

The Impact of Institutionalization of Street children: A Case Study of Nairobi County.

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Abstract

The number of street children in Kenya keep on burgeoning day in out. This happens despite the fact that there are many programmes that have been put in place to curb the street children phenomenon. This initiatives have been constituted by the government, private. Nairobi is the capital city of the Republic of Kenya. Statistics have it that the population of street children in Nairobi alone is estimated at 500,000. This number keeps on burgeoning everyday (Shashi, 2005). Is it that the impact of the concerted effort is not effective at all? Or is it that the work of the organizations is only but partial? Why do children continue pouring into the streets despite the work of charity? There is a big problem, because every day you wake up, you encounter hundreds of street children moving and eking a living up and down the streets of Nairobi. This study found out that institutionalization used alone will not curb street children in Nairobi County. Institutionalization is only addressing the eruptions, the real volcano keep on boiling and producing more eruptions. The argument in this paper is for how long are we going to keep addressing the eruptions (street children) when the volcano continues to fuelled by the ingredients like poverty, diseases, and mushrooming slums? This paper explains why interventions in place to curb street children are not working in Kenya.

Key Words: Street Children, Institutionalization, Education, Rehabilitation, Pedagogy, Volcano.

1. Introduction

The street children phenomenon was first noticed in Nairobi in 1969. Since then the number has grown by leaps and bounds. This numbers rapidly plummeted especially during the recent years (Wako, 1995).

Onyancha (1999) observes that the accurate statistics for the number of street children in Kenya is difficult to establish. He logically asserts that this would entail a street census on a massive scale. This is because street children have no fixed place at which an enumerator can find them. They are constantly moving from one part of the town to another. Furthermore, some are joining and leaving rehabilitation centres or going back to their parents and there are also new arrivals on the street every day.

By 1989 Nairobi had the dubious distinction of hosting 3,600 street children. National figures provided by the Ministry of Home Affairs and National Heritage stood at 16,300, the same year. In 1989, the Attorney –General office initiated a study on street children to enable the government to respond to the problem more effectively. The study was done by a research team from the University of Nairobi through the regional office of the African Network for the Prevention and Protection against Child Abuse and Neglect (ANPPCAN). The study was completed in 1991 and what emerged from the study was that as many as 3million children could fall under the category/potential and actual street children in any given year. Those in the streets were estimated to be 300,000 children. In Nairobi alone, the number has increased from 3,600 in 1989 to 40,000 in 1995 and to 60,000 in 1997. This number obviously stand very high currently now because the push and pull factors of the street children phenomenon have increased tremendously. Recent approximate estimates puts the number to 500,000 street children in Nairobi alone. The current figure quoted for Mombasa is 50,000 for Kisumu 45,000 for Malindi and Kilifi 5,000 each and for Kitale and Nakuru 4,050 each. Nairobi's street children, therefore, outnumber by far all the street children in the rest of towns in the country. A study of four hundred street children in Nairobi in 1994 found that 90% were between 6-15 years of age, and about 10% were over 15'years (Shashi, 2005).

It is reportedly that street children live in peer groups, each group member earning money in a way that he or she is particularly adept. For example, the small children beg; the older ones collect and sell waste paper. At the end of the day, each member gives the money he or she earns to the group leader in exchange for protection, food, and drugs; the girls prepare the food. In this way, they create their own community. Their way of living is dangerous: they have to face many risks that can adversely influence normal growth and development they lack parental guidance and protection; they are exposed to violence and criminal activities, and their primary socialization is among peers. Another factor is the use of drugs to dull the hunger and misery. Many street children sniff glue that affects the brain and influences learning capacity. Lack of food and drinking the illegally



brewed alcohol "chang'aa," influence their growth and development (Aker et al, 1999).

But a very worrying trend is that despite the fact that there are more than 200 street children centres and also a number of initiatives have been constituted by the government, private and volunteers to curb this problem in Kenya, this problem keeps on growing up every now and then. Is it that the impact of the concerted effort is not effective at all? Or is it that the work of the organizations is only but partial? Why do children continue pouring into the streets despite the work of charity? There is a big problem, because every day you wake up, you encounter hundreds of street children moving and eking a living up and down the streets of Nairobi (Aker et al, 1999)

Goals included: to determine why there is increasing numbers of street children despite increasing street children's institutions; to determine the impact of institutionalizing street children; to assess the pedagogical approaches used to rehabilitate institutionalized street children; to examine the government policy with regard to the institutionalization of street children; and, to determine other programs aside from institutionalization that can be used to rehabilitate and educate street children.

Defining street children

The United Nations Children's Education Fund (UNICEF) defined three categories that relate essentially to the Third World: The first category consists of the children working on the street but living with their families. They are the so-called "candidates for the street." The second group are children on the street – "with inadequate and/or sporadic" support. The last category is of those children of the street - those who are "functionally without family support" (UNICEF, 2006)

It is conceivable to note that different perceptions of the concept of street children have been used by government and non - governmental organizations involved in the affairs of street children. The police, for instance, looking at the concept of street children from their own perspective, define street children as: Those who commit crime in the street; Those who are abandoned by their families and who have to work, beg, or steal; Those who attend day school on a shift basis and pass the rest of their time on the street and practice bad habits, including prostitution (Aker et al, 1999)

However in a recent UNICEF publication, it is concluded that the definition of street children is still a cause for concern and in the process of clarification. Research on street children by non - governmental organizations and UNICEF suggests that a comprehensive definition and categorization should include the extent to which conditions on the streets expose children to specific risks, such as abuse of dangerous substances, exploitative work, sexual exploitation, discrimination, mistreatment, and violence. Although there are several other definitions and descriptions for street children, they have the following in common: These children are trying to escape a hostile family environment—one characterized by violence, abuse, alcoholism, and alienation. They feel they can no longer trust society, and try to manage their lives and futures on their own.

The Push and Pull Factors

Urban poverty is the fundamental reason for why children take to the streets. Within the context of urban poverty, children are driven to the street by a multitude of factors that come from all domains of influence in a child's social environment. These factors are overlapping and synergistic, but operationally, can be classified into "push" and "pull" factors "Push" factors include those directly related to poverty and economic necessity, as well as family-level factors such as domestic violence, lack of parental guidance, large family size and family disintegration. "Pull" factors operate by attracting children to the streets who are "pushed" out of their homes due to economic, family or other reasons. These include income from working on the streets, peer influence, substance abuse, and the hope of a better life on the street (Tumaini, 2011).

The presence of children on the streets is attributed to the "push" factors such as poverty, war, drought, family dysfunction and the death of a parent as well as "pull" factors like following friends (peer influence), or believing that there were good things to discover on the streets. This literature found that one quarter of the full-time street girls and a tenth of the boys came from homeless families. It continues to shade light that "push" factors as the poor quality of family life (in terms of the provision of food, clothing, shelter and emotional support) were also vital (Tumaini, 2011).

Apparently, various factors contribute to the ultimate family type. The most crucial being the economic status and the will of the family to supersede the otherwise dependent environment. It is this that may explain the



presence of the families in the slums, who depend on equally meager sources of income but are able to retain their children in school and therefore curtail any intent at street life. These families, it is assumed, are able to feed their families and offer an emotional and psychological cushion to their children. Where alcoholism, commercial sex activities, negligence are rife children are bound to go to the streets (SNV, 2002).

Other push factors identified include the use of corporal punishment, occasional escapades to the streets, truancy from school and idleness due to lack of schooling. They pointed out that the strongest pull factors were peer influence and the use of drugs. Also the promise of freedom offered by the streets and the continued availability of basic provisions apparently act as significant pull factors in the case of boys. Similarly, the influence of friends emerges as the most critical factor pulling girls to the streets. They quote that "The Hearing on Street Children in Kenya" talk of poverty, family breakdown, child abuse (particularly of girls), domestic violence, lack of communication at home and in school, and problems relating to shelter and the environment as direct reasons for the street children phenomenon. To this list may be added the issues of parental negligence, rejection and abandonment. This review also notes that an increasingly significant factor contributing to streetism is orphanhood caused by the HIV/AIDS pandemic (Wako, 1999).

Institutionalization

Article 40 of the CRC(Convention on the Rights of the Child) specifies that State Parties must offer 'a variety of dispositions, such as care, guidance and supervision orders, counseling and foster care' as alternatives to institutional care to ensure that children are dealt with 'in a manner appropriate to their offence.' Unfortunately, the Children's Services Department of the Kenyan government spend roughly two-thirds of their entire budget on institutions such as approved schools, borstals and remand homes, leaving scant manpower or resources for community social work or the development of other alternatives to these correctional facilities. The end result is that the vast majority of children in conflict with the law are sentenced to periods of custody within these institutions, giving the impression that Kenya has a significant problem of juvenile crime, when in fact court convictions specify as few as 15% of children actually having committed a criminal offence. The government institutionalized supportive programmes are for delinquent juveniles and youngsters of ages 6-18 years. Although the programmes were not initially set up for street children, their delinquent nature has made them the programme's main beneficiaries. The programme is organized into two types of institutions: Approved schools and juvenile remand homes (CRADLE, 2004).

There are over 300 NGOs running supportive and/or preventive programmes for over 500,000 actual and potential street children through provision of fostering, rehabilitation and training services. The supportive programmes are institution-based while preventive ones are family (community) - based. These institutions keep growing every year. The study observes that both donors and civil society organizations have shown considerable interest in child rights, child protection issues and children in conflict with the law, and it would appear that there is adequate funding available to make significant change. However, interventions continue to be somewhat small and 'one-off', with little emphasis on large-scale coordinated approaches. This may explain why, in their study of street children in Nairobi in 2002, SNV Kenya and GTZ discovered that only half of the children they interviewed had some knowledge about various organizations that offer services to street children, and none were aware of any organization working on the issue of juvenile justice. This would suggest that NGOs still have some way to go before they become recognized actors within the juvenile justice system, at least in the eyes of children (SNV, 2002)

2. Methodology

Sample size and sampling technique

The sample size was 105 street children institutions. These institutions were randomly sampled. Statistics have it that the whole of Nairobi area has got close to four 300 street children institutions (population). To get the sample we randomly picked the 105 institutions from the street children centre directory.

The study sample was purposively drawn on the basis that the institutions are rehabilitating street children; hence other children centers were be excluded from the sample. This was because they were not be informative; hence they were not the concern of the study.

The managers or the persons running these institutions were the targeted for interview. They also filled a questionnaire. The other staffs were excluded from the study because they do not possess the right information



that was needed by this study. The director of National Council Children's Services (NCCS) was also interviewed on issues relating to institutionalization of juvenile delinquents and street children concerns.

Data Collection Procedures

The respondents filled in individual questionnaire. The questionnaires had both open – ended and closed – ended questions. The use of both types of the questions was aimed at balancing the demerits of both forms when used alone; as closed – ended questions limit the respondent to the researcher's options, while open – ended questions allow for detailed information (Mugenda, 1999). In every institution that was visited, at least the person running and managing the institution was required to answer the questionnaire.

The managers and staff of these institutions were interviewed on the effectiveness of the approaches their organizations are employing. Also interviewed was the government official who has been given the mandate of children affairs on the government children policy. He shade light into the study on the government plan so far about street children and the government policy on children generally, especially institutionalization.

3. Results

The data elicited from the respondents was analyzed manually and presented using percentages, frequency tables, graphs and pie charts. The pie charts and graphs were constructed using excel. The study sample was one hundred and five institutions of street children in Nairobi. These organizations are spread across all constituencies of Nairobi: Starehe, Embakasi, Makadara, Dagoretti, Kasarani, Langata, Westland's.

The organizational Nature

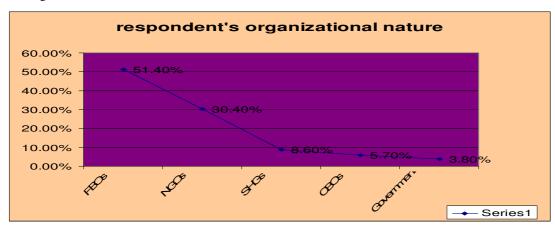


Figure 1: The Distribution of Respondents according to the nature of the organization

The study findings show that Faith Based Organizations lead among other stakeholders in the institutionalization of street children. 51.4% of the sampled institutions were FBOs. They were followed by the Non – governmental organizations, Self – Help Groups, Community – Based Organizations and government which scored 30.4%, 8.6%, 5.7% and 3.8% respectively. It is evident from this findings that the government plays a very minimal in curbing street children. The NGOs however play an important role.



The institutional Financial Resources

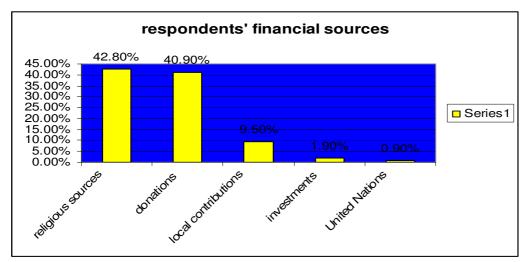


Figure 2: Distribution of Respondents according to the Sources of funding

The religious sector led with 42.8% among the financial sources that were used to run and manage the institutions. Other organizational sources of funding also featured prominently. The other financial sources were donations from well-wishers, local contributions, Government of Kenya, investment and UN which prevailed with 40.9%, 9.5%, 3.8%, 1.9%, and 0.9% consecutively

Sustainability of the sources of funding

On whether the financial sources that the institutions have guaranteed continuity and achievement of the projects' objectives annually, most of the respondents argued that the funds were usually not enough. This was represented by 94.3% of the respondents. Only a smaller 5.7% of the respondents felt that the money was usually enough to run their activities for that year.

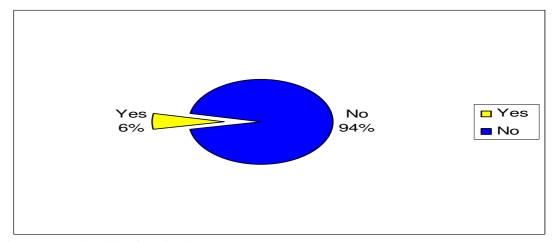


Figure 3: Sustainability of the funds

Budgetary allocations per annum

Concerning the costs of running projects, the financial range of Kshs. $1000\ 000-2000\ 000$ featured predominantly. It was represented by 41.9%. The range between Kshs. $0-100\ 000$ was the least with only 10.5% of the respondents. The other two ranges were Kshs. $100,\ 000-1000\ 000$ and Kshs. $2000\ 000$ and above which tied at 23.8% each.



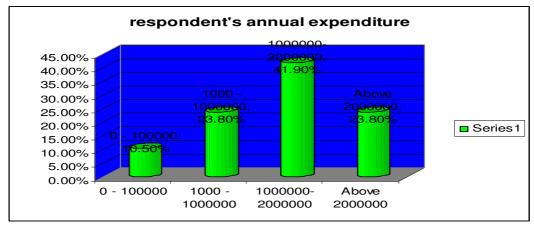


Figure 4: Annual project budgets

The fate of the institutionalized children in-case of financial problems

Most of the institutions represented by 92.5% cited that in - case of problems with the approximated budgets costs per annum they would do the following to the institutionalized children: Reintegrate the children back home. But these children ultimately find their way back to the street again, because the very problems that compelled them to the streets are still prevalent.

Because of unexpected financial downfalls some organizations remove the children from boarding schools and send them to day schools. This is aimed at reducing the expenses. Some of the respondents mentioned that they would get the parents to contribute towards the education and even rehabilitation of the children i.e. asks the parents to do the personal effects budget.

Only a small 7.5 percent of the organizations had contingent plans for the institutionalized children. These plans involved making appeals from time to time for donations of basic needs to friends and well wishers

Other institutions had emergency budgetary allocations that come in handy when the annual budgets default. These emergency budgetary allocations apparently are entrenched into the budgets when the projects are making yearly budgetary allocations usually at the beginning of the year

Effects of biting inflation on the annual budgetary allocations.

Inflation has been an evident phenomenon in Kenya in the past few years. This study also sought to ascertain the effects of inflation on the running and management of the institutions. It was evident that all of the institutions suffered from the biting and unexpected effects of inflation. They pointed out the following effects: Increased food prices, increased schools fees levels and increased cost of fuel for the motor vehicles. These increased rates of inflation subsequently impacts directly on the budgetary allocations that the organizations make per annum.

The respondents represented by 35% however gave the following reasons as to how they cushion themselves from biting inflation: Making appeal through friends of the institutions; Investments; Supplementary budgetary allocations; Change of food menus; Change of schools; Reduce levels of food, fuel, and stationery consumption; Use public means of transport rather than the institutional vehicles

The annual targeted number of institutionalized street children



Table 1: Distribution of respondent's annual number of institutionalized street children

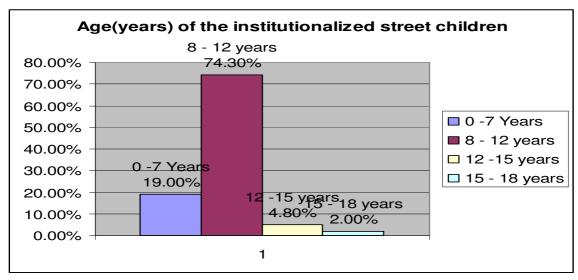
Number of children	Frequency	Percentage
0 – 50	70	67.0
50 – 100	20	19.0
100 – 200	10	9.5
Above 200	5	4.8
Total	105.00	100.00

Most of the institutions represented by 67.00% institutionalize admit between 0-50 street children annually. There were only few organizations represented by 4.8% that admitted more than 200 street children annually. The other organizations admit 50-100 and 100-200 street children scored 19.00% and 9.50% respectively.

The gender disparity

It was evident from this study that most of the children on the street were male street children. This was represented by the entire 100 percent of the respondents. They attributed the following factors to the reasons as to why the male gender was more prevalent on the street than the female gender: Fewer girls may be abandoned by their families. girls are often socialized to be submissive and caring and therefore they tend to have fewer behavioral problems; they have less conflict with their families and do not need to leave their families; families might get rid of girls by marrying them off when they are young as 13. The girl would then have another family; the authorities or individual member of the community may pick up girls on the street more quickly. For example, the one respondent cited that girls can be or may recruited to do domestic work is private households or to work in commercial sex industry; and the street girls may be less visible to researchers or educators. Some street girls suffer from harassment by police and welfare workers, employers and other street children and other may appear on the streets at night.

The age of the institutionalized street - based children



re 5: Age on institutionalized street children

Most of the institutions admit the 8-12 years age bracket. This bracket was therefore represented by 74.3% of all the respondents. The very least age bracket was that one of 15-18 which only scored 2%. The other two distributions were 0-7 years and 12-15 years which respectively scored 19% and 4.8%.



The largest score (8 - 12 years) was due the presumption that this children are more vulnerable and can be easily managed and tamed. Education as a tool of rehabilitation can also be applied on this group range. Older street children from the respondents' points of views are aggressive, overly hooked to drugs and expensive to rehabilitate. Also by removing these children, it acts as prevention for future generations of street children.

The institutional programmes/project objectives

The objective that was practiced by the most institutions was rehabilitation. Rehabilitation scored the highest 54.30%. It led the other objectives i.e. reintegration and street work which scored 22.00% and 19.00% respectively.

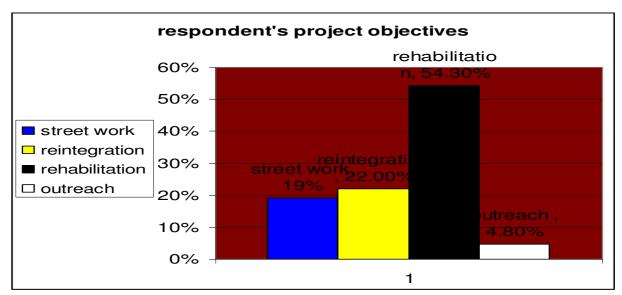


Figure 6: Project Objectives

The least activity undertaken by the institutions was outreach which only scored 4.8% of the total respondents' sampled. The study further sought to know the activities that social workers interviewed were involved in the activities are listed below:

a) Street work Activities

These activities are directed towards helping the children cope on the streets especially when the capacities of the centers are apparently full. 19% of the organizations that do street work highlighted a broad set of activities that they do on the streets of Nairobi. They social workers, street workers and educators pointed out the following activities:

- Medical care: medical camps and routine medical visits. It is presumed that street children are
 completely ostracized that even for them attending the mainstream hospital becomes a problem. Also
 for street children, survival forms the core of daily activities. So for them it is simply impossible for
 them to afford to be sick. On this effect then, street children rarely attend hospital in the event of illness.
 Street educators and workers therefore feel it right to take medical care to these children on the streets.
- Another street work activity is visits to the streets during the night. Respondents reported that they do this because it is hard usually to reach all children during the day because they are usually working to earn a living. Also for those who would want to conduct census, the night hour is the best because the children come to the bases to sleep during this period. On the same wavelength street worker also make visits to the streets during the day.
- Some institutions also donate basic needs support food, clothing and shelter on the streets. This intervention respondents confessed is meant to ease life for the street children on the street. So food is given to them on daily basis and clothes distributed to them as well.
- A street sport is a street work activity that is aimed at creating awareness about the street children



phenomenon. This activity goes hand in hand with street walks to raise awareness and fundraise. Also more importantly, respondents highlighted that during these activities, they take advantage of the numbers of street children present in this activities to educate them on effects of drug abuse and reproductive health.

• On advocacy of children's rights respondent's highlighted that it is through street work that they get to find or witness the plights of street children. These plights are then brought out to the world through research reports, documentaries and the media houses so that the government and the whole world are compelled to fight for the rights of the street children.

b) Reintegration Activities

The 22% of the respondent's participation in reintegration highlighted the following reintegration activities that they undertake:

- The respondents highlighted family empowerment as a key activity in the eminent reintegration process. This involves rehabilitation of the family as well to create a safe haven that will be conducive for the child when finally h/she is reintegrated. To achieve success in this activity, respondents pointed out that they journey together with the family from admission of the child to the institutions to the final integration phase. By this time, they usually make sure that the family problems that cause home to street migration have been scraped away.
- The other one is the Self Help Initiatives. Parents are encouraged to set up business e.g. selling charcoal, groceries, shop, or saloon. This empowers the family financially and hence protecting the child from going back to the street. Some organizations apparently even have a small parent empowerment financial package that is given to the parent without interest demands.
- Counseling: social workers perform a lot of counseling to repair households and dysfunctional families. Respondents believe that once the family is intact, then the child easily fits in there with no problems again. In counseling the family is empowered to be architects of their own problems.
- There is a paradigm shift that is targeted at community rehabilitation of children. Therefore this activity aims at involving the community in the protection and also rehabilitation of their children. This is in line with an African adage that point out that the child belong to the community and not the family alone. Institutions also work with young adults in the community. This involves formation of youth groups.
- To avoid recidivism some institutions have an Alumni arrangement for the old boys and girls. This is just aimed at monitoring and ensuring that the boys and girls support each other so that they do not think of the street again.
- For children and parent who come from the same hood for example the same slum, the organizations have organized the formation of support groups whereby children and parents meet with the help of a worker to solve their own problems collectively. This helps an otherwise vulnerable child to cope at home upon reintegration back home and to the community.

c) Rehabilitation Activities

The rehabilitation objective had the highest percentage. It scored a whopping 54.3%. This shows that most of the organizations did rehabilitation as compared to street work, reintegration, outreach and even value added objectives. The key respondents highlighted the following rehabilitation activities:

- Provision of basic needs: shelter, food, and clothing. These children presumably lacked these basics at home. It is therefore because of lack that children migrated to the street to satisfy their wants. So respondents provide the basic needs in handy to help the children settle down and focus on education.
- Medicare; on admission the children are taken for medical checkup followed by periodic subsequent check up to ensure that the children's health is upheld.
- By putting the children in the institutions, respondents felt that this plays a crucial role in child protection because in these organizations the childen's rights are upheld to the later.
- Psychosocial support is at the core of rehabilitation. It is assumed that children have gone through stigmatizing experiences at their homes and in the streets. So psychological therapeutic interventions are focused towards helping the child adjust his/her life and pick up the pieces and put them together again.
- Spiritual nourishment; is also at the core of rehabilitation. Religion in the society is known as the institution that focuses on controlling behavior. Mostly the all of the institutions preferred their children to be brought up in a religious manner. Most of the institutions participating in rehabilitation of street children are faith based as earlier on envisaged in this study.
- Education: Non Formal Education (NFE), Formal Education (FE), Vocational Education (VE),



Accelerated Learning (AL) and Survival Education (SE) were the kinds of pedagogical strategies used by the respondents to educate the children in their institutions. The most predominant pedagogy was NFE and FE.

 Home visits and family contacts; Farming and animal husbandry; Sports and recreational activities were also some of the other key activities of rehabilitation that the respondents pointed out as being crucial rehabilitation tools.

d) Outreach Activities

The 4.8% of all the organization that had outreach as an objective participated in the following broad outreach activities:

- OVCs (orphans and vulnerable children) programmes whereby these potential street children are supported in school at home. The projects also have some welfare programmes for these children whereby they are supplied with food and clothing. The organizations also help them trace distant relatives who can stay with them.
- Other outreach activities include: Self help initiatives; School fees sponsorship; Family counseling and Home and school visits
- e) Value added Activities (what do you do that others don't)

The study also sought to ascertain the kinds of value added activities that these organizations participated in. On this effect, only 30% of the respondents had any value added activities. They cited the following broad activities as valued added:

• Tackle basic questions of life; Community building; Integrated approach; Gender responsiveness; value based approach; and Training of trainers.

Relevance of the objectives to the street children problem

The study unravelled that the whole of whopping 100 percent of the respondents felt that their objectives were relevant and aimed towards the eradication of the street children in Nairobi and its environs. They also felt that they were on track record to achieving their goals.

But even though, 60 percent of the organizations felt that they were not on track to achieve their stated goals and objectives due to the following hampering factors such as: insufficient resources e.g. funds; Inability to acquire competent staff that demands high pay; Increased inflation; Recidivism of the children back to the street

Education and rehabilitation tools

Table 2: Distribution of respondent's tools of rehabilitation

Pedagogical approach	Frequency	Percentage
Non - Formal Education	66	41.0
Formal Education	66	41.0
Vocational Education	25	15.4
Survival Education	4	2.5
Accelerated Learning	1	0.6
Total	162	100.00

Concerning the pedagogy, the Formal and Non – formal education both scored 41.00% each. The other forms of pedagogy which scored 15.4%, 2.5% and 0.60% were Vocational Education, Survival Education and Accelerated Learning.

Most of the organizations chose NFE and FE. Other organizations performed the whole of these activities. NFE apparently from this study is used to assess the child's standard ability and prepare the child for formal or mainstream education upon reintegration. These children after going through the informal school set up are then later reintegrated back to formal schools. This confirms the literature review on the stipulations and role of NFE



by the Ministry of Education Science and technology.

In the case of those organizations that provide vocational education, very few organizations represented by only 15 percent provided their graduates with start – up kits so as to enable them start to practice what they have been thought.

The duration of the agency's rehabilitation period

The study learned that in fact all of the institutions have two year rehabilitation programmes. In these settings, children stay for the first one year in the reception centre and then the next one year in the exit programme. These children are subsequently reintegrated home to their parents.

Asked of where the children will be taken after the rehabilitation phase, most of the organizations agreed that their children are usually taken home to be with parents. Only one few organizations had the adoption programme where children are open to adoption by would be foster parents in line with the government policy on adoption.

The Follow up plan for the reintegrated street children

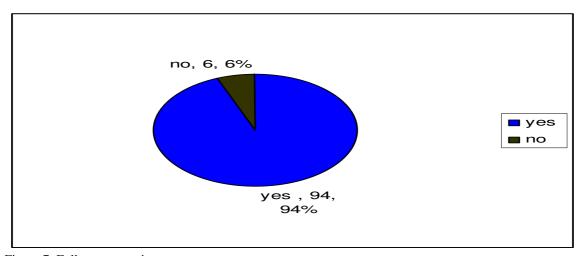


Figure 7: Follow up practices

The study unravelled that most of the respondents practiced follow – up after reintegrating the children back home. This was represented by 94.3%. Only a small fraction: (5.7%) of the sampled respondents did not participate in follow – up.

The duration of the follow – up plan

Most of the organizations practiced follow – up for one standard year before the children are left with the parents and the community. The 1 year follow – up plan scored 54.3 %. It was closely followed by the 2 years follow – up plan which scored 10% less. Only 2.00% of the institutions sampled practiced follow – up for more than 2 years. There was one organization that did and was in touch with children for life.



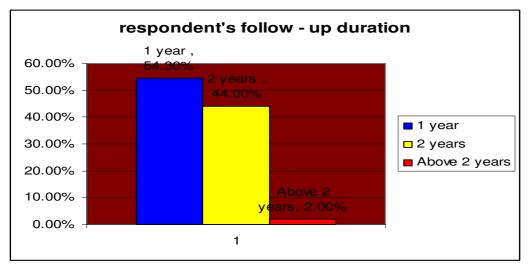


Figure 8: Duration of follow – ups

Most of the respondents (98%) agreed that follow – up is important. This is because it helps to curb the children from going back to the street, especially after rehabilitation. Therefore on this effect, they cited a number of activities that constitutes follow – up i.e.: To follow up on the child especially after reintegration. This is usually aimed at ensuring that the child settles well at home because one problem that the respondents cited was dependency the centre. So this activity is aimed at literally cushioning the child from navigating back to the streets. In the course, respondents go to find out if the situation at home is conducive for the wellbeing of the child: rehabilitate and empower the child's family. This creates a safe haven for the children to thrive

They also try to get the family to the level of being experts of their own problems through counselling. So that whenever problem or crisis hits the family, they would know how to navigate out of it. This will then ensure that the child does not recidivate back to the streets.

Other organizations have a follow policy called, the "open door policy" whereby the child can always come back to the institutions and be supported even after reintegration. Open door policy operates on the premise that the client views himself still as being not able to cope alone without the support of the agency. The organizations which employed this policy are represented by a smaller 15% of all the sampled institutions.

Recidivism

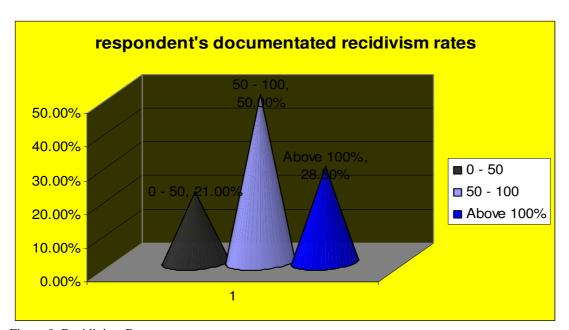


Figure 9: Recidivism Rates



Concerning the respondent's rates of recidivism, most organizations recorded numbers between 50 - 100 having went back to the street after or in the course of the rehabilitation process. This was represented by 50.5%. The other rates of recidivism were of 0 - 50 and above 100 children which scored 21.00% and 50% respectively.

The respondents attributed a number of reasons for recidivism:

Lack of food and other essentials featured prominently as children would not starve because the organizations don't have food. These children find way back to the street immediately.

Another reason was the addictive nature of the street. Once children get to street life it becomes very hard to scrape the culture that entrenches so much to their veins from them. They always want to be on the street. Therefore when taken to children's institutions, they view these organizations as poisons because they are used to roaming about on the street. In the street there are no rules and regulations – the rule of the jungle. Children do as they wish. That is why most of the children always would want to navigate back to the streets.

Some organizations also have staff that is very abusive, arrogant, uncaring, unloving and stigmatizing to the children. When the children witness this it reminds them of the activities that pushed them to the street in the first, so they end up back to the streets again.

Respondents also cited drug addiction as a big reason for recidivism. "As part of street culture, most of the street children use drugs. As a result most of them are addicted to bhang, khat, cocaine and other substances at a tender age" said one of the respondents. So literally it becomes really hard to keep them in the centre when they are feeling that urge to do drugs. Most of them apparently to quote another respondent battle with withdrawal symptoms on the first week of admission. These kinds of children as a result in fact just go back to the street in search of satisfaction.

On this effect respondents cited that what you find in the street is children who have been to and from different street children's institutions. These children have a very negative perception about street children institution and would run or simply deny street workers dialogue. They detest with passion any attempt to take them to the institutions.

The success stories – successfully rehabilitated and reintegrated children

Table 3: Distribution of respondent's success stories since inception of programmes

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Number	Frequency	Percentage	
50 – 100	77	73.3	
100 – 200	23	22.0	
Above 200	5	5.0	
Total	105.00	100.00	

The study determined that most of the organizations had success stories ranging from 50 - 100 children since their projects began. The 50 - 100 range was represented by 73.3 percent of the sampled respondents. The other success ranges were 100-200 and above 200 which scored 22.00% and 5.00% respectively.



Regulation of the institutionalization of street children

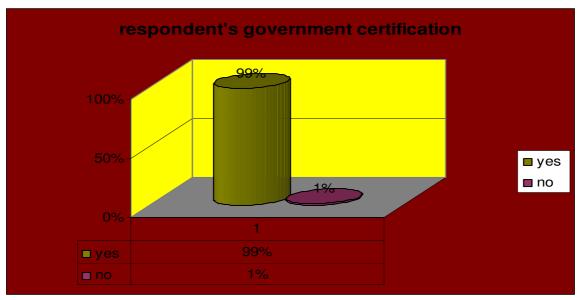


Figure 10: Institutional Registration by the government

99% of the institutions were registered by the government. This is in line with the government policy on children that requires all the children institutions to meet certain requirements to get the certification to institutionalize children. Only 1% of the institutions were not registered yet.

The Requirements from the Government for Setting Up Street Children Institutions

The respondents highlighted the following requirements that they are set to meet to operate:

- The first one was specialized and competent work force. This involves persons who have got experience of working with street children and either have a diploma or degree in a helping profession.
- Secondly, there should be sufficient housing and space. The house should have proper ventilations, space and doors.
- Also the institutions should be located in a good and conducive environment for education of the children and child development. It should not be located in town for example but in the outskirts of the town.
- Staff should posses certificates of good conduct and medical certificates that certifies them to handle
 food and the children. These requirements are essential to bar criminals and sick persons from handling
 the children.
- Another requirement is policies i.e. Behaviour management policy; Child protection policies; Rehabilitation policy, etc. that the institution wants t govern it activities. The institutions are also required to possess constitutions that govern the institutional day in out activities.
- The government also requires all the institutions to make availability of recreational, leisure and sports facilities for the children.
- The organizations are also supposed to have fire management policy and it should construct exits that
 can be used in the event of fire outbreak. On the same line, they are required to obtain insurance for
 both the children and also workforce.
- Lastly all the institutions are required to have got certification from the government showing that they
 have been licensed to practice. Licences are only granted to those organizations that meet all the
 requirements.

The director of the National Council of the Children's services also echoed the same keys components as very



vital for any institution to practice. He said that "any organization operating alone outside the laid down government policy is illegitimate and liable to closure with immediate effect."

Networking between Institutions and the Government

Table 4: Distribution of the respondent's network and collaboration with the government

Networking status	Frequency	Percentage
YES	77	73.3
NO	28	27.0
Total	105.00	100.00

73.3% of the organizations had networks between government and other likeminded organizations. Only 27.00% of the organizations did not have any networks.

Benefits of the government and other institutional networking.

The 77 percentage of the institutions that network with the government and other like – minded organizations cited the following benefits of networking as they have experienced so far:

- The networks have created a platform for the referral of the children to other institutions in case of financial problems and lack of resources. Also referral captures children that the institutions feel they can't be handled by them to other organizations with that capacity.
- The government gives directions for the protection of the children. So it is vital that the organizations collaborate with the government to borrow the directions that they are supposed to uphold.
- The children's act is an instrumental document for the protection of the children. This act of parliament stipulates all the issues related to child protection and it safeguards the rights of the child. It is these rights that the organizations are protecting too. So collaboration here becomes an essential ingredient to achieve organizational objectives.
- Councils collaborate a great deal with the organizations in the protection of the children in all the district levels in Nairobi.
- The children's department has got offices in every Nairobi district where issues of children are taken
 care off. The street children institutions collaborate with these offices in the bid to achieve their
 objectives.
- The organizations always collaborate with the policy for example in making arrests for the perpetrators of child abuse and neglect. The police statements and evidence forms an integral part of the statutory practice and evidence in court.
- Most of the international humanitarian organizations e.g. USAID, SLOVAK AID, the UN etc. use the
 government as an entry point to help the street children. The government will then subsequently
 propose agencies that will benefit from such ventures. Undugu society for example is known a lot for
 advocating for the rights of street children. As a result they have benefited on numerous occasions from
 such ventures.



The impacts of the Government policy on street children

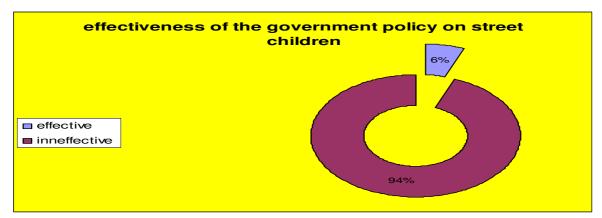


Figure 11: Respondents' opinions about the effectiveness of the government policy on street children

This study found out that 94.2% of the organizations sampled were of the view that the government policy on street children as it is now is not effective. Only 6.00% agreed that the government policy was anything to go by.

The effectiveness of institutionalization of street children

On whether putting street children on institutions was a lasting solution to the street children problem, this study sought out the opinions of the respondents. 76.2% of the respondents thought it was ineffective. Only 24% thought that institutionalization of street children was not effective.

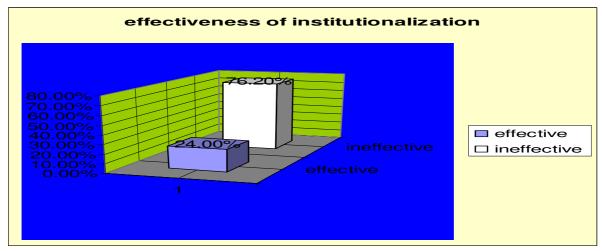


Figure 12: Effectiveness of Institutionalization of Street Children

Other approaches apart from institutionalization that can be used to rehabilitate street children

Most of the respondents advised that institutionalization should be integrated with this other approaches to achieve a meaningful impact. They suggested this other approaches:

- Community rehabilitation of street children: this is whereby services for street children happen right there on the street where the children are living. It involves programmes such as the mobile school, carpentry, and masonry right on the street. It works like this: the street child is attached to a carpenter for example for a period until he/she masters the art. Later on the child is given start-up kit to begin their own workshop. By so doing the whole community supports the child to attain the necessary skills.
- Street work outreaches involves going to the street and providing services such as medical care, education, life skills, rotational medical camps, provision of food and clothing, counselling and



assessment of the problems of the street children.

- Reintegration of the children straight from the streets home is also another approach that was on the respondents' radar. This way a child is identified from the street, taken home, given support from home and then finally the follow up is enlisted to ensure that the child does not go back to the street at all.
- National youth service: the government should set up institutions of this kind whereby youths on the
 street are thought skills and vocational education. But the respondents pointed out that the government
 should not just round up street children, a mechanism of registration should be developed whereby
 children own the transition and choose courses of their choice.

Other activities other than institutionalization undertaken by the projects

Apart from institutionalization of street children only 22% of institutions participated in other approaches targeted to ending the problem of the street children. But the whole majority of institutions – 78% only practice institutionalization.

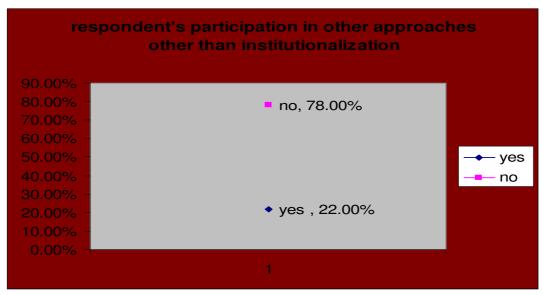


Figure 13: Other Approaches other than Institutionalization.

The 22 percentage that participates in some other approaches outside the mainstream institutionalization also proposed programmes like:

- Formation of self help and support group for both the parents and the children, and the older/former boys of the centres in order to make them develop a sense of self-reliance; Street work; Reintegration; Training of trainers whereby an agency organizes workshops to equip community members on skill that they can extend to other on how to work with street children:
- Social entrepreneurship: investments in schools, hotels, and transport industry. This is also an activity
 that most of the organizations have decided to venture into for sustainability and continuity of their
 programmes.



Street life preventive activities

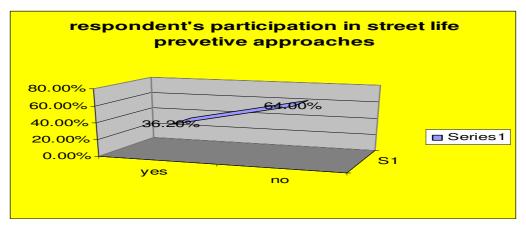


Figure 14: Prevention of street children.

It was only a smaller 36.2% of the institutions that participated in preventive programs aimed at curbing and protecting the children from getting to the streets even in the first place. 64% of the institutions did not participate in preventive programmes at all.

The study found out that all the 36.2 percent of the institutions that participate in the preventive programmes use the following preventive activities: Small micro – finances to the needy families in the slums: Sponsoring needy children to schools; Advice parents to take children to schools in the up country; Lobby the government to increase bursary funds allocations in the Nairobi districts; Lobby the members of parliament to make allocation from the Constituency Development Fund kitty for the support of needy children; Involve the children in the spiritual related activities and avoid them being idle and Area Advisory Councils

Eradication of the street – children in Nairobi: What can be done?

`The respondents were of the variant views that the problem of the street children could be managed or curbed through the following ways:

- The first preventive action is the "Eradication of extreme poverty and hunger. This one will go a long way in eradicating children who have found the source of livelihood on the streets. Poverty and hunger are the number one push factors that send the children to the streets;
- O Another Millennium Development Goal (MDG) that respondents saw a preventive for home street migration was Universal free primary education. They reasoned that if it is made mandatory for all school going children then the problem of street children will subsidize a little bit;
- O Declaration of the street children as a national disaster and review of the policy as regards children in Kenya; it is only until then that the problem of street children will get the attention it deserves just like hunger and HIV/AIDS were declared national disasters. The latter even attracted the co-operate society and the whole of Kenya to contribute towards alleviation of poverty in North Eastern Kenya. It the same leave is borrowed, then the problem of street children will be written off;
- O The adoption system in Kenya is very poor or even inexistent. Respondents therefore suggested that improvement of the adoption system in Kenya which is virtually not even there will go a long way in curbing children from going to the streets even in the first place. Such needy children will be diverted through adoptive parents. They government should also enact legislation that govern adoption, so that even such children can be adopted by relatives;
- Eradicate alcohol, drug, and substance abuse; this has contributed a lot to irresponsible parenting as
 parents spend most of the time in the alcohol joints leaving the children as architects of their own
 destinies. Such children as a result resolve the street is the place to be. They also are swayed by bad
 peer groups;
- Another preventive intervention would be to prosecute parents who let their end up in the streets, those
 that abuse and neglect their children. The government should make special budgetary allocations for the
 street children:



- O To crown it, respondents yet made another suggestion that of creation of a parliamentary select committee to probe on the plight of street to look into the affairs of street children and other children. The report findings then should be published and right legislation for street children enacted; and
- Lastly, respondents recommended that all the stakeholders working with street children in Nairobi should come together and form a consortium for street children. This consortium should then be used as an avenue for collaboration, networking and referrals. Research should be done extensively to evaluate the whole problem and suggestions made on how to curb it.

Challenges Faced by the Street children institutions

Respondents pointed out the following challenges that curtail their work with street children:

- Of Getting sponsors for really needy children towards academics was a problem that was prominent among the respondents. Kenyans naturally apparently are very mean and usually do not give towards charity. Even to crown, very few Kenyans would think of adoption. This poses a lot of challenges especially to the organization in terms of sponsorship for scholarship. Most of the sponsors for the kids who have successfully finished rehabilitation come from abroad.
- Another challenge faced by most of the respondents is insufficient funds to run their projects and achieve their goals. Such organizations as a result are forced to admit less number of children who fit their budgets. This problem is coupled by usually donor withdrawal.
- o Recidivism is also a big challenge that prevailed from this study. Each year, organizations have to grapple and come to terms with large numbers of children who are addicted to street life.
- o Increasing numbers of street children day in out. This problem is coupled by the fact the factors that lead to the street children phenomenon are never addressed. What institutionalization does is only to rescue people from the downstream who are drowning. The moment they remove another drowning person, another comes down stream drowning. The questions should be, "who is the one drowning people?" Then the effort should be directed towards removing the culprit other than continue the rescue operation. So in line with this adage, the focus should be on the activities that are geared towards preventing the children from going to the street in the first place.
- o Limited institutional capacity to hold as many street children as possible; most of the organizations only admit small numbers of children per year. They also make preference on age 8 − 12 leaving a big number of children languishing on the street.
- Another challenge is limited land and space in the city; most of the institutions operate in a very small space. Children even don't have playground. This has forced many of the organizations to sky scrape.
- o Inflation: increased prices on commodities and fuel. This has impacted negatively on organizations. This has affected their budgetary allocations. Organizations now have run out of funds and some are forced to reintegrate children earlier on. This children end up back to the street again.
- Another limitation of institutionalization is dependency. Both the children and family cannot let go the centre. So, withdrawal of the children from the programme makes them susceptible to the street again as the family cannot take care of them.
- Lastly, there is the challenge of mismanagement of project funds. Most respondents reported that their funds have been misappropriated by corrupt mangers that divert cash to their own coffers. In this circumstance, the projects end up bankrupt before the end of the financial year.

Projects' future expectations



Table 5: Distribution of respondent's future expectation

Expectation	Frequency	Percentage
Increase the numbers of institutionalized children	77	22.0
Entrepreneurship and investment	78	22.0
Buy land and expand the projects	23	6.5
Reintegrate more children each year and take care of them at home	77	22.0
fully equipped centres: schools, university and colleges	100	28.5
Total	355.00	100.00

Most institutions expect to own 'fully equipped centres' with a school, university and college. This expectation scored 28.5%. Other future expectations scores were 22.00% which was shared for the following expectations:

- o Reintegrate more children in the subsequent years and take care of them at home;
- Entrepreneurship and investment;
- Increase the numbers of institutionalized children.

Other projects wanted to buy big parcels of land and integrate all of their activities to one institution. This expectation however was a lower 6.5%.

Size of the human resource

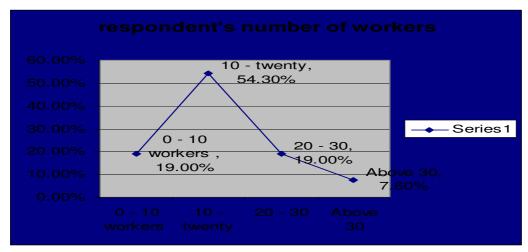


Figure 12: Size of staff working with and for street children

54.3% of the organizations had 0-10 manpower. 10-20 and 20-30 manpower scored 19.00% of the institutions sampled. Only 7.6% of the institutions had manpower above 30 workers.

4. Conclusions

The problem of street children grows leaps and bounds day in out. From the first time this problem was witnessed in Kenya in the 60s numbers have continued to burgeon. The institutionalization of street children only plays a palliative role as evident from the findings of the study. Institutionalization though it is doing an important role, it encourages parents to in fact send the children to the streets so that they can be picked by social



workers.

Institutionalization is only addressing the eruptions, the real volcano keep on boiling and producing more eruptions. The question is for how long are we going to keep addressing the eruptions? When the volcano continues to fuelled by the ingredients like poverty, diseases, slums, etc.

There are also high rates of recidivism as more children continue to pour back to the street even after rehabilitation. This forms a kind of circle as children are always in and out of institutions. Most of the children on the street therefore have been to one or more centres and the circle continues. So literally, the institutions are acting in futility.

It was apparent from this studies that street children institutions are doing very minimally to prevent the street children phenomenon. As a result day in out, this factors continue to push thousands of children to the street. These include among others: poverty, hunger, diseases, poor living conditions in the slums, overcrowded households etc. So for as long as these factors continue to be there, the street children will continue to be a feature of the Nairobi streets. Programmes for street children should focus on curtailing children from joining the street children from going to street even in the first place.

Also, most of the organizations do not employ integrated approaches that are targeted at protecting children from going to the streets in the first place. Most of the organizations are interested in "palliative measure" that just nurses the problem. The problem of street children needs radical surgical intervention to borrow a word from medicine. What organizations do at the moment is like just giving an analgesic to relieve pain. But the problem of street children is far more deep seated and continues to replicate on daily basis. To make crown it, the problem is now metastasizing to other towns in Kenya.

It was also evident from this study that there is poor enforcement of government policy on children. The government has very good policies but these policies just gather dust in cabinets as the rights of the children continue to be violated every day. This has only helped this problem to grow beyond uncontrollable degrees. Because one would ask himself, where is the government when street children numbers to great heights and there is a government in place who should have regulated this? In fact, the adoption policy in Kenya is poorly implemented. Kenyans are very poor in adoption. If Kenyans would adopt children that are left to them for example by the parents who die from disease, then we wouldn't be having a lot of orphaned children ending up in the street. Instead you find that the public and police have a very negative attitude towards streets. The public call them **chokora**, while police beat and round up children to remand homes where they are detained for allegations of theft, drug abuse and vagrancy.

The effective approach would be the one that is targeted towards stopping the street children volcano. The preventive approach will go a long way in curbing the street children by removing the stressor. The family is the basic unit where children should be protected from going to the street. The families should be educated on parenting and poor households empowered economically through welfare such as the one in the literature review that involved giving some monthly package to these families for upkeep. Only then shall we be able to protect children from getting to the street in the first place. The church in the society is charged with the role of controlling behaviour. This institution I can say has failed a great deal in its pursuit to ensure humanity and that people grow in religiously. It is the church's role to mend dysfunctional families, poor households and even protecting children.

The stakeholders on welfare for street children should formulate policies that target poverty, unemployment, disease eradication and family empowerment. This will in turn empower households to be able to take care of all the needs of children. Children mostly ran away to the streets because the parents cannot simply take care of them. But we are not ruling institutionalization. It will be implemented with all other approaches holistically.

Recommendations

- a) Integration of all the approaches targeted at the street children so that all the children on the street are captured.
- b) Enactment of legislations targeted at the street children alone as a group because this group is a special one and requires special attention too.
- c) Preventive approaches should be the core other than addressing the symptoms of the problem.
- d) More research on the most effective ways of addressing the problems of street children should be constituted and recommendations made.



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