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Linking Education with Health: Lessons from Children of Migrant Construction Labourers in India

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ABSTRACT

Children accompanied by migrant families in India are less often allowed to exercise their rights due to social, economic and political factors in an urban locale. There is a law preventing child labour and many interventions were being implemented to protect these vulnerable children. One of the recent campaigns is the 'schooling of migrant children' initiated by many government schools and nongovernmental organizations across the country. With this concept, this paper was performed a media content review of various interventions implemented to address schooling of migrant children of construction labourers and the review revealed a very grim picture of the complexity of the issue. The interventions were taken three different approaches; (i) children were directly mainstreamed into the government school driven by local government (ii) bridge schools were driven by non-governmental organizations for the children of first-generation learners and those discontinued their learning due to family migration. Bridge schools are found in various forms such as tent school, worksite school, moving school, study centres and community schools, finally (iii) seasonal hostel model for migrant children mainly at the source of migration. The content review arises the following discussion points: (i) what is the objective of the schooling of migrant children? (ii) what is the impact of the schooling of migrant children on the under-five children or mainly their younger siblings below under-five years age? (iii) is there any curriculum for bridging the learning gap? (iv) besides education, are health and nutrition being considered essential for the improvement in learning outcome? and (v) is the tracking mechanism effective enough to continue schooling of the migrant children? This paper recommends the following policy implications: a compulsory bridging programme for migrant children, compulsory health-checkup and supplementary nutrition along with education and inter-state partnership in addressing schooling of migrant children.

Keywords: Bridge courses, Construction sector, Health & nutrition, Internal migration, Migrant children, Policies and programmes, Primary schooling and education

BACKGROUND

Migrant children in India are less often allowed to exercise their rights to education and health due to social, economic and political factors in an urban locale. There are progressive actions

taken by the government to target the children of internal migrant labourers but there are blockades, gaps and limitations: the provision of the Sarva Shiksha Abhiyan (SSA) scheme of special schools like mobile schools, tent schools, short-term/worksite schools at construction sites, residential school, shelter homes and bridge courses/remedial courses with a focus on mainstreaming the urban deprived out of school children (Khan, 2010), have been poorly implemented. The Right to Education Act failed to address how the local bodies especially school ensure attendance of these moving folk of children of migrant labourers. The Building and other Construction Workers (Regulation of Employment and Conditions of Service) Act, 1996 made a provision of crèche facility for infants but no mention of compulsory education of children of construction workers in vicinity schools (Miri *et al.*, 2010). The guidelines of the National Commission for Protection of Child Rights' (NCPCR) made education and childcare accessible for migrant children in the destination. Integrated Child Development Scheme (ICDS) has a mandate to cover urban migrant children (UNESCO, 2015). But many times, ICDS services do not reach to the migrant children being held up to the informal school.

Rashtriya Bal Swasthya Karyakram (RBSK) programme aimed at reducing child mortality and morbidity by early identification and early intervention of defects at birth, deficiencies, diseases and developmental delays including disability of children 6 weeks to 18 years at anganwadi centre and government and government-aided schools. The programme focuses on the children enrolled in ICDS and any government or government aided schools. The majority of the children outside this umbrella are opted out from being the beneficiary of the programme. The curative approach in early detection of morbidity that might lead to mortality among children has not addressed in the school health promotion and specific protection for better outcome. The frequency of mobile health camp held bi-annually at ICDS and annually at government schools are not significant enough to address the early detection and intervention.

This article, with an aim to, analyses interventions implemented by government and Non-Governmental Organizations to address schooling of the migrant children in urban locale by identifying the gaps in delivering education and health in formal and informal system of schooling and studied the various approach and initiatives have taken in each of the intervention to overcome the challenges in the service delivery.

METHODS

A review of published literature was carried out, but it was found that the issues of schooling for migrant children attracted relatively less concern in academics though it has multidimensional implications in the contemporary society. The bulk of the information was reported in the media

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in the form of newspaper article, blog and project information published in the website. The content review for the same was performed. Though very limited information by media reports was not enough to perform an in-depth analysis of the situation and its impact, it has provided clear message on good practices as well as areas need urgent attention for improvement. Many of the interventions that has been implemented were on ad-hoc basis.

The interventions implemented (Table 1) to address the challenges of schooling of migrant children were taken three different approaches; (i) children were directly mainstreamed into the government school driven by local government (ii) bridge schools for children of first generation learners and those discontinued their learning driven by mainly Non-governmental Organization (NGO). Bridge schools are found in various forms such as tent school, worksite school, moving school, study centers and community schools, finally (iii) seasonal hostel model for migrant children mainly at source.

Table 1: Interventions implemented to address schooling of migrant children in Indian States

Indian States	Type of Interventions
Andhra Pradesh	■ Worksite school in Telangana for Odiya children (Deccan Chronicle, 2018)
and Telangana	 School for migrant children at brick industries by Bharath Abhyudaya Seva Samithi (Catherine, 2018)
	 Worksite Odiya school in partnership with Odisha govt. and brick kiln owner's association (Deccan Chronicle, 2018)
Gujarat	• Community outreach programme 'Nyasa' of Indian Institute of Technology, Gandhinagar at Palaj (IITGN)
	 Shaishav at Dhood (IDS, 2014)
	 Initiative to educate children of migrant slum families by Salesian Missions at Vadodara (Mission Newswire, 2015)
	■ Fisherfolk and Salt Water school (Majmudar, 2017)
	 Migration card system by Dept. Education 2009 (Vellaiappan, 2017)
	 Moving school at Kutch (Moving School, 2017)
	 Initiative of Govt. School Management Committees (Times of India, 2018)
Goa	• Mobile schools by Catholic Schooling in India – an initiative of Indian Govt. (de Souza, 2014)
	 Moving school by Anders Linnet and Mette Lange started in 2001 (Moving School, 2017)
Karnataka	 Special enrollment drive by Udupi district govt (The Hindu, 2013)
	Shale Kade Nanna Nade campaign
	 Tent school by SVYM at Police Public School, Karnataka State Open University, University of Manasagangothri (The Hindu, 2017)
	Diya Ghar run by Saraswathi Padmanabhan and Shyamal Kumar (Vidya Raja, 2018)
	■ Bridge schools in Govt. school premises by Gubbachi Learning Community (Ganju, 2018)
	■ Bridge schools in multiple urban slum by Samridhdhi Trust (Samridhdhi Trust website)
	 Worksite bridge school by Azim Premji Foundation (Mohan, 2012)

Table 1 contd...

Indian States	Type of Interventions
Kerala	Study Center's by State Education Department (Business line, 2014)
	 Initiative by Government school at Kandanthara, Malayidam Thuruth, Binanipuram etc (Navya, 2017)
	 Roshni project at Kochi (Indian Express, 2017)
	 Initiative by Sarva Shiksha Abhiyan (SSA) at Kochi (Indian Express, 2018)
Maharashtra	 Social Protection scheme by MREGS (UNICEF)
	 Mumbai Mobile Crèche (Vrishali Pispati, 2014)
	 Tata Mobile Crèche Pune (Women Across Frontiers, 2016)
	■ Anukaran (Pal, 2014)
New Delhi	 Mission Education Project by Smile Foundation in Gurgaon (Smile Foundation)
	 Radio phone by Qualcomm's Wireless Reach Initiative (Qualcomm, 2011)
Odisha	Humara Bachpan campaign for seasonal children (Jyoti Prakash Brahma, 2013)
Rajasthan	SSA funded migratory hostels at source-village centric (Megan Reed, 2014)
Tamil Nadu	 Worksite school for Odiya children (Pradeep Baisakh, 2012)
	 Postcards track progress by Aide Et Action (Hindustan Times, 2016)
Uttar Pradesh	Apna school in Bidhokar, run by Jagriti and Formed by faculty and students of IIT Kanpur (UNICEF)

FINDINGS

Table 1 portrays 31 interventions implemented across 12 States by State government and NGOs or sometimes in joint venture, showed that there is no systematic way of addressing the issues of schooling of migrant children. Many local governments of States such as Andhra Pradesh, Delhi, Karnataka, Kerala, Odisha and Telangana were found instrumental and have taken initiatives in resolving problems pertaining to the schooling of migrant children. But lack of attention, support and initiatives by the State level authorities have made it difficult to formulate a coherent strategy.

Many efforts have been made by the State governments and NGOs to get back the migrant children mainly of 6 to 14 age group into schools or mainstream them in government school at an age-appropriate class. Few NGO initiative has also given attention to pre-school education includes children below 6 years of age.

The interventions were focused on (i) Special enrollment campaign to bring back all children between 6-14 years in school and children below 6 years into anganwadis by visiting migrant worker's colonies in Udupi district of Karnataka. Similar campaign for children 6-14 years were conducted in Ernakulum district of Kerala. Besides campaigning, a survey conducted firstly, by

SSA with the local bodies and government in Kochi (Kerala) among inhabitants of migrant labour camps and, secondly Andhra Pradesh and Tamil Nadu government in association with NGOs in 2011 to provide education to Odiya children (ii) Appointment of migrant skilled volunteers to interact and conduct special classes for the migrant children by government schools in Ernakulum and other parts of Kerala (iii) Inter-State exchange of government teachers and text books between Andhra Pradesh/Telangana, Tamil Nadu and Orissa through inter-state partnership (iv) Support to establish and strengthen resources at worksite bridge school such as Odiya medium school at Hyderabad (Qualcomm, 2011). Similar school was observed for brick kiln children of Odisha at Telangana initiated by police commissioner of Rachakonda and collector of Yadadri. Government mid-day meal extended to the worksite school at Hyderabad. (v) Special training center at Delhi's one municipal school to bridge the learning gap for migrant children from Uttar Pradesh. Extending implementation of special training center to some selected schools were also seen in Kochi (vi) Providing school uniform, bags and other study material at free of cost with the help from local NGOs, SSA and companies in Kochi and Ernakulum district (Kerala). School teachers also contribute to hire a vehicle (such as auto) for migrant children school transportation (vii) track schooling in partnership with home State (such as Odisha government) by issuing an exit certificate by the worksite school at Telangana.

The content review arises the following discussion points.

(i) What is the objective of the schooling of migrant children?

The on-going initiatives by the government is mainly concentrated to bring back out-of-school children in mainstream schooling with the line of the Right to Education Act. This simultaneously have an impact on reducing child labour to a great extent. But the objective failed to provide special and individual attention to achieve improved learning outcome through quality education, ill-health and nutritional deficiency of the migrant children. The difficulties faced by the children directly mainstreamed into government school without acquiring age-appropriate cognitive skills were not known. The accessibility issue is not strategically addressed by the government. Few schools in Kerala have had a very less enrollment due to the high participation in private schools and therefore targeted migrant children. In case of NGO run bridge schools, it bridges the learning gap and mainstreams the children to age-appropriate class in nearby government school.

(ii) What is the impact of the schooling of migrant children to the under-five children?

In the process of schooling of children above five years of age, their siblings such as the toddler and children under five years were getting neglected from caring by their older counterpart in formal schooling as there are no facilities available for them such as crèche and pre-school education within school premise, which disallow the younger children to enjoy early childhood education, adequate nutrition and a healthy environment. This is one of the main barrier that migrant children were not being sent to the government school, and worksite bridge schools are much preferred because it accommodates children of any age and services are available to all, easy to access and breast feed the toddler also becomes easier. Due to the temporary nature of their stay, builder/corporates do not invest in schooling of these migrant children, but where initiative had taken, worksite school restrict services only to those children whose parents are contracted as a bonded labour with the builder/corporates for appropriate fund management.

(iii) Are there any curriculum for bridging the learning gap?

As far as the formal primary schooling in India is concerned, children are enrolled in age-appropriate class and the native (or State) language is being considered as the medium of instruction. Due to the migratory movement of the family, children either might not have gone to school or have attended school irregularly. Therefore, the disruption in learning processes undermine their ability to gain age-appropriate cognitive skills. Government schools upon admission did not have any strategy to examine the children learning ability so that, even if the migrant children admitted in age-appropriate class with less or no prior cognitive skills, teacher provide special attention to bridge the learning gap. But, for providing a quality education, it is essential that children continue age-appropriate formal schooling after the completion of the bridge course. Beside unavailability of textbooks in native language and difficulty in communicating with teachers, it became more difficult to engage children with linguistic barrier in the learning processes. Therefore, drive for schooling of migrant children might have no impact on improving their learning ability in government schooling processes.

In contrary, the structural understanding on how education is being delivered to the migrant children of both ages of below 6 years and 6-14 years especially at bridge schools is not clear in terms of availability of curriculum, pedagogy and teaching learning materials, background of the teachers/trainers, importance of health-nutrition-hygiene in achieving learning outcome and community engagement to empower parents to care, support and continue schooling of their children. To overcome the linguistic barrier in delivering education to the migrant children, few interventions at the State/district level have appointed qualified migrant volunteer locally available from the respective State and can able to interact in any one of the languages that the children speak. These volunteers were involved in conducting the special programs held for migrant children beyond the school hours. There was no clarity provided on the structure of the special programs: was its alike bridge courses? Or it's a kind of extra-curricular activities/games to engage these children and provided a space to motivate them to speak freely in their native language with the volunteers.

(iv) Besides education, are health and nutrition being considered essential for the improvement in learning outcome?

Migrant children need supplementary feeding apart from the usual meal to cope up with the pressure of learning. As nutritional interventions such as supplementary feeding at pre-school and mid-day meal at primary level are more institutionalized within the education system, the dropped out-of-school migrant children in informal schooling may not have access to it. Even the inter-state migrant children in school may not always like or consume the local food is being served in school and depend on junk food or survive with the food packed from home or go back to home for lunch. The quality and quantity of the meal provided in school is not being monitored effectively. Despite realizing the high prevalence rate of child malnutrition below 5 years of age, there is no mention of growth monitoring system is in place in primary school especially due to the lack of an established growth standard. Irregular or annual health check-up camp by State implemented programmes has been implemented only in government and government-aided schools and many times its services do not reach to the bridge schools.

(v) Is the tracking mechanism effective enough to continue schooling for the migrant children?

As children of seasonal migrants are mobile from one place to another due to the migratory nature of the family, the probability of discontinue schooling of these children is high if an effective and systematic tracking mechanism is not in place. The review does not provide clarity on the exit processes on how school authority ensures the child and especially influence the parent to continue schooling of their child at destined location?

CONCLUSION

By ensuring migrant children at school, children are provided access to education, improve health and deficit nutritional growth. But the challenge of protection is much larger than only schooling of migrant children. The social determinants affecting education and health and migrant's exclusion from accessing their rights to various entitlements in native as well as at the destination may not be addressed through schooling. Therefore, besides government interventions, the role of corporates/builders/NGOs must be defined in protecting the rights of the migrant families and children. It is essential to link education with health and nutrition. Study had shown that mid-day meal has improved children's test score by 18percent (Chowdhury, 2019). Besides nutrition, health promotion at elementary schooling is utmost important. But there is no strategy that dealt migrant children at school with special attention to address health and nutritional interventions.

This paper recommends the following policy implications.

(i) Compulsory bridging programme for migrant children

A bridge school at the worksite or in government school premises at vicinity that accommodate every child irrespective of their mobility and provide crèche facility to toddlers, pre-schooling and elementary education, health and nutritional services to the migrant children is recommended. Resources such as infrastructure, manpower, teaching learning materials and other necessary arrangements for the daily functioning of the school can be pulled under one roof for a cost-effective intervention. It could be regulated by the corporates/builders/NGOs and primarily responsible to implement the intervention with the support from government but it is highly recommended the inclusion of bridge schools within the schooling system by addressing challenges of access and school hours. Government has to extend its provision towards Mid-day Meal (MDM), development of structured curriculum, capacity building of teachers, easy mainstreaming process and so on. Government interventions must reach to every bridge schools. Further government must way out for institutionalization of the bridge schools and make bridge course education accessible to children in mainstreamed schooling system.

(ii) Inter-State partnership

Intra-State cooperation must be improved to address language barriers, tracking and mapping of child movement and continuation of schooling at source/destination, and cooperation towards exchange of educational resources such as textbooks. Even tracking mechanism must be improved at inter-Sate level. Institutionalization of schooling of migrant children require enormous effort to put on streamlining the process of delivering quality education at the intra-State level. Therefore, Memorandum of Understanding (MoU) between States would a great step achieving the ground level concerns and challenges.

(iii) Compulsory health-checkup and supplementary nutrition along with education

A regular health checkup is of much need to the migrant children due to unhealthy living environment and their susceptibility to climate variations. Cooperation from government implemented programs and nearest health facilities must be extended to the bridge schools by providing outreach camps at the worksite. To improve the deficit nutritional growth of the migrant children, supplementary feeding is essential beyond regular meal to improve classroom participation and stakeholder/community engagement especially parents in health and nutrition activities to improve dietary habits at the household level.

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