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CHILD STREETISM IN THE TAMALE METROPOLIS: EXPLORING POLICY

OPPORTUNITIES TO ADDRESS THE MENACE

MOHAMMED SIIBAWAY

2021

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OPPORTUNITIES TO ADDRESS THE MENACE

BY

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## DECLARATION

### Candidate's Declaration

I hereby declare that this thesis is the result of my own original research and that no part of it has been presented for another degree in this university or elsewhere.

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### Supervisor's Declaration

I hereby declare that the preparation and presentation of this thesis was supervised in accordance with the guidelines on supervision of thesis laid down by the University for Development Studies

Supervisor's Name: DR. IBRAHIM MOHAMMED GUNU

Signature: ..... Date: .....



## ABSTRACT

The purpose of this study was to explore on the phenomenon of child streetism in the Tamale Metropolis and also to find policy opportunities to address the menace. The study focused on finding out the factors that promote child streetism in the Tamale metropolis, the challenges facing street children in the Tamale metropolis, the strategies adopted by the street children to cope with the challenges of street life and also examining policies put in place to address the phenomenon of child streetism in the Tamale metropolis. The study was rooted on the social functionalist theory. Case study was used as the design for the study. The study employed the mixed research approach to gather the necessary data. Questionnaire, interview guided and documentary review were used to gather data. The quantitative data was analysed using the Statistical Package for Social Science Research (SPSS) Version twenty-two (22) and the qualitative data was analysed using narrations. The study found that poverty, family disintegration, inappropriate parenting, death of parents, abuse from home and peer pressure are some of the factors that promote child streetism in the Tamale metropolis. It also found physical and sexual abuse, accommodation and death as some of the challenges facing street children in the Tamale metropolis. The study also found that street children adopt different strategies such as leaning, scavenging, porting, begging, shoe shining to cope with the challenges of living on the street. The study again found that most policies that are meant to address the phenomenon have focused on re-integration, vocation and technical training. The study recommends that street children and their parents should be central to the planning and implementation of any policy intended to address child streetism.



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## **DEDICATION**

This work is dedicated to my parents, Amadu Salamatu and Issah Mohammed Gorden for the sacrifice they made in my education.



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## LIST OF ACRONYMS

UN:	United Nations
OAU:	Organisation of African Union
AU:	African Union
UNICEF:	United Nations Children's Fund
DSW:	Department of Social Welfare
CAS:	Catholic Action for Street Children
SAID:	Street Girls Aid
CSC:	Consortium for street children
CSF:	Civil society forum
HIV:	Human Immune Virus
AIDS:	Acquired Immune Deficiency Syndrome
NGO:	Non-governmental Organisation
USA:	United State of America
UK:	United Kingdom
WHO:	World Health Organisation
UNHR:	United Nations High Commissioner for Refugees
SPSS:	The Statistical Package for Social Sciences
KII:	Key Informant Interview
DOVVSU:	Domestic Violence and Victim Support Unit
MGCSP:	Ministry of Gender Children and Social Protection
ISODEG:	Integrated Social Development Centre
AFDOM :	African Development for Migration
UNESCO:	United Nations Educational, Scientist and Cultural Organization



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## CHAPTER ONE

### 1.0 Introduction

In recent years, the city of Tamale has become an attractive centre for street children. The street children mostly engaged in activities that have the tendency of affecting their growth and development. Despite the presence of policies to address the phenomenon of child streetism, the problem still exists in the Tamale metropolis. The intention of this study was to explore on policy opportunities to address the phenomenon of child streetism in the Tamale metropolis. The study focused on the factors that promote child streetism in the Tamale Metropolis, the challenges facing street children in the Tamale Metropolis, the strategies adopted by street children to deal with the problems they face on the street and assessing national policies put in place to address the phenomenon of child streetism.

### 1.1 Background

Childhood is considered as the foundation of every community and the nation as a whole (Mintz, 2004). It is for this reason that childhood is seen to be the stage where children are trained, supported and guided by adults to ensure that they grow to be responsible in the society (Mitz, 2004). Through children, societies are able to reproduce themselves and to establish series of connections with successive generations (Mintz, 2004). Children are not only the future of every society, they are also the groups with needs that requires greater attention by the society (Belay, 2007).

The United Nation's universal declaration on human rights has recognised that human beings are entitled to the same rights irrespective of age, gender, race, social status and nationality (United Nations, 1989). Universally, children are entitled to the same rights as the adults, the result of which there were many concerns on issues of welfare and rights of





children in the 1980s and 1990s by governments and non-governmental organisations around the world. This further led to the establishment of the convention on the rights of the child in 1989. The convention aimed at institutionalizing the rights and welfare of children (Belay, 2015; UN, 1989). The convention recognized rights such as the rights to survival, the right to be free from any sort of discrimination, the right for children to take part decisions that affects their lives. Ratifying the convention, many member countries have taken different initiatives to fulfill the promises of the convention. The convention therefore gave the framework for member countries in their efforts to promote children's rights (Belay, 2007).

In fulfillment of the UN conventions on the rights of the child, the Assembly of the heads of state and government of Organisation of the African Union (OAU) ratified a Charter on the rights and welfare of the child at Addis Ababa in 1990. In Ghana, the children's Act (Act 560) was enacted in 1998 in fulfillment of the UN Convention and the AU charter respectively. The content of the Act centered on the welfare principles that recognised and put central the welfare of children in all matters that affects children (Kuyini and Fati, 2011). Article 28 (1) of the 1992 constitution also enshrined provisions that protects the rights of children and enhances children's growth and development.

In most developing countries like Ghana, the issues of "child right" remains a social concern. Research shows that children in developing countries often suffer from homelessness, poverty, neglect, abuse, preventable diseases and sickness, unequal access to education among others (UNICEF, 2007).



One of the most vulnerable group of children around the world is street children (see Belay, 2015; De Moura, 2002; UNICEF, 2006; UNICEF, 2003). Globally, an estimated 100 million to 150 million children are found living on the street, especially in Latin America, Asia and Africa (Alianza, 2009; Hutchison, 2010). In Ethiopia for instance, it has been estimated that between 150,000 to 600,000 children live on the street (Consortium for Street Child, 2009). Figures in Kenya in 2007 estimated about 250, 000-300,000 street children in some major cities in Kenya (Belay, 2015).

Studies have revealed that the numbers for street children have been growing steadily in some Ghanaian major cities including Accra, Kumasi, Takoradi and Tamale. A study conducted in Accra have revealed that an estimated 60,000 children live on the street of Accra as at 2012 (Department of Social Welfare, Catholic Action for Street Children (CAS), and Street Girls Aid, 2012). CAS (2009) also estimated that approximately 10,000, 15,000 and 8,000 street children are found in Kumasi, Accra, and Tamale respectively in 2009.

These children suffer from all kinds of abuse, deprivation and social exclusion. They are often viewed by some people in the society as problems rather than children whose habitat is on the street which needs proper attention (Samuel, 2014). They mostly shelter at lorry parks, in front of shops and video centers (Civil Society forum report, 2003). Street children are often exposed to dangers such as being knocked down by moving vehicles, contracting HIV/AIDS, Cholera, typhoid, rape, torture, starvation and trafficking among others (Apteker, 1989; Civil society report, 2003). The street children adopt variety of livelihood approaches to survive, ranging from begging, theft, porting, scavenging, drug



dealings among others. It is against this background that this study explores policy opportunities to address child streetism in the Tamale Metropolis.

### **1.2 Statement of the Problem**

Child streetism is a global problem. It is found in the city streets of both the developed and developing countries (Hatloy & Huser, 2005; Khan, 2012). The children are engaged in petty trading, manual labour, and garbage collection among others (Ochieng, 2012). Although they are visible, they are however difficult to study, hence it is difficult to state the exact number of children on the street in a particular city across the world (Hatloy & Huser, 2005; Khan, 2012). The migration of children to the urban areas has increased in recent years largely due to the inability of family to perform their function properly, economic hardship and desire for good life in urban areas by children (Shanaham, 2001). These children in their quest to survive on the street often face exclusion, harassment from groups such as the security officers, market women, their guardians and even their fellow street children (Kusters, 1995). They are also viewed by the public as criminals, thieves, drug peddlers and abusers, Vagabonds among others (Alenoma, 2012; Baron, 2001).

Like many other cities in Ghana and across the world, Tamale has also become an attractive centre for street children (see Alenoma, 2012; Adjei, 2014; Kusters, 1995; CAS, 2009; Nieminen, 2010; Fuseini, 2016). Alenoma (2012) indicated that child streetism is becoming a growing social problem in the Tamale Metropolis. Cecile Kusters in her study on street children in Tamale indicated that as at 1995 there were an estimated 600 street children in the Tamale Metropolis (Kusters, 1995). In 2009, a study conducted by (CAS) indicated that an estimated 8000 street children are found on the street of the three Northern Regions, thus Northern, Upper East and Upper West (CAS, 2009).



The little accessible literature on child streetism has shown that the state has put in place policies such as the Children's Act (Act 560), the family and child welfare policy, among others, to deal with the problem of child streetism in Ghana. despite the existence of policies to deal with issues of child rights and welfare, there are still a large number of children living on the street of Tamale (see Nieminen, 2010; CAS, 2009; Alenoma, 2012; Fuseini, 2016). What factors promote child streetism in the Tamale Metropolis? What are the challenges street children in Tamale encounter? What coping strategies do street children in the Tamale Metropolis adopt? what policies are in place to address child streetism in the Tamale Metropolis? and What policy opportunities are available to address the issue of child streetism in the Tamale Metropolis? The current study therefore intends to find out answers to the above questions.

### **1.3 General Research Objectives**

The general aim of this study was to explore policy opportunities to address child streetism in the Tamale Metropolis.

### **1.4 Specific Objectives**

1. To investigate the factors that promote child streetism in the Tamale Metropolis.
2. To examine the challenges faced by street children in the Tamale Metropolis.
3. To find out the coping strategies adopted by street children in the Tamale Metropolis.
4. To assess policies put in place to address child streetism in the Tamale Metropolis.

### **1.5 General Research Question**

What policy opportunities are available to address the menace of child streetism?

### **1.6 Specific Research Question**

1. What factors promote child streetism in the Tamale Metropolis?



2. What are the challenges facing street children in the Tamale Metropolis?
3. What are the coping strategies adopted by street children in the Tamale Metropolis to cope with street life?
4. What policies are in place to address child streetism in Tamale?

### **1.7 Significance of the Study**

The importance of this study is that, as part of numerous initiatives to address the phenomenon of child streetism in the city of Tamale, this study explores policy opportunities that are available to fill the gaps in the efforts to address the problem of child streetism in the Tamale Metropolis. The study offers empirical evidence to help policy makers, and civil society organizations in the designing and implementation of policies and programs aimed at resolving the problem of child streetism in the Tamale metropolis. The study is also significant as it contributes to existing literature by filling in some of the gaps within the literature of child streetism. It is also a source of reference for researchers and students who intend to gain more light on child streetism in the Tamale Metropolis.

### **1.8 Scope of the Study**

In recent times children are seen on the street of Tamale trying to earn a living without proper care and guidance from adults. This study was therefore carried out in the Tamale Metropolis with a focus on exploring policy opportunities to address the menace of child streetism in the Tamale Metropolis.

### **1.9 Delimitation**

This study is delimited to the Tamale metropolis. This is because children under eighteen years are seen living and working on the street of the Tamale Metropolis.



### **1.10 Limitation of the Study**

The researcher's goal was to interview 50 street children for the research. However, the researcher was limited to 20 street children due to difficulty in accessing the children. This was because many of the street children do not have a permanent place where they live such that the children can easily be found. The children often switch from one place to another. Some of the children also refused to engage in the research. As a result, the study used 20 participants who were approached and agreed to take part in the study.

### **1.11 Operationalisation of key Concepts**

**Child:** A Child is someone who is under the age of 18 years, according to Article 28 (5) of the Ghana's 1992 constitutions.

**Streetism:** Streetism is explained as the ways of living, coping and surviving on the street.

**Street Child:** The Department of Social welfare (2018) describes street children as children who spend most of their time living and working on the street.

**Child Streetism:** This refers to the situation in which children spend a large amount of their time on the street and participate in activities such as porting, scavenging in order to survive.

**Policy Opportunity:** Policy Opportunity in this study refers to situations or chances available to make policies very effective in achieving its goal.

### **1.12 Organisation of Work**

This work has been organised in five chapters. Chapter one presents on the Introduction, the background of the study, problem statement, research objectives, research questions, significance of the study, scope of the study, delimitation, limitation of the study and operationalisation of key terms. Chapter two consists of literature review and it looked at



the concept of streetism, child streetism, categories of street children, Global overview of child streetism, African situation, the Ghanaian Situation, Factors That Promote child streetism, Challenges facing street children, coping strategies adopted by Street Children, Policies in place to Address child streetism, theoretical Framework and Conceptual Framework. Chapter three presents the methodology used for the study including the research design, the research approach, population of the study, sample and sample size, sampling technique, Data Collection Instruments, Data collection procedure, Data Analysis, Validity and Reliability and Ethical consideration. Chapter four presents, analyse and discusses the collected data and chapter five presents the findings, conclusions and recommendations for the study.



## CHAPTER TWO

### LITERATURE REVIEW

#### 2.0 Introduction

This chapter reviews literature related to the topic under study. Literature review is important in research because it helps the researcher to analyse similar works, to reflect, compare and learn from the gaps created by previous works on a related topic. It also enhances and enriches the researchers' study by providing the researcher with relevant sources of data. Literature review helps the researcher to know what is already known in an area of study and what gaps have been created (see Bryman, 2016; Kothari, 2008). The literature review in the current study focused on the following; the conceptual analysis including the concept of streetism and child streetism, categories of child streetism, Global trend of child streetism child streetism in the Africa, child streetism in Ghana, factors that promote child streetism, Challenges experienced by street children, strategies adopted by street children to cope with challenges they experience on the street and Policies for Addressing child streetism.

#### 2.1 The Concept of Childhood in the Ghanaian Context

In the Ghanaian Society, the family institution continues to be the basic and fundamental structure of the society despite being faced with greater social changes. The structure of the Ghanaian family differs from one ethnic group to the other, however, the internal values of the Ghanaian family system are similar (Salm & Falola, 2002). The hierarchy of





Ghanaian family structure has children at the base of the structure and the elderly at the top. Age, gender and status within the Ghanaian family structure determines the functions and responsibilities expected of members (Nukunya, 2003). The growth of members within a family from infancy to adolescence, adulthood and old age influences how they relate and functions (Salm & Falola, 2002).

As children go through the socialization process in the Ghanaian society, they are expected to meet certain economic and cultural requirements. The child is expected to observe adults and take part in activities that reinforce social and moral values of the society in order to develop mentally and physically (Nukunya, 2003). Economically, the Ghanaian child between the age of four and five, is encouraged to contribute to household's subsistence by helping with tasks which includes doing house chores, caring for livestock and running errands. Between age seven to thirteen, children begin to take part in the activities expected of adults in more limited sense. This is typically done to teach children the skills they need to protect their livelihood as they grow (Hashim, 2007; Nukunya, 2003). Hashim (2005) revealed that in the rural northern part of the country, children by the age of 14 years are engaged in all the activities required of adults.

Ghana has previously ratified several international treaties such as the UN declaration on human rights, UN Conventions on the Rights of the Child and the African Charter on the Rights and welfare of the Child. To fulfill the international commitment, Ghana has enacted legislation and formulated policies such as the constitution of the 1992, the penal Code, the Act on the rights of the Child (Act 560) and the Act 2003 on Juvenile justice, family and child welfare policies among others that has given priority to safeguarding the interest and wellbeing of children. These legislative and policy frameworks have sought



to protect and preserve the welfare and rights of children. It has also placed an internal obligation on the country to ensure the survival, development, growth and security of the Ghanaian Child. Institutions have been established with trained professionals to ensure that the freedom, health, privileges and interest of children are secured.

## **2.2 The Concept of Streetism**

Streetism is explained as the ways of living, coping and surviving on the street (Ennew, 2003). Streetism is often associated with risks that affects the growth and development of victims. It involves spending most of the time in the street, deprivation of basic right such as hygiene, nutrition, education and security (Crombach & Elbert, 2014).

## **2.3 The Concept of Child Streetism**

Like many other social science concepts, there is no single definition about the concept of child streetism. Universal definitions and usage of the concept of child streetism is problematic due to the different characteristics that street children often exhibit across the world (Brik, 2002). In the 19<sup>th</sup> century, the term streetism was often referred to as the urban centers in Europe (West, 2003). In recent times, however, scholars believe that the word child streetism is problematic because it means that street children are a homogenous group and are frequently defined according to the space they occupy (Evans, 2002; Guermina, 2004; Patrick- Brick, 2002). Some other researchers also argued that the generic term often used to refer to street children do not usually match the way and manners in which the street children narrates their lived experiences. Other scholars are of the view that the term promotes social stereotypes towards street children. They believe that the term distracts focus from the general population of children who are suffering with poverty and social exclusion (Guermina, 2004).



The term was first defined by an inter-NGO Program in 1983 which was subsequently used by the UN. They explained the term “street child” as any boy or girl to whom the street has become his or her abode. The definition further explain that such child is not properly protected, directed or supervised by any adults ( MOLSA & Sweden, 1998).

UNESCO (2006) explain that street children are girls or boys below the age of 18years who adopt the street life and public spaces as their alternative home and are unprotected and under-supervised by a responsible adult. Street children are children who live on the streets without daily support from family members (CAS, 2003). UNICEF (2003) also define street children as children below the age of 18years old who live and earn on the street.

It is clear that the term ‘child streetism’ does not have a single meaning and the conversation is expected to continue. This is because of street children exhibit different characters which makes it difficult for scholars to come to a unanimous definition. Despite the difficulty in getting a unanimous definition, it can be understood that child streetism is a situation where children live and work on the street without guidance from responsible adults.

## **2.4 Categories of Street Children**

Attempts to explain the phenomenon of child streetism have seen many researchers categorize street children into “children-on-the street”, “children-of-the street”, “Generational street children” and children who are completely abandoned or neglected (see Atlantis & Goddard, 2004; Ayuku et al., 2004; Malindi, 20014; Samuel, 2014; Hatloy and Husser, 2005). These categories are explained below;



**2.4.1 Children-on-the Street:** These are the children who work on the street during the day and return home after work. Children-on-the street have relationships with their families. They mostly exhibit characters that the society sees as inappropriate. Some of these children may attend school and maintain a sense of belonging to their families, but these children move to the street due to factors such as family's economic hardship, truancy and peer influence (Hatloy and Huser, 2005).

**2.4.2 Children-of-the street:** Children-of-the street are the category of street children who live, eat and sleep in the street. The street is practically the home of these categories of street children (Ayuku et al., 2004).

**2.4.3 Generational street children:** These are children who are on the street because their parents are living and working on the street. Hatloy & Huser (2005) indicated that children who are born on the street end up living and surviving on the street. They also participate in activities such as begging and theft to survive on the street. Apt (2004) also indicated that these category of street children often get to the street at a very early stage usually as early as 3-4 years.

**2.4.4 Abandoned children:** Patrick-Brick (2002) explained that these are children who have been completely abandoned and neglected by their families. They work on the street and have no support or anyone providing for them apart from themselves (Partrick-Brick, 2002).

Many studies have indicated that abandoned children are closely linked. Thus, abandoned street children can change from children on the street to children of the street, the reverse is true for the abandoned street children (see Malindi, 2014; Bhukuth & Ballet, 2015).



## **2.5 Definition of Policy**

Policy is defined as set of rules, procedure or protocol to guide decisions towards achieving a desired outcome (Saidi, 2012; Rynes & Shapiro, 2005). Thus, policies outlines set of rules, provide principles to guide the required action, assign roles and responsibilities to implementers, reflect the common values and clearly state the intention of group to do something.

Policies are developed when fundamental needs are not fulfilled, when people have been treated unfairly, when current policies are not effective in achieving their objective, when emerging situation pose threat to public health, safety, education or wellbeing.

## **2.6 Global Overview of Child Streetism**

Streetism is usually seen as a regular feature of many non-western societies. But in recent times, it has been established by many scholars that the industrialised world are also faced with the challenges of child streetism (UNICEF, 2006). UNICEF (2003) revealed that about 100 million children live in urban streets around the world. Many reports also predicted a likely increase due to an increase in global population and urbanisation (UNICEF, 2003).

Studies relating to child streetism globally shows certain characteristics which spread throughout both the first and the third world. In the western societies, child streetism is often linked to an exposure to violence and diseases among street involved children (Clatts & Davis, 1999). In most western literature, streetism is equated to homelessness as a result, many of the western literatures often draws attention to homeless children instead of street children. For instance, authors in the North America and Western Europe use homelessness interchangeably with that of street children whilst Latin America authors, Africa, Asia and Eastern Europe refer to the children as street children (De Moura, 2002).



In the United States of America, studies have shown that in the past few decades homeless children are increasing significantly. Though reliable statistics to show the exact number of homeless children in the United States of America could not be established, the National Center on Family Homelessness (2011) in USA has estimated that in every 45 Children, 1 child is a street child. Thus, an equivalence of about 1.6 million children are homeless. Many of them being below the age of 7 years. Schaffer & Caton (1984) reported that in the United States that there are as many as 20,000 children who are homeless.

Rew et al. (2001) estimated about 2 million homeless children in the USA and 800 of the homeless children are on the street on any given night. The study further stated that one in eight children are said to be out of home very much earlier and often stay on the street much longer. Kurtz et al. (2000) also indicated 40 percent of street children in the United States never find their way back home. These children often sleep at different places including abandoned houses, shelter homes or sometimes exchange sex for housing and some also take refuge with their friends or even sleep on the street. Youth Care (2001) also reported that about 52% of those found on the street of United States have reported cases of assault whilst on the street.

Studies conducted in the United States have revealed that children at risk of being on the street include the following; those who are in the process of terminating a stay in an institutional setting, children with inadequate support, children living in traditional housing arrangements, children living in poverty or in households with single parents and children who are recent migrants (see Kurtz et al.; Youth Care, 2001; Rew et al., 2001).

In the United State, homeless children are often described as America's Youngest Outcasts (American Academy of Pediatrics, 2005). Irrespective of their growing numbers,



homeless children are invincible to most people; they do not have a voice and they have no constituency in the United States. They lose their friends, possessions, pets and even their communities (American Academy of Pediatrics, 2005). They also lose the comfort the family often provide such as safety and privacy. Studies in the United States again indicated that homeless children are usually from malfunctioning family, marriage divorce, death of a parents, grade failing in school, deviant and delinquent behaviors and peer group influence (Rew et al., 2001).

In the UK (United Kingdom), street children are often referred to as independent street dwellers (The children's Society, 2000). They are also regarded as the 'runaway children' or 'throwaway children'. The runaways are the children who abandon their homes or treatment and are driven by their parents. The main reasons that are often given by the children as the push factor for the runaway children include violence, instability and abuse of the family, conflict in the family, neglect, rejection and drug problems (The children's society, 2000). They runaway children are made up of children who, due to the lack of accommodation or economic deprivation, live with other people. The children at risk are children living in the motels, hotels, tents, parks or campsites, those living in emergency or temporary camps, those abandoned in hospitals, children awaiting placements in foster care, those using primary night-time residence as a public or private location (Malindi, 2014).

In the United Kingdom, it is estimated that about 100,000 runaway children are forced to vacate their homes each year. A systematic research conducted in 27 different regions in England, Wales, Scotland and Northern Ireland reported that 77,000 children under the age of 16 flee each year. 14, 000 children who flee are forced to leave home by parents



(Malindi, 2014). It is estimated that each year 129,000 run away incidents occur. More than half (53%) of have run away before the age of 11. The survey also discovered that in the United Kingdom children running away from home had more to do with emotional and relationship issues that children experienced than prosperity or poverty (Malindi, 2014; West, 2003).

### **2.7 Child Streetism in the Latin America**

Studies have shown that Latin American nations are also confronted with the problem of street children (Malindi, 2014). Around 75million children are projected to be on the streets of cities in Latin America (Mahlangu, 2002). West (2003) suggests that children as early as seven years participate in numerous street activities such as selling candy, or newspapers, cleaning cars, shoe shining, entertaining passers-by, begging, scavenging and stealing.

Mahlangu (2002) indicates that in Latin American states, the issue of streetism is more serious than any other developing country. The study also found that there are around 40 million children live on the streets of Latin American states who face difficulties in their attempts to survive.

In Brazil, it is estimated that more than twenty million children are grow up on the streets in Brazil with an approximate 5000 street children living in the Bogete street in Brazil (Mahlangu, 2002). This is generally due, as indicated by Malindi (2014), to urbanization, severe poverty, inhuman living conditions, family disintegration, abuse of drugs and alcohol and domestic violence, among others.





## 2.8 African Situation

The child streetism phenomenon has been rising in Africa over the last two decades. Girmachew (2006) traced streetism in Africa to the 1960s and indicated that child streetism have been growing in Africa since the 1960s. It started from a handful of boys who deserted home out of recalcitrant behavior, their number increased in the early 1990s and by the close of the 1990s it escalated to thousands. Mahlangu (2002) asserted that street children in Africa more often than not originate from poor families and some are pushed on the street not because of poverty in their family but also because of politically incited violence, wars, harassment and abusive parents. The situation of children living and working on the streets of urban areas in Africa has reached a problematic depth (Mahlangu, 2002).

In recent years, the African continent has witnessed high level of crisis in the form of natural disasters such as famine which is a consequence of drought and ethno-religious wars (UNICEF, 2007). The conditions of the IMF Structural Adjustment Program (SAP) and the effects of globalization have also contributed to the aggravation of the problem most African countries are facing. This has facilitated transformation of the African society. Kapoka (2000) indicated that the social transformation has contributed to an increased number of street children in the continent. Kopoka (2000) has further indicated that the growth of child streetism in most African cities is as a result of poverty, political instability, war, harassment, abusive parents and to some extent the effects of HIV/AIDS.

The problem of child streetism is a response to a chain and accumulation of structural variables such as poverty, rural migration, undesirable condition of urban families and injustices, which are diversified at different level (AU, 2011). The study also showed that



the issue is due to inter-personal variables such as aggression, rejection and deviant behavior etc.

Approximately 10 million children in Africa live as street children without available families for them (UNICEF, 2004). According to Mahlangu (2002), there is an estimated 20, 000 children on the street of Khartoum and 500 children who are living in an institutional home in Ethiopia.

Malindi (2014) stated that the number of street children in Zimbabwe has risen in recent years with boys being the dominant group. The key reasons why children migrate to the streets in Kenya are factors such as poverty, peer control, death of parents, disintegration of the family, displacement by Civil Wars, drought and need for freedom (Plummer et al., 2007). Kaime-Atterhog et al. (2007) found in Kenya that most street children mostly come from poor families who participate in unsustainable income-earning practices such as casual work, hawking, and sex work. Owing to the failure of the parents to pay for their schooling, children drop out of school and sometimes end up on the street to support themselves and their families (Kaime-Atterhog et al., 2007). Kenya's street children are known for generating their income through activities such as begging, car guarding, shoe shining, scavenging, selling sweets and flowers, theft, prostitutions and sales of drugs to survive (Kaime-Atterhog et al., 2007). A report by the Consortium for street children estimated that about 300,000 children live and work on the street of Kenya and over 50% of them are concentrated in and around the capital of Nairobi (Consortium for street children, 2009).

In Nigeria, Abebe (2008) indicated that over 95% of children on the street of Akwa Ibom State in Nigeria are often declared as witches by some pastors and are abandoned to live



on the streets by their parents (Abebe, 2008). About 10,000 to 12, 000 children are said to be living in the street of South Africa because of poverty, overcrowding, abuse, neglect, family disintegration and HIV/AIDs (Abebe, 2008).

Cumming (2007) writing on street children in Sierra Leone stated that out of 4.6 million estimated population in 2001, though not officially collated, between 1,625 and 3,000 of the population are street children. In Tanzania, approximately 437,500 children are found on the street (Cumming, 2007). The study indicated that children as young as two years old approach both Africans and foreigners for money or food. Cumming (2007) observed a common phenomenon where street children move from drivers' windows to passengers' side of the same vehicle in an effort to find sympathetic person who will give them money or food. The research also noted that some of the children even tag the arms of pedestrians to encourage them to give them money while others beg with young babies at their backs in order to catch the attention of sympathetic adults to give them money.

### **2.9 The Ghanaian Situation**

In Ghana, there are about 50,000 street children between the age of 10 and 18 years with many of them believed to be in Kumasi, Accra and Takoradi and the other major cities across the country (Wutoh et al., 2006).

A head count conducted by the Catholic Action for street Children revealed that in Accra alone, there were 10,401 street children as of 1996 (CAS, 2003). In 2002, a headcount by CAS revealed that about 19,196 street children in Accra alone (Hatloy & Huser, 2005). Statistics by CAS in 2006 also estimated about 21,143 children living on the street of Accra alone. In 2009, around 21, 140 street children, 6000 street infants, 7,170 street



mothers under 20 years of age were discovered by the Consortium for Street Children (CSC, 2009).

### **2.10 Child Streetism in Tamale Metropolis**

Many studies available in Ghana regarding child streetism in Southern Ghana have indicated that bulk of the street children have migrated from the Northern part Ghana to the South (see Awartey, 2014, CAS, 2009, DSW, 2011). However, in recent times, studies have shown that many of the children stays in Tamale. For instance, Kusters (1995) indicated that as at 1995, there is an estimated 600 children living in the street. She sampled 75 street girls and 75 street boys and found that many of the children are children on the street whilst only 12 boys were children of the street. She noticed that all the girls were more cared for by their families in terms of lodging, food and healthcare while the boys took care of themselves and provide their needs. She also found that most of the street children are abused by other street children, by the security officers, market women, general public etc. They are often faced with security challenges as they lack safe place to keep themselves their belongings and money.

### **2.11 Factors that Promote Child Streetism**

It has become a difficult task by researchers to pinpoint the specific factors that promote the phenomenon of child streetism. Nonetheless, various attempts have been made by researchers to figure out some of the factors that promote street child phenomenon. Many studies have revealed some social, economic, cultural and policy related factors that promote street child phenomenon. These factors have also been described by many researchers as either a push or pull factors. (see De Moura, 2005; Le Roux & Lewis, 2001; Malindi, 2014; Montane, 2006; Pare, 2004). Some of these factors are presented into details below;



Owusu (2012) found that death is a factor that push children to the street. Adeyemi & Oluwaseum (2012) explained that where one or both parents dies, children become orphans and usually lack the support of adults. As a result, the children adopt street life in order to survive (Adeyemi & Oluwaseum, 2012). Eyiah (2003) opined that in most situation when one of the parents die leaving the other, who have no or limited support, it becomes problematic. In an attempt by living spouse to make a living and cater for the family, the children are encouraged to go to the street to make income, through activities such as begging, porting, scavenging, in order to support the family.

Another major factor that promotes the street child phenomenon is poverty. The World Health Organisation (2000) for instance explained that children are often pushed to work on the street due to poverty. Impoverished parents often send their children to work not out of choice but because of the family's economic hardship (Muchini, 2001). Hecht (2003) explained that most children are being refused access to school because their parents are not able to pay for their fees. These children are often seen on the street trying to earn a livelihood by engaging in activities such as begging, porting, drug peddling, sex, running errands, scavenging, shoe shining and even theft at the expense of schooling (Hecht, 2003).

Furthermore, Kopaka (2000) found family disintegration as a major cause of child streetism. Many studies have revealed that the family, which is an important social institution, is going through serious challenges. It has been revealed that fewer and fewer children are living in a stable and caring family environment (Kopaka, 2000). Many family breakdowns have left children to find a living for themselves (Kopaka, 2000). Studies have also shown that modern families are usually characterised by parents who are



always absent from home with poor limited contact between children and parents, alcoholism and domestic abuse (Kopaka, 2000). This situation makes the children very exposed to bad peers who end up influencing them to the street (Kopaka, 2000).

Moreover, violence and abuse on children is also another factor that promote child streetism. Many of the street children have the believe that moving to the street is much better than facing some problems at home. Many of the children move to the street due to factors such as physical or sexual abuse from the house and neglect from the house (WHO, 2000). Again, studies have also indicated that most children are abused and forced out of the house to live on the street because their behaviour is not approved by their family or society. Example of such behavior include Teenage pregnancy, homosexuality or substance use (WHO, 2000). Aptekar (1988) found that verbal and physical abuse and other conditions of neglect contributes to children to adopting street life. Aptekar further explained that some of the families the street children are coming from have mothers who are victims of abusive male partners. With the mothers being able to endure the abuse of their partners because they want to save their marriage, the children are usually not able to endure the abuse, hence they run away from home due to poor relationship with their families (Aptekar, 1988; Huang et & Mendoza, 2004). UNICEF (2006) found in a study that inappropriate parenting including child neglect and abuse by family is also a push factor for child streetism. In a survey of about 900 street children, it was discovered that although family financial crisis played an important role in pushing children to the street, there was a strong connection between parenting style and children running away from homes (see; Bourdillon, 2000; Donald & Swart-Krug, 1994; Rizzini, 1996). The study



explained that parents who abuse children in their correction mechanism often contribute to children moving to the street.

To add, family disintegration has been identified within the literature as a major factor that promote child streetism. Kopaka (2000) for instance observed that in recent times the family institution is experiencing a lot of upheaval. Very few children are living in a stable and caring family environments. Many families have been broken apart with children being left to find livelihood for themselves. Studies have also revealed that breakdown of family structure and divorce are major reason why children move to the street (see Abebe, 2009; Ojo, 2003; Senaratna & Wijewardana, 2013).

Large family size is also a factor that have been cited within the literature to contribute the phenomenon of child streetism. Abebe (2009) revealed that many children lived in the street as a result of large family size. The large family size coupled with lack of steady income often push children to the street. These children engage in all kinds of activities to make a living.

Mangesha (2001) in his study on policy framework for street children in Addis Ababa found that the services provided to street children by different organisation plays a key role in attracting children to the street life. He explains that some organisations are simply engaged in providing basic services for the children in an attempt to get them out of the street. Such service makes life easier for these children which influences their willingness to remain on the street or more seriously serve as a pull factor for attracting other children to the street.



Rural-Urban Migration and urbanisation has also been identified as one of the causes of child streetism. This is a situation which has been facilitated by modernisation and industrialisation. Adeyemi & Oluwaseun (2012) mentioned that modernisation is the causal factor of urbanisation which greatly contributes to the phenomenon of child streetism. They argued that people relocate and work in areas where industries are cited and these areas subsequently developed into urban centers. Abotchie (2012) further explained that urban areas such as Accra, Kumasi, Tamale and Obuasi have prospects, opportunities and indicators of good life such as good schools, good paying jobs, good health centers, large markets etc that are not available in the rural areas (Abotchie, 2012). The children are often attracted to the urban streets by such indicators of good life (Adeyemi et al., 2012). Lugalla & Kibasa (2003) shared the same sentiments that many of the children on the street leave home to seek for supposedly good life in the urban areas, without knowing anyone in the urban centers, they end up on the street. CAS (2003) also added that in most cases, the children have friends who are already staying on the street and so they end up joining them in the street.

Kebade (2015) also explain that desire for freedom and independence is a factor that push children to the street. Kebade (2015) indicated that most street children believe that by moving to the street they are free from family control. Thus, they believe that they will get the needed freedom and independence they are looking for. Aptekar (1988) explained that some children migrate to the street with the aim of being free from family control so they can live free life (Aptekar, 1988). A study conducted in South Africa reported that for some street children, moving and living on the street often meant enjoying freedom (Donald & Swart-Krug, 1994).





A study by Alenoma (2012) found that most parents were of the view that the movement of children to the street are due to reasons such as wanting to learn trade, deficiency in the basic educational system, children's desire to raise pocket money for school, poverty, divorce and desire to support family.

Inadequate housing is also another factor that promote child streetism . Kibrom (2008) noted that children who are on the streets in the cities of many developing countries are there because they do not have suitable homes. Some of the children live in very cramped situations such as one room shared with another family. After attaining adolescent, the children are unable to live in such conditions and instead opt to the street (Mercer, 2009).

Finally, Dysfunctional families has been identified within the literature to promote the phenomenon of child streetism (Bourdillon, 2000). Family as the basic unit of the society plays an important role in the socialisation process of the individual, however due to dysfunctional families have made it very difficult for the families to play their basic but important role. When families are dysfunctional it becomes very difficult for the families to address the tendencies engaged in delinquent behavior and leaving home. Dysfunctional families have been identified to be a major reason for domestic abuses in many families.

This may act as a push factor for children moving to the street (Bourdillon, 2000).

### **2.12 Challenges Faced by Street Children**

According to UNICEF (2017), street children live a transitory life style and lack basic necessities like food, good healthcare, and safe place to stay. They are mostly seen living in inhumane conditions, physically abused and deprived of basic services such as education. The society treat them as outsiders rather than children that needs to be nurtured and protected. Thus, street children are both spatially and socially oppressed, through



multiple forms of social control, marginalisation and powerlessness. They also suffer from physical, sexual and trafficking for the purpose of labour and sexual exploitation by unscrupulous elderly.

Ojelabi & Oyewole (2012) for instance explained that street children constitute the marginalised group in the society, largely because they are casualties of the lower economic growth, poverty, loss of traditional values, domestic violence, physical and mental abuse. They further explained that the continues exposure to harsh environments and the nature of their life style makes them vulnerable to substance use which threatens their mental, physical and spiritual wellbeing. Many of these children are confronted with discriminations, abuse, health and denial to social services (Ojelabi & Oyewole, 2012).

Marie (2001) held the view that street children face different kinds of violence on the street but the most obvious forms of violence associated with street children is extra-judicial killings, tortures, beating by police and other public and private security forces.

According to Amir & Rana (2002), street children suffer from both physical and psychological challenges. Their study explains that the exposure of the street children to unhealthy living and working conditions makes the children highly vulnerable to physical and sexual abuse. The circumstance also makes them addicted to drugs which conyrintutes to their indulgent in criminal activities. Amir& Rana further revealed that these children are also exposed to hazardous working environment and are exploited by adults.

For Van Rooyen & Hartel (2002) street children are mostly vulnerable to a wide range of issues, including security and guidance. They are mistreated, malnourished, raped, exploited, deprived socially, refused access to education. individuals and groups who are



expected to protect the children including parents, guardians and police are abusing the children (Van Rooyen & Hartel, 2002). Van Rooyen & Hartel again indicated that in some cases, the children, especially the girls, engaged in prostitution and are sexually abused. They often engaged into hard drugs which damage their respiratory system.

West (2003) added that street children are often intimidated on the street by their peers and the adults in the society. Anon (2003) explain that street children are totally not welcome in some communities. They are viewed as problems, criminals and socially misfit, as a result the community tend to maltreat the children (Van Rooyen & Hartel, 2002).

Anon (2003) indicated that street children are always afraid of being detained by the police and sent back to their families or the non-supporting community from which they run away. When the children are sent back home without putting efforts to change the situation that brought them out, they end up facing the same hostile conditions which often forced them back to the street again.

Anarfi (1997) in his study found a relationship between child streetism in Sexual Transmitted Disease. He found that most street children are sexually active. They do not have much knowledge on sexually transmitted diseases. As a result, they engage in unsafe sexual acts which expose them to sexual transmitted diseases. The girls often use sexual activities as a means of money exchange.

According to Hecht (2003) in most communities, street children form the marginalized group. They do not have an appropriate relationship with major social institutions such as the family, education and health. They are also exposed to harsh environments and the



continuous exposure of the children to the harsh environments and the nature of their life style makes them highly vulnerable to substance abuse which affects their mental, physical, social and spiritual wellbeing.

Flynn (2008) also indicated that life on the street is difficult and children are faced with very difficult and dangerous circumstances on a daily basis. This expose them to dangers such as injury, murder, violence, rape, sexual exploitation. Drugs, HIV/AIDs, hunger and solitude (Guernina, 2004).

### **2.13 Coping Strategies of Street Children**

Coping strategies are various ways in which an individual or people deal with the demands of living (Guernina, 2004). Coping process means, individual or group of people finding solutions to the problems they face in life and also strategies that helps people to adopt to the demands of a changing environment. It includes behaviors that are relevant, active, effective to person in dealing with the biological, psychological, environmental and socially related challenges (Huang & Mendoza, 2004; Flynn, 2008; Mercer, 2009). They are also activities that allows people to secure the necessities of life such as food, water, shelter and clothing. It includes acquiring the knowledge, skills, social networks, raw materials and other resources that is required to meet individual or collective needs on a sustainable basis with dignity (Mercer, 2009; Ababe, 2008).

In the context of this study, the process of coping refers to the series of solutions street children creates to the problem they face on the street. The life style inherent to living on the street exposes children to wide range of situations that are harmful to them (Sherman et al., 2005). Many studies have highlighted the strength of street children, the personal resources at their disposal and their reliance upon their resources in order to survive.



Studies often acknowledge that street children are creative and resourceful when challenged with difficult situations (Swart, 1990). Street children rely on variety of survival strategies in order to cope with the day-to-day challenges associated with being on the street. They are known to be mobile and always on the move (Sherman et al., 2005).

Most studies conducted in many developing countries have revealed that street children largely engage in activities such as shoe shining, begging, singing on buses, vending, carrying loads in market, guarding, washing cars, pimping and prostitutions among others (Ennew, 2003).

Abebe (1999) for instance found that one of the livelihood strategies among street children is begging on the street. He explained that as a way of living, street children resort to begging either as full-time or part-time in order to earn an income that is able to provide for their basic needs and also enable them to significantly contribute to the family's income.

Ababe (2009) added that by begging, street children are able to ensure that their basic needs are met and in some cases that of the family. He also indicated that in most cases the children beg for money, but in some cases, they may be given help in kind including clothing and stationaries. In some cases, they beg for leftovers of food from hotel, restaurant and cafeterias (Ababe, 2009). Grimachew (2006) provided the different approaches street children uses in begging. He revealed that the primary among the methods used is the brave and persistent approach. With this method they show to people they don't take "NO" as an answer. If they are denied, they ask politely over and over again until they are given (Ababe, 2008).



Girmachew (2006) indicated that one of the most popular activity for street children is shoe shining. This involves cleaning and polishing the shoes of people on the street. He indicated that many of these children have a fixed place where they operate whilst others are mobile in the city.

Habtamu & Laha (2016) in their studies of livelihood on street children and the role of social intervention, using meta-analysis to review 31 literature, found that most literature provided information on three broad categories of informal activities that street children are involved in including street begging, street daily labourer and street vendor. They found that in Africa, out of 25755 papers reviewed, 274 (1.06%) papers captured that street children support themselves and their families through begging, 1977 (4.13%) papers indicated that they engage in street vending and 187 (0.78%) captured that street children engage in daily labourer. Whilst in Latin America, out of 68014 papers reviewed, they found that 4 (0.66%) papers indicated the children were involved in begging, 13 (2.13%) indicated that street children are involved in daily labour and 52 (8.54%) indicated that they perform different kinds of activities.

According to a census conducted by the DSW et al. (2012), majority of the street children 58.2% are involved in porting luggage, 27.7% are street vendors 9.1% are engaged in dish washing, 32 are in shoe shining and 1.8% are sex workers.

Kebede (2015) in his studies indicated that street children engage in varied activities such as carrying luggage and shoe shining in the street in order to diversify their source of income in order to survive on the street. They also work in places where there are many



people such as the metro bus station, shopping malls, restaurant and market centres (Ray, Davey & Nolan, 2011; Ababe, 1999).

Studies within the literature has also indicated that most street children around the world do not have permanent place they live and sleep. They often move from place to place therefore making it very difficult to study them. They usually spend their night in any available open space. Hai (2014) in his studies of street children in Bangladesh revealed that street children move from one place to another during the day time to find petty jobs whilst at night, they sleep on pavement and under bridges. Similarly, Ray et al. (2011) indicated that street children often sleep in parks, gardens, under bridges and behind shops and restaurants in South Africa.

Hai (2014) again revealed that street children often bath three to four days intervals, thus they do not take their bath regularly, they often patronize public toilets and, in some cases, defecate in the gutters during the night.

Additionally, Meyer-Weitz & Asante (2016) in their study on the street children in Durban, South Africa revealed that to cope with street life, street children often resort to the use of drugs. They indicated that street children use hard drugs to cope with the activities on the street. They revealed that majority of the street children explained that substance use helps them to be hardworking and earn enough to support themselves and their families (Weitz & Asante, 2016).

Fiasorgbor (2015) indicated that street children seek treatment from friends, herbalist and self-medication to cope with their health challenges. Similarly, Amury & Komba (2010)



also revealed that street children resort to self-medication, traditional healers' service and in some cases, they sleep off their illness.

## **2. 14 International Efforts to Addressing Child Streetism**

Many studies have indicated that there have been efforts at the international level to protect the rights and welfare of children and that includes street children. The international policies provided framework and committed governments around the world to put in local mechanism to protect the rights and welfare of children. Some of these international policies as found in many literatures include; the UN convention on the rights of the child (CRC) and the AU Charter on the rights and welfare of the child (see, UN, 1989; AU, 2018; Boakye-Boateng, 2006; DSW et al., 2012).

### **2.14.1 The UN Convention on the Rights of the Child (CRC)**

The convention was ratified in 1989 by the UN General Assembly following several reports of child rights violation by many organisations, largely as a result factors such as wars and poor economic growth (CRC, 1989; OHCHR, 2011). It was ratified by 190 members countries. The convention provided a wide range of provisions that covers areas such as civil rights and freedom, family environment, basic health and welfare, education, leisure, cultural activities and special protection of which member nations were expected to localize them in their domestic laws to ensure that the welfare and rights of children are safeguarded (OHCHR, 2011). Thus, the convention has provided a framework for safeguarding and promoting the rights and welfare of the children across the world (CRC, 1989; DSW et. al, 2011; OHCHR, 2011).





### **2.14.2 AU Charter on the Rights and Welfare of the Child**

The Assembly of Heads of State and Government of the African Union (AU) ratified the charter on the rights and welfare of the African Child in 1990. African leaders noted with much concern about the situation of most children in African as a result of socio-economic development, cultural, natural disaster, armed conflict, exploitation and hunger. The leaders recognised that African child occupies a unique and privileged position in the African society and that in order to fully develop their personality, the African child should grow up in a very familiar environment, in a happy atmosphere that is full of love and understanding. The charter believes that the African Child requires particular care with regards to health, physical, mental, moral and social development and should be backed by legal protection in conditions of freedom, dignity, and security (AU, 2011). The charter which contains 48 articles sought to protect the private life of African Child and to safeguard the child against all forms of economic exploitation and against work that is hazardous to the child welfare, health, education, physical, social, mental, spiritual and moral development of the African child. The charter also required member states to put in mechanisms to protect against abuse and bad treatment, negative social and cultural practices, all forms of exploitation, sexual abuse and involving children in illegal drug use and /or sales. The convention also aimed at preventing the sale and trafficking of children, kidnapping and use of children to beg (AU, 2011).

Despite the availability of this charter, the African continent remains one of the continents that is facing serious challenge when it comes to the issue of child streetism suggesting that little is done by many of the African countries to protect the welfare and rights of their children.



## **2.15 National Policies Put in Place to Address Child Streetism in Ghana**

Many studies have pointed to some national policies that have been put in place in Ghana to deal with the phenomenon of child streetism. Most notable policies include the children's Act (Act 560), the child and family welfare policy, the National policy of Action for the elimination of worst form of labour, the domestic violence Act (Act 715) and the Justice for children policy (see Abochie, 2012; Adjei, 2014; the Children's Act of Ghana, 1988; GOG, 2015). Some of the policies are reviewed below;

### **2.15.1 The Children's Act of Ghana (Act 560)**

On the 30<sup>th</sup> December 1998, Ghana enacted the Children's Act (Act 560) which was in fulfilment of the UN Convention on the rights of the child it committed itself to. The Children's Act (Act 560) sought to protect the interest and needs of the Ghanaian Child. The Act focused on the basic rights of children, the maintenance and adoption of children, regulating child labor and apprenticeship, Quasi-Judicial and Judicial Child protection, fosterage, adoption, and other matters that concerns the welfare of children in the country. The Act served as a major law and policy guideline for the protection of children in Ghana (The Children's Act, 1998).

Section 18, 19 and 20 of the Act have been highlighted for the purpose of this research.

The Act laid down strict guidelines to be used to decide if a child needs state care and safety. The act placed on the district assemblies the responsibilities to protect the welfare and rights of children within a district, while the social welfare and community development centers are responsible for investigating cases of child rights abuses.

Section 18 (1) for instance captured that a child needs care and protection if the child –

- (a) is an orphan or is deserted by his relatives.



- (b) has been neglected or ill-treated by the person who has the care and custody of the child.
- (c) has a parent or guardian who does not exercise proper guardianship;
- (d) is a destitute
- (e) is under the care of a parent or guardian who by reason of criminal or drunken habits, is unfit to have the care
- (f) is wandering and has no home or settled place of abode or visible means of subsistence
- (g) is begging or receiving alms, whether or not there is any pretense of singing, playing, performing, offering anything for sale or otherwise, or is found in any street, premises or place for the purpose of begging or receiving alms;
- (h) accompanies any person when that person is begging or receiving or receiving alms, whether or not there is any pretense of singing, playing, performing, offering anything for sale or otherwise”.

The provision also stipulated actions to be taken to respond to circumstances when the child need such a protection and care as provided by the section 18 in section 19.

Section 20 also provided for the care order of family tribunal and prescribed how the family tribunal can obtain a care order. It also stipulated the institution the family tribunal must entrust the care of the children to.

Section 20 provided that “A family tribunal may issue order to the department on the application by a probation officer or social welfare officer under section 19(4)



- (1) The care order shall remove the child from a situation where he is suffering or likely to suffer significant harm and shall transfer the parental rights to the department
- (2) The probation officer or social welfare officer shall take custody of the child and shall determine the most suitable place for the child which may be-
  - (a) An approved residential home
  - (b) With an approved fit person; or
  - (c) At the home of a parent, guardian or relative
- (3) The maximum duration of care order shall be three years or until the child attains eighteen years which is earliest and the Family Tribunal may make an interim order or may vary the order.
- (4) The family tribunal may make a further order that the parent, guardian or other person responsible for the child shall pay for the cost of maintaining the child” (see the Children’s Act of Ghana 560, 1998: p10-11)

The Children’s Act (Act 560) has thus provided the necessary framework for addressing issues of child streetism. The Act when applied in a very effective and efficient way will help guide street children back home to their parents. In situations where the parents are completely unable to take proper care of the children the state take care of their welfare.

#### **2.15.2 The Child and Family Welfare Policy**

The child and family welfare is another national policy that has been designed with the intention of addressing child related issues including child streetism in Ghana. The child and family welfare policy was first formulated in 2015 by the Ministry of Gender, Children and social protection (MGCSP) with the support of UNICEF. It was introduced in reaction to an increasing concern regarding issues of child rights and welfare in Ghana



including child trafficking, child streetism, domestic violence, corporal punishment, sexual abuse and exploitation, child marriage among others (GoG, 2015).

The policy was also intended to reduce the gap in existing policies that aimed at addressing child rights and welfare in Ghana. The child and family welfare policy focused on addressing 3 key areas; domestic violence and child streetism, child maltreatment and abuse, exploitation and neglect and other protection issues concerning children that is perpetuated by the child's own risk-taking behavior like substance abuse, unwanted pregnancy or being in conflict with the Law (GoG, 2015).

The child and family welfare policy sought to achieve ten set of objectives. Some of these objectives include;

- to design child and family welfare programmes that shield children from all forms of violence, abuse, neglect and exploitation.
- To ensure an effective coordination of the child and family welfare service at all levels,
- to build the capacity of institutions and service providers
- to ensure the quality of services for children and families in urban areas,
- to ensure provision of adequate resources for functioning of child and family welfare services at all level (GoG, 2015).

### **2.15.3 The National Plan of Action (NPA) for the Elimination of Worst Form of Labour**

Ghana ratified the ILO Convention No. 182 in 2000 which sought to protect children against the worst form of child labour. The convention considered acts such as slavery, sales and trafficking of children, serfdom, and forced labour, forced recruitment of



children into armed conflict, the use of children for prostitution, the use of children for illicit activities such as producing and trafficking drugs as among the worst form of labour (ILO, 1999).

Since the ratification of the convention in 2000, the government of Ghana has considered the elimination of worst form of child labour as a priority for the total enhancement of the living standard of its citizens and the sustainable development of the country. In further fulfillment of the convention, the government of Ghana have formulated ‘the National Plan of Action for the Elimination of worst form of Child Labour. This plan provides the framework that seeks to promote a more coordinated effort towards the elimination of the worst form of child labour. The plan also provides a concrete coordinated platform for implementing other national legal instruments which address various forms of child labour. The NPA also serve as a concise set of agreed measures for implementation by different partners such as the MDAs, MMDAs and civil society organisations (CSOs). The plan has detailed the functions of every implementing agencies towards achieving the objective of the plan.

The NPA was also an instrument for fulfilling Ghana’s obligation to a number of international instruments to which Ghana is a party including the UN Convention on the rights of the Child, the AU Charter on the rights and welfare of the child and the sustainable Development goal (MGSP, 2017).

#### **2.15.4 The Domestic Violence Act, 2007 (Act 715)**

Several studies have indicated that children move to the street due to issues domestic violence. The Domestic Violence Act, 2007 (Act 715) was enacted to respond to issues of domestic violence and children are included in that category. The Act covers arears such



as physical, psychological, sexual, economic violence among others and provides for both criminal and civil remedies for victims including compensation. However, despite the existence of this Act, children are still faced with challenges of domestic violence which accounts for children moving to the street.

#### **2.15.5 The Justice for Children Policy (MGCSP, 2015)**

Studies have indicated that children often move to the street due to injustices they face within their society in terms of violence, denial of parenthood, parental irresponsibility. On the street they are faced with injustice such as violence, physical and sexual abuse among others. The justice for children policy was expected to prevent and protect street children against all forms of injustices within the society (UNICEF, 2005).

The justice for children policy sought to set up a well-structured and coordinated justice for children which will promote the wellbeing of children in the country, prevent them against any form of violence, exploitation and abuse. The justice for children policy also sought to protect children from harm and also promotes justice for children. The justice for children policy relates to children who have come in to contact with the justice system either as victims of crime, witnesses, alleged offenders and/or offenders and in other cases involving children (GoG, 2015).

The justice for children policy intended to improve access to justice for children in line with acceptable standard, values and beliefs of the formal and community justice system. The policy also aimed at preventing juvenile offending, strengthen programmes for rehabilitation and social reintegration. The justice for children policy again aimed at strengthening formal and community justice systems and also link both the formal and community justice systems up to enhance access to justice and protection for children who



are in conflict with the Law. The policy also provided protection for child witness, children who are victims of crime, children involved in family and other civil proceedings. The policy also provided a guide for the reform of laws, policies and procedures to improve access to justice for children (GoG, 2015).

Some of the guiding principles underpinning the justice for children policy included the following;

- Non-discrimination based on race, gender, ethnicity, religion, disability, health status, custom, status of parents, socio-economic status or geographic location.
- The best of interest of child is paramount in all issues with respect to child custody, child maintenance, adoption as well as when in contact with the law.
- The right to protect the dignity and privacy of children in all actions within the formal justice systems for children as well as community justice systems for children.
- Confidentiality at all stages of justice system for children paramount.
- Other principle held by the policy include right to be heard in matters that affects them, right to fair trial, right to legal representation and access to social service-related support (GoG, 2015).

### **2.16 Factors that Affects the Formulation and Implementation of Policies on Street Children**

Studies have revealed that several factors affect the formulation and implementation of policies meant to address the problem of child streetism. Smart (2003) for instance indicated that there are four major challenges that serve as impediments to the formulation and implementation of policies that target street children. They include the lack of





consensus on policy definition of street children, the emergence of rights-based approach to addressing child streetism, the absence of political will and ineffective resource base to address the phenomenon.

For Aptcker (1988), the lack of consensus on policy definition of the term child streetism is the first challenge that affects the formulation and implementation of a comprehensive policy program that aim at addressing child streetism. UNICEF have provided a frequently used definition and have categorised street children into Children on the street and children of the street (UNICEF, 2006). However, this definition is not fully used all over the world. Governments and non-governmental organization use their own working definitions that meets their agenda (Aptcker, 1988). As a result of the differences in terms of the definitions of the term, and the magnitude and uniqueness of the problem, large part of the problem is left without being fully understood by the policy makers and implementers (Ansel, 2005; Hutchison, 2010).

The second challenge is the emergence of the rights-based approach for programs that aim at addressing child streetism. Since the CRC was ratified by many nations, focus have shifted from welfare/need approach to the rights-based approach to dealing with the problem of child streetism. This new approach is not fully understood by many nations, hence the inability of many nations to design programs that provide a comprehensive solution to the problem of child streetism (see Ansel, 2005; Hutchinson, 2010).

Thirdly, the lack of political will by governments is another challenge affecting the formulation and implementation of the policies concerning child streetism. Kopoka (2000) explained that the lack of political will by governments to address the phenomenon of child streetism is manifested in their total denial and reluctance to acknowledge the



existence and magnitude of the problem. Most governments' response to addressing the phenomenon have been characterised by repression and cleaning of the urban areas by removing the street children from the street forcefully. Such actions suggest that there is lack of commitment by the government to properly look into the issue and find comprehensive solutions to the problem (Kopoka, 2000).

Volpi (2002) further explained that in situation where the governments have recognised the existence of the problem, they fail to have a social policy that specifically deal with the problem of child streetism. Most national policy regarding child streetism, tend to be generalised and fails to identify street children as special category of vulnerable children that requires unique attention. Many governments also tend to underestimate the problem because of lack of reliable information on the size of the problem. As a result, many social policies leave the problem of child streetism unspecified. This poses greater challenge to the efforts made to address the problem (Volpi, 2002).

Finally, limited resource flow is another factor mostly cited to have affected the formulation and implementation of the street child related policy. Awartey (2014) explained that when the political will of the government is too low in addressing the issue of child streetism, it consequently affects the amount of the budget that will be assigned to address the problem. Awartey (2014) further explained that in situations where there exists a fair political will, limited budget may hinder the mobilization of necessary resources to address the problem.

### **2.17 Common Strategies Used for Addressing Child Streetism**

Street children are mostly found on the street due to the social and economic difficulty they face in the family and the society (Anon. 2003). Therefore, the most important



strategy that can be applied in addressing the problem according to Ennew (2003), is to stop the at-risk children from moving to the street. This he believes can be done by protecting the children from the difficult social and economic situation they encounter which pushes them to the street. Some of these strategies are explained below;

**2.17.1 Economic Support:** One of the street child policies and programmes often cited by many researchers is the policies that focus on economic support. According to Ennew (2003) economic support policies for street children often focus on the children's needs for income and economic independence rather than rescuing them from the street life. This strategy is mostly achieved through the availability of programmes that responds to the economic needs of the children (Ennew, 2003). It includes formal and informal education, life skills, technical and vocational training. It is also achieved through microfinance support to the parents of the street children with the view that it will assist in preventing the migration of the children to the street (Anon, 2003).

**2.17.2 Focus on Reintegration:** Another policy and programmes often used in addressing the street child phenomenon as identified within the literature is reintegration of the children to their families. Anon (2003) explains that children often move to the street due to the instability of the social environment, including the families, schools and the communities. He therefore posits that attempt to get the children out of the street is to reunite them with their families and the communities at large with the assumption that they need to go back to their home and that their communities and their families are willing to accept them back. Schurink (1993) further stated that in situations where the strategy of reuniting them with families fails, alternative is found in foster families, adoption and community homes to cater for the needs of the children. Anon (2003)



emphasised that to effectively reunite street children to their families and communities, members of the community should be educated or sensitised on issues of streetism through awareness campaign in order to prevent stigmatisation of ex-street children. This the study believes will help the children settle well in the community when they are reunited. Schurink (1993) advised that in the case that the children are to be reintegrate to their schools, the children should not be immediately reintegrated into the formal education system. It is important to first assess the children's needs. This is because they might even prefer informal education that has a curriculum designed in the form of vocational training that is linked with literacy, life skills and numeracy that they deem relevant to their experience in life and work.

**2.17.3 Networking and Institutional Operations:** NGOs have played significant role in designing and implementing policies that aimed at addressing streetism over the years, usually in the form of supplying of services that supplement local and national government's efforts (Anon, 2003). It is important for the NGOs to establish a strong network with the local government and other service providers to strengthen their forces to in combating the street child phenomenon. Anon (2003) again added that the affected families should be included in the development of strategies to prevent the problems.

Dybics (2005) proposed four (4) strategies to dealing with child streetism based on West (2003) work. Dybics (2005) explained that in addressing issues of child streetism, it is important to examine the reasons why they migrate to the street. He covered these strategies under the following headings, prevention, the street, the street children protection centre and reintegration.



**2.17.4 Prevention:** The first strategy according to Dybics is prevention. Prevention in this context focus on addressing the push and pull factors that often promotes child streetism, including extreme poverty (Dybics, 2005; West, 2003). With this strategy, Dybics believed that child streetism can be addressed through community-based programmes that support employment creation in the formal market and also programmes that increase market and people's sense of responsibility for their own development (De Moura, 2005). This strategy also require government to play a crucial role in reducing poverty through skills development and employment creation (Ward & Seager, 2010). Both Dybics (2005) and West (2003) are of the opinion that the government can also play a crucial role under this strategy by providing housing for the children, offering them skills training, giving them grants, providing them with primary health care and emergency assistance, reuniting them with their families and returning them with their families or returning them to schools. Dybics (2005) suggest that in the case where children migrate to the street due to physical, sexual, emotional abuse and lack of parental skills, the children should be removed from dangerous family circumstances and placed in other forms of care such as foster care or adoption families.

**2.17.5 Focus on Children on the Street:** The second step as according to Dybics (2005) focus on children who are already on the street. The most applied strategy in this category include the use of the drop-in centers, shelters, children's home as well as street education (Ward & Seager, 2010; Dybics, 2005). Dybics (2005) explains that the creation of the institutions such as shelter homes and drop-in-centers will enable street children receive formal and informal education, proper rest, proper accommodation, social recreation,



counselling and place of safety. These institutions should provide the basic services that meets the physical and mental needs of the children (Ward & Seagar, 2010).

**2.17.6 Protection:** The third category focused on protection which provides attention on protecting the rights of the street children. This strategy requires the creation of protection centers with a well-trained staff on various issues such as the convention on the rights of child, counselling and communication skills (West, 2003). These centers should be responsible for the creation of a warm and development environment for especially those who have undergone traumatic experience (Dybics, 2005).

**2.17.7 Reintegration:** The last stage focused on reintegration of the children to their families and communities. This requires efforts by government and non-governmental organisation to assist in uniting street children to their families provided the families and communities are willing to accept the children (West, 2003). In situation where the families are not willing to accept the children, shelter homes and other institutions can be resorted to as an alternative (Kudrati et al., 2008).

In contributing to discussions of re-integrating street children to the families, Kudrati et al. (2008) provided the following process to be followed in reintegrating street children to their families;

- Building trust and rapport with the children, so that they can agree to leave the street voluntarily.
- The children should be engaged in a lengthy period of counselling and an exposure to living the community in order for them to properly integrate in the community.



De Moura (2007) opined that in the case of migrants and street children who have never experienced family life, the intervention should focus on economic and social welfare programmes at both the local and national level.

### **2.18 Theoretical Framework**

In this study, the ‘social system theory’ also known as the social function theory was adopted for this study. This theory helps the researcher to understand the interrelations that exist between social systems and their influence on the phenomenon of child streetism in the Tamale Metropolis. This theory draws its inspiration from the work of Emile Durkheim. The theory focuses on the ways social institutions work to meet the social needs. The social system theory believes that the society is held together by systems and subsystems with different factors contributing to a continues interaction among all actors within the society to ensure a healthy, stable and problem free environment (see Durkhaim & Halla, 1984; Fisher, 2010; Harper, 2011; Handel, 1993).

The central concern of the social system theory is the stability and cohesion of societies which the theory believes is necessary to ensure the continued existence of the society over time (Weitz, 2007). The theory argued that social institutions are functionally integrated to form a stable system and that a change in one institution will affect the functioning of the other institutions (Isajiw, 2000). Societies are seen by social functional theorist as coherent, bounded and fundamentally relational constructs that functions like organisms, with their various parts (sub-systems) working together to maintain social equilibrium. The theory believes that all social structures such as the family, political, religious, economic and legal structures, work together to contribute to the operations and stability of the society (Fisher, 2010).



In the context of this study, the Tamale Metropolis depends on the working of sub-systems within the society to ensure a stable and proper functioning society. The major Sub-systems used to understand the phenomenon in this study is the family and the governance system and their relationship in contributing to the phenomenon.

The first point of contact for a child is the family. As a sub-system of the society, the family offers a forum for the development, education, security and socialization of children in a larger society. The family is responsible for protecting children, providing guidance as well as the basic needs of children, such as schooling, housing, food and clothing. The family is expected to ensure the protection and promotion of the rights and welfare of the child including the right to life, dignity, respect, leisure, health, education and shelter. Family also plays the function of protecting children from neglect, discrimination, violence, abuse and any risky exposure (see Children's Act 560, 1998). Furthermore, the family is also expected to provide good guidance, care and ensure the maintenance of the child. The ability of the family to function effectively by providing the needs of the child and providing guidelines such that the child does not portray behavior that is contrary to the accepted behavior in the society. This means that the child has greater likelihood of integrating into the society. On the other hand, when the family fails to perform its function properly, the child resort to other means for survival including living on the street.

The other sub-system identified in this study is the government. Government formulates laws and regulations that is expected to maintain law and order in the society. A good government therefore ensures that the responsibilities and duties of government towards the citizens and that of the citizens to the state is clearly stated and followed. In this





respect, the governance sub-system is expected to enact legislations, provide policies and institutional framework to manage and protect children's rights and welfare. In Ghana, laws and policies like the Children's Act 560, 1998, the UN's Convention on the rights of the Child, the Child and Family Welfare Policy, the child right protection Act (2015), Article 28(1) of the 1992 constitution are some of the policies and laws that guide issues related to children. These laws and policies are expected to define the boundaries, terms and condition under which children should be catered for and protected to ensure survival and total development. When these laws are properly enforced by the government, it will ensure that children are not left to carter for themselves and their needs, but the state takes charge of the responsibility to protect and provide the needs of the children. Thus, where the families fail to play their functions as expected, the state is expected to intervene either by forcing the parents to take up their responsibilities or by providing care and protection for the child.

It is important to note that the social system theory also recognized the influence of external environmental factors on the functioning of the sub-social systems. In this context, the significant external factor that has been identified to have influence on the sub-system is the economy. The poor economic status of the society has greater influence on issues like poverty and unemployment. These issues tend to influence the proper functioning of the sub-system such as the family and the government. Where the economic system is strong, it reduces issues of poverty and unemployment which facilitates the proper functioning of the family in promoting and protecting the welfare of their children and the government's ability to perform its function of designing policies and programs to protect children where the family system is unable to properly function.



In a nutshell, the effective functioning of the social system within the Tamale Metropolis is dependent on the effective and efficient interactions of the sub-systems in their respective role and functions. The family is responsible for providing the basic needs of the children, emotional support of children, and ensuring the overall survival and development of the children. The government on the other hand formulates policies, institutional frameworks and laws to regulate the activities of the human society, provide protection and assistance to vulnerable groups including street children.

### **2.19 Conceptual Framework**

This conceptual framework is developed to provide clear picture of how the interactions that exist between the sub-systems within the social system as identified in the theoretical framework contributes to either promoting or preventing child streetism. The framework also shows how external factors can influence the functioning of the social system.

The family is expected to take care of their children and protect the children from any possible risk. When the family system is able to perform this function, the children are able to develop as expected by the society. When the family is able to provide for both the emotional and physical needs of the children, it becomes difficult for the children to move to the street. However, children whose physical and emotional needs are not properly provided by the family, they are forced to move to the street. Also, the family would not be able to perform its functions properly if external factors such as poverty, financial constraint, unemployment, insufficient welfare service and parental irresponsibility are not properly controlled by the state. The failure of the family as a result of external factors to function properly in providing the needs of the children, makes the children to seek



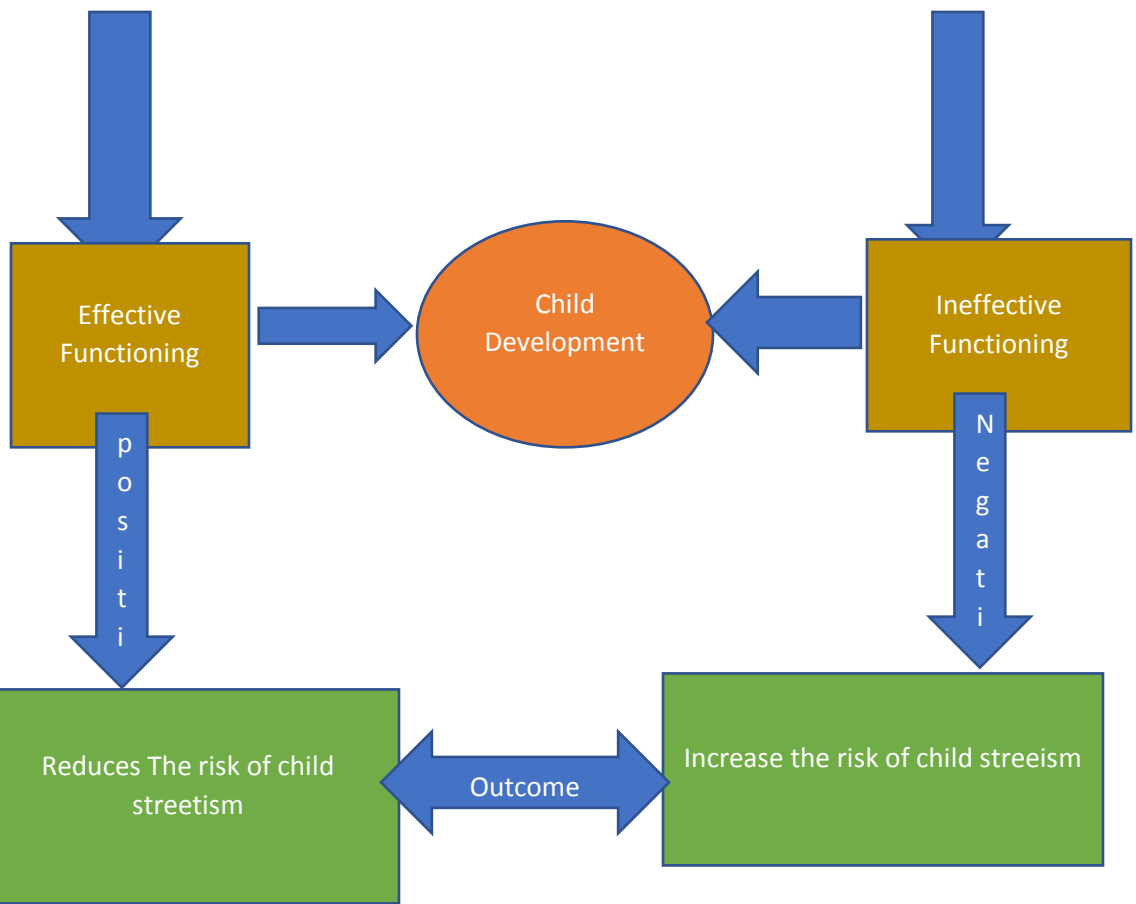
alternative means to provide for their needs and in many cases, the street becomes one of the major places they move to.

The government has the responsibility of promoting and protecting the welfare of the citizen. The government is expected to come out with policies, laws and effective justice systems to promote issues regarding child care and protection. This is to ensure that the state must have plans in places to help protect and promote the welfare of children when families are unable to perform their task. When this is in place, and government operates successfully, children will not be left to move on their own in order to meet their needs. This because the state has laws and policies in place that will intervene to mitigate the risk of children moving to the street. However, if the government does not work properly usually as a result of lack of funding and poor implementation of policies, the propensity of children switching to the street increases.



### Conceptual Framework Diagram

Functions of the Family system	Functions of the governance system
<ul style="list-style-type: none"><li>• Proper upbringing of children</li><li>• Provision of emotional and physical needs</li><li>• Provision of security</li></ul>	<ul style="list-style-type: none"><li>• Enacting laws to protect the rights and welfare of children</li><li>• Design and implement policies to promote the welfare of children</li><li>• Establishing institutional framework to support children's needs.</li></ul>



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## **2.20 Conclusion**

This chapter has reviewed literature from varied secondary sources including books, government records, published reports, journals and news reports relative to the area of the study. The literature review focused on the conceptual analysis including the concept of childhood in Ghana, the concept of streetism, the concept of child streetism and the concept of policy. The literature review also looked at the categories of street children. Literature was also reviewed on the global perspective of child streetism, child streetism in the Latin America, child streetism in the African perspective, child streetism in Ghana and street child situation in the Tamale metropolis. Factors that promote child streetism, challenges facing street children, coping strategies of street children, international efforts to address the phenomenon of child streetism, national policies put in place to address child streetism in Ghana and the common strategies used to deal with child streetism were reviewed in this chapter. The theoretical framework and the conceptual framework for the study have also been presented in this chapter.



## CHAPTER THREE

### METHODOLOGY

#### 3.0 Introduction

Methodology is explained as the planned activities in research that involves gathering the necessary information or materials for a particular study (Bryman, 2016; Robson, 2002).

This chapter presents information on Research design, Research Approach, Population of the Study, Sample Size, Sampling Procedure, Data Collection Instruments, data analysis and ethical consideration.

#### 3.1 Research Design

Research design refers to the conceptual structure within which research is conducted.

Research design facilitates researcher's ability to be as efficient as possible in gathering important information for a study (Yin, 2011).

The design adopted for this study is the case study. The essence of this design is that case study is a holistic and allows individual entities to be systematically represented in a context that allows researchers develop a grounded new understanding of a problem (Creswell, 2009). Case study design is also vital for this study because it allows the case to be studied in the real-life context and also provide the researcher with an understanding of how the case is influenced by its context. For this research, case study is also helpful because it allowed the researcher to use various sources of data collection including interviews, questionnaires and documentary review that allows triangulations of outcomes (Yin, 2011).



Yin (2011) explain that case studies are often applied when the study requires answers for how and why questions, when the investigator has little control over events and when the issue is on contemporary phenomenon within a real-life context. Hence, the case study was the appropriate design that will help in gathering the needed data in a very efficient and effective way for the study.

### **3.2 Research Approach**

Research approach refers to a general plan of how the researcher goes about answering the research question (Sounders et al., 2009). Thus, it deals with how the researcher wants to carry out his or her research by applying either qualitative, quantitative or mixed approach. This study employed the mixed approach in conducting the research. This is because the mixed approach helps minimize the inherent inadequacies mostly associated with the exclusive use of either quantitative or qualitative approaches (Creswell, 2014). The mixed strategy also gives guidance in terms of the options to identify the various variables, and population associated with the study (Yin, 2011). The mixed strategy was also chosen due to its flexibility in terms of how and where the researcher finds the needed information required for the study (Bryman, 2016). Mixed strategy is important for this study because it does not restrict the researcher to one particular source of information (see Bryman, 2016).

### **3.3 Population of the Study**

Population can be referred to as the class or group or city from which few are selected to be sampled (Bryman, 2016). The population for this study includes Street children in the Tamale Metropolis and officials of organisations working to address child streetism in Tamale Metropolis including the Social Welfare Department, Catholic Action for Street



Children (CAS), Consortium for Street Child, Integrated Social Development Centre (ISODEC) and African Development for Migration (AFDOM).

### **3.4 Sampling and Sample Size**

Sampling is defined as the process of obtaining information about an entire population by examining or selecting only a part of the population on the basis of which a judgement or inferences about the larger population is made (Kothari, 2008). Sampling is necessary in research because it is impossible to have the entire population as research respondents in a study (Bryman, 2016). The total sample size for this study was fifty-five (55) including twenty (20) street children and thirty-five (35) officials working to address child streetism in the Metropolis (Social Welfare Department, Catholic Action for Street Children (CAS), Consortium for Street Child and Integrated Social Development Centre (ISODEG) and African Development for Migration (AFDOM).

### **3.5 Sampling Technique**

Sampling technique refers to the method of choosing few from a larger group to serve as the basis for predicting a fact, circumstance or even an outcome relevant to the larger group (see Kumeckpor, 2002; Kothari, 2008; Bryman, 2016). This study employed the non-probability sampling procedure to gather the information that is necessary for the study.

This procedure was adopted due to the fact that there are no available data that indicate the exact number of street children in the Tamale Metropolis from which the researcher could compile and take a sample (see Bryman, 2016).

In selecting the officials from the institutions that work to address child streetism, the expert sampling technique was used. Expert sampling is a type of purposive sampling that is used to obtain knowledge from individuals that have particular expertise (see Bryman,





2016). Expertise sampling was used in this research because it allows the researcher to solicit information from people who have in-depth knowledge and experience working to address child streetism in the Tamale Metropolis. This is important because it helps the researcher to gain deeper insight into the phenomenon by looking at the issue from perspectives (see, Bryman, 2016). This technique was used to select 35 respondents including 7 each from the social welfare department, Consortium for Street Child (CSC), Catholic Action for Street Children (CAS), Integrated Social Development Centre (ISODEC) and AFDOM

In selecting the street children, the snow ball sampling was used. In applying this procedure, seven (7) street children were initially identified with the help of officials from some of the organisations earlier contacted, who have been working with street children in the Tamale Metropolis. The seven (7) initial contacts introduced other street children to the researcher by allowing the researcher to use their names as reference. The identified contacts also introduced the researcher to others until the researcher obtained a total of twenty (20) sample.

### **3.6 Data Collection Instrument**

Data collection instruments are tools used to gather information that is necessary for a study (Bryman, 2016). The instruments used in this study included the following; interview guide and questionnaire.

#### **3.6.1 Interview Guide**

Interview refers to a communication event in which the interviewers and respondents are engaged in an interaction and exchange of information through various channel of communication and codes (Cresweel, 2014). Interview allows the researcher to embrace various topics since unanticipated information emerge from people's experience rather



than pre-conceived ideas as associated with questionnaire (Mattingly, 2001). Unlike survey, interviews are flexible, interactive and continuous rather than already prepared answers. In this research, in order to obtain the required qualitative data for this study, participants were engaged in an in-depth interview focusing on the objectives of the study with the assistance of an interview guide.

### **3.6.2 Questionnaire**

To obtain the needed quantitative data for this study, closed and opened –ended questionnaires were used as a tool for data collection. A closed-ended questionnaire includes possible answers or pre-written responses which respondents were asked to choose among them with boxes to tick (Saunders et al., 2009). On the other hand, the open-ended questionnaires gave respondents the opportunity to answer the question in their own words, as blank section are provided in the questionnaire for them to write in an answer in their own words (see, Saunder et al., 2009).

### **3.6.3 Documentary Review**

The study also reviewed important documents related to the study area to obtain necessary information for the study.

### **3.7 Data Collection Procedure**

After purposefully selecting the samples for the study, the researcher piloted ten (10) questionnaire and the interview guide to ascertain the effectiveness of the questions on achieving the objectives set for the study. After the pilot, the necessary editing was done and the final questionnaire and interview guide was sent to the field. The questionnaires were administered to the respondents and returned in a week time. This was after an



introductory letter was obtained from the university seeking permission to conduct the study in their institutions.

The interview guide was used to interview the street children. After identifying an initial five (5) contacts through the help of some organisations working to address child streetism, an initial five the permission of their relatives, thus for those whose relatives were accessible to them, were sought before they were included in the study. But for those without relatives accessible to them, the permission of some of their leaders who serve as guardians to them, were sought before they were interviewed. The initial five contacts also recommended others for inclusion. Before a street child was included in the study, the permission of either their relative or leaders who acts as their guardians were sought.

The data was also taken at the convenience of every participant. Any participant who at a point during the research felt to opt out was allowed to do so. The researcher was also transparent to the respondents and their privacy and confidentiality was maintained

### **3.8 Data Analysis**

In processing and analysing the quantitative data, the questionnaire was edited, coded and entered into the computer for analysis (Bryman, 2016). The Statistical Package for Social Scientists (SPSS) version twenty- two (22) was used to process and analyse the data. The analysed quantitative data were presented in the form of tables and figures. The data were classified into themes and sub-themes in line with the research objectives. The SPSS software versions 22 was used to facilitate the generation of tables and figures through the graphical interface which was then transported into Microsoft excel and word. The generation of these tables and figures were guided by the identifiable themes that were drawn from the data obtained.



In analysing the qualitative data obtained through the interview conducted during the research, the audio-recording from the interview were transcribed word-for-word in English language. The interviews were held in both English language and the local dialect the respondents understand. Interviews conducted in the local dialect were transcribed into English language.

After examination, the data were coded and the related codes were organised and categorised into themes (Nieuwenhuis, 2010). The transcripts were gone through to make sure that there was no theme that was missed. The themes were further broken into sub-themes and content analysis was used to look at the data into various angles in order to understand and interpret the data.

### **3.9 Validity and Reliability**

One of the most important criteria for measuring the quality of a research work is validity and reliability of the instruments used to collect the data (Bryman, 2016). Validity and reliability in research refer to the consistency level that is used to measure the research instrument and the level at which biases are involved in conducting study (Bryman, 2016).

In this study, three instruments, thus, questionnaire, interview guide and documentary review were used to obtain information from three different source on an issue. This allowed the researcher to triangulate the data obtained in order to establish the authenticity of an issue at a time. Thus, each category of respondent responded to the same issue relative to the objective set for the study. Workers of organisations dealing with street children responded to the same issue on the questionnaire as the street children did in the interview guide. The researcher observed a high level of consistency in response of the



respondents which formed a strong basis for validity and reliability of the instruments used to collect the data for this study.

### **3.10 Ethical Consideration**

An important component of academic research is ethical issue. Researchers are always expected to strictly adhere to ethical issues relating to their academic work. For this study, an ethical review form from the university was filled by researcher and an introductory letter was obtained from the university before the start of the data collection. Below are some of the ethical issues considered for this study;

#### **3.10.1 Voluntary Participation**

Participation in research should be voluntary and it is unethical to force participants to take part in research (Strydom, 2011). In this research, no participant was forced to participate. All the participants participated in the study voluntarily and were given an option to leave at any point during the study if they feel doing so.

#### **3.10.2 Informed Consent**

It is very important in research for subjects of a particular research to be informed about a study they are expected to participate. This is to allow the participants in the study to make an informed decision as whether or not to participate in the study. For this study, the researcher served participants with letters that requested for their permission to take part in the study. The information contained in the letter included the objective of the study, the direction the discussion will take and assurance of privacy. The street children whose relatives are accessible to them, the consent of their relatives was taken before they were included in the study. Those who do not have their relatives accessible, a leader amongst them was identified and his consent was obtained before they were included in the study.



### **3.10.3 No Deception of Respondents**

Another ethical issue considered in this study was deception of participants. Bryman (2016) explained that deceiving participants in research is undesirable for ethical reasons in research. In this study, there was no deception of participants for the study. Participants were not misled in responding to the issue during the discussion and interview. The nature of the study including the aim of the research and the medium through which the data will be collected from the participants were explained to them in the language they understand.

### **3.11 Summary of Chapter**

This chapter presented on the methodology this study adopted to conduct the research. The study adopted the case study as the design for the study. Mixed approach was adopted in this study to gather the data for the study due to its ability to minimize the inadequacies characterised with adopting either one of quantitative or qualitative approach. The population for this study from which the data was gathered were the street children and workers of institutions and organisations working to address child streetism in the Tamale metropolis including Social Welfare Department, Catholic Action for Street Children (CAS) and Consortium for Street Child (CSC), ISODEC and AFDOM. The study adopted purposive sampling to sample all the fifty (55) respondents for the study including 20 street children and 35 workers of organisations that address child streetism. The instruments used to collect the data included interview guide and questionnaire and SPSS software was used to analyse the data. The chapter also presented on ethical issues the study considered during the research including the voluntary participation, informed consent, no deception of respondents.



## CHAPTER FOUR (4)

### DATA PRESENTATION AND ANALYSIS

#### 4.0 Introduction

This chapter presents, analyse and discuss the data gathered from the respondents during the research. The presentation, analysis and discussions were done based on the objectives and research questions outlined for the study. The quantitative data were obtained from 30 respondents constituting 54.5% of the total sample of 55 from officials of organisations working to address child streetism including the Social Welfare Department, Catholic Action for Street Children (CAS), Consortium for Street Child, AFDOM and ISODEC. Qualitative data was also obtained from 25 respondents including 20 street children and 5 officials of organisations working to address child streetism in Tamale constituting 45.5% of the total sample of 55. The chapter has been presented in five sections. Section ‘A’ contain information on the demographic characteristics of the respondents, Section ‘B’ focused on the factors that promote child streetism in Tamale, Section ‘C’ presented the Challenges street children face in the Tamale Metropolis, Section ‘D’ examined the coping mechanisms embraced by street children to deal with the difficulties of street life in the Tamale Metropolis and Section ‘E’ presents and analyse data on the Policies in place to address child streetism in the Tamale Metropolis. Tables and charts were used to present the quantitative data and the qualitative data were transcribed.



#### **4.1.0 SECTION A: DEMOGRAPHIC CHARACTERISTICS OF STREET CHILDREN**

The tables below contain information on the demographic characteristics of the respondents. This was to give the researcher a fair idea about the background of the selected respondents for this study. The variables considered included the age of the respondents, the sex of the respondents and the educational level of respondents.

##### **4.1.1 Age Distribution of Respondents**

Table 4.1.1 presents data on the age distribution of the street children included for the study. The age range used include below 10years, 10-13years and 14-17years. This is in line with age range used by the census conducted by the social welfare Department in 2011. The distribution is provided in the table below;

**Tab 4.1.1: Age Distribution of Respondents (Street Children)**

<b>Age</b>	<b>Frequency</b>	<b>Percentage</b>
Below 10years	3	15
10-13years	11	55
14-17years	6	30
<b>Total</b>	<b>20</b>	<b>100</b>

**Source: Field survey, 2020**

From table 4.1.1 above, the data reveal that 3 out of 20 selected street children representing 15% are within the age range of below 10years. 11 representing 55% of the



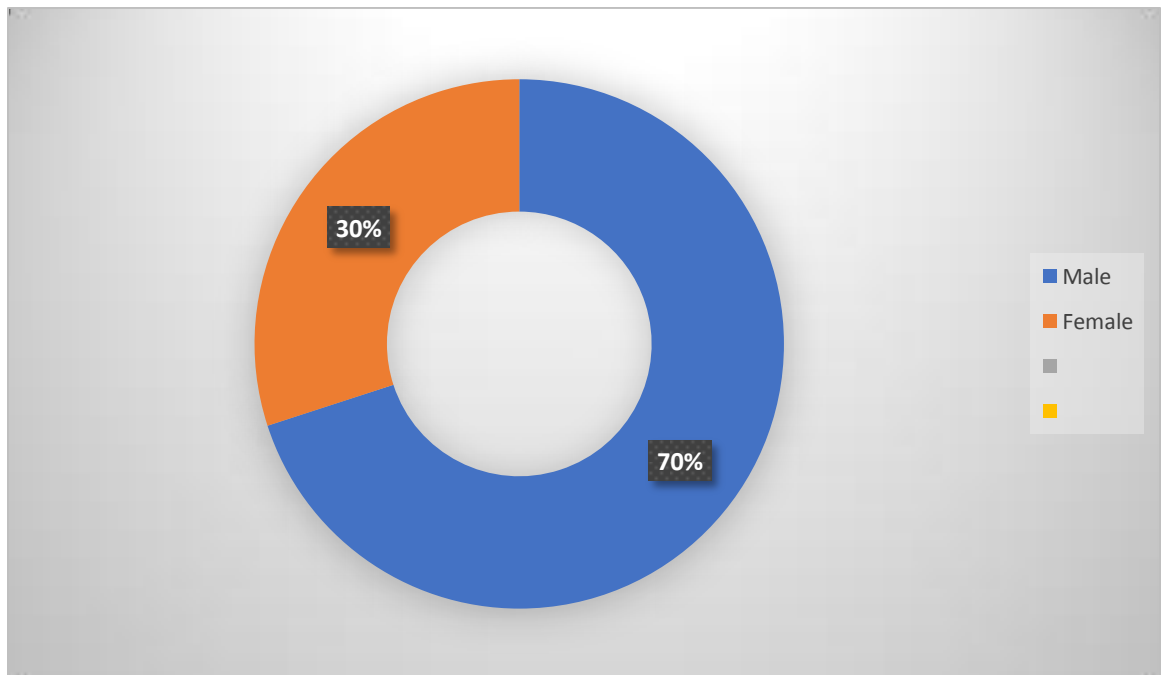


respondents are within the age range of 10-13 years and 6 respondents representing 30% of the respondents are within the age range of 14-17 years. This finding shows that majority of street children included in the sample are between 10-13 years of age and that the smallest group comprises of the very young children between 6-9 years of age. The findings is in line with the statistics carried out by the Social Welfare Department from the street children's census in Accra in 2011, which showed that most street children are between the ages of 11 and 15 years old (see DSW et al., 2011).

#### 4.1.2 Sex of Respondents (Street Children)

The figure below shows the sex distribution of the street children who have been included in the study. It was observed that majority of the respondents in this study are males.

**Figure 2: Sex Distributions of the Street Child Respondents**



**Source: Field survey, 2009.**

Figure 2 above indicate that 14 respondents representing 70% of the total respondents are males and 6 respondents representing 30% are females. This suggest that majority of the



respondents who are street children in this study are males. The data above is a sharp contrast with what has been found by the DSW (2011) Census conducted on child streetism in Accra and the findings of Hatloy & Husser (2005) which revealed that many of the street children in Accra are females. The findings however support Alenoma (2012) and Adjei (2014) study which indicated that majority of street children in Tamale are males.

#### **4.1.3 Educational Background of the Respondents (Street Children)**

The study also looked at the educational background of the respondents. The options provided include primary school, Junior High School and Never been enrolled. The results indicate that majority of the respondents have never been enrolled in school. The table below presents data on the educational background of the respondents;

**Tab 4.1.3: Education Level of Street Child Respondents**

<b>Level of education</b>	<b>Frequency</b>	<b>Percentage</b>
Primary	6	30
Junior High School	3	15
Never been enrolled	11	55
<b>Total</b>	<b>20</b>	<b>100</b>

**Source: Field, Survey, 2020.**

Table 4.1.3 revealed that 6 respondents representing 30% of the total respondents who are street children have their highest education level to be Primary School, 3 respondents representing 15% of the respondents have their highest education level being Junior High School and 11 respondents representing 55% of the street children have never been enrolled in school. The results from table suggest that majority of the respondents for this study who are street children do not have any form of formal education. Those who have



obtained formal education thus 9 respondents have ended it at the basic level. These findings fall in line with studies conducted by researchers in Tamale such Alenoma, (2012), Adjei, (2014) Kusters, (1995) and CAS (2009) that suggested that most of the street children in Tamale do not have any formal education.

#### **4.2.0 Section B: Factors that Promote Child Streetism**

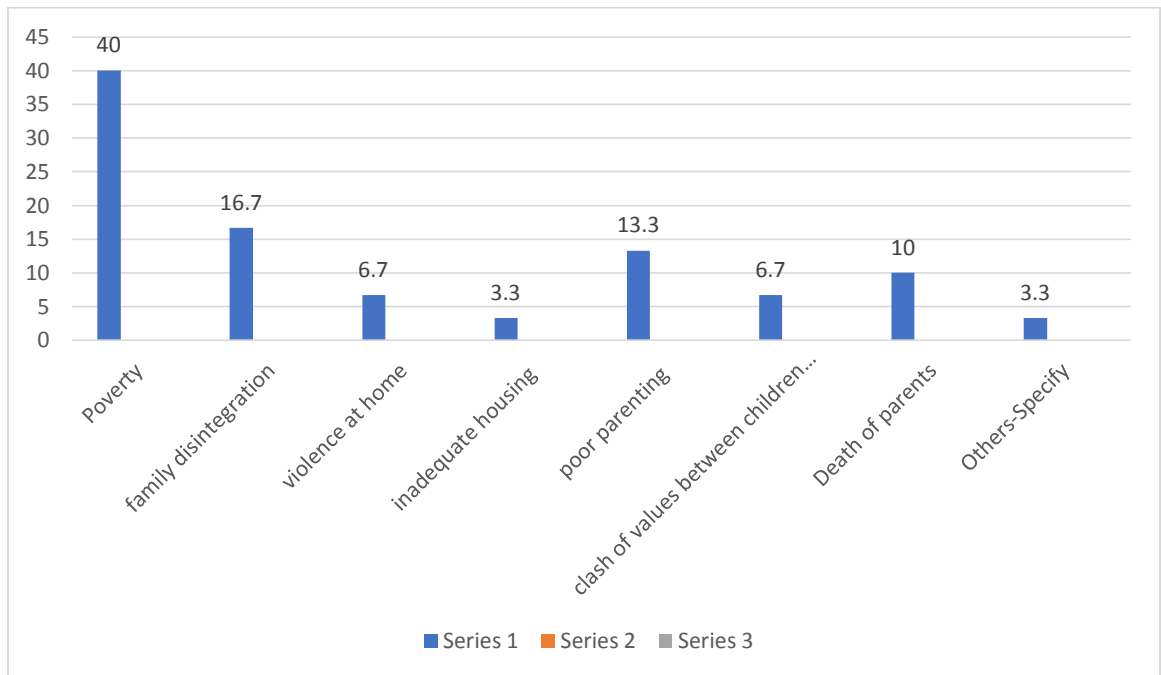
Objective one of this study was to find out the factors that promote child streetism in the Tamale metropolis. These factors have been categorised in two forms in this study, thus the push and pull factors as captured in many literature (see De moura, 2005; Le Roux & Lewis, 2001; Malindi, 2014; Montane, 2006; Pare, 2004).

##### **4.2.1 Factors that Push Children to the Street**

The push factors are the factors or circumstance that force children to move and adopt a street life. To obtain the necessary data on the factors that push children to the street, the following options were provided for responses; poverty, family disintegration, violence at home, inadequate housing, inappropriate parenting, clash of values between parents and children, death of one or both parents and others-specify for options that are not captured in the questionnaire. It was found that poverty is a major factor that push children to the street in the Tamale Metropolis. The results are presented in figure 4.2.1 below;



**Figure 3: Factors that Push Children to the Street**



**Source: field survey, 2020**



The results from figure 3 above regarding the factors that push children to the street reveal that out of the 30 respondents who are staff of organisations that work to address child streetism in Tamale, 40% of the respondents indicated that children are on the street in Tamale due to poverty, 16.7% indicated that children find themselves on the street due to family disintegration, 6.7% indicated that children move to the street due to violence they face at home, 3.3% also indicated that children move to the street due to inadequate

housing, 13.3% indicated that inappropriate parenting is a factor that push children to the street, 6.7% indicated that clash of values with parents push children to the street, 10% indicated death of one or both parents being a factor that push children to the street. 3.3% indicated forced marriage as the other factors that push children to streets in the Tamale Metropolis.

The interview conducted with the street children regarding the factors that push children to the street revealed that most of the children are pushed to the street largely due to poverty. The following are some excerpts of the interview conducted relating to factors that push children to street;

*“... I have come here to work and get money because my parents do not have money to take care of me...” (K3, Male, 13years).*

*“...Ever since my father died, it was only my mother who has been taken care of us. Because she does not also have the money to take care of us and I moved here to look for money to take care of my mother and my sibling...” (K,7, Male, 16years).*

*“...I come here to work so that I will get some money to support my mother...” (K 1, Male, 11years)*

The results from both the quantitative and qualitative data above indicates that poverty is a leading factor that push children to the street in the Tamale Metropolis. Other factors include; family disintegration, physical abuse, parental irresponsibility, death of one or both parents are some of the major push factor that push children to street of Tamale.

This results support WHO (2000), Hecht, (2003), Shanaham (2001) and Muchini's (2001) findings that suggest that poverty remains one of the key factors that push children to the



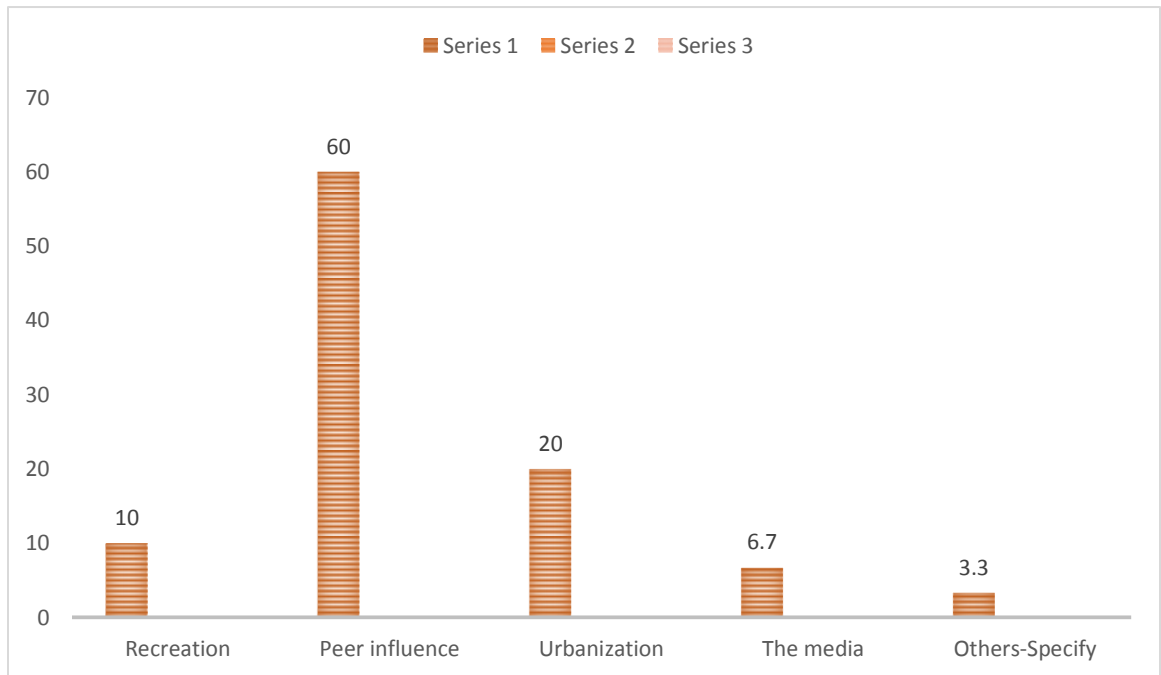
street. It also confirms Alenoma (2012) study in Tamale that suggested that many street children come from families that are poor and cannot provide for their economic needs.

The findings also suggest the inability of the family system to perform its function of protecting and providing for the welfare of their children. As a result of poverty children take a decision to move to the street as assumed by the social system theorist (see Durkhaim & Halla, 1984; Weitz, 2007; Fisher, 2010; Shanaham, 2001).

### 4.3 Factors that Pull Children to the Street

Pull factors are factors that lure or attract children to the street (see Agyman, 2011). To obtain data in that regard the questionnaire provided the following options for the respondents to respond; recreation, peer influence, urbanisation, the media and ‘others-specify’ for option that are not captured in the questionnaire. The data reveal that peer influence is a leading factor that pull children to the street. The data is presented in figure 4.2.2. below;

**Figure 4: Factors that pull children to the street**



**Source: Field survey, 2020.**

The results from figure 4 shows that out of the 30 sample who work with organisations to address child streetism, 10% indicated that children are pulled to the street as results of recreation, 60% indicated that children move to the street due to peer group influence, 20% indicated urbanisation, 6.7% indicated the media and 3.3% indicated the desire for children to seek independence and free life as the factors that pull children to street.

Some of these factors were highlighted in the interview conducted with the street children.

Two of the responses are provided below;

*“... My friends who are living on the street will come and be sharing nice experiences about street life. They tell me they sell items and carry luggage for other people in order to buy nice dress. Because I also need money to make a better life, I also follow them. That was how I moved to the street to make a living...” (K,10, Male, 14years).*

*“... I came to Tamale because I always here my friends say that your life will be better when you move to Tamale. I wanted to come and make a better life for myself and family. So, I got here and I realised that is not what they always say...” (K,1, Male, 15years).*

The results suggest that peer group influence is a leading factor that pull children to the street in the Tamale Metropolis. This supports Adjei (2014) findings on street children in Tamale which revealed that most children are on the street of Tamale due to influence of their friends. This is possible when parents or families fail to play their function of given proper care to their children, the family consequently lose control of their children which easily exposes the children to peer group influence.

#### **4.3.0 Section C: Challenges Faced by Street Children**

Objective two of the study was to find out the challenge street children face in the Tamale Metropolis. To achieve the objective, the study sought responses on the challenges faced



by the street children in the Tamale Metropolis and the group of people the street children face problems with.

#### **4.3.1 Distribution on the Kind of Challenges Street Children Face in the Tamale Metropolis**

The table below shows the distribution on challenges street children face on the street in the Tamale Metropolis. The options provided for response were accommodation, sexual abuse, health challenge, physical attacks and others-specify for options that are not available in the questionnaire. It was realised that the major challenge street children face in the Tamale Metropolis is health. The data is provided in the table 4.3.1 below;

**Table 4.3.1: Distribution on the Kind of Challenges Street Children Face**

<b>Response</b>	<b>Frequency</b>	<b>Percentages</b>
Accommodation	5	16.7
Sexual abuse	4	13.3
Health Challenge	11	36.7
Physical attacks	7	23.3
Others-specify	3	10
<b>Total</b>	<b>30</b>	<b>100</b>

**Source: field survey, 2020**

Results from table 4.3.1 above revealed that out of the 30 respondents who answered the questionnaire, 5 respondents representing 16.7% indicated that street children are faced with accommodation challenge, 4 representing 13.3% indicated sexual abuse, 11 representing 26.7% indicated health challenge, 7 representing 23.3% indicated physical attacks and 3 respondents representing 10% indicated others and specified the following





malnourishment and murder as the other challenges street children face in the Tamale Metropolis.

In the interview conducted with the street children, most of them indicated that their greater challenge on the street relates to health. Excerpts of the interview are provided below;

*“...When we are sick, we don't get proper health care because we don't have health insurance and no one will take us to the hospitals. Sometimes our friends will contribute money and buy drugs for us and at times we don't take any drugs, the sickness goes by itself...” (K 17, Male, 18years).*

*“...Most of us don't have health insurance. So, when we are sick, we can't go to the hospital. Sometimes friends will buy medicine for you...” (K,1, Male, 15years).*

*“...we always suffer from malaria. When we fall sick, we can't go to the hospital because we don't have health insurance...” (K 7, Male, 16years).*

The results of the data show that the major challenge facing street children in the Tamale Metropolis is health challenge. It was observed that due to their vulnerability to harsh weather condition, poor sanitation and physical abuse, these children easily fall sick. Most of the children don't have health insurance to enable them get proper health care, hence they resort to self-medication which is not good for their health. This supports the findings made by Adjei, (2010); Marie (Marie, (2001), Amir & Rana, (2002); Oyaya & Esamai (2001) and Rabi and Mohammed, (2015) in their various studies on child streetism which reveal that street children are mostly faced with health problems.



#### 4.3.2 The Group of People with Whom Street Children Often Encounter Problem

The researcher also sought to find out the group of people street children have problems with. The options provided included; market traders, City guards, Police, fellow street children. It was found that most street children in the Tamale metropolis encounter problem with market traders the most.

**Table 4.3.2: Response on the Group of People with Whom Street Children Often Encounter Problems**

Response	Frequency	Percentages
Market Traders	14	46.7
City guards	5	16.7
Police	7	23.3
Fellow street Children	4	13.3
<b>Total</b>	<b>30</b>	<b>100</b>

**Source: Field Survey, 2020**

Table 4.3.2 shows that out of the 30 respondents 14 representing 46.7% respondents indicated market Traders, 5 representing 16.7% indicated that street children face challenges with the City guards, 7 representing 23.3% indicated the Police, 4 representing 13.3% responded that street children face problem with fellow street children.

The qualitative data obtained from the street children with regards to the group of people street children in Tamale face problem with are provided below;



One of the respondents indicated that “...we always face problem with people at the market. They think we are bad boys, so when you go to them, they think you are coming to steal their money. So, they begin to harass us.” (K 3, Male, 13years). Another respondent said “...the market women always beat us because they always think that we are criminals.” (k 5, Male, 15 years).

The findings from both the quantitative and qualitative data obtained suggest that street children in Tamale face problem with the market traders very often. This confirms the findings of a study conducted in Bangladesh by Prtibha, Mathur & Ansu, (2016) which indicated that street children face abuse, exploitation and harassment by the market men and women the most.

#### **4.4 SECTION D: COPING STRATEGIES OF STREET CHILDREN**

Many studies have established that street children in an effort cope with street life adopt varied strategies. This study sought to find out the coping strategies street children often adopt to survive or cope with the challenges they face on the street in the Tamale metropolis in line with the second objective of the study. In this study, how street children cope with the health challenge, the economic activities and the sleeping of the street children in Tamale were the focus.

##### **4.4.1 How Street Children Cope with the Health Challenge**

The study wanted to find out how street children cope with the health challenges on the street. It has been found that majority of street children rely on self-medication to cope with the health challenges they face on the street. Both the quantitative and qualitative data in this regard are presented below;

**Table 4.4.1: How Street Children Cope with the Health Challenge**



Coping Strategy	Frequency	Percentage
Visit to the hospital	7	23.3
Self-medication	18	60
Sleeping off the sickness	5	16.7
<b>Total</b>	<b>30</b>	<b>100</b>

**Source: Field survey, 2020.**

From the table above, the results shows that out 30 respondents from organisations that deal with street children who answered the questionnaire, 18 respondents representing 60% indicated that street children when they are sick resort to self-medication, 7 respondents representing 23.3% also indicated that street children visit the hospitals when they are sick and 5 representing 16.7% indicated that street children sleep off the sickness.

During an interview with some of the street children, one of them revealed that “...because we don’t have health insurance, when we are sick our friends buy drug for us to take.”(K 11, Female, 12 years) another one also said”... we always treat our selves because we don’t have insurance...”(K 14, Male, 13 years)

The above suggest that street children in order to cope with the health challenges on the street resort to self-medication. It has been observed that most of the children do not have health insurance. So, access to quality health care becomes a key issue to them, hence they rely on self-medication to cope with the challenges of living on the street. This is in line with the findings of Adjei (2014) and DSW et al. (2011) which indicated that street children in Ghana often rely on self-medication because they are not on the National Health Insurance Scheme (NHIS).



#### 4.4.2 Sleeping Place of Street Children in Tamale

As part of effort to find out how the street children cope on the street, the study intended to find out where street children in Tamale often sleep. To obtain the needed data, the study provided the following options; Infront of shops, friends' room, market, relatives and lorry station for respondents to choose one. The data is presented in the table and figure below;

**Table 4.4.2 Sleeping Place of Street Children in Tamale**

<b>Sleeping place</b>	<b>Frequency</b>	<b>Percentage</b>
In front of shops	4	13.3
In the Market	3	10
Relatives	17	56.7
Lorry Station	6	20
<b>Total</b>	<b>30</b>	<b>100</b>

**Source: Field survey, 2020**

The figure above shows that out of the total 30 respondents who answered and returned the questionnaire, 4 representing 13.3% indicated that street children often sleeps in front of shops, 3 respondent representing 10% indicated that street children sleep in the market, 17 representing 56.7% responded that street children often sleep with their relatives and 6 representing 20% indicated that street children often sleeps in the lorry station.

Some of the interview conducted in relation to where street children sleep are provided below;



*“...I sometimes go to the house to sleep. Sometimes I go and sleep with my friends, another time too I will sleep here if I feel like not going home...” (K 18, Female, .15years)*

*“...as for me, I go to the house to sleep every night and come back here in the morning ...” (K 2, Female, 16years)*

This data suggests that majority of the respondents believe that street children in Tamale often sleep with their relative. Thus, majority of the street children in Tamale do not sleep on the street unlike street children in Accra and Kumasi as found by studies such as that of Department of Social Welfare, Catholic Action for Street Children & Street Girls Aid (2011) and Awartey (2014) respectively. It however confirms Adjei’s (2010) and Kusters (1995) findings that indicated that most street children in Tamale sleep with their families but come to street in the morning to engage in activities to support their families.

#### **4.4.3 The Economic Activities of Street Children in the Tamale Metropolis**

The table below provides data on the economic activities of street children in the Tamale metropolis. The variable provided in the questionnaire for response included shoe shining, hawking, cleaning, scrap dealing and begging. The data is presented in Table 4.4.1;

**Table 4.4.3 Response on the Economic Activity Street Children Engage to Survive**

<b>Response</b>	<b>Frequency</b>	<b>Percentages</b>
Porting	6	20
Hawking	11	36.7
scavenging	3	10
Scrap dealing	4	13.3
Begging	6	20



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<b>Total</b>	<b>30</b>	<b>100</b>
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**Source: field survey, 2020**

Table 4.4.1 shows that out of the 30 respondents 6 respondents representing 20% indicated that street children in Tamale engage in porting, 11 representing 36.7% of the respondents indicated that street children in Tamale engage in hawking, 3 representing 10% indicated that street children engage in scavenging, 4 representing 13.3% indicated that street children engage in scrap dealing, 6 representing 20% indicated that street children engage in begging in order to survive on the street.

The following are qualitative data obtained regarding the economic activity street children adopt to cope with their economic challenge.

One of the respondents said “...*I carry peoples’ things to get money...*” (**K 3, Male, 13years**).

Another also said “...*whatever I get I do. Sometimes I engage in shoe shining, hawking, and sometimes I will beg if I am not getting anything for the whole day...*” (**K 8, Male, 13years**).

The results show that street children in Tamale in an attempt to cope with the challenges that they face on the street adopt variety of strategies ranging from self-medication, sleeping over sickness to cope with the health challenge they face on the street as found in the study of Adjei (2014) and DSW et al. (2011).

Among the economic activity street children engage for survival, the most engaged economic activity by street children is hawking. They mostly carry people’s loads for money which is a confirmation of Alenoma (2012) and Adjei (2010) findings. The current



study also observed that street children in the Tamale Metropolis can change economic activity over time.

#### **4.5 SECTION E: Policies Put in Place to Address Child Streetism in the Tamale Metropolis**

The fourth objective of this study was to assess the policies put in place to address the phenomenon of child streetism in the Tamale Metropolis. To achieve this objective, the study focused on finding out national policies put in place to deal with child streetism, the effectiveness of the policies in addressing the phenomenon of child streetism in the Tamale Metropolis. The study also sought to find out the views of respondents about factors that affects the effectiveness of the identified policies.

##### **4.5.1 Some National Policies Put in Place to Address Child Streetim**

From the documentary review, this study has found that there are policies that have been put in place to address the issue of child streetism. Theses national policies were initiated in fulfillment of the global commitments towards protecting and promoting the welfare of children. Some of these national policies are discussed below;

At the national level the Children's Act (Act 560) has provided a framework for the protection of children's rights and welfare. The Act was in fulfillment of the UN Convention on the rights of child (1989). Ghana was among the first countries to sign the UN Convention on the rights of the child (Awarthey, 2014). The children's act (Act 560) mandated state institutions such as district assemblies, the social welfare department, community development agencies and the family tribunal to take up responsibilities to protect the rights and promote the welfare of children in the country. This is in order to prevent children from moving out of their homes to the street. The presence of the





children on the street shows clearly a violation of the provisions in the children's Act (Act 560) and a monumental failure on the part of the state institutions.

The documentary analysis also revealed the existence of the child and family welfare policy by the Ministry of Gender, Children and Social Protection (GoG, 2015). The child and family welfare policy was formulated with the support of UNICEF to protect and promote the welfare of children in Ghana and to also respond to the gaps created in the existing policies. The child and family welfare policy intended to protect and prevent children from all forms of violence, abuse, neglect and exploitation. It also intended to put in place mechanism to ensure an effective coordination of child and family welfare services at all level in the country. The child and family policy was to build the capacity of institutions and service providers to ensure quality of services for children and families in both the urban and rural areas. The child and family welfare policy was to strengthen community structures to protect and promote the rights and welfare of children and to provide alternative care especially where the family is not option. The policy sought to empower children and to build alliance with civil society organization towards protecting the rights and welfare of children (GoG, 2015). The implementation of this policy has remained on the drawing board for some time now, leading to the suffering of innocent soul on the street.

Another policy that was worthy of reviewing was the Ghana National Policy of Action for the elimination of worst form of child labour (MESW, 2009). This policy was formulated in 2009 by the then Ministry of Employment and social welfare in fulfillment of the ILO No. 182 the country has signed in the year 2000. The policy was formulated to protect children against worst form of child labour including slavery, serfdom, child prostitutions



and using children for drug trafficking among others. As found in the study, street children in their effort to survive on the street engage in activities that are dangerous to their health including porting, hawking, sex work and drug dealing. The policy provides framework to promote a more coordinated effort towards the elimination of worst form of child labour in order to enhance the living standard of the Ghanaian child. The plan also served as a concise set of agreed measures for the implementation by different partners such as MDAs, MMDAs, and civil society organisations (CSOs). The plan was further extended from 2017-2023 after the initial plan came to an end in 2015.

Other policies that aimed at addressing the problem of child streetism and its effects include the National Plan of Action for the Elimination of Worst form of Labour (GoG, 2017), the Domestic Violence Act, 2007 (Act 715), the Justice for Children Policy (GOG, 2015).

The findings show that there are national policies put in place by the state to tackle issues of child streetism. However, despite the presence of these policies, there are significant number of children living on the street of Tamale. It has also been revealed that the existing policies concentrate on the general welfare of children and have failed to realise that street children do have their peculiar needs and experience that requires specific attention as pointed out by researchers such as Shanaham (2001), Awartey (2014), and Kangstaba (2008). These findings support calls for specific policy meant to address the specific needs of street children rather than putting them in the general category of vulnerable children.



### **5.3 Factors that Affect the Effectiveness of the Policies in Addressing Child Streetism in the Tamale Metropolis**

The study went further to find out the factors that affects the effectiveness of the policies meant to address child streetism in the Tamale Metropolis as part of efforts to assess the policies put in place to address child streetism. It has found that several factors such as lack of commitment by the government, resource limitations, poor inter-agency collaboration and poor monitoring and evaluation mechanism are among the factors accounting for the ineffectiveness of the policies that are meant to address child streetism in the Tamale Metropolis. Some of the data regarding this are presented below;

**1. Monumental failure of the policies to address challenges facing children.** It

was realised that the monumental failure of the existing policies to properly deal with the challenges children face in the country has brought about the ineffectiveness of the policies to deal with child streetism. A respondent from the Catholic Action for Street Children said “...*most of the national policies that have been designed and are expected to protect the rights and welfare of the children have monumentally failed to address some of the challenges children go through particularly that of child streetism....*”

**2. Poor implementation of the existing policies.** Some of the respondents believed

that policies meant to address child streetism are ineffective because they poorly implemented by the implementing agencies. As one of the respondents from ISODEC has indicated “...*there are good policies that have been designed to promote the welfare of children in this country, but there are serious gaps in terms of implementation and results...*”



**3. Limited resources.** Resource limitation has been identified as one of the factors that limit the effectiveness of the policies in addressing child streetism. Many of the respondents believed that institutions expected to implement policies intended to address child streetism in the Tamale metropolis are not able to effectively do so because they are under resourced. The following are some excerpts of their responses during an interview; A staff of social welfare explained “... *the children’s policy act requires that through an order by a family tribunal, we take charge of the children’s care when found on the street engaging in menial and dangerous activities for survival and where necessary we force the parent to take up their responsibility. Unfortunately, we are less resourced in terms of logistics in terms of finance, human and logistics...*”

A staff of CAS explained that “... *Institutions tasked to implement child policy in this country are poorly resourced. Hence the inability to adequately deal with the problem of child streetism in the Tamale Metropolis....*”

Some of the street children also indicated that they were turned away by some of the shelter homes due to resource limitation. One of the street children said “...*my friends and I were taking to the children’s home but they said they don’t have space to take us...*” (K 4, Female, 10 years)

**4. Poor monitoring and evaluation.** Another factor identified in the study to have limited the effectiveness of the policies in addressing child streetism in the Tamale metropolis is poor monitoring and evaluation. Most of the respondents held the view that due to poor monitoring and evaluation mechanism, the policies are not



properly implemented by the Implemented agencies, hence the influx of children on the street. Excerpts of the interview are provided below;

Official of ISODEC said “...*Most institutions mandated by state to carry out functions of protecting the needs and interest of the children are not frequently monitored in the implementation of the policy...*”

An official from the Consortium for street child was of the view that “...*some of these policies are ineffective because they are poorly monitored and evaluated. Most child policies in Ghana stipulates who is responsible in the implementation and the activities they are expected to do. This gives a clear basis for monitoring and evaluating of the implementation and outcome of the policies. However, the implementing agencies are not regularly monitored to see whether the provisions of the policies are properly implemented and the expected results achieved. That is why we still find these children on the street in town*”.

- 5. Weak inter-agency collaboration.** Most of the respondents also indicated that weak inter-agency linkages is a factor contributing to the inability of the policies to be effective in addressing child streetism in the Tamale metropolis. Most of the respondents held the view that there is lack of coordination and networking between institutions mandated by the state to protect the rights of children and non-state organisations with the interest in child welfare. Excerpts of the interview are provided below;

Respondent from ISODEC said “...*there is poor networking and limited collaboration among organisations working to address the issue of child streetism in Tamale. Due to that there is always a duplication of programs by these*



*institutions and organisations in their effort to address the problem. This usually brings about waste of resources and poor results...*

Respondent from CAS also said “...Other reasons why we are losing the fight against child streetism despite all of these policies put in place, is the absence of effective and efficient collaboration and networking between government agencies, non-governmental organization and civil society groups. Everybody is doing what it feels is right which weakens our ability to fight the phenomenon. It is important to share data and experience if we want to fully address the issue but this is not the case. Experience and data are not shared by the institutions. As a result, programs are often duplicated which does not usually serve the needs of the children. This therefore makes it very difficult to get them out of the street completely”.

- 6. Failure to tackle the root cause of child streetism.** Most of the respondents also revealed that most national policies intended to address child streetism are failing to get the children out of the street because the policies focus on the immediate effect of the problem rather than the root cause of the problem. They believe that to solve the problem is to address the root cause of the problem. Their responses are presented below;

Respondent from CSC said “...Existing policies are only responding to situations when the family fails. It does not make the conditions right for the families not to fail. They don't address issues of poverty, psychological needs of parents, inequality among others which are the root cause of child streetism in Tamale. This brings about solving an aspect of the problem rather than the whole problem. This makes difficult to comprehensively address the issue of child streetism...”



Respondent from AFDOM said “...*child streetism is caused by multi-dimensional factors so, addressing the phenomenon requires a multi-dimensional policy that addresses every aspect of the problem. However, we don’t have a policy that specifically designed to address the phenomenon of child streetism. this is one of the reasons why the phenomenon is difficult to address...*”

- 7. lack of professional staff.** It was found that the staff of some of the shelter homes for the children are lacking high level of professionalism. As a result of some of their unprofessional conduct, the children often find the shelter homes unconducive and insecure. This results in some of the children running to the street. Some of the street children respondent shared their views related to the unprofessionalism of some of staff of the shelter homes;

One of the street children said “...*I grew up in the children’s home before I came here. I was not eating good food and they beat us a lot. Because of this I runned away from the home...*” (K 13, Male, 12years).

Another Street child said“...*is better to be on the street to make a living than to be at the children’s homes. Because at the children’s home, they don’t treat children well. They maltreat children, they don’t give children good food and proper cloth...*” (K7, Male, 12 years).

- 8. Failure of state institutions to protect children in need.** the failure of state institutions to protect and provide for the needs of the children when the family is unable to do so has been found to be one of the reasons why the policies are not effective in addressing issues of child streetism. one of the street child respondents narrated that “... *when my father refused to take care of me because he said I was*



*not his son; my mother went to the social welfare and CHRAJ for them to intervene for my father to take care of me. They could not help her because when they came once that was all. She took care of me and because things are hard, I always come here to get some monies to support her and my siblings” (K 5, Male, 15 years)*

This suggest that limited resources, poor monitoring and evaluation, weak inter-agency collaboration, failure to tackle the root causes of child streetism and lack of professional staff by institutions mandated to protect the welfare and interest of children are some of the factors that makes it difficult for the implementation of the existing policies meant to protect and promote the welfare and interest of children.

#### **5.4 Measures to Improve the Effectiveness of the Policies**

The study sought the views of respondents regarding the opportunities available to make the policies effective in addressing child streetism in the Tamale metropolis. Most of them held the view that there are varied opportunities to make the policies very effective in addressing the phenomenon of child streetism in the Tamale Metropolis. The following are some of the views of the respondents regarding the opportunities available to make the policies better;

1. **Evidence based policy:** Some of the respondents believe that one of the measures to ensure the effectiveness of the policies meant to address child streetism is formulation of evidence-based policies. Most of them believe that policies that takes the views and experience of the key stakeholders, will bring effectiveness and efficiency. A respondent from CAS said “...*we need to design evidence-based policies that specifically address the needs, rights, and welfare of the street children. Such policies need to take into considerations the views and experience*





*of the street children in its design, plan, implementation and evaluation process. With strict monitoring and evaluation plan that considers the views and experience of the street children, I think we can make the policies very much better...”.*

- 2. Sensitisation:** Some of the respondents also believe sensitisation on parental responsibility is important in improving the effectiveness of the existing policies. The respondents believed that when parents are well informed on the duties as required by the existing policies, they will effectively play their role as required by the law. In line with, a respondent from Social Welfare Department said “...*there is the need for constant education of parents on their responsibilities towards their children. The children should also be educated on some of the policies that protect their welfare and the institutions mandated to protect them. I think the implementing agencies like the social welfare, CHRAJ and NCCE should incorporate education component to their strategies...”.*
- 3. Strengthening state institution:** Most of the respondents believe that as a measure to ensure the effectiveness of existing policies, the capacity of the institutions mandated to implement the policies needs built by way of providing with adequate resources. This will enable them to carry out their mandate effectively. In relation to this point, Respondent from AFDOM said ”...*The state needs to strengthen the institutions like the social welfare, the children’s home and others that are mandated to protect the interest and the needs of the child, by fully resourcing them with finances, logistics and human resource to be able to implement the policies as expected. The non-governmental organisations and civil*



*society groups also need to be supported by the state to supplement the efforts of the state in addressing the issues”.*

4. **Strong inter-agency collaboration:** The need for strong inter-agency collaboration was also found to be a measure to ensure the effectiveness of the existing policies. Some of the respondents believe that when state and non-state agency collaborate, they share great strength in their effort to address child streetism. This is needed to ensure the policies are effective. Respondent from ISODEC shared his view in that regard “...*the government and non-governmental organization that deal with street children needs should partner each other in their effort. They need to share data, experience and collaborate on programs and projects to come out a comprehensive road maps for tackling child streetism in Tamale. This will ensure effective mobilization of resources to address the specific needs of the children...*”
5. **Periodic professional programs:** Some of the respondents believed that training and development programs should be organised for staff on how to implement the existing policies effectively and efficiently. The respondents believe that this will improve their professionalism. *As a respondent from the social welfare said “...training programs needs to be regularly organized to strengthen the capacity of those who work to protect the welfare of children...”*

All the data above points to the fact that Ghana has instituted national policies that aimed at protecting the rights of the child in the country. However, the policies have not been very effective in addressing the issue of street children in the country. There is still evidence of many children living on the street making efforts to survive on their own



without any guidance or protection from the family and/or the state. These children face varied challenges including abuse, exploitation, access to basic needs including education and health and social exclusion despite the existence of policies such as the children's Act 560, the child and family welfare policy and Justice for children program.

The data also shows that the failure of the policies to properly address issues of child streetism can be attributed to factors such as lack of coordination among agencies and institutions with the interest and mandate to protect the welfare of children including street children. Other factors such as limited resource to implementing agency, poor monitoring and evaluation mechanism, lack of commitment by the state to fully support and protect the welfare and rights of children, duplication of efforts as a result of the limited of inter-agency collaboration, focus of existing policies on addressing immediate effect rather than addressing the root cause of the problem, lack of professional staff to handle the welfare of children, failure of the policy to address the challenges facing children, poor implementation strategy and failure of the state to support children in need, The results also show that proper resource allocation, effective monitoring and evaluation, focus on root causes of child streetism such as poverty are some of the measures that can help improve the effectiveness of the policy. The results support Awartey (2014) finding which suggest that the policies that in place to tackle the phenomenon of child streetism in Ghana have not yielded the needed results due to factors such as lack of commitment by the government, resource limitations, lack of broader and acceptable approaches to guide the implementation of the policies, lack of coordination among governmental and non-governmental organization working to address the issue and poor monitoring and evaluation mechanism. It also confirmed the findings of Alenoma (2012) and Adjei (2010)



that suggest that child streetism in Tamale is on the rise as a result of the failure of both the state and the family to properly function in promoting, protecting and providing the needs of children. The results also support the assumption by the social system theorist that indicate that the inability of sub-system to function effectively, in this case the government to implement the policies relating to child welfare and rights effectively, leads to the instability of the social system which consequently leads to social problems, in this context the phenomenon of child streetism.

### **5.5 Policy Opportunities for Addressing Child Streetism**

Following the data obtained and analysed from the quantitative, qualitative and the documentary analysis made, the study has revealed that there are gaps in the policies that are in existence to address the issue of child streetism. The study therefore explores opportunities that are available to make the policies that are intended to address child streetism in Ghana very effective in the Tamale metropolis. Some of these opportunities are discussed below;

#### **Establishment of mechanism to coordinate the activities of implementing agencies:**

First, there is the need for an establishment of mechanism to coordinate and integrate the activities of the implementing agencies. As found in the study, the implementation of existing policies to address child streetism are fragmented in nature. Thus, there is lack collaboration among the agencies working to protect children's rights. For effective implementation of the policies, it is important for the departments and agencies to coordinate and integrate their efforts. This will give them an opportunity to share data, experiences and also enable them to pull resources together to fight the problem child streetism in the metropolis.





**Establishment of special institution to monitor and evaluate policy implementation:** To ensure an effective monitoring and evaluation of the policies put in place to tackle the issue of child streetism, it is important to for special institution to be established and mandated to supervise the policy execution of the policies regarding child streetism. As observed in the study, poor monitoring and evaluation is one of factors that has created serious gaps in terms of policy implementation and outcome with regards to the issues of child streetism. The establishment of a special institution is key in ensuring proper monitoring of the implementation of the policy. The views of the children and that of their parents should be central to ensure that the impact of the policy is properly assessed.

**Training and engagement of family centered social workers:** As realised in the study, the social welfare department and the district assembly are mandated to perform numerous functions. This limits their ability to proper attention to some of the risk factors of child streetism. There is therefore the need for family centered social workers to be trained and engaged by the government to support the work of the social welfare department at every district. The family centered social workers will be able to determine and assess the risk factors at the family level that can push children to the street. They will act as brokers and advisers to families in order to monitor possible factors that can drive children to the street and quickly address them.

**Specific policy for child streetism:** As found during the study, most of the policies are unable to address the issue of child streetism because they focus on the general welfare of the children. As a result, street children get limited attention and are inadequately dealt with. It is therefore important that the state formulates and adopt policy that specifically address the issue of child streetism. The policy and its framework should be provided with

the needed attention with the roles and responsibilities of the implementation agencies clearly stated and the staff properly equipped in terms of capacity and resource to carry out their functions properly.

**State support for family systems:** The state should play an important role in building the capabilities of the family systems to enable them function properly within the social system. As found in the study, both the documentary, qualitative and quantitative analysis indicate that poverty greatly affects the family's ability to play their function of properly caring for their children's needs. When formulating policies to tackle child streetism, it is important that reducing poverty and income inequality be made central. This will empower families to play their functions well which will consequently reduce the risk of children moving to the street.

**Strong political will:** Again, as observed in the study, there is limited political will to enforce the policies that are in place to promote and protect the welfare of children. This is evident in the fact that little resource is given to the mandated institutions to protect children's rights and welfare and also refusal by the state to realise and acknowledge the magnitude of the problem. This has created a huge gap in policy formulation, implementation and outcome regarding child streetism in the country. To close the gap, an opportunity exists in government's showing of commitment, acknowledging and responding to the problem by allocating enough resources for the implementation of the policies to tackle child streetism.

**Resourcing state institutions:** The district assemblies, the social welfare department and other departments and agencies mandated to implement the policies should be properly



resourced in terms of finance and human resource to enable them implement the policies very effectively. During the study, it was found that in many cases the gap that exist between the policy implementation and results is a result of the mandated institutions being poorly financed. This largely affects the efforts in making sure that the policies are effety enforced. The capacity of these institutions needs to be strengthened to enable them carry out their functions as required by the policies.

The above are some of opportunities that the existing polices and future policies that aim at addressing child streetism can make use of in order to ensure to an effective, efficient and sustainable policy outcome. Therefore, policy makers and implementers should consider some of the opportunities found in this study in designing and implementing policies and programs that aim at addressing the phenomenon of child streetism in the Tamale Metropolis.



## CHAPTER FIVE

### SUMMARY, CONCLUSION AND RECOMMENDATIONS

#### 5.0 Introduction

This chapter provides the summary for this study, the major findings in line with the objectives of the study, conclusion and recommendations based on the findings from the study. Suggestions for further research is also provided in this chapter.

## **5.1 Summary of the Study**

This study sought to explore on the policy opportunities that are available to address the phenomenon of child streetism in the Tamale Metropolis. The study focused on finding out the factors that promote child streetism in the Tamale Metropolis, the challenges street children face in the Tamale Metropolis, the coping strategies street children in Tamale Metropolis adopt to survive and finally the study focused on assessing the policies put in place to address child streetism in the Tamale Metropolis.

The study reviewed extensive literature relating to child streetism across the world, in Africa, in Ghana and Tamale Metropolis. Literature review was done in line with the objectives outlined for the study from various secondary sources including published books, journal articles, news items, published thesis and published reports.

The study adopted the case study and mixed research approach as the design and approach for this study respectively. The population for this study were street children and workers of organisations that works to address child streetism in the Tamale Metropolis. Fifty-five (55) samples were chosen for this study using purposive sampling technique. The study also used interview guide, questionnaire and documentary review to collect the necessary data. Quantitative data was analysed using the SPSS version twenty-two (22) and Microsoft excel. Analysed data were also presented using charts and figures and the qualitative data was analysed using content analysis.

## **5.2 Summary of Major Findings**

After collecting and analysing the data, the following findings were made in line with the objectives set for the study;

### **5.2.1 Objective 1: Factors that Promote Child Streetism in Tamale**





The first objective of this study was to find out the factors that promotes child streetism in the Tamale Metropolis. The following factors were found to be the major factors that promote child streetism in the Tamale Metropolis;

- It was found that poverty is a major factor that promote child streetism in the Tamale Metropolis. Most parents of street children are unable to provide for the basic needs of their children, as a result, either the parents push the children to the street or the children themselves, out of desire to support their family, move to the street.
- It has also been found that peer group influence is a major factor that pull children to the street in the Tamale Metropolis. Children are often lured to the street as a result of influence by their friends.
- It has also been revealed that family disintegration is another factor that promote child streetism in Tamale Metropolis. When families are disintegrated as a result of marriage break down, distance and poor communications, it brings about the problem of who takes the responsibility of the children. When this happens, children are left on their own without proper guidance and care. In an attempt to survive most of the children move to street to make a living.
- It has also been observed that parental irresponsibility push children to the street. When parents fail to take up their responsibility of providing the children's needs, guidance and proper care, the children become prey to peer influence which eventually lead the children in making a decision of moving to the Street.
- Another key finding regarding the factors that promote child streetism is the death of parents. The death of one or both parents usually comes with the challenge of



proper care, proper guidance and protection. When a parent dies, the surviving parent is confronted with the challenges of combining both parental roles. The inability of the surviving parent to play the combined role often lead children to the street. In a situation where both parents are dead, the children are left alone without any care. This situation mostly forces the children to make a decision of moving to the street to make a living.

### **5.2.2 Objective 2. Challenges Street Children Face in the Tamale Metropolis**

The second objective of this study was to examine the challenges street children face in the Tamale Metropolis. Base on this objective, the following findings were made;

- It has also been found that a major challenge street child in Tamale Metropolis face is health challenge. The condition of the children exposes them to harsh weather, unhygienic conditions, abuse and rape which pose a greater health challenge to them. Street children are mostly affected by malaria, typhoid, HIV/AIDS and physical injuries. With many of them not having health insurance, they do not have access to proper and quality health care.
- It has been found that physical abuse is major challenge street children often encounter on the street. Society often view them as problems and criminals. As a result, they are often attacked by adults, the security guards or by their own friends on the street.
- Another challenge the study revealed is accommodation. Most of the children do not have proper place to sleep. They often rely on their friends, some sleeps Infront of kiosks, shops or at the lorry station.



- It has also been found that street children are exploited by adults. Thus, most of the children are made to work by some adults without or with a little pay, any attempt by the children to protest, they are physical abused.

### **5.2.3 Objective 3: Coping Strategies of Street Children in Tamale**

The third objective of this study was to find out the coping strategies the street children are adopting to cope with the challenges on the street. The following findings were made in this regard;

- It has been revealed in the current study that majority of the street children in Tamale sleep with their relatives. Thus, most of the street children often comes to the street in the morning and go back to their families to sleep in the night. This is a sharp contrast to what other studies in Accra and Kumasi have found that suggest that many street children sleep on the street.
- It has been revealed that some street children in Tamale also rely on their friends for shelter. After work, these children move to their friends to pass the night.
- It has also been found that some street children in Tamale also sleeps at the market, in front of shops and at the lorry park.
- It has also been observed that in some cases, the children don't have permanent sleeping places. Thus, they could be sleeping with their relative, with friends or at the market or lorry park.
- It has been found that hawking is the major economic activity of street children in the Tamale Metropolis. Other activity the children engage in for survival



include shoe shining, cleaning, scrap dealing, begging and managing game centers.

#### **5.2.4 Objective 4. Policies Put in Place to Address Child Streetism in the Tamale Metropolis.**

The fourth objective of this study was to assess the policies put in place to address child streetism in the Tamale Metropolis. In this regard the following findings have been made;

- It has been revealed that there are some policies at the national level that have been put in place to address the phenomenon of child streetism in Ghana. Some of these policies include the Children's Act 560 (1998), the child and family welfare policy, the justice for children policy and the national policy of action for the elimination of the worst form of child labour.
- The study also observed that policies put in place have not been very effective in addressing the phenomenon of child streetism because there are still a greater number of children living on the street due to factors the policies intend to address.
- The study also found that factors such as resource limitation, lack of inter-agency collaboration, lack of political will to by the state to address child streetism, focus on the effects of the problem rather than the root cause of the problem, poor monitoring and evaluation are among the factors that affects the effectiveness of the policies put in place to address the menace of child streetism in the Tamale Metropolis.
- The study also found that there are numerous opportunities available to make the policies aimed at addressing child streetism very effective and efficient. Some of the opportunities include; resourcing the implementing agencies to build their



capacity of implementing the policies, establishing strong inter-agency collaborating in fighting against the menace, proper monitoring and evaluation mechanism, focusing on both the root cause of the problem and the effects of the problem, sensitisation of both parents and children on the policies.

### **5.3 Conclusion**

This study sought to explore policy opportunities to address the phenomenon of child streetism in the Tamale Metropolis. The study looked at the push and pull factors that promote child streetism in the Tamale Metropolis and found factors such as poverty, family disintegration, peer group influence, clash of values between parents and children, parental irresponsibility and violence at home. The study also looked at the challenge street children face on the street of Tamale Metropolis and found challenges such as physical abuse, sexual abuse, lack of accommodation and health challenges. The study also looked at the strategy street children adopt to cope with street life including the sleeping place of street children and the economic activities of street children. The study finally assessed the policies put in place to address child streetism with focus on the effectiveness of the policies, factors that affects that effectiveness of the policies and the opportunities available for making the policies effective.

Based on the findings made, the study therefore concludes that despite policies put in place by the state to address the phenomenon of child streetism, child streetism still remains a social problem as there are a greater number of children living on the street of Tamale Metropolis. Thus, there are serious gaps in policies put in place to address the phenomenon of child streetism in the Tamale Metropolis. To close the gaps, it is important the state commit resources to strengthen the capacity of agencies and organisation



mandated to implement and evaluate the policies. There is also the need for the state to give specific attention to the problem of child streetism, instead of considering street children in the general category of vulnerable groups. This should be done by designing policies that specifically focus on addressing child streetism, because street children have different needs, interest and experience to other vulnerable groups of children. The Policy should make the views and experience of street children central to the design, implementation and evaluation of the policy.

#### **5.4 Recommendations**

- The government should properly target vulnerable groups with its social protection policy/programs in order to strengthen the capacity and capabilities of the vulnerable groups. This will prevent the incidence of children moving to the street due to poverty.
- The government should also partner with the Non-governmental organisation who work to address the issue child streetism to establish a drop-in or training centers. The drop-in centres will serve as place where the children would be kept and be provided with employable skills such as ICT, Fashion designing, hair dressing, carpentry skills, formal education and other employable skills based on the individual need of the child. In doing this, the children must be identified first, their needs assessed and then gradually transited into the training centers where the programs will be designed based on their needs. It is also important for the training to be accompanied with proper mentorship in order to provide proper guidance for the trainees to start and grow their own initiative. After the training and mentorship, those whose family can be traced should be taken back and re-united



with their families and those whose families are not available should be supported with funds to start-up.

- The government should strengthen the capacities of the child rights policy implementing agencies such as the social welfare department, the Commission on Human rights and administrative justice. By providing them with the needed financial, human and logistic resources they will be able to implement the policies very effectively.
- There should be a strict monitoring and evaluation system to track the implementation and the outcome of the policies. The monitoring and evaluation criteria should include the perspective of street children and the reports of the implementing agencies.
- There should be a strong inter-agency collaboration among institutions and organisations that work to address the menace in Tamale metropolis. This will ensure an efficient mobilization of resources in the form of human, finance and logistics to effectively address the menace of child streetism in the Tamale metropolis.
- There is weak collaboration among Ministries Departments and Agencies (MDAs) towards implementation of children's rights as the study has found. The different agencies working towards the protection of children's rights have fragmented programmes with little collaboration among them. There is therefore the need for an effective partnership among the MDAs so that they can share information, coordinate and monitor policy implementation. This will bring about a wholistic



and comprehensive approach or programs for addressing the problem of child streetism in the Tamale Metropolis.

- The government and non-governmental organization should embark on mass sensitisation on the dangers of child streetism and the need for families to take proper care of their children to prevent the children from coming close to the risk factors that push or pull children to street.
- There is the need for social workers to employ the services of counsellors who offer counselling services on behavioral and child psychology to families to reduce the level of violence and abuse in the house since child abuse has been found to be a contributing factor to child streetism in Tamale.

#### **Suggestion for Further Studies**

This study was limited to the Tamale Metropolis with sample of fifty-five respondents. In view of this limitation further studies should consider more than one city in Ghana with more than fifty-five sample.

Also, in view of the fact mandated institutions are faced with numerous challenges in implementing the policies aimed at protecting the needs and welfare of street children, the study recommends that further studies should try to assess the challenges facing government in addressing the phenomenon of child streetism in Ghana.

Moreover, as the study has observed policies available to address the issue of child streetism are policies that generally protect and preserve the needs and interest of children, little attention is given to street children. Therefore, it is important for studies to be carried out in finding out policy options that specifically address child streetism in Ghana.







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**APPENDICES**

**APPENDIX A: QUESTIONNAIRE**

**UNIVERSITY FOR DEVELOPMENT STUDIES**

**FACULTY OF EDUCATION**

**GRADUATE SCHOOL**

**DEPARTMENT OF DEVELOPMENT EDUCATION STUDIES**

**INDIVIDUAL QUESTIONNAIRE FOR INSTITUTIONS DEALING WITH CHILD  
STREETISM**

**Introduction and consent:**

I am an **M.Phil. Student** in Development Education Studies of the above-mentioned institution carrying out a study on the topic **Child Streetism in Tamale Metropolis: Exploring policy opportunities to address the menace**. I seek your participation in this research. Your participation is voluntary. However, I would be very grateful if you agree to take part in this study. All information provided will be treated confidential and used purely for academic purpose. I shall be very grateful if this questionnaire is filled out with appropriate answers to achieve the purpose for which it has been designed.

**SECTION A**

**BACKGROUND OF RESPONDENTS**

1. Age.....
2. Sex  
A) [ MALE] B [FEMALE]



3. Education

- A. [Basic Education level] (B) [Senior Education level] (C) [Tertiary Education level] D) [Post graduate level]

SECTION C: FACTORS THAT PROMOTE CHILD STREETISM

4. Which of factors push children to the street of Tamale the most?

- a. poverty
- b. Family disintegration
- c. Violence at home
- d. Inadequate housing
- e. Inappropriate parenting
- f. Clash of values between parent and child
- g. Death of one or both parents
- h. Others-specify.....

5. Do you think there are factors that attract children to the street life?

- A. Yes            B. No

6. If yes, what factors do you think attract children to the street of Tamale the most?

- a. Search for independence
- b. Recreation
- c. Peer influence
- d. Urbanization
- e. The media
- f. Others-specify.....



SECTION D: CHALLENGES FACED BY STREET CHILDREN

7. Do you think street children in Tamale face challenges?
- A. [Yes]    B. [No]
8. If yes, how often do you think street children face problem on the street in Tamale?
- A. [Very often]
- B. [Sometimes]
- C. [Rarely]
- D. [Not at all]
9. What kind of kind of challenge do you think street children face whilst on the street?
- A. [Exploitation]
- B. [sexual abuse]
- C. [Accommodation]
- D. [Physical attacks]
- E. [Others-Specify].....
10. Who do you think street children often have problems with the most?
- A. [Market men and women]
- B. [City guards]
- C. [Police]
- D. [Ordinary citizens]
- E. [Others-specify].....
11. What do you think is the common sickness street children in Tamale?



- A. [Malaria]
- B. [Headache]
- C. [Stomach ache]
- D. [Typhoid]
- E. [Others- specify] .....

SECTION E: COPING STRATEGIES OF STREET CHILDREN

12. How do you think street children find their sleeping place?

- A. Through friends
- B. [whenever they find an available place]
- C. [Through a good Samaritan]
- D. [Others-specify].....

13. What economic activities do street children do to survive?

- A. [Shoe shinning]
- B. [Hawking]
- C. [Cleaning]
- D. [Truck pushing]
- E. [Scrap dealing]
- F. [Managing game centers]
- G. [Commercial sex]
- H. [Others-specify] .....

14. What informs the children's decision to engage in a particular chosen activity?

- A. [It is the only available option]
- B. [It is highly profitable]



- C. [No jobs available]
- D. [It is easy to do]
- E. [Others-specify] .....

15. How sufficient is the economic activities to the street children?

- A. [Highly sufficient]
- B. [Sufficient]
- C. [Not sufficient]

16. What strategies do street children adopt to cope with the health challenge they face on the street?

- A. Visiting the hospital
- B. Self-medication
- C. Sleeping off the sickness
- D. Others-specify

**SECTION F: SECTION F: POLICIES IN PLACE TO ADDRESS CHILD STREETISM**

What factors do you thin affect the implementation of policies put in place to address child streetis?

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What other opportunities are available to address child streetism in Tamale?

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**Thank you**





## **APPENDICE B: INTERVIEW GUIDE FOR STREET CHILDREN**

I am **Mohammed Siibaway, M.Phil. Student** in Development Education Studies of the University for Development studies. I am carrying out a study on child streetism in the Tamale metropolis: exploring policy opportunity to address the menace. Your participation is voluntary. However, I would be very grateful if you agree to take part in this study. All information provided will be treated confidential and used purely for academic purpose. I shall be very grateful if this questionnaire is filled out with appropriate answers to achieve the purpose for which it has been designed.

1. Can you please tell me about yourself?
2. What pushed you to the street?
3. Do you have your family easily accessible to you?
4. How long do you stay on the street?
5. Can you tell me what you do to survive on the street?
6. What are some of challenges you faced whilst on the street?
7. Did you benefit from any program or policy from any organization that intended bringing you out of the street?
8. How helpful was the program and what do you think should be done to improve other related policies/programs?
9. In your opinion, how do you view street life?
10. Do you dream of living the street one day?
11. In your opinion, what do you think should be done to take people like you out of the street?



### **APPENDIX C: Interview guide for organizations**

I am **Mohammed Siibaway, M.Phil. Student** in Development Education Studies of the University for Development studies. I am carrying out a study on child streetism in the Tamale metropolis: exploring policy opportunity to address the menace. Your participation is voluntary. However, I would be very grateful if you agree to take part in this study. All information provided will be treated confidential and used purely for academic purpose. I shall be very grateful if this questionnaire is filled out with appropriate answers to achieve the purpose for which it has been designed.

1. In your opinion, what do you think are some of the factors that promote street child phenomenon in Tamale?
2. In your opinion, how does living on the street affect street children?
3. What do you think are some of the effects of child streetism on the Tamale Metropolis?
4. What policies are in place to deal with child streetism in Ghana?
5. Are these policies very effective?
6. What are some of the factors that affect the effectiveness of the existing policies?
7. What opportunities are available to make the existing and future policies effective?

