

## **Brief History of Our Work in Kanidvali (W)**

### **Background:**

The Kandivali Shattabdi area work was started in the year 1997 in the month of October. It is situated at 300 metre walk from Kandivali railway station and behind the Shattabdi hospital and the land which they have occupy come under the BMC department which is in always the line of demonization. The houses in which they stay are made of bamboo covered with the plastic sheet and with no basic amenities for which have to hunt and struggle a lot. The family are mainly from various part of Gujarat and Maharashtra ratio will be 80% from Gujarat a tribal population called Vagiri and 20% from various part of Maharashtra [Sholapur, Ratnagiri, and Nasik]. The family were from labour class because all they came to Mumbai due to poverty and such of employment and the especially the tribal from Gujarat were mostly involve in the seasonal work, old cloth collection and in the craft work of Gujarat. The population as per compare tribal had more children as in each house you will find minimum of 5 children which they been notable manage with their daily income. The area was also exposing too many illegal activities such as gambling, selling of drug and alcohol, prostitution and Robbery.

No. of Families	:	74
No. of Children	:	120
No. of Youths	:	20
No. of Women's	:	23

### **Problem/issues for starting project over there:**

Due to the work on the daily bases and both are working you will find the children left behind when the parent go for work and you will find these children roaming around the signal and railway station for begging. The area was identifies when children was found begging on the railway station and later we came to know that they come by the nearby area called Shattabdi and when we survived we found more than 100 children in which hardly 10% were going to school and even by the initiative by the school as no children were ready to go to school. And due to begging the children were getting which they have been using for their habit such as gutka, tobacco, tapkir and gambling with the money as there was no watch over by the parent and even some time the parent will utilize their children money to full fill their habit such as addiction and gambling. Later in the study it was found that the parent started their children for begging to meet their house hold and unwanted needs and even in the night the girl children would go for begging for food as these community will not prepare their food for evening and children will return late night after collecting the remaining food from the nearby society. The area was the exploitation place for by the parent and the surrounding as children were involve in labour, selling alcohol and only work for these children. Due to regular demonization children were majorly affected because they have to take care of all their belonging.

### **Past Success:**

On the first attempt 54 children were admitted to school and who have completed the basic education. Through the networking with the local police station and community begging was stop in the area and people was sensitize and along with it selling of Drug, Alcohol and gambling was stop in the area. The centre was open in the area and provided educational and the health services to these children. Due to vocational guidance and training program 25



children are job placed in BMC garbage department as driver and helper and getting the salary around 10000 to 12000 rupees per month and taking care of the family and 1 boy completed the Photoshop training and earning around 18000 and taking care of the family who previously take care of the family by selling alcohol. Five families have been rehabilitated in other area through our intervention and children have also been settled. Parents are giving priority for their children and focus on children development.

**Current Activities/Availing Facilities:**

In the centre focus on their educational development through staff and volunteers from college, child right base program, school networking, youth development, women's development, awareness and rallies and watch on the children health and personal hygiene.



**Future Projection:**

Forming for youth and women's group and registering the group and provide training to the group so they able to sustain the program and handle the responsibility of the children and community.

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