

Health Hazards of Child Labor in Brick Kiln Sector of Bangladesh: A Case Study in Chandpur District.

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ABSTRACT

The researchers in this study set out to learn more about the risks that children working in Bangladesh's brick kilns face to their health. A plethora of health hazards were exposed to children in their professions, according to the study, which used quantitative and qualitative data collected from parents and child laborers. In addition to testing the children's knowledge of the health risks involved, the study investigated their reasons for participating in the job. Reducing the environmental and health dangers associated with brick kilns requires a practical method that is implemented at the appropriate time. At the end, the report proposes a number of measures to shield kids from potentially harmful environments.

Key words: Child labor, brick kiln, health hazards, work environment

INTRODUCTION

Of the 3.54 million working-age children in Bangladesh in 2022, 1.76 million are not considered child workers, 1.78 million are, and 1.07 million of them are involved in hazardous work, according to the National Child Labour Survey. Urban areas employ 64.3% of these young laborers, while rural areas employ 35.7%. In particular, the poll found that 19.1% of boys and 7.7% of girls engaged in potentially dangerous actions like pushing or hauling heavy objects. Of the 39.96 million children in the 5–17 age bracket, 55.2% are in the 5–11 age bracket. Children in the labor force make up 3.54 million of this total. Dhaka has the greatest proportion of children, as highlighted in the report's analysis of regional differences. The current school attendance rate is 34.81%, and there are 27.63 million families with children in this age range. Children between the ages of 5 and 17 work in 3.54 million of these households. These young people work in a wide range of industries, from farming and manufacturing to building and retailing. Nearly 60% of them are paid workers, while the remaining 99% do unofficial jobs. Approximately 60.7% of children who work are enrolled in school at the moment. Child laborers typically put in 27.1 hours per week and earn TK 6,661 per month. In addition, the survey shows that a whopping 82% of child laborers reside in their own families. Of those, 33.3% work in manufacturing, while 23.6% are employed in agriculture, forestry, and fisheries. In all, 52.2% of child laborers are enrolled in school, while 68.8% are classified as employees. Child laborers earn an average of 6,675 TK each month.



When children's actions put their bodily, emotional, or mental well-being at risk, as well as their developmental progress, we say that they are engaged in hazardous employment. Anyone between the ages of 5 and 17 who

works for at least one hour a week, for pay or not, is considered a child worker according to the Bangladesh Bureau of Statistics.

A secure and caring home environment helps children develop the self-assurance and competence they'll need to tackle adult challenges (Venkatapuram, 2011; Muntaner et al., 2010). Their ability to safeguard their health and advance human rights may be compromised in the event that these fundamental rights are infringed upon. "The promotion and protection of health rights are fundamentally linked," according to Mann et al. (1994, p. 179). Not only are these children entitled to health care, but they are also granted the right to an education under Article 17-A of the Bangladeshi Constitution and the Universal Declaration of Human Rights (1948). It is a serious humanitarian problem to deny these fundamental rights and force youngsters to work for a living.

Because of this, they are compelled to work, which hinders their physical and mental development and limits their potential for growth (International Labor Organization, 2013). According to Ennew et al. (2005), these youngsters frequently find themselves cut off from mainstream society and subjected to ongoing exploitation, which makes it difficult for them to integrate. These children are vulnerable to various forms of child labor, which significantly obstruct efforts to achieve universal primary education (Singh, 2013). One such sector is brick kilns, where illiterate or out-of-school children are often employed, typically under conditions of familial debt bondage (Bhukuth, 2005).

Children who have never attended school or have dropped out face a double disadvantage: they are deprived of educational opportunities, which is a lifelong handicap, and they are burdened with adult responsibilities at an early age, negatively impacting their balanced personality development. This denies them the chance to enjoy a wealth of life experiences (Kamm, 1993). Children from working-class families often become entangled in labor within family-run businesses, particularly in the informal sectors of the economy, including a wide range of manufacturing industries.

Whether these child laborers work as "trainees" or simply wage earners, there appears to be a strong element of exploitation at their work place. They are usually paid far less than the minimum wage rate (Bekele & Boyden, 1988) and they are mostly engaged in environments which are highly injurious to their health and overall growth (Watch, 2011; Hussian, 1998). The hazardous child labor not only stunts the child development but also perpetuates and strengthens the vicious cycle of poverty and underdevelopment of the whole community (Hindman, 2011).

Child labor and Child health

The United Nations International Children Emergency Fund (UNICEF) defines child labor as any activity that affects a child's health and education. Its definition also states that child labor is work that leads to deprivation of childhood activities, exploitation and abuse.

Child labor is work that exceeds a minimum number of hours, depending on the age of a child and on the type of work. Such work is considered harmful to the child and should therefore be eliminated.

- ☐ Ages 5-11: At least one hour of economic work or 28 hours of domestic work per week.
- ☐ Ages 12-14: At least 14 hours of economic work or 28 hours of domestic work per week.
- ☐ Ages 15-17: At least 43 hours of economic or domestic work per week.



In Bangladesh, about 3.54 million of the children aged 5-17 years are participating in the work force (National Child Labor Survey, 2022) and 1.7 million children aged 5-17 engaged in hazardous labour. Child laborers often do not have access to safe working conditions and proper nutrition, which are considered two of the most essential factors in determining good health (Daniels, 2008; Cigno & Rosati, 2006). In general, children's physical, mental, and social development are all negatively impacted by the working conditions (Ecrelawn & Nauman, 2001; Basu, 1999). According to Beegle, Dehejia, and Gatti (2009) and Awan et al. (2010), minors who labor are subjected to physical harm, psychological distress, long-term psychosocial traumas, and sexual harassment on the job.

Hundreds of thousands of Bangladeshi children work in hazardous jobs. These are jobs that have been identified by the ILO to expose children to hazards including: physical, psychological or sexual abuse; excessive work hours; an unhealthy environment. The child workers work in brick industry found that almost all had some sort of respiratory problem and were not provided with any safety equipment or protection from brick dust.

This study delves into the family dynamics, employment patterns and circumstances, health status, and work settings of child laborers in Bangladesh's brick kiln sector to uncover the health consequences on their well-being.

METHODOLOGY

The primary goal of the data collection was to identify the health risks experienced by children working as brick kiln workers in Bangladesh. A home survey was carried out to gather information about the socio-demographic characteristics and working conditions of the children who work in this sector of the economy. For this study, researchers used quantitative and qualitative techniques to learn about the child laborers' thoughts and feelings about their working conditions and the effects on their health. No one else was present during the interviews because they took place in a private room. Maintaining participant anonymity and data confidentiality was a top priority during data collection. A large proportion of children were found to be working and not in school, according to the results.

Household Survey

A multistage sampling method was utilized to identify households with children engaged in the brick kiln industry. The initial phase involved the identification of brick kilns in the Chandpur district. Field inspections and local informants indicated the presence of 123 brick kilns distributed throughout 8 upazilas, each employing around 50 to 100 child laborers. In the second phase, 15 brick kilns were randomly chosen from a total of 123, and 60 houses were surveyed. The primary respondents were the parents of the child laborers, and data was collected using an interview schedule. In Bangladesh's familial framework, dads were primarily the respondents; but, in their absence, mothers were interviewed. In the concluding phase, 20 child laborers were chosen from each of the 15 brick kilns, yielding a total sample size of 60 parents ($15 \times 4 = 60$) and 300 child laborers ($15 \times 20 = 300$). Descriptive statistics were employed for data analysis.

Focus Group Discussions and Observations

To get a feel for the child laborers' thoughts, feelings, assessments, and perspectives, researchers ran four focus group discussions (FGDs). The focus groups give the children who work as laborers a chance to share their thoughts and feelings on issues that are relevant to the research. There were five to ten kids in each focus group. In order to set the stage for the discussions, facilitators gathered participants' basic information, including their income, employment, health risks, and overall health. Because people in the group were more likely to speak up when someone else voiced their opinion, the setting encouraged the free flow of ideas. The children's workplaces served as the setting for the focus groups, which were comprised of participants selected from households that had already been surveyed. There were no financial or other incentives offered, and participation was entirely voluntary. One qualified researcher acted as moderator and the other as recorder during the FGDs. Where permission was given, audio recordings were made. To gain a comprehensive understanding of the "life-world" of juvenile laborers, qualitative data was collected through observations in workplaces and households in addition to focus group discussions. While conducting field observations, we used

a checklist and a discussion guide for the focus groups. To explore the participants' experiences in various aspects of their job, a thematic analysis was carried out. In order to address the research questions, the FGD data was coded in a systematic way, and themes were identified within the codes.

FINDINGS

Socio-Demographic Background of Child Laborers

The following data was gathered from a household survey: 1) important socio-economic family traits; 2) educational attainment of the children in the household, including the parents, siblings, and child laborers; 3) main causes of child labor; and 4) living circumstances and housing of the children in the study.

Key Socio-Economic Characteristics of the Child Laborers' Families

There were 300 children working in the brick kiln industry, according to Table 1. With boys making up approximately 83.0% and girls about 17.0%, it's clear that the majority of these children were male. More than 55.0% of the kids were in the 10–14 age range, 19.0% were in the 5–9 age bracket, and almost 25.0% were in the 15–17 age bracket.

Table 1 Socio-demographic characteristics of the child laborers (n=300)

Characteristics	No. of respondent	Percentage
Age (years)		
5 – 9	57	19.0
10 – 14	168	56.0
15 – 17	75	25.0
Gender		
Male	249	83.0
Female	51	17.0
Education		
Illiterate	90	30.0
Basic Literate	54	18.0
Primary	102	34.0
Secondary	54	18.0
School drop-outs		
Yes	240	80.0
No	60	20.0
Reasons for school drop-out		
Poverty	204	68.0

Education not available/accessible	24	8.0
School condition/teachers behavior	72	24.0

Source: Field survey

Among all the children surveyed, 18.0% were basic literates, meaning they could only write their names. It was about the second or third grade when the majority of these kids stopped attending elementary school. A bigger percentage (34.0%) had finished elementary school, while a third had gone on to high school. It is evident that over 80.0% of the children left school either before or shortly after completing primary education. Various reasons were cited for dropping out, with poverty being the most significant factor (68.0%). Other contributing factors included the inaccessibility of schools, poor school infrastructure, and unfriendly behavior from teachers. Despite these challenges, approximately 24.0% of the working children were still attending school, likely working as seasonal or part-time laborers (Table-1).

Personality traits of working children's families

Parents of child laborers living in low-income rural areas of the district made up the bulk of the survey takers. Ten women were also interviewed, but mostly male household heads (either because they were absent owing to work in other places or because the male head had passed away). Table 2/3 shows that almost 60% of the family members were under the age of 18, and that 55.0% of the respondents came from families with seven or more members, suggesting a high dependency ratio. Among the family members, about half were illiterate and just 20% had finished elementary school. This exemplifies the poor level of education held by these families, which is in line with their meager monthly income of about 10,000 BDT. Thirty percent of the family's income came from specialized occupations, while thirty percent came from farming.

Table 2/3 Socio-demographic characteristics of parents and siblings of child labourer (n=60)

Characteristics	No. of respondent	%
Place of residence (n=60)		
Rural	45	75.0
Urban	15	25.0
Age of respondent (in years) (n=60)		
25-34	21	35.0
35-44	15	25.0
>44	24	40.0
Gender (n=60)		
Male	54	90.0
Female	6	10.0
Total number of family members in the household (n=60)		
≤ 7	33	55.0
> 7	27	45.0
Age group of family members (n= 60)		
0-4	9	15

5-9	10	16.6
10-14	12	20.0
15-17	6	10.0
18-60	18	30.0
>60	5	8.4
Gender of family members (n= 60)		
Male	36	60.0
Female	24	40.0
Family member's educational status (n= 60)		
Illiterate	30	50.0
Basic literate	9	15.0
Primary	12	20.0
Middle	6	10.0
High	2	3.3
More than secondary	1	1.7
Occupation of family members (n= 60)		
Employed	30	50.0
Students	10	16.6
Housewife	8	13.3
Family worker	5	8.3
Unemployed	7	11.8
Monthly family income (in BDT) (n=60)		
<10,000	21	35.0
10,000-15,000	27	45.0
>15,000	12	20.0
Major family income sources (n=60)		
Agriculture	20	33.33
Skilled labor	18	30.0
Unskilled labor	13	21.67
Child labor	09	15.0

Source: Field survey

Causes of the use of child labor

The researchers surveyed parents to find out why their children worked as brick kiln laborers. Parents sent their children to work primarily because of poverty, according to the majority of parents (80.0%). Among the other reasons were adherence to family tradition (5.0%), the need for children to acquire practical skills (7.0%), and the possibility of father unemployment or death (3.1%). In addition, around 5% of people who took the survey mentioned that poverty, inaccessible schools, and an unwelcoming school climate were all problems.

Health hazards of child labor in brick kiln sector

Working long hours for low pay: Despite working long hours, child laborers earned roughly 10,000 BDT per month. Even younger kids were putting in over eleven hours a day. The businesses still didn't pay more, even if workers put in more hours. When children's fathers were contractually agreed upon to do employment, the children would often not get any compensation for their efforts. Some participants mentioned that their parents felt ashamed of sending them to work but had no other choice due to financial constraints.

On average, both adults and children worked nearly 13 hours a day, typically from 8 am to 9 pm. However, during tight deadlines, children were forced to work alongside adults at night, despite their fragile physical structure and limited strength.

Despite the grueling nature of their work, children working outside their family roles earned only Tk. 80 to 150 per day, an amount insufficient to significantly improve their living conditions or cover household expenses. With such minimal earnings, many struggled to afford proper meals. Malnutrition was a result of most paid children cutting back on food spending to save money. The payment schedule for children was irregular, and they frequently went without money for a month or even three quarters of a year. Employers did occasionally give children shoes or clothes for Eid, but this was quite infrequent and unreliable.

Work environment

The work's routine and nature posed numerous risks to children's health. The bulk of the kids were involved in the mud and brickmaking processes. Reportedly, they would occasionally partake in dangerous tasks, such as loading lorries with bricks straight from the kilns. Children were observed to labor for extended periods of time in the winter using chilly water and mud. In contrast, incidences of dehydration and sunstroke were documented as a result of children working directly beneath the scorching sunshine during the summer. It was unusual for businesses to provide a welcoming work environment where employees were treated with dignity. The vast majority of the students felt their teachers were unfriendly and unsupportive. Verbal and physical abuse were commonplace, and even small infractions were frequently met with reprimands or scoldings. Not only did the dangerous and unsupportive work environment cause minor injuries like cuts and bruises, but it also contributed to more serious health problems including asthma, hepatitis, and tuberculosis, according to most participants. It is worth noting that children frequently complained of symptoms including sleepiness, weight loss, and hunger, which goes to show how harmful their working conditions were.

Health hazards

The overall working conditions were found to be highly unfavorable, leaving children with no choice but to labor in unhealthy and hazardous environments. Nearly all participants described the brick kiln work environment as terrifying, with constant risks to their health. The primary occupational hazards included working without essential protective measures such as sun shades, gloves, or proper footwear. Many kids in the focus groups were taken aback when asked about PPE, which includes things like goggles, helmets, gloves, coats, and long shoes. The lack of personal protective equipment (PPE) was said to be a leading cause of many injuries, cuts, and other forms of physical harm, including the tragic loss of a child in certain instances.

Extreme heat in the summer and freezing in the winter were common experiences for child laborers. Several participants complained of exhaustion and back pain; in fact, one individual was unable to walk correctly because of the severity of their back pain. After using soil-digging tools and hauling big loads, many children complained of being exhausted. A number of individuals showed signs of recent injuries, including those to their hands and

feet. Working long hours without getting enough sleep made me feel lightheaded and led to several trips and falls. Problems with one's eyesight and persistent coughing were mentioned by around a third of the participants.

The lack of medical attention for children meant that injuries could often heal on their own, unless the situation was considered life-threatening. There were certain companies where first-aid kits were so rare that employees would use scraps of fabric to cover cuts and scrapes. Transportation to hospitals was usually covered by employers in the event of serious injuries. The dangers to the children's health were already high, but the fact that most brick kilns were situated in outlying suburban regions without any close medical facilities really made things worse.

A thirteen-year-old witness corroborated this finding when she said: "One of my cousins lost his finger after getting cut by the 'kudaal' (earth-digging tool)." The maalik, or employer, was absent when his finger began to bleed. The bleeding persisted despite our best efforts to apply a bandage. It was too late by the time he was finally admitted to the hospital that night... If he had been taken to the hospital sooner, I think his finger might still be alive.

Additionally, the workplaces lacked basic amenities such as potable water, sanitation, and proper civic facilities. There were no designated areas for children to eat or rest, further exacerbating the health risks they faced. Many children appeared visibly anemic, highlighting the severe impact of these inadequate conditions on their well-being.

Child labor and future opportunities

Younger children working in these environments had limited awareness of their grim future and the dangers of their working conditions. However, the older children were more conscious of the negative consequences of their labor. Their present occupation could not pave the way to success or a better tomorrow, therefore they realized that putting job before school was bad for their future.

A child worker, who was sixteen years old, said: "I've been working here day and night for the last four years, like a donkey." This worker had only completed three years of elementary school before beginning her job. No matter how hard I work, the money I make is pitiful. Both my dignity and my prospects are bleak. When you're always splattered in mud, no one likes you.

The elder siblings wanted their younger siblings to stay in school and not join the workforce when they were younger, even though they too couldn't make the switch from working to going to school because of being too old and not having enough money. Almost all of the kids said that they would have preferred to stay in school and get a good education instead of working when they were younger if they had had the chance. Some youngsters willingly worked as laborers because they wanted to "learn" skills that would be useful when they were older and could start their own businesses. However, this was a very tiny proportion of children.

"Now I understand how great it is to study in school," a fifteen-year-old shared, despite having only two years of schooling and hardly being literate. Seated under a fan, dressed neatly, you take pleasure in an atmosphere of mutual respect and friendliness. In any case, that assumes your folks can afford to pay for your schooling. None of mine ever did.

Children's perceptions about causes of child labor

If asked why their parents put them to work, most of the kids would say poverty. Government schools' dismal state, teachers' aggressive and punishing tactics, severe poverty, a lack of employable skills, and high unemployment rates were all contributors to this crisis. All of these things worked together to make parents less likely to pay for their kids' schooling. Working seemed like a good option in this situation because kids could get some experience and help out with the family budget.

In spite of this, the participants were adamant that manual labor would never alter their destiny. Nonetheless, they persisted in working to contribute financially to the family and, as elder siblings, to assist their younger siblings in continuing their schooling.

The thirteen-year-old lad from a family that had been manufacturing bricks for five years described how there was no way to make money working in the brick kiln; all you could do was dig, dig, dig with muck. This is not a place to hone your skills. You might pick up some useful skills if you shadow an electrician or go to a car repair business, but your Ustaaad (trainer) will scold you if you mess up.

DISCUSSION AND RECOMMENDATIONS

The statistics showed that there were several human rights violations and health risks faced by children working in brick kilns. Even the children's families were witnesses to these exploitative practices; yet, it seemed like they had grown too weak and helpless to carry out their basic duty of protecting their children from harm and fighting against exploitation (Cannan & Warren, 2013). Actually, families had no other choice but to put their children in danger due to the widespread poverty. According to the study, these families have accepted child labor as a cultural norm due to the long-term economic difficulties (Hilson, 2012). Efforts to improve the situations of these children are complicated by the normalization of child labor (Khan et al., 2010). In the brick kilns of Bangladesh, for example, families engage in the practice of child labor and protect the exploitation of children from any attempts to address the issue.

Parental illiteracy, big family sizes, and low household income are important variables that lead children to work (Awan et al., 2011; Bhalotra, 2007; Sawada, 1999). Child work is worsened by an unwelcoming educational system and low adult literacy rates (Chaudhury, 2000). The study found that parents frequently had no idea how dangerous the job was and how it could affect their children's health. The parents' inability to recognize the serious harm caused by unsafe workplaces is probably due to their low health literacy levels. Child laborers also lacked the education and training to assess the dangers of their job and devise ways to safeguard themselves from harm (Fassa et al., 2000).

Parents and the community at large seem to be woefully uninformed when it comes to the importance of children's health and safety. This misunderstanding stems from people not knowing or not having "common sense" about the harmful impacts of exposing children to dangerous job situations throughout their vital developmental stages. People cannot be adequately prepared to safeguard their own and their children's health just by possessing the capacity to read and write.

Rather, health literacy is crucial for identifying and reducing these risks; it is described as the capacity to obtain, process, and use health information to make educated decisions (Kickbusch, 2013; Comparative Report on Health Literacy, 2012). In order to improve the health-related capacities of child laborers, a minimum degree of education is required, since health literacy is strongly correlated with education.

The brutal exploitation of youngsters further demonstrates how state institutions have failed to safeguard them. Numerous government departments are tasked with ensuring the well-being, safety, and human rights of children. These include the Labor Welfare, the Social Welfare, the Health, and the Education Departments, among others. These groups are quite bureaucratic, but they don't accomplish anything to protect the rights of minors in the workforce.

According to the facts, there are a lot of dangerous situations where youngsters labor, and they are quite dangerous to their health. Environmental factors were determined to be socially, mentally, and physically detrimental to these children. While better working conditions could reduce some of these risks, there is currently no easy technological fix to keep these kids safe. A holistic approach, involving the combined actions of all pertinent stakeholders, is necessary to safeguard children from further violations of their rights and to tackle the root causes of child labor (Smith, 2004).

Adult poverty and illiteracy are the primary drivers of child labor, according to this study. Working children at a young age was also found to have serious negative impacts on their health. Comprehensive strategies that inform the public about the long-term health risks of child labor and provide assistance to families in need are necessary to address these issues.

RECOMMENDATIONS

Based on the findings, the following recommendations are proposed:

1. Fix Working Hours: Establish clear limits on the number of hours children can work each day.
2. Prohibit Night Work: Ban children from working at night to ensure their safety and well-being.
3. Ensure Safety in Exceptional Cases: In unavoidable situations where children must work beyond standard hours, provide adequate lighting and implement safety measures to protect them from dangers such as insects, snakes, and stray dogs.
4. Provide Basic Facilities: Ensure that every brick kiln has access to potable water, toilets, and hand-washing facilities.
5. Arrange Emergency Transportation: Make transportation available for emergencies to ensure timely medical care when needed.
6. Protect from Harsh Weather: Construct shaded areas at workplaces to shield children from extreme sun and other harsh weather conditions.
7. Supply Protective Gear: Provide gloves, masks, and long shoes to minimize physical injuries and exposure to harmful materials.
8. Restrict Use of Sharp Tools: Prohibit children from working with sharp-edged tools to prevent accidents and injuries.

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