Shivaji Nagar. Irrespective of this, parents and children alike reported satisfaction with the services offered by the anganwadis in the community.
- There is a shortage of government primary and secondary schools across the three settlements as per the DP regulation of 1990, which states that for the suburban division, there must be one primary school per 6,000 persons and one secondary school per 9,000 persons. There are no government secondary schools in any of the three communities.

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Government Primary level schools	✓	✓	✓
Government Secondary level schools	✗	✗	✗
Private schools	✓	✓	✓
Madrasa	✓	✗	✓
Anganwadi	✓	✓	✓

- Though there are several private schools in both Lallubhai Compound and Shivaji Nagar, availability does not ensure access. Children across the three communities reported many hazards along the routes to school, which makes access to school unsafe for most children.



## b. Enrolment retention and provisions

● Mandating free and compulsory education under the RTE Act (2009) as well as the efforts made by the ICDS staff and local NGOs have ensured high rates of school enrolment in the community. However, school enrolment is highest at the primary level but gradually falls from the upper primary level onward with not much of a gender difference.

● There are no provisions for special needs education in any of the public primary schools across the three settlements.

● Parents did not report satisfaction with the quality of education provided at government schools leaving them with little choice but to pay for expensive private schools. Parents in Rafi Nagar shared that financial constraints force them to compromise on quality and send their children to government schools as they offer free education. However, even in government schools, parents have to purchase school supplies and project materials, which is sometimes a burden on families earning subsistence incomes.

● Though mandated by law, government (yes) primary schools across the three settlements do not have basic

facilities for children such as safe drinking water and clean, gender segregated toilets.

● Parents from Rafi Nagar shared that gaining admission to government schools is not easy and they have to rely on local NGOs to help enrol their children in school. Parents in Shivaji Nagar shared that they have to pay donations for private school admissions, which is a burden on the family.

## c. School dropout

● Though adult perceptions suggest that children do not commonly drop out of school, attendance at schools fluctuates as children are required to spend time supporting their families either in taking care of household chores, such as fetching water, or playing the role of caregiver for younger siblings and elders in the family, in the absence of their parents.

● Adults in Shivaji Nagar and Lallubhai Compound shared that boys are more likely to drop out of school. In comparison, in the partly authorized settlement of Rafi Nagar, adults perceived that both boys and girls are as likely to drop out of school.

● Primary causes of children being out of school were:

1. Family's inability to pay the school fees.

2. Family's expectation that children work and supplement the family income.

3. Negative peer influences.

4. Beatings by teachers and persons in authority at school.

5. Public sexual harassment on the way to school.

6. 'Lack of interest in studies' which is also indicative of the quality of education provided at school and the neglect children face from teachers when they do not perform well academically.

● Children tend to drop out between standard five to seven, around age 14, which also marks the end of free and compulsory education under the RTE (2009).

● The lack of government secondary schools in the two wards has led to children discontinuing their education unless the parents can pay for expensive private schools.

## d. Adult education and provisions for higher education

● Given that the adults have only basic levels of literacy, they are unable to either supervise or assist in their

child's learning. Children are thus forced to seek paid private coaching classes to get assistance for their schoolwork.

There are no government run colleges in the two wards making college education expensive and inaccessible. In addition, there is also a lack of skills-based programmes run either by the government or private sector organizations. As a result, across the three settlements, a substantial percentage of youth are absent both in educational institutions as well as in paid work. With little to occupy themselves, in terms of recreational activities or skills training among other things, youths are perceived to be majorly involved in substance abuse and anti-social activities, such as public sexual harassment and street fights, which makes the social environment unsafe.

### Impact of inadequate education on children

- The lack of sufficient government (free) primary schools, results in overcrowding at these institutions, leading to skewed teacher-student ratios, which in turn adversely impacts quality learning and readiness for higher education.
- The lack of a learning environment, lack of quality teaching and affordable education, harsh disciplinary measures

adopted by teachers, lack of educational support by parents, and unsafe access to schools eventually creates disinterest in learning and attending school, inevitably leading to dropping out of school.

- The lack of government secondary schools and colleges may lead to low educational attainment or a total lack of education for children from families who cannot afford costly private secondary and higher education.

- In cases where the formal education is not completed, skills-based programmes help children acquire marketable skills, which could result in gainful employment. However, the lack of such programmes, offered either by the government or the private sector in and around the three communities, has resulted in lack of marketable skills and low incomes with dismal prospects for increasing income.

### 5.5 Protection

Each and every child has the right to protection. This entails that child protection mechanisms be extended not only to those children who have faced and/or witnessed abuse, violence, and exploitation in any form and need to be brought back into the social security and safety net, but also those

children who have not experienced such situations, so that they continue to remain protected. Therefore, child protection mechanisms require that 'protection' be understood in the context of different groups of children, as their need for protection may vary depending upon their socio-economic and geographical realities.

Efforts have been made over the past decade to put in place laws and legislations such as the Juvenile Justice (Care and Protection of Children) Act (JJ Act), 2000 and 2015, the Prohibition of Child Marriage Act, 2006, Protection of Children from Sexual Offences (POCSO) Act, 2012, Child Labour (Prohibition and Regulation) Act, 1986 and its amendment in 2016, and Commissions for Protection of the Rights of the Child Act, 2005.

However, child protection as an issue in India was acknowledged for the first time as late as the XI Five Year Plan (in the year 2009), which led to the introduction of the Integrated Child Protection Scheme (ICPS). Adopting a convergent approach, ICPS endorses the protection of children from violence, abuse, and exploitation by converging multiple government child protection schemes and integrating the provision of services such as education,

health, labour, and the justice system. Further, the National Plan of Action for Children (NPAC) 2016, which has adopted the definition of child protection from the ICPS, endorses creating a “caring, protective and safe environment for all children, to reduce their vulnerability in all situations and to keep them safe at all places”

However, child protection is not the sole responsibility of the government but a shared responsibility – with the family being the first in line, followed by the community/society and then, when all else fails, the State comes into the picture. The community specifically plays an important role as it is the child’s closest environment after the home. Therefore, the quality of the community, especially its social cohesiveness, influences child development and parenting. However, for children living in poor urban slum settlements<sup>9</sup> with inadequate and often hazardous living and working conditions— a lack of and/or total absence of decent secure housing and basic services, lack of access to education, the danger of sexual exploitation and abuse, physical and mental violence, exposure to customary and traditional practices that place them at risk, economic exploitation,

<sup>9</sup> 42% of Greater Mumbai’s population lives in slums (Census of India 2011).

financial pressure on families to earn a subsistence and more—the community and family inadvertently create the grounds for the most pervasive violations of children’s rights. Nonetheless the current legislation, is a good starting point, it focuses primarily on response rather than prevention. Thus, it is important to create need specific interventions and services to cater to the unique protection requirements of children, focusing not only on response but also on promoting resilience.

## Key findings: Protection

### a. Violence

#### At home

- Violence at home is largely invisible as children and adults alike were reticent about discussing what happens inside the home. Children reported experiences of physical violence, verbal abuse, sexual abuse, discrimination, and neglect, however, in the context of families other than their own.
- Children reported feeling unsafe as they are exposed to domestic violence at home, both as victims and witnesses to alcohol induced fights between parents and high stress levels due to overcrowding, financial constraints, and substandard living conditions

all of which lead to parents venting out by engaging in physical and verbal abuse.

- Punishments meted out by parents take the form of beatings, slapping, caning, restricting the child’s mobility, taunting, humiliating the child, withdrawal of television time and pocket money, and giving the child tasks or household chores.
- Children perceived being humiliated and taunted as the worst form of punishment. However, parents and children alike do not perceive physical punishment by parents as violence but as a disciplinary measure to ‘teach appropriate conduct’, indicating social acceptance. Interestingly, parents perceived corporal punishment by others as violence.

#### At school

- Children reported feeling unsafe at school due to a fear of the teachers as they mete out punishments in the form of beating, slapping, caning, expelling from class, cutting marks scored on a test, depriving children of opportunities due to biases, making students stand in uncomfortable positions, taunting, and labeling. Children also reported that teachers often neglect those who do not perform well academically.

- Punishments are administered for not completing homework, poor academic performance, being late for school, and not wearing the proper uniform.
- Children are exposed to bullying from peers and older students at school. At times this can take the form of physical and territorial violence and emotional abuse such as name-calling and labelling.
- Though children do not like receiving punishments, they do not perceive physical punishments by teachers as violence.
- Adolescents in Lallubhai Compound declared the school to be an unsafe space due to reported instances of teachers and principals being attacked by local goons, within the school premises.
- Though there are no formal processes or mechanisms to address violence at school and no formal training programmes to address, reduce or mitigate the effects of violence at school, children and parents alike shared that they can approach teachers and the school management to report issues.

### In the neighbourhood

The community environment is noisy and chaotic with frequent violent fights between adults, causing the children to feel unsafe. Conflicts are centred around a lack of cohesiveness and basic trust (in the case of Lallubhai Compound), limited basic resources, children’s play, instances of public sexual harassment, molestation, and rape, labelling/name-calling targeting the differently abled, and religious (communal) issues, leading to a lack of a general sense of safety within the community.

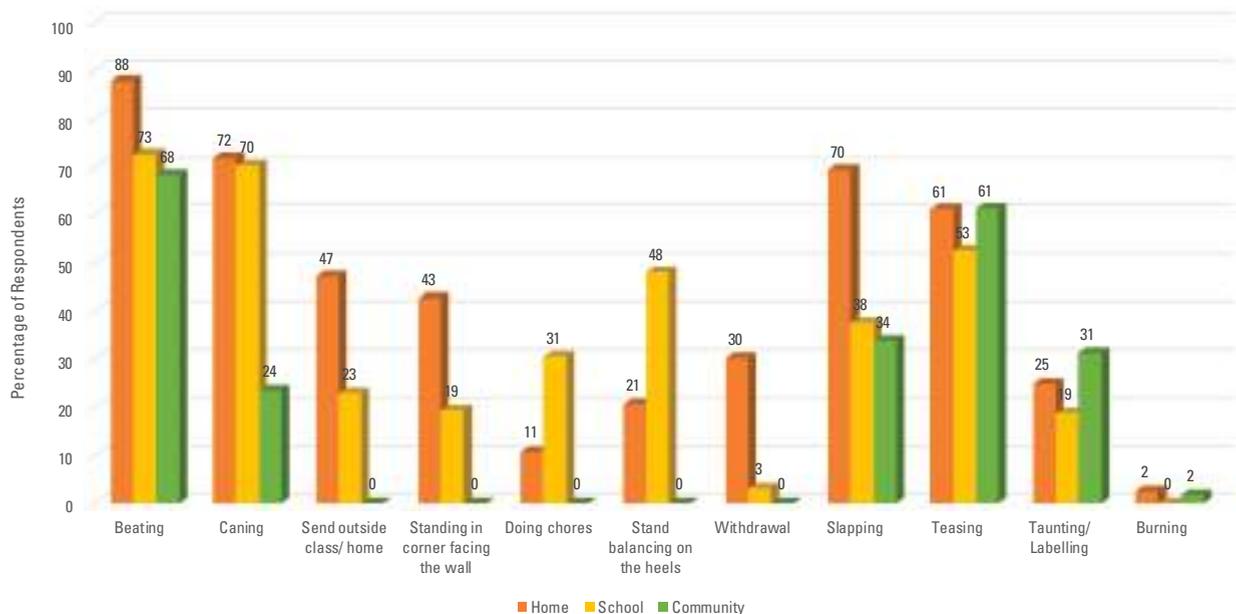


Figure 5-15. Perception of Disciplinary Actions taken across the three communities

## b. Child labour

• The number of cases of child labour reported in the household surveys, across the three settlements, is as low as 2%. While the perceived prevalence of child labour is not very high in the authorized settlements of Lallubhai Compound and Shivaji Nagar, child labour is perceived to be more prevalent in the partly authorized settlement of Rafi Nagar, with children engaging in rag picking and working in the many small-scale manufacturing units within the community. Most of these children are migrants and do not have families living in the community. As these are mainly older children, between 14 to 18 years of age, they work legitimately in hazardous jobs without being labelled child labourers.

• Due to a lack of childminding support systems, such as day care centres, crèches, and play schools in the community, many working women have to take their children with them to ensure their safety. This may result in the child being groomed and going on to engage in unpaid labour in the form of helping out, or in other cases paid labour. When both parents are engaged in gainful employment, or in single parent families, children automatically assume the role of primary care giver for younger siblings and/or grandparents, often carrying out chores such as cooking, cleaning, washing, etc., even when they attend school.

## c. Protection mechanisms

• Adults and children across the communities are not aware of the various government protection systems and mechanisms other than the police, possibly a result of poor outreach and lack of information.

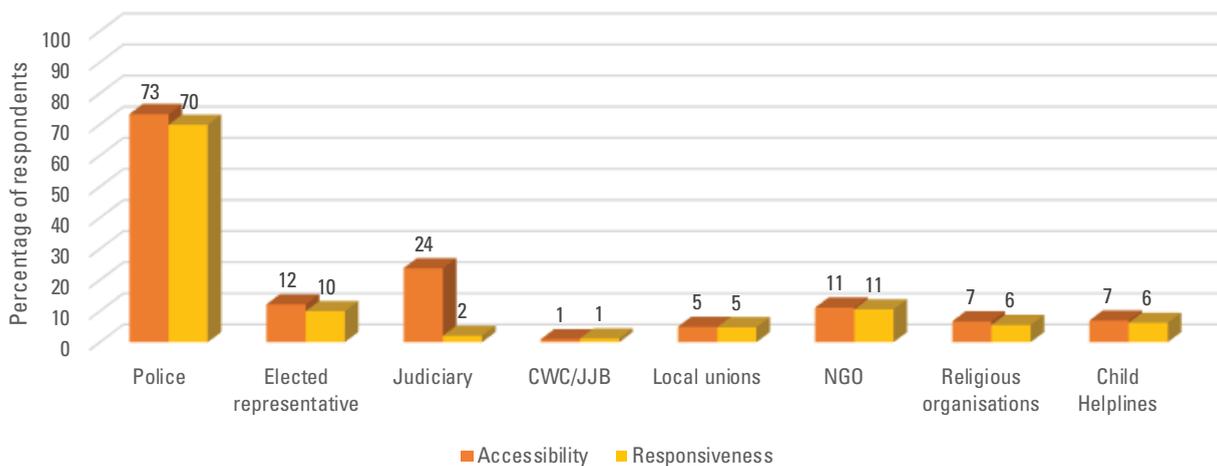


Figure 5-16. Perception of protection systems in the communities

• Though the police are the most accessed and responsive system, the residents do not perceive them as a protection system, indicating a lack of trust and satisfaction with service delivery. Efforts made by local NGOs have helped bridge the gap between the police and the community.

• The police, as well as local mediators, are perceived to be the most common and approachable conflict resolution mechanism. However, in Shivaji Nagar, where people share a sense of community, there

is complete reliance on local mediators as compared to Lallubhai Compound, which is a heterogeneous community with a history rooted in recent forced displacement, where the residents mainly rely on the police in any crisis.

- There is no provision for emergency shelter options for women and children run either by the government or NGOs and CBOs in and around the community. The community relies on informal mechanisms such as seeking help from family and friends.

- There are no clear formal or informal protection mechanisms at the community level for the protection of children. However, children shared that they can approach the local NGOs and Childline to report cases and seek help.

### Impact on children

- Children living in homes where there is domestic violence grow up in an environment marked by unpredictability, tension, anxiety, and dominated by fear. This can lead to significant psychological and emotional trauma forcing children to worry about the future, trying to predict when such episodes might occur next, in order to try to protect themselves and their siblings. In such cases, getting through

each day becomes the main objective for children leaving them with little to no time for fun, relaxation, academics, or planning for their future (Cleaver, Unell & Aldgate, 2011).

- Children exposed to domestic violence are not only at risk of sustaining physical injury but also react to violence by engaging in self-blame and feeling a sense of helplessness, shame, anger, and numbness.

- Though the extent of the impact varies for every child, poor concentration, low academic achievement, dropping out of school, staying away or running away from home, aggression, hyperactivity, disobedience, violent outbursts, withdrawal, low self-esteem, pessimism about the future, depression, poorly developed communication skills, conflict with parents, participating in dangerous risk-taking behaviour to impress peers, alcohol and substance abuse, etc. are some of the possible impacts of domestic violence on children and adolescents which in turn makes them vulnerable to further abuse and violence (Impact of domestic violence, 2017).

- Apart from the emotional, physical, social and behavioural damage that abuse creates for children, research shows

that domestic violence can also become a learned behaviour. This means that children may grow up to think it is okay to use violence to get what they want and as adults that it is okay for there to be violence in their relationships (Edleson, 1999; Kovacs & Tomison, 2003).

- Children experiencing violence, sexual abuse, and engaging in child labour stand the chance of ending up in institutional care for their protection, but often face abuse and violence in institutions. Children growing up in institutions have difficulties learning, forming and maintaining healthy relationships when adults, and are at high risk of becoming homeless, and finding themselves in situation of conflict with the law.

- Corporal punishment has a negative effect on intelligence and cognitive functioning. Moreover, children experiencing corporal punishment at school on a regular basis may drop out of school, thus depriving them of their right to education (Perkins, Finegood & Swain, 2013)

### 5.6 Play and recreation

Article 31 (Leisure, play, and culture) of the Convention on the Rights of the Child recognizes that all children have the right to rest and play, and to



Informal play in Lallubhai Compound  
Photo Credit - ACE Trust

engage freely in a wide range of age appropriate cultural, artistic and other recreational activities. To be able to access this right, Article 32 further states that not only do children have the right to play but they also have the right to the provision of the opportunity to play which requires the State to encourage the provision of appropriate and equal opportunities for the same. Globally children's playtime has steadily decreased due to educational pressure, reduced time for recess in schools, and pressure of afterschool academic programs. Play spaces are also shrinking, particularly in urban areas. Parental concerns for the safety of children while playing outdoors lead parents to withhold permission for play. For children living in urban poverty, access to play may be further compromised by barriers such as high risks of environmental hazards, lack of safety in the neighbourhood, less time to play on account of work, socio-economic stressors, fewer resources for play, and more. Since play is a crucial component of development during childhood and indeed, the most important aspect of the pleasure of childhood, children living in urban poverty suffer an additional deprivation from poor access to play that may adversely impact their physical and psycho-social health, both in the short and long term.

### **Policies and plans promising play**

#### **National Policy for Children 2013, Clause xii**

- Review, develop and sustain age-specific initiatives, services and programmes for safe spaces for play, sports, recreation, leisure, cultural and scientific activities for children in neighbourhoods, schools and other institutions.

### National Early Childhood Care and Education (ECCE) Policy 2013

- The Government shall ensure the provision of safe, child-friendly and developmentally appropriate play and learning materials and appropriate play spaces by appropriate instruments and instructions in ECCE settings.

### National Plan of Action for Children 2016

- Sub-objective 2.9: Develop and sustain age-specific initiatives, services and programmes for safe spaces for play, sports, recreation, leisure, cultural and scientific activities for children in neighbourhoods, schools and other institutions.

### Emerging issues related to play

- No organized play and recreational spaces/facilities for children and children with disabilities within the community.

Table 5–23. Types of Play Spaces			
	Lallubhai Compound	Rafi Nagar	Shivaji Nagar
Type of Play Spaces	Formal – Two playgrounds	Formal – None	Formal – Gyaandhara and Bhaudevi Ground
	Informal – streets, area around buildings and back alleys	Informal – Streets, in front of house, dumping ground, a plot earmarked for a cemetery	Informal – Streets, in front of temple and cave

- Children seek play opportunities by accessing open spaces, common spaces, streets, and the area around the buildings, in the case of Lallubhai Compound. For the partly authorized Rafi Nagar, there are no open spaces other than the vast expanse of the city dumping ground and a plot of land earmarked for a cemetery, frequented by drug addicts, where children seek play opportunities.
- However, conflict over common space between children belonging to different age groups and gender, and between children and adults, often deprives younger children particularly girls, of playing outdoors.
- The traditional play space of children living in slums, the street in front of the house, is lost in case of flatted developments such as Lallubhai Compound. This also erodes the most common socializing space for adolescent girls whose play opportunities are also curtailed due to lack of free independent mobility within the local area with their friends.
- While children in Shivaji Nagar have access to formal open spaces such as the Gyaandhara and Bhaudevi grounds, access is limited due to the territorial nature of these spaces; this is one reason why many children identify these spaces as unsafe.

- The common open spaces in the community have turned into garbage dumping grounds and hot spots for substance abuse and public sexual harassment, due to a lack of daily maintenance. In the absence of other spaces, children are forced to play in these unsafe environments.

- Children lack access to nature and natural play environments within the community. Hence, they actively seek out natural spaces, often taking great risks such as crossing major roads with heavy traffic.

- Lack of awareness of the intrinsic importance of play and recreation, as well as limited resources, leads to a lack of tolerance for play among adults, which in turn affects children's access to common open spaces for play.

- Children with disabilities are not seen playing outdoors in any of the three communities.

### **Impact of lack of play and recreation on children**

- Lack of safe open spaces and streets in the community restricts play opportunities for children; especially girl children, younger children, and children with disability. Play and recreation are also a form of participation in everyday life, and are of intrinsic value to the child,

purely in terms of the enjoyment and pleasure they afford (UN Committee on the Rights of the Child 2013).

- Play is critical to a child's development. It teaches core values, improves health, reduces the likelihood of disease, improves the ability to learn and retain information, ensuring that children lead healthy and fulfilling lives. Lack of and/or inaccessible play opportunities leads to serious socialization deficits and compromised physical health (Santer, Griffiths & Goodall, 2007)

- In addition, play enhances psychosocial well-being by means of teaching coping mechanisms, fostering social integration by bridging cultural divides, reducing depression, improving concentration, building self-esteem and connections with others.

- Playing helps children develop an intimate relationship with their immediate environment and play offers the possibility of injecting "surprise into the mundane practicalities of everyday experiences" (Lester, 2010). Play helps learn life skills, which empowers children and provides them with a constructive activity thus, helping to reduce juvenile crime, anti-social behaviour, substance abuse, school dropout rates, and child labour.

## **5.7 Participation and empowerment**

The UNCRC endorses respect for the consideration of the views of children as one of its fundamental principles. It talks about children's right to freely voice their views in all matters that affect them. It further emphasizes that the views of children be given due weight in accordance with their age and maturity (Article 12). Through Article 13, the Convention talks about children's right to freedom of expression. Children are entitled to freedom of thought, conscience and religion (Article 14), to privacy and protection from unlawful attack or interference (Article 16) and to freedom of association and peaceful assembly (Article 15). India, being a signatory to the Convention, established the Commission for Protection of Child Rights Act 2005 and followed it by setting up the National Commission for the Protection of Child Rights (NCPCR) in 2007. Child participation is emphasised as 'the work of the Commission being informed by the views of children in order to reflect their priorities and perspectives' and promoting, respecting, and considering the views of children in its work and in that of all government departments and organizations dealing with children. However, despite such national commitments, over the years, children's participation in decisions that impact them has been far from meaningful.



Focus group discussion with women in Shivaji Nagar  
Photo Credit - CCDT

More recently, the NPAC 2016, which is a road map linking policy objectives to actionable programmes, so as to achieve the Sustainable Development Goals, talks about ‘participation’ of children as one of its key priority areas with the target being to ‘enable children to be actively involved in their own development and in all matters concerning and affecting them’. The plan lays down clear strategies, focusing on efforts to create opportunities and effective platforms for children to voice their informed views in all matters concerning them. Given the trend of rapid urbanization and the increasing population<sup>10</sup> of children in cities, it is imperative that children be encouraged by the government to participate actively in matters that affect them, and play a vital role in improving their lives and communities.

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<sup>10</sup> The UN World Urbanization Prospects for 2014 ranks Mumbai as the 5th largest agglomeration with 21 million inhabitants. As per the Census of India 2011, 29% of the city's population is comprised of children.

## Key findings: Participation and Empowerment

- Though the Government of Maharashtra's R&R policy encouraged community participation in planning and provided for assistance to all affected people, notwithstanding the legality of land tenure; in the case of Lallubhai Compound no vulnerability assessment was carried out. The participation of the project-affected persons in the planning and implementation of the resettlement colony was limited or completely absent. Also, children's participation was completely lacking in the resettlement process.

*“There are only goons and dons who take decisions here...each one here is his own minister and corporator...No politician or MLA has ever come here to help people settle down... There is an MLA who comes here for votes... we go to see the MLA to tell him about our problems but he doesn't ask us what we want. He enquires about us only during election time.”*

*– Men from Rafi Nagar Community*

- While the MMRDA made efforts to mobilize and organize people in Lallubhai Compound to form cooperative housing societies, there is a considerable difference in the management of registered and non-registered societies, with the non-registered societies not respecting the need to hold regular meetings and carry out their duties in a timely manner. Presently, 57 out of 70 buildings have registered societies 12 years after the completion of the construction of Lallubhai Compound.
- Other than these societies, there is a complete lack of formal or informal platforms across the three settlements for the residents to organize themselves and discuss local issues that affect them. Local politicians, the Corporator, and political parties are the decision makers for the local area, and the residents have no say in the political outcomes that impact them.
- Children have no say either in local decision making other than in efforts made by NGOs to engage them in participatory processes.
- Both children and adults report that the networks and groups they are affiliated to, primarily focus on cultural activities around religious and other festivals.
- Children and women lack participation opportunities at home. Gender stereotypes shape their limited participation opportunities in the day-to-day and important decisions taken at home.

## Importance of participation for children

- Children's participation in management and decision making on issues that directly affect them enhances their self-protection and enables them to protect themselves as well as their peers.
- Meaningful participation of children in urban governance would help in better understanding the issues children living in urban poverty face and thus help create inclusive, safe, and child friendly cities.

*“Since he (husband) is the only earning member, he takes all decisions. He treats me like a lowly being only meant for taking care of children and cooking... my opinion is not taken at all. I have to account for every penny spent...we [she and her children] are told that because we stay at home, we do not know how the world works, so we cannot interfere in his decisions...I feel that women are cursed by birth...even insects are better off than us.”*

*– A woman from Shivaji Nagar community.*



Child Resource Centre.  
Photo Credit - Paula Bronstein,  
Photo Journalist

# 6.

# EXPERIENCE OF THE PILOT AND CHILD RESOURCE CENTRES

UNICEF, in partnership with the Committed Communities Development Trust (CCDT), Pratham Mumbai Education Initiative (through its program Pratham Council for Vulnerable Children – PCVC), Youth for Unity and Voluntary Action (YUVA), initiated pilot projects in each of the three slum communities by implementing measures to improve unsafe conditions, as suggested by the mapping, to create safe communities for children. The focus was on addressing issues of violence across sectors (such as education, housing, health, protection, etc.) and creating safe communities for children and adolescents by reducing risks, building resilience, and enhancing the protective environment to safeguard children and adolescents from professed threats and further vulnerability.

## **6.1 Objectives and key implementation strategies of the Promoting Safe Communities programme in Mumbai**

### **Objective 1:**

Specific vulnerabilities and child protection challenges, needs and resources in the two Wards of Mumbai Suburban District are identified through a participatory approach involving children, the community, child protection structures, and other stakeholders.

### **6.1.1 Participatory mapping of protection issues**

The process of participatory mapping of issues concerning children at the household and community level was carried out using the lens of protection. The exercise was implemented with a view to gathering evidence-based data with the active involvement of children (of all ages, gender, and ability), adults from the 3 communities, available children protection institutions and structures, and systems, so as to build a solid foundation for developing a community based model to address the safety and protection concerns of children living in urban poor settlements, as well as to prevent further vulnerability.

With this objective, Action for Children's Environments (ACE) Trust conducted a series of workshops, training programmes, and processes with the local partners, children and adult research volunteers from the three communities. The first phase mapping tools involved observation checklists and interview schedules, which were developed, finalized, and pilot tested across the three communities. ACE conducted group and bilateral training workshops over a period of 6 months (October 2014 to March 2015) with 45 child researchers, 15 adult volunteers, and 9 staff members from the local partner organizations.

The pilot testing helped initiate a dialogue on child protection concerns with children, parents, anganwadi workers, and women's groups in the 3 communities. It also brought up the need for awareness generation and sensitization on child protection risks, vulnerabilities and violations as the community, especially the adults, did not see any of these issues, other than the more obvious ones as protection concerns. 2014 being the 25<sup>th</sup> year of the United Nations Convention on the Rights of the Child (UNCRC), CRC week was celebrated across the 3 communities from the 14 to the 20 November.

Simultaneously, Pratham and YUVA started engaging with the local police in M-East by conducting child rights sessions of with police personnel, as well as facilitating formal interactions between the local police and children residing in Rafi Nagar and Lallubhai Compound.

The week-long celebrations provided a perfect platform for the local partners to facilitate interactions between children and adults from the community and the various child protection systems and government functionaries such as the police, the Governor of Maharashtra, the Municipal Commissioner, the city Mayor, and officials from the Department of Women and Child Development. These interactions proved mutually beneficial as they helped bridge the gap between the community and the system, as well as contributing to the knowledge of this initiative around child protection taking place in the city. At the same time, interactions and deliberations were also initiated with the District Child Protection Units (DCPUs) in order to chart out their partnership in the child protection pilot project.

#### Training and selection of child researchers:

YUVA and CCDT also focused on activating children's groups within their respective intervention areas (Lallubhai Compound and Shivaji Nagar). Through YUVA's BASS<sup>11</sup> program, during the first six months, 45 children (25 girls + 20 boys) were organized through 3 children's groups in Lallubhai Compound. One youth group of about 10-12 youth (primarily those who have grown out of BASS) were also activated to support BASS. Similarly, in Shivaji Nagar, CCDT facilitated the activation of 12 Maitree<sup>12</sup> groups (65 boys and 57 girls). Training sessions on child rights and discussions on child protection were simultaneously initiated with these children. The first group of Child Researchers for the mapping in these two communities were identified from these groups.

#### Objective 2:

The capacities of select stakeholders (residents and service providers) in the three urban poor settlements are strengthened to respond to abuse, exploitation and violence against children.

<sup>11</sup> *Bal Adhikar Sangharsh Sangathan (BASS) is an organization of, for, and by the children living in slums, pavement settlements, and on streets. This organization is a vehicle through which children articulate their issues and concerns. In the past, through this organization, children raised their concerns regarding health, education, child labour, and child abuse through various forums at different levels.*

<sup>12</sup> *A programme evolved in 2010 as a model of participation of children and adolescents from 12 to 18 years, with a focus on life skills and leadership development.*

### 6.1.2 Organizing, sensitizing, and capacity building to form Community level Child Protection Committees (CCPC)

The Maharashtra State Child Protection Society (MSCPS) was formed in 2011 to govern the implementation of the Integrated Child Protection Scheme. Subsequently, the District Child Protection Units (DCPUs) were set up with basic staff in all 36 districts of the state, including 2 in Mumbai – DCPU Mumbai City and DCPU Mumbai Suburban. To decentralize the DCPU in the city context, the Government of Maharashtra has passed a Resolution dated 10.06.2014, to set up Child Protection Committees (CPCs) at the electoral ward level. However, it was felt that a single CPC at the electoral ward level, which has an average population size of 40,000-50,000 was not sufficient and that this structure needs to be decentralized further. Thus, through the Safe Communities program, the implementation partners are demonstrating the decentralization of the CPC to the lowest common denominator; the community.

To achieve this goal, efforts are being made through the existing *chawl* committee<sup>13</sup> structure within each community to form Community level Child Protection Committees (CCPCs) comprising 3 to 4 contiguous *chawl* committees (covering 30 to 40 households). Structured sensitization and capacity building programmes on child protection, targeting children, parents, youth, local CBOs, anganwadi workers, local police, school teachers, small scale factory owners (in the case of Rafi Nagar), and municipal representatives at the ward level, are being carried out by the implementation partners, sometimes involving a specialized agency.

With sustained efforts, in 2016, two CCPCs each were formed in Shivaji Nagar, Rafi Nagar, and

Lallubhai Compound.<sup>14</sup> Efforts have also been made towards the formation of Child Protection Committees in the electoral wards of R/North (08) and M/East (13). Through the Safe Communities Programme, the partners will focus on the CCPCs and explore linkages at the ward level, to effectively facilitate the responses required from departments for services (Municipal Ward Office), and child protection systems and structures (CWCs/JJBs/DCPUs/SCPCR (State Commission for Protection of Child Rights) for protection needs.

The CPCs will serve as vigilance committees as well as respond to cases of child protection vulnerability (for example, out of school children) and violation. They will also partner with the DCPU in advocacy efforts with various stakeholders, such as local schools, the local police station; and to bring about change to enhance the child friendliness of the communities.

#### Objective 3:

Specific responses to the protection of children and youth are innovated and links with systems and access to services (including education, protection and health) for children are strengthened.

Participation of children being paramount to the CCPCs effectiveness, children's groups were formed at the community level. CCDT and YUVA are already developing a ground base of child participation through Maitree in Shivaji Nagar and BASS in Lallubhai Compound respectively. In Rafi Nagar, PMEI mobilizes the community through school outreach. The organizational work targeting children will be from an "every child under the safety net" perspective. The understanding is that what informs replication is the process and principles that emerge.

<sup>13</sup> *Slum settlements in Mumbai are informally organized into chawl committees covering about 10+ households, as a mechanism to manage basic amenities like community water connection, toilets, and electricity metering (latter found particularly in the case of non-regularized settlements).*

<sup>14</sup> *In Lallubhai Compound, the CCPCs are being formed at the level of the Housing Society (individual building of 100 to 120 flats).*

### 6.1.3 Transforming unsafe physical spaces

In the first phase of data collection, children in the age group 7 to 18 years were engaged in mapping safe and unsafe spaces in their community using aerial maps and transect walks. Both children and adults identified several spaces in and around the three project sites as 'unsafe'. After analysing the reasons why particular spaces were perceived as unsafe, it was decided to work on transforming these 'unsafe' spaces into 'safe' spaces. Towards that end the children and the CBOs started advocating for safe spaces in their community with the local self-government and the police.

During this period, in Shivaji Nagar, an 'unsafe' open ground, which was being used by the community as a garbage dumping site, and was frequented by young people for substance use and abuse and other risky behaviour, was transformed into a playground through advocacy with the municipal systems, with the active participation of the children living in Shivaji Nagar. Also, most children and adults in Shivaji Nagar had identified the public toilets as unsafe due to lack of proper lighting and broken doors, which made them feel unsafe while accessing and using these toilets. Sustained demand by adolescent girls for working lights and lockable doors in the toilets achieved positive results and helped make the toilet blocks safe for women and children.

Lallubhai Compound and the neighbouring slum settlements are bordered by the Govandi-Mankhurd railway line to the south. There are no pedestrian over-bridges to cross this unprotected railway line leaving children and adults alike to cross the line as they go about their everyday activities in the area. Children, in particular, cross the railway line as a short cut to their schools, and there have been reported cases of accidental injury and death. During this period, facilitated by YUVA, the children in Lallubhai Compound made recommendations to the Mumbai Development Plan

(2014 – 2034) and met with the MLA to present a petition to build a pedestrian bridge over the railway line.

### Child resource centres

In each of the 3 communities, Child Resource Centres were envisaged as vibrant, outreach and drop-in hubs – a space children will want to access, a space where young people would want to gather, and a safe space that promotes a safe environment within the community. In 2015-16, Child Resource Centres (CRCs) were set up in all three communities to address (through preventive and responsive strategies) vulnerabilities to sexual abuse, substance abuse, trafficking and delinquent behaviour. Located within the heart of the community, these centres act as one stop resource hub that children access for the following programmes and services:

- Information dissemination on schemes, issues faced by young people, child sexual abuse, substance abuse, etc.
- An alternative recreation space that positively channelizes young energies and develops them as individuals.
- A learning/education space for out-of-school children and those attending school irregularly – serving as a means to transform them into regular school attendees.
- A service space that can provide psycho-social counselling, substance abuse support, legal, health (including HIV disclosure), referral services.
- A space for relevant vocational, and life skills training (safety, security, such as self-defence for girls; and development, such as, financial and digital literacy) for adolescent girls and boys and young men and women.
- A space that monitors child protection violations in the community, and possesses mechanisms for constant communication of data to the system – police, legal system, etc.

Table 6—1 presents the services and programmes provided to children through the Child Resource Centres.

### 6.1.4 Partnerships

In both R-North and M-East wards, several civil society organizations work on different aspects of child rights issues and other issues that directly or indirectly impact children’s well-being. In addition, at the ward and district levels, there are service providers (education, health, police) and child protection systems such as the DCPUs, Child Welfare Committees and Juvenile Justice Boards. In the near future, data and information from the

participatory mapping process will be shared in order to develop joint action plans to strengthen services for children as well as advocacy. This will ensure that there is synergy and convergence to address the scale of the problem, and coordination between multi-sectoral disciplines that have a bearing on child protection. The partnership forums will offer members a collective space for learning and action and also escalate the accountability of state and non-state actors. Partnership deliberations will take place at the community and ward level (CBOs, ICDS, local police, school management committees, ward office), the district level (DCPUs, CWCs, JJB), as well as the city level.



**Table 6–1. Services and Programmes Provided to Children through the Child Resource Centres**

Component for common activities	Activities	Beneficiaries
Skill Development	Digital literacy	6 to 18 years
	Reading	
	Life skills	
	Music (learning instruments as a hobby)	
	Informative sessions on child rights, child protection, online safety, personal safety.	
	Engagement of children on issues of child rights and child protection through creative expression using forms such as street plays, street art, and poster exhibitions.	
Psycho-social support services (with a view to reducing risks)	Counselling	All children
	Dance movement therapy	
Awareness and information dissemination  (Sessions and workshops with a focus on creating common spaces for residents and service providers to engage and interact with a view to strengthening services for children and responding to abuse, exploitation and violence against children.)	The sessions included topics such as child rights, child protection, child development, parenting, child sexual abuse, the Juvenile Justice Act, and the POCSO Act. The workshops cover topics like communication skills, personal safety (online and offline), stress management techniques, women empowerment, personality development, employability skills as well as information on government schemes and program.	Shivaji Nagar 62 sessions conducted with a range of stakeholders including 170 children, 90 adolescents, 60 youth, 180 parents, 15 school teachers, 20 anganwadi workers, 14 police and 57 CBO members
		Lallubhai Compound 45 sessions conducted with a range of stakeholders including children, adolescents, youth, parents, school teachers, anganwadi workers, police and CBO members
		Rafi Nagar 50 sessions conducted with a range of stakeholders including children, adolescents, youth, parents, school teachers, anganwadi workers, police and CBO members
Partner specific initiatives		
Pratham	Worked with the Department of Labour as part of Operation Smile to rescue 180 child workers from the community. They are currently working on rehabilitating these children through education and skill development.	
	Worked with 43 children in conflict with law in collaboration with the Child Welfare Committee with a focus on providing these children with education and skills for gainful employment.	
	Runs a drop-in centre and a Child Rights Protection Desk within the community. The desk registers and addresses issues of child protection (education, child labour, child abuse, issues of differently abled children, etc.), reported by community members.	



Community space at the entrance to the low-lying Shivaji Nagar.  
Photo Credit - ACE Trust



Children at play in Shivaji Nagar.  
Photo Credit - ACE Trust

# 7.

# OUTLINE FOR A SAFE COMMUNITY MODEL

The indicators for a Safe Community model are developed to address three levels of deprivation: child-specific, family/household specific and community/neighbourhood specific. One of the core objectives of the mapping phase of this program was to develop child specific indicators for a safe community that would lend themselves to disaggregation in order to track locality based inequalities in cities.

The Safe Community indicators, similar to the research indicators, are based on the transactional-ecological model of human development, moving beyond and away from an identification of risk factors in children's lives to protective factors that are essential for positive outcomes for children. This approach, in line with the positive measures of the JJ Act<sup>15</sup> and other relevant literature, firmly believes that for families to create protective environments characterized by the qualities of caring and opportunities for participation for young people, they, in turn, must exist in communities that also provide support and opportunities for families and children (Benard, 1991 & 2004). As indicators need to be relevant to identifying priority areas for policy action and programme design (Azzopardi, Kennedy

& Patton, 2017), as well as to monitoring progress, the Safe Community indicators follow an evidence-based approach for developing a safe community model for Indian urban poor settlements.

A new international development agenda came into force in 2016. The agenda aims to tackle the most pressing global problems as manifested in the 17 Sustainable Development Goals. India is a signatory to this agenda and its goals along with 193 other countries. Of the 17 goals, 8 include specific references and targets for an improvement in the lives of children. These range from providing green public spaces for children to eradicating all forms of child labour and early and forced marriages. The goals and targets specific to this project and their benchmarks are included in the Safe Community indicators.

For a detailed discussion of the SDGs with respect to the Safe Community indicators see appendix 1.

<sup>15</sup> The Juvenile Justice Care and Protection Act in its general principles of care and protection of children describe positive measures as: "All resources are to be mobilized including those of family and community, for promoting the well-being, facilitating development of identity and providing an inclusive and enabling environment, to reduce vulnerabilities of children and the need for intervention under this Act."

**Table 7–1. Indicators for a Safe Community Model**

Level	Sub-index/ Theme	Indicators for a Safe Community	Benchmark
<b>CHILD</b>	<b>Safety and security</b>	Children feel safe at home (%)	100%; SDG Target 11.1 & 11.5
		Children feel safe at school (%)	100%; SDG Target 4a
		Children feel safe in the neighbourhood (%)	100%; SDG Target 11.1, 11.5, 11.6 & 11.7
	<b>Protection issues</b>	Children registered at birth (%)	100%; SDG Target 16.9, NPAC 2016 target by 2021
		Children are protected from violence (actual abuse or the threat of abuse whether physical, sexual, verbal, emotional or economic) within the family, school and neighbourhood (%)	Significant reduction: SDG Target 16.2 Various targets set in NPAC 2016 in key priority areas under protection
		Children employed as child labour (%)	Zero: SDG Target 8.7, NPAC 2016 target for 5-14 years by 2025.
		Children married before legal age (%)	Zero: SDG Target 5.3. 15%: NPAC 2016 target for girls by 2021.
	<b>Education</b>	Children are enrolled in school (%)	100%; SDG Targets 4.1 and 4.2.
		Net enrolment ratio at primary and upper primary (%)	100% by 2021: NPAC 2016
		Number and % out of school children in the age group 6-13 years	Zero by 2021: NPAC 2016
		Children study in age appropriate classes (%)	100%; SDG Goal 4
		Children do not drop out of schools (%)	100%; SDG Goal 4
		Retention rate at elementary level (%)	100% by 2021: NPAC 2016
		Children attend school regularly (%)	100%; SDG Goal 4
		Availability and accessibility of special needs education	100%; SDG Goal 4
		Violence against children at school (%)	Zero: SDG Goal 4

**Table 7–1. Indicators for a Safe Community Model**

Level	Sub-index/ Theme	Indicators for a Safe Community	Benchmark
<b>CHILD</b>	<b>Play and recreation opportunities (time, space, permission)</b>	Children have sufficient time to play everyday at home, preschool, school and community suitable for children of all ages, stages and abilities.	CRC Article 31
		90-120 mins of free play indoors and outdoors recommended for children in preschool/day care settings	Outdoor Classroom Day India Campaign recommendations
		Four hours of academics and one hour for assembly and recess	National Curriculum Framework 2005
		Children have permission to play everyday at home, preschool, school and community suitable for children of all ages, stages and abilities.	General comment No. 17 (2013) on the right of the child to rest, leisure, play, recreational activities, cultural life and the arts (art. 31)
		Children have access to safe, hazard-free but challenging, flexible play spaces in their neighbourhood (%).	100%: SDG Target 11.7, 3.4 & 3.9 National Policy for Children (2013) clause xii; National Plan of Action for Children (2016) Sub-objective 2.9
		The principles for designing adequate play spaces include: <ul style="list-style-type: none"> <li>• Play space site free from physical and social hazards and located centrally within the neighbourhood</li> <li>• Using natural elements</li> <li>• Providing a wide range of play experiences for different ages either in the same space or in a range of interconnected spaces across the neighbourhood</li> <li>• Play spaces are accessible to both disabled and non-disabled children</li> <li>• Play spaces have built in opportunities to experience risk and challenge</li> <li>• Are sustainable and easy to maintain</li> <li>• Allows for change and evolution</li> </ul>	General comment No. 17 (2013) on the right of the child to rest, leisure, play, recreational activities, cultural life and the arts (art. 31)
<b>FAMILY/ HOUSEHOLD</b>	<b>Safety (of Home)</b>	Security of tenure of homes	SDG Target 11.1 New Urban Agenda
		Habitable, affordable and safe homes	SDG Target 11.1 New Urban Agenda, Sendai Framework
	<b>Security</b>	Eligible families access social protection schemes	SDG Targets 1.3, 5.4 and 10.4
		Adequate educational achievement to attain income security	SDG Targets 4.4, 4.5, 4.6 and 4.7
		Income level of families adequate to secure a modest living standard	SDG Target 10.1
		Opportunities for skill upgradation and livelihood diversification	SDG Targets 4.3, 4.4, 4.5 and 4.6
	<b>Protection</b>	Children as victims of domestic violence (%)	0%: SDG Target 5.1 & 5.2
		Children can directly communicate with family members regarding issues related to physical, sexual and emotional abuse, neglect and harmful practices	ICPS objective: To strengthen child protection at family and community level
		Parents receive support from the community for the protection of their children	SDG Targets 5a, 5b, 5c, 8.5 and 8.6. ICPS objective: To strengthen child protection at family and community level
		Families have access to emergency shelters	Sendai Framework
Women and children have access to safe spaces in all neighbourhoods		No specific guidelines but provisions in ICPS and Protection of Women from Domestic Violence Act (PWDVA) Supreme Court Guidelines – Permanent 24-hour shelter with minimum ratio of one shelter of capacity 100 persons for every one lakh population	

**Table 7–1. Indicators for a Safe Community Model**

Level	Sub-index/ Theme	Indicators for a Safe Community	Benchmark
<b>FAMILY/ HOUSEHOLD</b>	<b>Health</b>	Institutional deliveries are the norm	SDG Target 3.1
		End preventable deaths of newborns and children under 5 years and reduce neonatal mortality and under 5 mortality	SDG Target 3.2 Neo-natal mortality to at least as low as 12 per 1,000 live births Under-5 mortality to at least as low as 25 per 1,000 live births
		Families are protected from epidemics	SDG target 3.3
		Children are not victims of traffic accidents	SDG target 3.6
		Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol	SDG Target 3.5
<b>COMMUNITY</b>	<b>Safety and security</b>	Adequate street lighting	As per engineering standards for type of light used by ULB
		RWAs, self-help groups and youth groups are aware of and proactive in monitoring safety of crime hotspots and developing strategies for urban safety and prevention of crime and violence (numbers of groups and organizations working on this agenda).	New Urban Agenda (planning and urban spatial development objective): <i>We will integrate inclusive measures for urban safety and the prevention of crime and violence...Such measures will, where appropriate, engage relevant local communities and non-governmental actors in developing urban strategies and initiatives, including taking into account slums and informal settlements as well as vulnerability and cultural factors in the development of policies concerning public security and crime and violence prevention, including by preventing and countering the stigmatization of specific groups as posing inherently greater security threats.</i>
		Safe mobility options available for work, school and other common everyday routes	New Urban Agenda (planning and urban spatial development objective): <i>we support the provision of well-designed networks of safe, accessible, green and quality streets and other public spaces that are accessible to all and free from crime and violence, including sexual harassment and gender-based violence</i>
		Safe spaces available for play and recreation for boys and girls	
		No retail sale of alcohol and other abusive substances particularly to adolescents and children	SDG Target 3a, 3.5
		No threat of forced evictions	New Urban Agenda
	<b>Environment</b>	Population has access to an improved water source	SDG Target 6.1
		Population served by regular garbage collection and safe disposal	SDG Target 6.2
		Population has access to improved sanitation	SDG Target 6.2
		Regular cleanliness initiatives community/ward/city to keep neighbourhood clean	SDG Target 6.3 and 6b
		Disaster risk prevention and reduction for known hazards (fire, flooding etc.), and resilience building	SDG Target 11.5 & 11b and Sendai Framework
	<b>Education</b>	Availability and accessibility of quality early childhood education facilities (ICDS centre or anganwadi) in the neighbourhood	ICDS norms: 1 ICDS centre for a population of 1000/250 households
		Availability and accessibility of quality Primary and secondary schools in and around the neighbourhood	<u>URDPFI/NBC Standard</u> Primary school: 1 for a population of 5,000 Secondary school: 1 for a population of 7,500
		Opportunities for vocational training present	

**Table 7–1. Indicators for a Safe Community Model**

Level	Sub-index/ Theme	Indicators for a Safe Community	Benchmark
<b>COMMUNITY</b>	<b>Health</b>	Availability of different health centres in or around the neighbourhood	<u>URDPFI /NBC Standard</u> Dispensary: 1 for a population of 15,000
		Availability of counselling centres for mental health	Childcare welfare and maternity centre: 1 for a population of 45,000
		Availability of emergency care facilities in the ward	Nursing home: 1 for a population of 45,000 Specialty hospital: 1 for a population of 100,000 General Hospital: 1 for a population of 250,000
		Availability of de-addiction and rehabilitation services in the ward	NA
	<b>Play and Recreation</b>	Availability and accessibility of spaces for play, games and sports within the ward and neighbourhood level	URDPFI standard of open spaces promotes 10 to 12 sq. m per person
		Availability and accessibility of play spaces for boys and girls of different ages	General comment No. 17 (2013) on the right of the child to rest, leisure, play, recreational activities, cultural life and the arts (art. 31)
		Play spaces designed keeping in mind disabled children	
		Availability of spaces in the community where children can get connected to nature	
	<b>Protection and Protection systems</b>	Low prevalence of conflicts within the community	SDG Goal 16
		Local conflict resolution mechanism within the community available	
		Conflicts do not escalate to violence	
		Presence of accessible and efficient government protection/prevention/service provision system	ICPS provisions; NPAC recommendation: Urban wards-level Child Protection Committees formed and trained.
		Awareness about and satisfaction with protection systems (level) within families	SDG target 16.1
		Police performance satisfactory in Child Protection cases (violence, abuse and child marriage)	SDG target 16.2
		Communities with established Child Protection Committees	NPAC recommendation
	<b>Participation and empowerment</b>	Membership organizations for children and youth available	SDG target 16.7
Children’s organizations offer linkage and opportunities for participation in local area-based and community structures for decision-making			
Membership organizations for adults available			
Adult’s organizations offer linkage and opportunities for participation in local area-based and community structures for decision-making			

Based on the above evidence-based indicators, each community could create a contextually relevant plan of action to achieve the goal of creating a model safe community.

Some recommendations for action at government, NGO and community level for developing a plan of action to create a safe community, based on the key findings of this research are included in the table below.

Table 7–2. Recommendations Arising out of the Key Findings

Key finding	Recommendations	Stakeholders
CHILDREN ARE AT RISK OF VIOLENCE AT HOME, SCHOOL AND IN THE COMMUNITY	<p><b>Advocacy:</b> Raising awareness of detrimental effects and unacceptability of sexual harassment and disseminating information on what to do if witnessing or being subject to sexual harassment. Strengthen norms and values that support non-violent, respectful, and gender equitable relationships for all children and adolescents via different channels and programs such as positive parenting programs.</p>	<p>WCD, schools, colleges, anganwadi centres, health centres, local government</p> <p>Key influencers within the community, youth, children, parents, schools, NGOs, ICDS centres and health centres.</p>
	<p><b>Training:</b> Setting up and training Community Child Protection Committees (CCPC) Setting up and training Child Protection Committee (CPC) in each ward Setting up Child Friendly Police Stations in every ward. Training police, health workers, teachers and others in contact with children to adopt non-violent and child friendly ways while interacting with children. Initiatives such as the 'Police Didi'<sup>16</sup> to ensure awareness building and knowledge dissemination on issues of violence and abuse.</p> <p><b>Collective action:</b> Community monitoring to protect areas intended for play and recreation from individuals or groups who threaten children's safety Provide access to quality response services for children affected by violence.</p>	<p>NGO, CBO</p> <p>The District Child Protection Unit and the Women and Child Department</p> <p>Government training institutes and divisions such as the training division of the Bureau of Police Research &amp; Development and government-owned teacher training institutions (TTIs).</p>
	<p><b>Laws and policies:</b> Ensure the implementation of laws that prohibit all forms of violence against children</p>	<p>Community, parents' groups, trained youth groups JJ Institutions, police, NGO, CPCs</p> <p>Constitutional law enforcement agencies</p>
ONLY 67% OF CHILDREN HAVE BIRTH CERTIFICATES	<p><b>Advocacy:</b> With the government to accelerate and improve birth registration service delivery system. With parents to register all births and procure birth certificates</p>	<p>MCGM Community, NGO</p>
	<p><b>Demand generation:</b> Amongst parents, guardians, community leaders and service providers for registration and issuance of birth certificates.</p>	<p>Community, NGO</p>

<sup>16</sup> Project 'Police Didi' is an initiative of the Mumbai Police in collaboration with a few city-based NGOs. Started in 2014, the initiative engaged women police personnel from police stations across the city to go into communities and schools educating and spreading awareness on issues pertaining to violence and abuse.

**Table 7–2. Recommendations Arising out of the Key Findings**

Key finding	Recommendations	Stakeholders
<p><b>FAMILIES SOCIALLY INSECURE:</b></p> <ul style="list-style-type: none"> <li>• Low average monthly income</li> <li>• Low educational attainments of parents</li> <li>• Community not availing social security schemes</li> </ul>	<p><b>Advocacy:</b></p> <p>Promote group savings, loans associations, microfinance combined with gender norm/equity training.</p> <p>Awareness generation about relevant social security schemes, eligibility criteria and points of access</p> <p>Promoting poverty alleviation schemes specifically targeting vulnerable families where children are at-risk of child labour and early child marriage.</p>	<p>NGO, CBO</p> <p>Health centres, ICDS, schools, department of women and child development, Ward Committee, Women and Child Welfare Committee of MCGM</p>
<p><b>RISK OF DROPPING OUT OF SCHOOL</b></p>	<p><b>Advocacy:</b></p> <p>Promoting affordable and accessible quality education up to the secondary level for all children (NPAC)</p> <p>Advocacy for a central legislation banning corporal punishment and for strict action to be taken against abusive teachers and principals.</p> <p>Training of teachers to encourage them to adopt innovative, child friendly methods of teaching and ensure inclusion, respect, and equality of opportunity for all children in schools – no stereotyping, exclusion or discrimination on the basis of difference (e.g.: as determined by gender, culture, social class, ability level).</p> <p>Advocacy for provision of adequate infrastructure, including separate toilets for boys and girls, to encourage enrolment and retention especially of girls</p> <p>Provision of outreach services to working children and other children in difficult circumstances that hamper their education, through bridge education, night shelters and vocational training</p>	<p>Department of Education, MCGM</p> <p>Department of Education, DWCD, Women and Child Welfare Committee of MCGM</p> <p>Department of Education, Inclusion of these aspects and in B.Ed curriculum and all teacher training modules</p> <p>Child rights groups, parents, NGO</p> <p>Department of women and child welfare, education department, NGO</p>
	<p><b>Collective Action:</b></p> <p>Map the facilities, fees, and attendance figures for existing private schools to evaluate access by slum residents and implement programmes to address gaps.</p> <p>Conduct a mapping of facilities in all government schools in and around the slums with a view to implementing a strategy for upgrading basic infrastructure, including provision of clean toilets, proper sanitation and safe drinking water, play space/ sports ground.</p>	<p>NGO, CBO, ICDS, Women and Child Welfare Committee of MCGM</p> <p>NGO, department of education, educational institutions</p>

**Table 7–2. Recommendations Arising out of the Key Findings**

Key finding	Recommendations	Stakeholders
<p><b>LACK OF SAFE PLAY SPACES AT SCHOOL AND COMMUNITY LEVEL</b></p> <p><b>LACK OF PLAY TIME IN SCHOOL AND COMMUNITY</b></p> <p><b>UNSAFE ROUTES TO SCHOOLS</b></p>	<p><b>Advocacy:</b></p> <p>Good play spaces within the community with opportunities for adults and young people to socialize together or separately.</p> <p>All play spaces to have universal access and a distinct local character through design.</p> <p>Motivate communities to design and maintain small play spaces spread throughout the area, build them with funding support from corporator, ward and MCGM budgets, and CSR funds</p> <p>Advocate schools to promote outdoor learning and play every day in a safe environment, and for at least 60 minutes of recess spread over the 6 hour school day in 2 or 3 breaks.</p>	<p>Key influencers within the community, youth, children, parents, schools, NGOs</p> <p>MCGM, Ward Committee, private sector</p> <p>PPP, RWAs, local corporator, Ward Committee , MCGM</p> <p>MCGM, Education Department</p>
	<p><b>Demand generation:</b></p> <p>Demand funds from the Gender Budget of MCGM and other relevant slum redevelopment budgets to develop community designed and built play spaces in the slums and R&amp;R sites.</p> <p>Local corporators to raise demand in Ward Committee meetings for safer play spaces within slum communities and seek release of funds for the same.</p>	<p>SRA, MCGM and other authorities responsible for slum redevelopment and rehabilitation.</p>
	<p><b>Provisions:</b></p> <p>Provide safe access to natural areas, landscaped green areas, and large open spaces for play and recreation</p> <p>Provide outreach play programs on site in the neighbourhood when there is no space for a playground</p> <p>Provision of clubs<sup>17</sup>, sports facilities, organized games and activities for both girls and boys of all ages and from all communities.</p>	<p>NGO, CBO, community, planning authorities</p> <p>Department of Environment, Department of Sports, Department of Youth Affairs, Locally elected representatives</p>

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An example is the eco club being supported by the Department of Environment, Govt. of NCT of Delhi, in schools and colleges.

**Table 7–2. Recommendations Arising out of the Key Findings**

Key finding	Recommendations	Stakeholders
<p><b>HIGH PREVALENCE OF SUBSTANCE ABUSE</b></p>	<p><b>Advocacy</b></p> <p>Demand and advocate laws that regulate the hours during which alcohol can be sold, number of alcohol outlets, and the price of alcohol.</p> <p>Advocate eradicating drug dealing and usage within the community and implementing the Scheme for prevention of Alcoholism and Substance (Drug) Abuse.</p> <p>Advocate government run free de-addiction centres as an essential social amenity in each ward in the city’s Development Plan.</p> <p>Establish approaches to substance abuse education and prevention that stress participation and the availability of constructive activities.</p> <p><b>Training</b></p> <p>Enlist and train eligible organizations to implement the Scheme for prevention of Alcoholism and Substance (Drug) Abuse.</p> <p>Organizations to be trained include schools, universities and NGOs in wards across cities and in areas with high prevalence of slums.</p> <p>Design and implement a prevention curriculum and enlist and encourage school students and children and adolescents in community-based organizations and child and youth clubs to act as mentors and leaders. Train them to teach the prevention curriculum to peers and younger students. Health care and educational providers should act as support elements.</p> <p><b>Provisions</b></p> <p>Providing counselling services within the community and schools for families that require assistance.</p>	<p>Local, state and central governments</p> <p>Key influencers within the community and civil society, CBOs, schools, health centres</p> <p>Ward committee, MCGM</p> <p>Ministry of Social Justice and Empowerment</p> <p>NGO, CBO, schools</p> <p>Department of Social Justice and Empowerment with the support of NGOs, health centres, schools, child clubs, child resource centres, CCPC, health workers, ICDS centres</p> <p>NGO, CBO</p>
<p><b>LACK OF CHILD PARTICIPATION IN LOCAL DECISION-MAKING</b></p>	<p><b>Demand generation</b></p> <p>Enable children to organize themselves for example through child clubs, bal sabhas etc. to identify those issues of concern to them and to determine how to take action to address them</p> <p>Encourage inclusion of representatives of child governed organisations on local bodies and committees with responsibility for management of local issues</p> <p><b>Collective Action</b></p> <p>Facilitate targeted consultations with children on local safety audits, design of parks and playgrounds, mapping ease of access to local transport and buildings</p>	<p>Youth, children, parents, schools, NGOs, locally elected representatives, local ward office</p>



**Table 7–2. Recommendations Arising out of the Key Findings**

Key finding	Recommendations	Stakeholders	
<p><b>INADEQUATE BASIC SERVICES</b></p>	<p><b>Advocacy</b></p> <p>Campaign through schools and media to encourage families to demand better sanitation services from Swatch Bharat Mission.</p> <p>Allocation of land in DP to build overhead reservoirs to improve water supply in slums.</p> <p>Regular and reliable waste collection by the corporation.</p>	<p>Schools, NGO, parents,</p> <p>MCGM, ward committee</p> <p>MCGM, ward committee</p> <p>MCGM, planners and engineers</p>	
	<p><b>Demand generation</b></p> <p>Mapping of the existing water and sewage pipelines for regular maintenance and repair.</p>		
	<p>Integrate the provision of drainage into the construction of roads and pathways.</p> <p>Ensure that the water supply and sewage line are separate and not in contact with each other.</p>	<p>Key influencers within the community, youth, children, parents, NGOs.</p>	
	<p><b>Collective Action</b></p> <p>Involve local residents in identifying and reporting uncollected garbage and polluted water.</p> <p>Assess and reduce health risks presented by various environmental hazards.</p> <p>Encourage and incentivize communities to harvest rainwater at the building, street and community level.</p>	<p>Corporators, RWAs, Mahila Milans, child clubs</p>	
	<p><b>MANY PREVENTABLE HAZARDS IN EACH COMMUNITY</b></p>	<p><b>Training</b></p> <p>Raise community awareness about the importance of removing encroachments from drains and natural drainage corridors and keeping the same free of garbage to prevent flooding.</p> <p>In case of R&amp;R buildings, ensure fire safety codes are followed in tall buildings, elevators are kept in working conditions, fire escape staircases are not used as storage space, and sand buckets are kept in every house.</p>	<p>NGO, CBO, community health workers</p>
		<p><b>Advocacy</b></p> <p>Restricting polluting industry in the vicinity of residential areas and giving low-income groups access to land and housing free from hazards through reservation of land under Public Housing in the DP.</p>	<p>MCGM</p>
		<p>Improvement of slums and providing adequate services and amenities to slum dwellers, especially water and sanitation irrespective of tenure security.</p>	<p>MCGM</p>

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Children on a transect walk.  
Photo Credit - YUVA

# APPENDIX - I

## Mapping and Safe Community indicators for Sustainable Development Goals (SDGs)

Goal	Target	Scope in terms of mapping indicators
GOAL 1	<ul style="list-style-type: none"> <li>1.3: Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable</li> </ul>	Eligible families access to social protection schemes
GOAL 3	<ul style="list-style-type: none"> <li>3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births</li> <li>3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under 5 mortality to at least as low as 25 per 1,000 live births</li> <li>3.3: By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases</li> <li>3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being</li> <li>3.5: Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol</li> <li>3.6: By 2020, halve the number of global deaths and injuries from road traffic accidents</li> <li>3.9: By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination</li> <li>3a: Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate</li> </ul>	<p>Institutional deliveries are the norm</p> <p>End preventable deaths of newborns and children under 5 years and reduce neonatal mortality and under 5 mortality</p> <p>Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol</p> <p>No retail sale of alcohol and other abusive substances particularly to adolescents and children</p> <p>Children have access to safe, hazard-free but challenging, flexible play spaces in their neighbourhood</p>

Goal	Target	Scope in terms of mapping indicators
GOAL 4	<ul style="list-style-type: none"> <li>• 4.1: By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes</li> <li>• 4.2: By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education</li> <li>• 4.3: By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university</li> <li>• 4.4: By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship</li> <li>• 4.5: By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations</li> <li>• 4.6: By 2030, ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy</li> <li>• 4.7: By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development</li> <li>• 4.a: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, nonviolent, inclusive and effective learning environments for all</li> </ul>	<p>All children are enrolled in school in age appropriate classes</p> <p>Availability of quality early childhood education facilities (anganwadi)</p> <p>Affordable schools in proximity to home – both primary and secondary</p> <p>Availability of vocational courses with enrolment in secondary and higher secondary schools respectively</p> <p>Availability and accessibility of education for special needs children (developmental issues, behavioural issues, medical issues, mental health issues, learning disabilities)</p> <p>Adequate educational achievement to attain income security</p> <p>Opportunities for skill upgradation and livelihood diversification</p> <p>Equal treatment for children with disabilities</p> <p>Gender Equality in school</p> <p>No discrimination based on caste, religion, etc.</p> <p>Perceived prevalence of violence (harsh disciplining through corporal punishment, bullying etc.) in school (%) and coping</p> <p>Child protection training available for designated school staff</p>
GOAL 5	<ul style="list-style-type: none"> <li>• 5.1: End all forms of discrimination against all women and girls everywhere</li> <li>• 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation</li> <li>• 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation</li> <li>• 5.4: Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate</li> <li>• 5a: Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws</li> <li>• 5b: Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women</li> <li>• 5c: Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels</li> </ul>	<p>Children are protected from becoming victims of domestic violence</p> <p>Perceived prevalence of child marriage and coping</p> <p>% of adolescents age 10-19 who are currently beneficiaries of a social protection scheme to stay in school or delay marriage</p> <p>Formal and non-formal community based protection mechanisms available for safeguarding children</p> <p>Presence of accessible and efficient government protection/prevention/ service provision system</p> <p>Parents receive support from the community for the protection of their children</p>

Goal	Target	Scope in terms of mapping indicators
<p><b>GOAL 6</b></p>	<ul style="list-style-type: none"> <li>• 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all</li> <li>• 6.2: By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations</li> <li>• 6.3: By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally</li> <li>• 6b: Support and strengthen the participation of local communities in improving water and sanitation management</li> </ul>	<p>Population has access to an improved water source</p> <p>Population served by regular garbage collection and safe disposal</p> <p>Population has access to improved sanitation</p> <p>Regular cleanliness initiatives community/ward/city to keep neighbourhood clean</p>
<p><b>GOAL 8</b></p>	<ul style="list-style-type: none"> <li>• 8.5: By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value</li> <li>• 8.6: By 2020, substantially reduce the proportion of youth not in employment, education or training</li> <li>• 8.7: Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms</li> </ul>	<p>Availability and accessibility of quality primary and secondary schools in and around the neighbourhood</p> <p>Opportunities for vocational training are present</p> <p>Perceived prevalence of child labour and coping</p> <p>Children living and working in streets (numbers) – perceived prevalence</p> <p>Formal and non-formal community based protection mechanisms available for safeguarding children</p> <p>Presence of accessible and efficient government protection/prevention/service provision system</p>
<p><b>GOAL 10</b></p>	<ul style="list-style-type: none"> <li>• 10.1: By 2030, progressively achieve and sustain income growth of the bottom 40 per cent of the population at a rate higher than the national average</li> <li>• 10.4: Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality</li> </ul>	<p>Income level of families adequate to secure a modest living standard</p> <p>Eligible families access to social protection schemes</p>

Goal	Target	Scope in terms of mapping indicators
<p><b>GOAL 11</b></p>	<ul style="list-style-type: none"> <li>• 11.1: By 2030, ensure access for all to adequate, safe and affordable housing and basic services, and upgrade slums</li> <li>• 11.5: By 2030, significantly reduce the number of deaths and the number of people affected and decrease by [x] per cent the economic losses relative to gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations</li> <li>• 11.6: By 2030, reduce the adverse per capita environmental impact of cities, including by paying special attention to air quality, municipal and other waste management</li> <li>• 11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities</li> <li>• 11.b: By 2020, substantially increase the number of cities and human settlements adopting and implementing integrated policies and plans towards inclusion, resource efficiency, mitigation and adaptation to climate change, resilience to disasters, and develop and implement, in line with the Sendai Framework for Disaster Risk Reduction 2015–2030, holistic disaster risk management at all levels</li> </ul>	<p>Availability of Security of tenure</p> <p>Affordability and adequacy of home and basic services</p> <p>Homes made of safe materials (from fire/other hazards) and for protection from extremes of climatic conditions</p> <p>Adequate infrastructure and basic services available to the community:</p> <ul style="list-style-type: none"> <li>garbage</li> <li>water supply</li> <li>sanitation</li> <li>street lights</li> </ul> <p>Disaster risk prevention and reduction for known hazards (fire, flooding etc.), and resilience building</p> <p>Physical structure of neighbourhood positively influences children's mobility and outdoor activities through location and nature of open spaces</p> <ul style="list-style-type: none"> <li>streets</li> <li>community facilities</li> </ul> <p>Community aware of crime hotspots and proactive in monitoring safety in unsafe spaces</p> <p>Safe spaces and child friendly spaces available within the community</p> <p>Safe Mobility options available for work, school and other common everyday routes</p> <p>Availability and accessibility of spaces for play, games and sports within the neighbourhood and ward, for girls and boys of different ages and ability</p> <p>Availability of spaces in the community where children can connect to nature</p> <p>Community prepared to respond to hazards/disasters: natural and man-made:</p> <ul style="list-style-type: none"> <li>traffic</li> <li>pollution</li> <li>mobile radiation towers</li> <li>railway tracks</li> <li>road safety measures: signal, speed-breakers</li> <li>dumping ground</li> <li>fire</li> <li>flooding</li> </ul>
<p><b>GOAL 16</b></p>	<ul style="list-style-type: none"> <li>• 16.1: Significantly reduce all forms of violence and related death rates everywhere</li> <li>• 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children</li> <li>• 16.7: Ensure responsive, inclusive, participatory and representative decision making at all levels</li> <li>• 16.9: By 2030, provide legal identity for all, including birth registration</li> </ul>	<ul style="list-style-type: none"> <li>Children are protected from violence (actual abuse or the threat of abuse whether physical, sexual, verbal, emotional or economic) within the family, school and neighbourhood</li> <li>Membership organizations for children and youth available</li> <li>Membership organizations for adults available</li> <li>Children's and adult's organizations offer linkage and opportunities for participation in local area-based and community structures for decision-making</li> <li>Participation opportunities at ward and municipal level</li> <li>All Children registered at birth</li> </ul>



Street life in Rafi Nagar.  
Photo Credit - ACE Trust

# APPENDIX - II

Table A1: Fact File of Slums Under Study

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar												
Location	M-East Ward, Mankhurd East. Landmarks – Near Deonar Colony and M East Ward Office.	R-North Ward, Dahisar West. Landmarks – Mandapeshwar Caves, St. Francis Technical School, Dahisar Bridge riverside.	M East Ward, Shivaji Nagar. Landmarks – Near Deonar Dumping Ground and Shivaji Nagar New Bus Depot, 90 feet road.												
Area	185,283 sq. m (0.19 sq. km or 18.5 hectare or 45.71 acres)	3 Hectares or 7.41 acres	12.31 Hectares or 30.42 acres												
Population	29,843 (TISS Survey, 2015) living in 6105 households (Health Post Survey, data 2013). The fully occupied population is likely to be around 52,000.	25,000 living in 4000 households.	17,487 (Health Post, data 2014)												
Population density	653 persons/acre (current occupancy), anticipated 1120 persons/acre.	3,373 people per acre	575 people per acre												
Number of children	Total – 11,191 (TISS Survey, 2015)	Adults – 22,300 (Health Post data) Total – 2,700 (Health Post data) 0-5 – 700 boys and 650 girls 6-14 – 840 15-18 – 560	5,239 (Health Post, data, 2014) <table border="1"> <thead> <tr> <th></th> <th>Boys</th> <th>Girls</th> </tr> </thead> <tbody> <tr> <td>0 to 5 yrs</td> <td>1,012</td> <td>602</td> </tr> <tr> <td>6 to 14 yrs</td> <td>1,520</td> <td>1,405</td> </tr> <tr> <td>15 to 18 yrs</td> <td>340</td> <td>360</td> </tr> </tbody> </table>		Boys	Girls	0 to 5 yrs	1,012	602	6 to 14 yrs	1,520	1,405	15 to 18 yrs	340	360
	Boys	Girls													
0 to 5 yrs	1,012	602													
6 to 14 yrs	1,520	1,405													
15 to 18 yrs	340	360													

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Employment rate and sectors	<p>All households have at least 1 working/ earning member.</p> <p><b>Regular jobs</b> – working in private companies; government jobs like in the BMC; working in factories; auto-rickshaw drivers (though very few own the vehicles); vendors – vegetable, fruits, snacks, fish, seasonal vendors (rakhis, handis for dahi handi) etc.; small scale businesses – run small shops, roadside stalls, small hotels; working as LIC agents; sell articles in local trains – gajra, hair clips, snacks; piecework – women in houses make bindis, attaching price tags to goods, making necklaces; domestic workers – mostly women (around 50% of women are involved) and children assist families with work, but only in informal/unorganized work settings.</p>	<p>100% households. All families have at least 1 working member.</p> <p><b>Regular jobs</b> – Mantralaya, BMC, Hospitals, Schools.</p> <p>Auto-rickshaw Drivers (Very few own the vehicles and they rent it from someone else)</p> <p><b>Vendors</b> – vegetable, fruits, snacks, etc.</p> <p>Small-scale business – LIC agents, real estate agents, etc.</p> <p>Piecework – Women in houses make bindis, hair clips, bangle colouring, etc.</p> <p>Domestic workers – mostly women. Around 90% of women.</p>	<p>100% households. All families have at least 1 working member.</p> <p><b>Regular jobs</b> – working in private companies; government jobs like in the BMC; auto-rickshaw drivers (though very few own the vehicles); small-scale businesses – run small shops, roadside stalls, small hotels; working as LIC agents; domestic workers – mostly women (around 50% of women are involved) and children assist families with work, but only in informal/unorganized work settings.</p> <p>Daily Wage: Construction labourer, hawkers, rag pickers, sell water, collect fee at fun fair (seasonal), Hamali (Porters, Carry goods for people), etc.</p>
Land and property ownership	<p>The land originally belonged to a certain individual named Lallubhai who owned a large factory in the area/compound. After the factory shut down, the government reserved this plot for building a housing site under the DP Plan of 1991. The land currently belongs to the MMRDA. Construction of Lallubhai Compound started in 2001 and was completed in 2005 as a R&amp;R colony for the MUTP projects. Around 60 – 70 % of flats were allotted to development displaced people and handed over to families, but not all of these families live in Lallubhai. Around 50% of the families live in self-owned houses while the remainder live on rent. House owners only have an allotment letter while ownership papers are held by the MMRDA to be provided to the owner after completion of 10-years after allotment.</p>	<p>Shivaji Nagar is built on Collector's land. Families slowly started settling here and the slum was formed. 74% of families are house owners and 26% live on rent. Many families have moved out of the slum and are now living in areas such as Nalasopara and have rented out the rooms they owned here. Others live on the ground floor themselves and have rented out the first floor. The 74% who own the rooms do not have any ownership papers per se. They have a photo pass issued by the BMC against which they pay annual taxes for amenities such as water supply, electricity, etc. Since they are in possession of this photo pass, they are entitled to rehabilitation under the various housing rehabilitation schemes rolled out by the government. Those living on rent do not have a proper rental agreement but have the details spelt out on INR100 stamp paper.</p>	

	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Type of development	70 high-rise buildings built on contract by two separate builders – Hiranandani (26 buildings) and SV Patel (44 buildings). All buildings were commissioned by the MMRDA under the R&R Component of the MUTP project, which was a joint initiative of the Government of Maharashtra and the World Bank in 2002. Buildings built by Hiranandani are 7 storied with all apartments designated for commercial use. The buildings built by SV Patel have 5 stories each. While the area provided for each apartment by both developers is similar, there are some differences in design such as the location of access corridors.	Mostly ground plus one masonry dwellings with proper tiling. There are few houses with only ground floor.	Baba Nagar comprises kutcha houses made of materials picked up from the dumping ground such as plastic sheets, tin sheets, etc. Authorized part of Rafi Nagar has pucca houses with masonry walls and floors. All pucca houses are ground plus one (two storeyed)
Number of constructed apartments/DUs	SV Patel 6,336 (144 apartments × 44 buildings) + Hiranandani 4,134 (78 apartments in one wing and 156 apartments in 26 buildings) = 10,470	4,000 (CCDT, 2015)	3,498 (Health Post data, 2014)
Dwelling unit size	21 square meters approximately or 225 sq. feet	60% of the houses have an area of between 100 sq. ft. to 250 sq. ft. The rest have area of more than 250 sq. ft.	Mostly have a carpet area below 250 sq. ft.
NGOs active in slums and their focus	YUVA – Child Protection. Sneha – family nutrition and vocational training for girls (nursing). Apnalaya – Domestic violence cases, counselling. Stree Mukti Sangathna – Domestic violence cases, counselling. Door Step School – Education. Run aaganwadis and study classes (informal education). Akanksha – Run study classes (informal education). Pratham – Children with special needs. Identifying children and linking them to skills development programs. Material aid for people with special needs. FPI – Reproductive health. Navjeevan – Health of sex workers. Spandan – Health. This is a charitable trust running a homeopathic hospital. SPARC – Run a bachat gath (mahila milan) with women in Lallubhai. Magic Bus – Sports for development.	CCDT – Child Protection. Zarina Foundation – sports for development, cleanliness drives, and need based work in the community. The founder member lives in the community. Shakti Udaan – Skills development training for girls, coaching classes for girls enrolled in standard X. Don Bosco Institute – Skills development training for boys (technical skills) Karuna Trust – tailoring classes for girls. MNS – Sports activities in Bhaudevi ground. Not accessed by children and youth from Shivaji Nagar. Touching Lives – Recreational activities for both boys and girls. IC Church (Our Lady of Immaculate) – offer tailoring courses for girls, material aid to families in need.	Pratham Mumbai Education Initiative – Education, Child Protection Apnalaya – Disability, runs a day care centre for children Nirmaya Foundation – Health Aangan – Child rights Karunya Trust – Education (National Open School) Palvi Trust – Education Magic Bus – Sports for development Sneha Foundation – Health Lok Seva Sangam – Tuberculosis prevention Save the children – Education and recreation

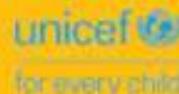
	Lallubhai Compound	Shivaji Nagar	Rafi Nagar
Who is the corporator?	Mr. Dinesh (Bablu) Panchal, Shiv Sena and Ms. Sunanda Ramesh Lokare, Congress	Dr. Shubha Raul, Shiv Sena	Mrs. Reshma Nevrekar (Samajwadi Party)
How involved is the corporator or other government agencies in slum development work? What aspects do they work on?	Ms. Sunanda is easily accessible and active in the area. She has worked towards the cleaning of gutters and laying a new water line. Bablu Panchal is not very accessible and has only created tin sheds in open maidans for community meetings. YUVA is currently coordinating with them for developing the CPC.	The Corporator is easily accessible to the community residents. She has set aside two days (Wednesdays and Fridays) for the residents of Shivaji Nagar to approach her with their issues. She sits at a small office very close to the community. However, more work takes place in pockets C and D (Shivaji Nagar and Panchsheel). In pockets A and B (Chota Panchsheel and Shivaji Nagar), MLA Manisha Chowdhury of the BJP has a strong hold and more work is carried out by her. Aspects – activating mahila mandals, bachat gaths, started the Dattak Vasati Yojana, cleaning gutters, etc. Also, two new toilets were constructed during her tenure. The community residents have a lot of faith in the Corporator.	Corporator is not working on the slum development and no government agency is involved.
Has the slum benefited from any govt. scheme (central/state/local)?	ICDS, Mid-day meal, RTE, PDS (subsidized ration), Manodhairya Scheme (compensation for victims under POCSO), and some State government scholarships accessed by families who are aware of the existence of such schemes.	ICDS, Jan Dhan Yojana (life insurance), Rajiv Gandhi Jeevandayi Yojana (health), Mid-day meal, RTE, PDS (subsidized ration), and Pahal Scheme (subsidized LPG).	The following schemes can be accessed by people who have all the required documents; ICDS RTE Rajeev Gandhi Jeevandayee Yojana PDS In December 2016 two boards advertising the 'Pradhan Mantri Aawas Yojana' were put up in Rafi Nagar to provide information on the scheme.
What are the community development activities currently on-going? Is there any focus on children?	NGOs like Swadhar and Annapurna help run self-help groups. No specific provision for children	Nothing specific as such. None of the government activities are focused on children.  Since January 2016, the SRA has become very active in the area and there are talks of building vertical dwellings here.	Pratham has presented the needs of the children in Rafi Nagar to the 'Mumbai Development Plan' committee. These needs were expressed by the children themselves (such as playground, community centre, footpath, regular clean water, etc.).
Number of Anganwadis Primary Schools Secondary Schools	35 Anganwadis. 2 public schools (Tamil, Telugu, Marathi, Hindi, English, Urdu, Semi-English mediums) and 4 private schools (English and Marathi) 2 public schools (Tamil, Telugu, Marathi, Hindi, English, Urdu mediums) and 4 private schools (English and Marathi)	5 Anganwadis (2 in pocket B, 1 in pocket C, and 2 in pocket D). 4 primary private schools and 2 secondary private schools 5 government primary schools 5 semi-government primary schools 2 government secondary; 5 semi-government secondary All these schools are within a radius of 1 to 2.5 km of the community and all the children walk to school.	13 Anganwadis.  3 BMC Schools (Urdu 1, Urdu 2, Hindi) and 1 Private School (Jafri School – English Medium) No Government School and 1 Private School (Secondary plus junior college).



## Promoting Safe Communities

The cities of the developing world account for over 90 percent of the world's urban growth and as many as 60 percent of all urban dwellers will be under the age of 18 by 2030. However adequate development and protection of children living in urban poverty involve complex processes. Cities are likely to house 40 percent of India's population by 2030. In the context of India, not only is there little data on the risks faced by the most vulnerable urban children, there is also little understanding of child rights governance. Under these conditions, it is very difficult to implement the Sustainable Development Goals and particularly goal 11— *Make cities and human settlements inclusive, safe, resilient and sustainable*, and goal 16 — *Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels*.

This report shares the experiences of the "Promoting Safe Communities" program in selected slums in Mumbai by Action for Children's Environments and a consortium of partners, CCDT, PMEI, YUVA, supported by UNICEF India. It is an example of a collaborative and community based participatory mapping involving children. This report highlights the urgent need for inclusive policies in urban development to ensure that SDGs for urban poor children can be met.



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