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Beggary in India: Patterns, Causes and Everyday Realities

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Abstract

Beggary, defined as the practice of soliciting alms in public spaces, reflects structural vulnerability, rather than individual choice. This study examines the conditions and challenges faced by beggars in India through an analysis of national census records and six purposively selected qualitative case studies. Utilizing a mixed-methods, retroductive approach, the census data identify demographic and geographic clusters with elevated prevalence, while in-depth narratives elucidate household-level processes—such as sudden livelihood loss, chronic ill health and disability, limited educational attainment, and exclusion from formal labor markets—that lead to reliance on alms. The findings indicate that poverty, job loss, health insecurities, and inadequate social protection are the principal drivers, and that begging often functions as an adaptive survival strategy when viable alternatives are lacking. Weak family support, disrupted household structures, and constrained community networks further exacerbate vulnerability, and adult–child economic interdependence often integrates children into household coping strategies rather than reflecting isolated exploitation. By mapping qualitative mechanisms onto census distributions, this study demonstrates how individual actions emerge from pervasive systemic constraints. The study concludes that beggary in India is primarily shaped by structural poverty and policy failures and calls for integrated responses focused on labor inclusion, disability support, accessible education, and strengthened social safety nets to reduce the reliance on alms.

Keywords: Beggary, Poverty, Public Spaces, Structural.

Introduction

Begging is an act of asking for money/food/clothing, or other fundamental necessities for survival, and is a very common phenomenon in developing countries. India is home to more than 4 lakh beggars, reflecting the sad reality of widespread poverty and deprivation in the country (1). In India, the issue of begging extends beyond socio-economic factors and is deeply embedded in cultural and historical contexts. Religious customs have played a significant role in perpetuating this practice, as giving alms to beggars is often viewed as a means to earn divine favour (2). As a result, begging has become a normalized aspect of society rather than being tackled through effective welfare programs. Ironically, this religious viewpoint has delayed the establishment of adequate state support systems. The Yuga theory teaches that charity *(daan)* is considered the highest virtue in the current *Kali Yuga*. At the same time, the Varna system once laid down rules for both offering *daan* and accepting *bhiksha*. Buddhism and Jainism also recognized *bhiksha* as a way for monks and ascetics to live, depending on the goodwill of others. In Islam, *Zakat*, the act of giving to those in need, is a key pillar of faith, practiced with special devotion during Ramzan. Sikhism, however, took a different stand by rejecting begging, calling it a harmful form of dependence and instead encouraging dignity through honest work and collective service like *langar* (3). However, Contemporary Indian policy, beginning with the Beggar Act of 1959, predominantly addresses beggary as a law-and-order issue rather than tackling its underlying structural causes (4). Beggary arises from a complex web of interconnected structural factors. The primary causes include: the decline of agriculture and the migration from rural to urban areas, which leave workers without stable employment; disability and chronic illness without institutional support—affecting those with physical impairments, mobility limitations, or age-related vulnerabilities—who are left without access to care systems; family breakdown or the loss of primary earners due to widowhood, divorce, or death; and systemic unemployment and insufficient welfare coverage. These issues are not individual failures but rather structural vulnerabilities where legal avenues to a dignified livelihood are obstructed (5). Beyond these

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material causes beggary also reproduces itself through various organised social networks such as various gangs teach new people when and where to beg, sometimes intentionally hurt children's so their body part doesn't work and also trade them and whatever the amount is collected they distribute among themselves. Begging has become an organised system that is intergenerational rather than being just a result of a failure of an individual (5). How society sees city puts an effect on the policies. The life on the streets is often portrayed as full of filth, unhygienic and dangerous due to which people are excluded instead of taking strong welfare steps (6). However, streets are political and economic space where poor people sustain and sometime resist. Understanding this means policies should work together to provide jobs for the displaced workers, medical and institutional care like providing homes for incurable people and protect children from exploitative networks (5, 6).

From sociological perspective issue of beggary can also be understood through Merton's Structural Strain theory and Marx's Conflict theory. With respect to Merton's theory, when individuals are unable to attain accepted goals with the available and legal means, they can search for alternative means to survive. For begging, the accepted goal is a dignified basic livelihood. For various reasons like poverty, disability, unemployment, and illiteracy, many individuals are not able to avail the legal means to attain it. Begging then becomes a means of survival rather than a voluntary choice. This means that the problem is not one of personal weakness but of the inadequacies of social and economic structures to provide equal opportunity (7).

Conflict theory describes how the unequal distribution of power and resources in society results in marginalized groups. The fact that begging exists in public is evidence of these profound inequalities, where individuals are pressured to exist on the periphery without protection or assistance (8). Both views highlight that begging is a consequence of structural collapse rather than individual issue.

In India, educational deprivation among women creates a cascading mechanism that systematically drives vulnerable populations to beg. Female literacy gaps, particularly in rural north India, prevent women from developing marketable skills, restricting their access to formal employment and quality informal sector work. Without education, women are confined to the most precarious positions—informal work characterized by wage discrimination (with women earning 30-50% less than men for similar work), lack of contracts, and no social protection (9). These positions are inherently unstable; when informal employment collapses due to economic downturns, health crises, or family disruption, uneducated women face critical vulnerability as they possess no alternative livelihood options. Research on female beggars reveals that 92.5% possess minimal or no formal education, a direct consequence of educational deprivation eliminating employment alternatives (10).

The National Education Policy 2020 recognizes this pathway through initiatives such as a Gender Inclusion Fund, scholarships, bicycles, and hostels—interventions designed to break the education-to-employment-to-survival-begging chain. Thus, educational deprivation operates not merely as a statistical disadvantage but as a systemic mechanism that closes employment pathways and, in the absence of alternative livelihoods, compels vulnerable women toward begging as a final survival strategy.

The urgent issue of child begging in India is delved into by the study, which presents a case study of 50 children in urban public places. It is revealed through field observations and structured interviews that most child beggars [aged 6–14] come from migrant or nomadic families. Approximately 70% are found to beg within family networks, while 30% are coerced or trafficked. The pressing need for integrated child protection frameworks is underscored by the study, linking rehabilitation with migration, education, labour policies, and stronger inter-agency coordination to dismantle exploitation networks (11).

Begging as a socioeconomic and cultural phenomenon in India is examined by the study. Secondary data and field observations are used to identify the root causes of systemic poverty, unemployment, migration, and disability. A distinction is made between involuntary, professional, and occasional beggars. Legal frameworks like the Bombay Prevention of Begging Act are critiqued for criminalizing beggars while failing to provide rehabilitation. It is argued by the authors that stigma and exclusion are

reinforced by current policies. A recommendation is made to shift from punitive models to welfare-centric approaches, with community-based rehabilitation, vocational training, and livelihood support being proposed to address structural inequalities (12).

The criminalization of begging in India is critiqued by a doctrinal legal study, with the argument made that Article 21 of the Constitution is contradicted. The Bombay Prevention of Begging Act is analysed, and the 2018 Delhi High Court judgment is referenced to show that the poor, homeless, and disabled are disproportionately targeted by these laws. The failure to differentiate between voluntary and coerced beggars is highlighted, resulting in rights violations under Articles 14 and 21. Nationwide decriminalization and rights-based legal reform focused on dignity, inclusion, and structural support, such as skill-building and welfare access, are called for by the study, offering a hopeful vision for the future (13).

The major socio-economic reasons behind begging in Aligarh, Uttar Pradesh, are highlighted by the study. Poverty (44.8%) is identified as the primary reason, followed by caste-based hereditary practices (29%) and illiteracy (8.3%). Biological vulnerabilities such as disease (6.6%), old age (3.2%), handicaps (2.3%), and orphanhood (2.9%) are also included as factors. It is pointed out by the authors that most beggars are pushed towards this profession solely by poverty, which escalates systemic failures like unemployment and lack of access to basic needs (food, clothing, shelter). As of 2001, the population of Aligarh was recorded as 2.99 million. The density of the urban population was reported to be around 5949 persons per km^2, while the rural population density was around 607 persons per km^2, showing high urban-rural disparities. The overall literacy rate was reported as 58.5%, with 71.7% males and 43% females being literate. Block-level data highlights that in the Tappal region of Aligarh, 73.8% of begging is attributed to poverty, whereas in the Gangiri block, 44.5% is attributed to caste-based inheritance. Employment (20.3%), electricity (16.4%), water (15.8%), sanitation (15.7%), housing (10.3%), and BPL cards (10%) are proposed as solutions by beggars. Comprehensive support was demanded by 12.7% of urban beggars, while employment was prioritized by 22.1% of rural beggars over other needs. In the Tappal region, 46.5% of beggars demanded jobs, and in the Lodha region, 23.3% required holistic aid. From all the data, poverty is identified as the core driver of begging. It was found by the study that almost half of the beggars in Aligarh district are forced into begging due to extreme poverty, with caste and illiteracy further reinforcing this condition. Targeted interventions such as employment generation through vocational training and agro-industry development, provision of shelters and proper sanitation, financial support through pensions and distribution of BPL cards for subsidized food access, and collaboration between various NGOs and state agencies for proper counselling are recommended by the authors. Addressing systemic inequities to uplift this marginalized population is stressed by the authors (14).

Child begging is identified as a socio-economic crisis caused by systemic poverty, rural unemployment, and exploitation by criminal syndicates. It is reported that around 3 lakh children, who are often kidnapped or maimed, are forced to beg, turning this into a multimillion-rupee industry. The root causes are attributed to rural-urban migration, where many people migrate in search of better job opportunities but fail to find employment, inadequate urban employment absorption, and the social norm of almsgiving, which is perceived as a social or religious duty, thereby increasing begging practices. Existing beggary laws, such as the Bombay Prevention Act (1959), are criticized for criminalizing poverty rather than addressing structural inequalities. Various government schemes like universal education, mid-day meals, and MNREGA (Mahatma Gandhi National Rural Employment Guarantee Act) are aimed at reducing poverty but are hindered by poor on-ground implementation. Legislative measures like the Juvenile Act 2000 and IPC (Indian Penal Code) section 363A penalize the exploitation of children, but weak enforcement is observed. The crucial role played by NGOs and civil societies in rescue and rehabilitation is acknowledged, though challenges persist due to a lack of rehabilitation infrastructure and public apathy. Beggary is viewed as a form of social exclusion that has been exacerbated by urbanization, unplanned development, and marketization. Data from the Census (1971-2004) and NHRC (National Human Rights Commission) reports are cited to highlight urban destitution,

with 40% of people living below the poverty line. Recommendations include strict enforcement of laws, community-driven interventions such as self-help groups and anti-human trafficking groups, public awareness campaigns to limit almsgiving, and accessible education. The failure of the state to protect children's rights is emphasized, and a multi-sectoral approach integrating policy, civil society, and socio-economic reforms is advocated to dismantle exploitative networks and rehabilitate victims (15).

Urban begging as a socio-legal issue is examined using secondary data. It is found by the study that begging has increased in cities like Delhi and Mumbai, particularly near temples, tourist sites, and traffic junctions. Beggars are categorized as involuntary, exploited children and the mentally ill. Rural poverty, migration, and disasters are identified as causes. Laws like the Bombay Prevention of Begging Act are critiqued for criminalizing people with low incomes while systemic issues are overlooked. Decriminalization and comprehensive reforms, including shelters, vocational training, mental healthcare, and a national action plan integrating legal and welfare frameworks, are called for by the study, with emphasis placed on the crucial role of the audience in these reforms (16).

Anti-begging laws in India are critiqued through a legal-sociological lens by the study; with the argument made that Articles 14, 19, and 21 of the Constitution are violated. Judicial decisions and human rights literature are drawn upon to reveal that beggars—often disabled, transgender, or displaced individuals—are marginalized by exclusionary state actions such as raids and detentions. Access to welfare schemes like Aadhaar and housing is lacking for many. A shift from punitive responses to inclusive urban governance, including decriminalization, community-based shelters, and participatory policy-making to uphold dignity and social justice, is advocated by the study (17).

The study seeks to examine the socio-economic and personal circumstances that lead individuals into begging, and to analyse the influence of social factors such as family support, peer influence, and community networks in shaping begging practices. Further, it aims to explore beggars' perceptions of their current livelihood activity and to assess their levels of satisfaction with this means of subsistence.

Methodology

This study adopts a mixed-methods approach, integrating quantitative census analysis with comprehensive qualitative case studies. Integration occurs during the analysis phase: census data elucidate structural patterns and inform the selection of cases for study, while narratives from case studies uncover mechanisms that are subsequently validated against census distributions. The objective was to elucidate population-level patterns by tracing the individual-level processes that give rise to them.

We analyzed census records pertaining to begging to identify the most affected demographics and geographic locations. The key variables examined included age, gender, disability status, household structure, and place of residence. The census analysis served two primary functions: it identified structural patterns and demographic clusters that informed the selection of qualitative cases, and it provided a benchmark to assess whether the mechanisms observed in case narratives could account for the observed prevalence differences across groups.

Six purposively selected case studies were conducted in Aligarh district, Uttar Pradesh encompassing both adult and child beggars. The focus is on family based economic interdependence and structural vulnerabilities such as disability, poverty, loss of employment, and family disruption. This emphasis contrasts with studies that treat child begging as independent exploitation; here, children may participate as part of household survival strategies for their parents.

This study employed stratified purposive sampling and utilized census data to select cases. Five criteria were established to ensure diversity: age [13–60 years], gender (three men, three women), disability status (physical or mental conditions and none), economic circumstances (job loss, long-term unemployment, widowhood, and retirement poverty), and family structure (single, widow-headed, and adult–child partnership). Although community contacts facilitated participant identification, selection was based on specific criteria rather than convenience. The sample of six cases prioritizes depth over the representativeness. The objective was to

comprehend the causes and processes rather than quantify their prevalence. These cases illustrate how broader conditions influence individual choices and family strategies. The findings are contextually explanatory and sensitive rather than statistically generalizable.

The analysis employed a methodological approach known as reproductive logic, which begins with observable phenomena, examines the broader context, and ultimately identifies the underlying causes of these events. This process comprises three stages: describing observable phenomena, such as increased begging among disabled individuals, the elderly, and households experiencing disruption; explain the broader context, including factors such as job exclusion, inadequate social security, loss of familial support, and prevailing cultural norms; and determining the connections between the broader context and the observed events. Integration occurs through three mechanisms: selecting cases (utilizing census data to identify samples), testing causal relationships (verifying case causes against census data), and final synthesis (combining data and narratives to illustrate the interplay of context, cause and outcome). This method substantiates claims using both quantitative data and qualitative narratives.

Data analysis combined quantitative census examination with qualitative thematic analyses. Census records were analyzed using cross-tabulations and percentage distributions across age, gender, disability status, household structure, and location to identify demographic and spatial patterns to guide case selection. Qualitative interviews and field notes were transcribed verbatim and analyzed through staged thematic coding (open, axial, and selective), supported by a refined codebook, and analytic memos. The themes and processual mechanisms identified in case studies were compared with census patterns using joint displays and process tracing to assess whether micro-level explanations plausibly account for population-level distributions.

Confidentiality was preserved by substituting real names with pseudonyms and anonymizing specific locations and employer details while maintaining analytical integrity.

Limitations of the Study

However, certain limitations must be acknowledged: the small number of case studies restricts representativeness, convenience sampling reduces generalisability, and census data may not fully capture the hidden or mobile beggar population. Despite these constraints, the combination of census data and case studies provides a balanced and meaningful understanding of the complexities of beggary.

Results and Discussion

Census-Based Analysis

Table 1 presents the state-wise distribution of beggary in India by gender (male and female) based on Census data**:**

Table 1: State-wise Distribution of Beggary in India by Gender (1)

India/State/UT	Beggars, Vagrants etc.		
	Persons	Males	Females
JAMMU and KASHMIR	4134	2550	1584
HIMACHAL PRADESH	809	504	305
PUNJAB	7939	5197	2742
CHANDIGARH	121	87	34
UTTARAKHAND	3320	2374	946
HARYANA	8682	6504	2178
NCT OF DELHI	2187	1343	844
RAJASTHAN	25853	15271	10582
UTTAR PRADESH	65835	41859	23976
BIHAR	29723	14842	14881
SIKKIM	68	46	22
ARUNACHAL PRADESH	114	59	55
NAGALAND	124	65	59
MANIPUR	263	117	146
MIZORAM	53	33	20
TRIPURA	1490	607	883
MEGHALAYA	396	172	224
ASSAM	22116	7269	14847
WEST BENGAL	81244	33086	48158
JHARKHAND	10819	5522	5297
ODISHA	17965	9981	7984
CHHATTISGARH	10198	4995	5203
MADHYA PRADESH	28695	17506	11189

GUJARAT	13445	8549	4896
DAMAN and DIU	22	15	7
DADRA and NAGAR HAVELI	19	7	12
MAHARASHTRA	24307	14020	10287
ANDHRA PRADESH	30218	16264	13954
KARNATAKA	12270	6436	5834
GOA	247	131	116
LAKSHADWEEP	2	0	2
KERALA	4023	2397	1626
TAMIL NADU	6814	3789	3025
PUDUCHERRY	99	54	45
A and N ISLANDS	56	22	34
INDIA	4,13,670	2,21,673	1,91,997

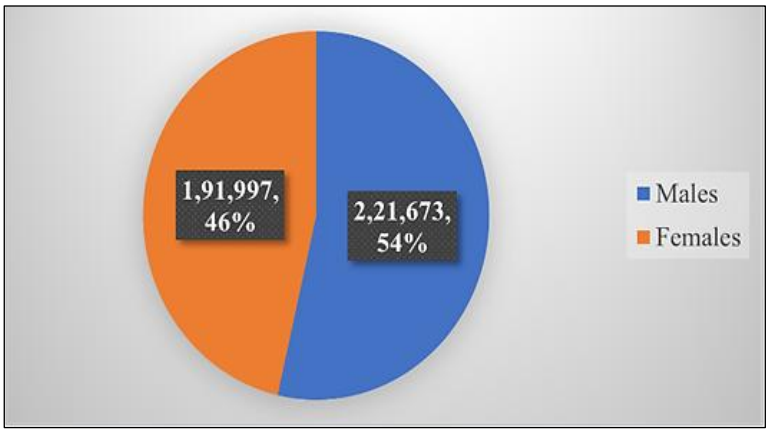

Figure 1: Number and Percentage of Male and Female Beggars in India (1)

Figure 1 presents the number and percentage distribution of male and female beggars in India, based on census data: The data has been taken from the Press Information Bureau, Government of India (2021), which provides a tabulated summary compiled by the Office of the Registrar General and Census Commissioner, India (2011). It identifies the number of beggars, vagrants, and individuals from related categories across various states and union territories, along with the overall total for India. It includes 36 entries, which are disaggregated according to gender. At the National level, 413670 individuals are recorded, of whom 221673 are males and 191997 are females (1).

In various states and UTs (Union Territories), Jammu and Kashmir reported 4134 beggars, which include 2550 males and 1584 females. Himachal Pradesh accounted for 809 individuals, of whom 504 were males and the rest 305 were females. In Punjab, there were 7939 persons, of which 5197 were males and 2742 were females. Chandigarh reported 121 beggars, 87 males and 34 females. Uttarakhand reported 3320 individuals, which include 2374 males and 946 females. Haryana reported 8682 beggars, 6504 males, and 2178 females.

In the National Capital of Delhi, there were 2187 persons, out of which 1343 were males and 844 were females. Rajasthan reported 25853 individuals, which include 15271 males and 10582 females. Uttar Pradesh accounted for 65835 individuals, of whom 41859 were males and the rest 23976 were females. In Bihar, there were 29723 persons, of which 14842 were males and 14881 were females. Sikkim reported 68 beggars, 46 males and 22 females. Arunachal Pradesh reported 114 beggars, 59 males and 55 females. Nagaland reported 124 beggars, 65 males and 59 females. Manipur reported 263 beggars, 117 males and 146 females. Mizoram reported 53 beggars, 33 males and 20 females. Tripura accounted for 1490 individuals, of whom 607 were males and the rest 883 were females. Meghalaya reported 396 beggars, 172 males and 224 females. Assam reported 22116 beggars, 7269 males, and 14847 females.

In West Bengal, there were 81244 persons, of which 33086 were males and 48158 were females. Jharkhand accounted for 10819 individuals, of whom 5522 were males and the rest 5297 were females. Odisha reported 17965 beggars, 9981 males, and 7984 females. Chhattisgarh accounted for 10198 individuals, of whom 4995 were males and the rest 5203 were females. Odisha reported 17965 beggars, 9981 males, and 7984 females. Madhya Pradesh reported 28695 beggars, 17506

males, and 11189 females. Gujarat reported 13445 beggars, 8549 males, and 4896 females. Daman and Diu reported 22 beggars, 15 males and 7 females. Dadra and Nagar Haveli reported 19 beggars, 7 males and 12 females. Maharashtra accounted for 24307 individuals, of whom 14020 were males and the rest 10287 were females.

In Andhra Pradesh, there were 30218 persons, out of which 16264 were males and 13954 were females. Karnataka reported 12270 beggars, 6436 males, and 5834 females. Goa reported 247 beggars, 131 males and 116 females. Lakshadweep reported 2 beggars, 0 males and 2 females. In Kerala, there were 4023 persons, out of which 2397 were males and 1626 were females. Tamil Nadu reported 6814 beggars, 3789 males, and 3025 females. Puducherry reported 99 beggars, 54 males and 45 females, and the Andaman and Nicobar Islands reported 56 beggars, 22 males and 34 females. The data sheet showed that West Bengal has the highest number of beggars and Lakshadweep has the lowest. Males constitute 53.59% of the total population, whereas females make up 46.41% (1).

Case Studies

The method of exploring and analyzing the life of a social unit: be it a person, a family, an institution or a community is known as case study method (18).

Case Study I: Rehana (name changed) is a 55 years old widow with no formal schooling who supports a household that includes herself and four unmarried daughters. Her household situation changed sharply after the death of her husband, who worked as an e-rickshaw driver and was the primary source of income. Two older daughters live separately in Hathras and are married. The four unmarried daughters work at a local lock factory, but their wages are insufficient to meet the family's needs. Faced with losing the primary earner and the insufficiency of the daughter's earnings, Rehana began to beg as a way to deal with her problems. She began begging on her own rather than being persuaded by others. She chooses a busy foot traffic spot near Shah Jamal Gosht Wali Gali. Her choice of location is influenced by familiarity with the neighborhood and where she expects more daily passersby. Rehana operates alone and does not involve her children in begging. Information states that her earnings are not sufficient for family survival. She reports low satisfaction with begging because it is driven by necessity, not choice. Rehana says she would stop begging if a viable alternative livelihood were available. For health needs, she uses local public clinics or a charity dispensary.

Analysis: This case illustrates how the sudden loss of a household breadwinner can push an adult woman with low formal education into visible survival strategies that carry stigma and low returns. Female migrants usually work in informal sectors, which lack formal contracts and social benefits, which enhances their vulnerabilities. The case also shows the role of existing local knowledge of safe public spaces in shaping where begging occurs. The choices Rehana makes are based on her immediate needs and the limited options available for women with low education and dependent family members. From a structural strain perspective, Rehana's entry into begging reflects the pressure created by the loss of the household breadwinner and the absence of viable livelihood alternatives for low-educated women. This strain is sustained by gendered labor market exclusion and weak social protection, indicating broader structural inequalities that limit women's access to stable income.

Case Study II: Imtiyaz (name changed) is a 45 years old man with schooling up to class five and lives with his two daughters and his spouse, making a household of three. He worked as a rickshaw driver until a leg impairment reduced his capacity to work, and his rickshaw was subsequently stolen. The loss of the vehicle, together with the disability, removed his primary livelihood. In addition to these material shocks, Imtiyaz faces social and financial pressures such as the need to fund his daughter's marriage and the extra costs caused by a drinking habit. After these combined shocks, he began begging, a choice that was encouraged by peers among other disabled beggars. He begs six to seven days a week, working mainly in the morning and late evening to avoid the midday heat. He typically positions himself at a busy junction in Jeevangarh a location where people passing by are more sympathetic and likely to support him. Imtiyaz works alone. He does not provide exact figures for his daily income and notes that his earnings are barely reliable for family survival. He reports low to medium satisfaction with begging as an income source. He values the income as better than nothing but finds the work stigmatizing and insecure. He expresses

willingness to stop begging if an alternative livelihood were made available. For health care, he goes to the local doctor in Jeevangarh.

Analysis: The Imtiyaz case highlights how combined health shocks and asset loss can lead into chronic vulnerability and social stigmatization. It also shows the role of peer networks among disabled beggars in shaping entry into begging and the specific temporal strategies used to survive in hot climates. Imtiyaz's shift to begging illustrates structural strain arising from disability, asset loss, and unmet family obligations. The lack of institutional support for disabled informal workers reflects underlying inequalities in access to welfare and secure employment, reinforcing chronic vulnerability rather than enabling recovery (19).

Case Study III: Sajjad (name changed) is a 42 years old man with schooling up to class eight and lives in a household of six, including his wife, three daughters, and one son. He works time to time as a private car or school van driver when such work is available. When driving jobs are absent, he uses begging as a fallback to smooth household income. This means that begging is not his primary occupation but rather a practical strategy to reduce gaps in earnings. He begs two to three days a week, mainly midday and early afternoon. He typically positions himself outside schools and temples where charitable giving is higher. Sajjad operates alone and does not involve his children in begging. He does not specify his average daily income from begging or driving. The case notes that begging partially covers income gaps and helps to prevent large shortfalls in household consumption. Sajjad reports medium satisfaction with this arrangement because it provides needed cash when driving work is absent, but remains insecure and stigmatizing. He says he would quit begging if offered a stable alternative to replace the irregular earnings of driving and begging combined. He uses a private clinic for health care, which he pays for from irregular driving income.

Analysis: Sajjad's situation illustrates a pattern where informal and formal income sources are combined to manage risk. It also shows how individuals with slightly higher education and some assets or skills may still resort to begging as part of a diversified livelihood strategy. The case points to the importance of reliable irregular work and access to stable employment as potential routes out of begging (20). Sajjad's use of begging as a supplementary income source reflects strain caused by irregular employment and unstable earnings. While he retains partial labor market access, employment insecurity and the absence of income protection push him toward stigmatized coping strategies common among precarious workers.

Case Study IV: Jugnu (name changed) is a 60 years old man with no formal schooling and lives alone. He lost one leg and has been begging for several years since the amputation. He has no pension and receives no family support. He was introduced to begging by a community of disabled beggars and now begs seven days a week. He works primarily in the evening and at night to take advantage of religious gatherings and evening foot traffic. He selects locations near shops and mosques in Ahmad Nagar where donations are more likely. Jugnu operates alone rather than as part of a group. Since he has no dependents, the question of family survival does not directly apply, but he reports low satisfaction with begging because he experiences loss of dignity. He also states that he would accept an alternative livelihood if available. For health care, he attends Deen Dayal Hospital.

Analysis: This case highlights how permanent physical disability, combined with the absence of social support and formal safety nets, can produce long-term dependence on begging. It also shows the role of peer introduction in shaping occupational trajectories (21). For Jugnu, begging is a daily routine that follows certain times and places, linked to local religious and market activities. The case underscores the limits of current public provision for disabled adults who are not in formal welfare programmes. Jugnu's long-term dependence on begging reflects extreme structural strain following permanent disability and social isolation. The absence of pensions or inclusive welfare mechanisms highlights systemic neglect of non-working disabled adults, resulting in sustained exclusion from dignified livelihood options (22).

Case Study V: Shaila (name changed) is a mentally ill 37 years old female with no formal schooling and lives alone. She originates from a village in Aligarh and appears to have mental health issues. She lacks a care giver and does not have local kin to support her. Rather than being persuaded by others, she began begging as a survival response. She moves

between high footfall markets in the city center and tends to beg five to six days a week. She often spends days wandering between bazaars and begging at different stalls and junctions. Shaila beg alone. She reports low satisfaction with begging and is confused about alternatives. She is uncertain whether she would stop begging even if an alternative were offered because the transition would require sustained and structured support beyond a single livelihood offer.

Analysis: Shaila's case shows the interaction of mental health problems, lack of social support, and urban mobility in producing sustained street-based begging. It also highlights that simply offering a short-term job may be insufficient for persons with mental health needs who require ongoing therapeutic and social support to change occupational patterns. The case points to the need for integrated responses that combine mental health services, social care, and livelihood support (23). Shaila's continued begging demonstrates severe structural strain produced by mental illness, lack of caregiving, and social isolation. The case reveals how institutional gaps in mental health and social care disproportionately marginalize vulnerable individuals, making survival-based street activities difficult to exit without sustained support (24).

Case Study VI: Munna (name changed) is a boy of about 13 years who is not attending school. He belongs to an extended family that practices begging and has been involved in begging since early childhood. Parents and elder siblings encourage him and treat begging as a normalized family occupation. He lives in Shamshad Market and begs seven days a week from morning to evening. He takes breaks to play and to use student's phones. Munna works in a small sibling group and prefers tourist spots and school gates where students and visitors give treats or money. The family pools small earnings, so the pooled amount is insufficient for household survival. Munna reports high satisfaction with his routine. He values friendship, the social rewards, and small material benefits such as phones and cigarettes. He is unlikely to quit unless schooling and appealing livelihood alternatives are provided. He uses a local street vendor clinic for minor illness that offers informal care.

Analysis: Munna's case illustrates how family socialization and peer networks can normalize child begging and create intrinsic incentives for children to remain in this work. It also shows that economic measures alone may not keep children from begging if alternatives are not perceived as attractive. Any intervention for boys like Munna must combine accessible schooling, social incentives, and livelihoods that match the social rewards the child currently receives (25). Munna's involvement in begging reflects early socialization under structural strain, where poverty and exclusion from schooling normalize begging as a livelihood (24). The reproduction of this practice across generation's points to deeper inequalities in access to education and child protection, limiting pathways out of marginality (26).

Conclusion

The study shows that the socio-economic and personal circumstances pushing people into begging are deeply linked to poverty, sudden loss of income, disability, and lack of education. For many, such as widows, the disabled, or those without steady work, begging emerges not as a chosen path but as a way to manage problems when other options collapse. This highlights that begging is more a survival strategy than an occupation of preference. Social factors also play a significant role in shaping begging practices. Some individuals, like Rehana, rely mainly on personal circumstances and their own decisions, while others, like Imtiyaz and Jugnu, enter begging through peer groups of disabled individuals. In child beggars like Munna, family and community networks normalize begging as a household occupation, passing it down across generations. This underlines the powerful influence of family support systems, peer encouragement, and community practices in determining how, where, and when individuals beg. In terms of perceptions and satisfaction, the majority of beggars in the study express dissatisfaction with their livelihood, seeing it as degrading and insecure. However, satisfaction levels vary depending on age, socialization, and alternatives available. Adults like Rehana and Imtiyaz are clear that they would leave begging if stable work or support were offered. In contrast, children like Munna report high satisfaction because of peer camaraderie and small social rewards. This shows that while most beggars remain in the occupation due to necessity, their personal experiences and views differ. Overall, the

study concludes that begging in India is not only about individual choices but shaped by structural poverty, health vulnerabilities, social networks, and lack of alternatives. Sustainable rehabilitation requires livelihood opportunities, social security, and targeted interventions that address the specific needs of different groups. The findings from Aligarh have the potential to inform broader policy discussions on begging by identifying practical and realistic intervention points. The cases indicate that begging often commences following sudden income loss, disability, or health shocks, underscoring the necessity of timely social protection measures such as emergency cash support, disability pensions, and widow assistance. Furthermore, the findings suggest that livelihood programs should be integrated with healthcare, mental health services, and social support, as short-term employment opportunities are frequently inadequate. The emergence of child begging through familial and peer influence highlights the need for a comprehensive approach that addresses education, safe activities and parental support. Additionally, peer networks can be leveraged for outreach and rehabilitation efforts. Although the study is context-specific and based on a limited number of cases, the identified mechanisms can inform pilot programs in similar districts and be evaluated at the state or national level using census data before broader implementation.

Abbreviations

IPC: Indian Penal Code, MNREGA: Mahatma Gandhi National Rural Employment Guarantee Act, NEP: National Education Policy, NGOs: Non-Governmental Organizations, NHRC: National Human Rights Commission, UTs: Union Territories.

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Author Contributions

All the authors have contributed equally to the research and preparation of the manuscript.

Conflict of Interest

The author(s) declare no conflict of interest.

Declaration of Artificial Intelligence (AI) Assistance

Grammarly was used to correct grammar during the writing process; no other generative AI or AI-assisted technologies were used.

Ethics Approval

All ethical guidelines were duly followed during the research process.

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