Domestic Child Labor in India – Reasons and Responses

I read with interest the exhaustive study done by Bannerjee, et al.(1), one of the dovens in the field of child labor. Their results show that despite the inclusion of employment of children as domestic servants under the purview of the revised Child Labour (Prohibition and Regulation) Act, 1986 (61 of 1986), the problem of child labor in the domestic sector is continuing unabated. It was gratifying to note that the authors addressed the issue of the characteristics of the employers, to determine whether any particular group is more commonly involved with the practice. However, as their results show, all types of occupational groups are involved in the propagation of this abhorrent practice. 3.6% were doctors, which supposedly know better the harmful effects of this practice(1). In our recent study of this practice amongst the medical profession, we also found a large number (64%) of doctors (including pediatricians) employing domestic child labor(2).

It was disheartening to note that nearly 85% of such servants were girls, with both nutritional deficiencies and medical problems(1). It is well known that whether it is the impact of poverty, illiteracy or malnutrition, it is the girl child who suffers the maximum, and same is the case here. During our study(2), we also found majority of the domestic servants to be girls and also tried to look into the reasons for the same on the basis of detailed interviews (unpublished data). In addition to the causes mentioned by Bannerjee, et al.(1), we found another recurring theme for the preference for young female domestic servants. With the increasing incidence of child sexual and physical abuse at home by domestic servants, most employers felt that it was safer to have a young female domestic servant to

look after the children, rather than have an adolescent or adult male servant at home. This was confirmed further on noting that most of the girls employed were for domestic work, whereas most of those working at the clinic were boys (unpublished data). Thus, it strikes one as '*propagating child abuse to prevent child abuse*', a variant of vicious cycle of child abuse.

I would also like to raise two ethical issues concerning this study(1). Domestic child labor has now come under the purview of Child Labour Act, and is illegal. Did the authors report the presence of domestic child workers noted during the study to the concerned authorities? Secondly, as 3.4% children had been sexually abused(1), were any of the recommended interventions(3) provided to the affected children, like counseling, involving the police or any social service organization, separating the children from the perpetarators, etc?

Such studies are a welcome addition to the published literature on this topic from India, as they provide an insight in to the ground situation. Moreover, such studies also provide data for the policy makers to justify allocation of resources for addressing this problem.

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