

Assessing the Challenges and Coping Strategies Adopted by Street Children of School Going Age in the Tamale Metropolis: Policy Implications

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ABSTRACT

Children form the foundation of every society. They are expected to be trained, supported and guided to become responsible to the society. In Ghana, the 1992 constitution (Article 28, clause 1), the children's Act (Act 560) and the Child Rights Regulations 2002 (LI.1705) are among the measures put in place to promote the wellbeing of children in the country. However, there are significant numbers of children who are living in many city streets in Ghana including the Tamale metropolis. These street children are living the life that has the tendency to affect their physical and mental development. This paper examines the challenges street children in Tamale face and their coping strategies. It also explores various policy options to ensure their continuous education. The study used a case study design to collect both qualitative and quantitative data. Findings of the research show that street children encounter challenges related to accommodation, education, sexual abuse, health, security, and malnourishment and in some cases death. The paper also found that street children adopt variety of strategies including relying on self-medication, hawking and the formation of networks to cope with the various challenges they encounter on the street. However, the education of these children is a big challenge. It is in the light of this, that the paper calls on relevant key stakeholders to put in serious efforts towards tackling the education of street children and child streetism in the Tamale metropolis to ensure access and quality of education of these children.

INTRODUCTION

Children are considered as the foundation of every society or community (Mintz, 2004). Children are expected to be trained, supported and guided by adults to grow to become

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).

The Convention on the Rights of the Child and the UN Sustainable Development Goals (SDGs) put responsibilities on nations to adopt domestic strategies to protect and promote the rights of children. Many member countries have taken various measures to safeguard and enhance the wellbeing of children (see Belay, 2007; Ibrahim, 2018).

In Africa, the Assembly of the heads of state and government of Organization of the African Union (OAU), being guided by the UN convention on the rights of the child, ratified a Charter on the rights and welfare of the child at Addis Ababa in 1990. This kept responsibility on members of the African Union including Ghana to design and implement effective strategies to promote and preserve the rights and welfare of children (see AU, 2011).

Ghana's first instrument for protecting the rights and welfare of children was Article 28 (1) of the 1992 constitution. The article provided provisions that enhance the development of children in the country. In addition to Article 28 (1) of the 1992 constitution, the children's Act (Act 560) was also enacted in 1998. The Act centered on the welfare principles that recognized and put central the welfare of children in all matters that affect them in the country (Kuyini and Fati, 2011).

Despite Ghana's numerous efforts to promote and defend children's wellbeing, child rights concerns remain a critical concern. Studies have consistently revealed that children suffer from homelessness, poverty, neglect, abuse, diseases, and unequal access to education among others (UNICEF 2007; Ibrahim, 2018).

One of the most vulnerable groups of children globally 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 was estimated that about 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 of their major cities (Belay, 2015).

In Ghana, studies have showed that the numbers for street children have been growing steadily in some of the major cities particularly, Accra, Kumasi, Takoradi and Tamale. Catholic Action for Street Children [CAS] (2009) estimated that approximately 10,000, 15,000 and 8,000 street children are found in Kumasi, Accra, and Tamale respectively in 2009.

The Tamale metropolis is one of the fastest growing cities and the also the fourth largest city in Ghana. The city has in recent times witnessed a growing number of children on the street. Studies conducted by Alenoma (2012); Adjei, (2014), CAS, (2009), Nieminen, (2010) and Fuseini (2016) have revealed that child streetism is growing steadily in the Tamale metropolis in recent times. Even though, the UN Convention on the rights of the child and the children's Act 560 have provided frameworks for protecting children in Ghana, it is heart breaking to see children between the ages of 6 to 17years on the street in the Tamale metropolis at the time

one expects children to be at school or at homes with their parents. These street children engage in many activities that are dangerous to their physical and mental development.

This paper examines the challenges street children face in the Tamale metropolis and the strategies street children in Tamale metropolis adopt to cope with the challenges they face on the street.

RESEARCH QUESTION

1. What are the challenges street children face in the Tamale metropolis?
2. What are coping strategies street children in the Tamale metropolis adopt to cope with the challenges on the street?

BRIEF LITERATURE REVIEW

Categories of Street Children

The term child streetism was first defined by an inter-NGO Program in 1983 as any boy or girl to who made the street his or her home. The United Nations adopted this definition and added that such child is not properly protected, directed or supervised by any adults (MOLSA & Sweden, 1998, UNICEF, 2003).

UNESCO (2006) explains 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. Catholic Action for Street Chidldre [CAS] in their 2003 report explained that street children are children who live on the streets without daily support from family members (CAS, 2003).

Due to the different characteristics exhibited by street children, scholars find it difficult to find a uniform definition for street children. However, it suffices to say that child streetism is a situation where children live and work on the street without guidance from responsible adults. Street children are group of vulnerable children who exhibit varied characteristics. Scholars such as Samuel (2014) and Hatloy and Husser (2005) have therefore attempted to classify street children into various categories. These categorisations are: "children-on-the street", "children-of-the street", "Generational street children" and children who are completely abandoned or neglected by caregivers (see Altanis & Goddard, 2004; Ayuku et al., 2004; Malindi, 20014; Samuel, 2014; Hatloy and Husser, 2005).

Children-on-the Street

Children on the street belong to the category of street children who work on the street during the day and return home after work (Hatloy and Huser, 2005). Children-on-the street still maintain relationships with their families. They have access to their families and often sleep in the house at night but work on the street during the day. They exhibit behaviors that the society mostly sees as inappropriate and parallel with the social and cultural norms. Children-on-the street may attend school and maintain a sense of belonging to their families. Street children under this category often move to the street because of factors such as family's economic hardship, truancy, peer influence, parental irresponsibility (Hatloy and Huser, 2005).

Children-of-the street

Children-of-the Street is 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 (see Hatloy & Husser, 2005; Ayuku et al., 2004). Street children belonging to this category may have their family ties cut off. They are move to the street as a result abuse they face in the home, death of both parents, complete neglect by family and migration (Panter-Brick, 2002).

Generational street children

Generational Street children refer to street children who are on the street because their parents are living and working on the street. Thus, they are children who are on the street by virtue of the fact they were born. Hatloy & Husser (2005) indicated that children who are born on the street end up living and surviving on the street. Such situation if not truncated, will see the children also living and giving birth on the street. Such children, particularly the girls often face sexual abuse and are easily lured into prostitutions. They also participate in activities such as begging and theft to survive on the street.

Contextualizing Child Streetism in Ghana

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, Takoradi, Tamale 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).

Many studies available in Ghana regarding child streetism in southern cities have indicated that bulk of the street children have migrated from the Northern part of the country (see Awartey, 2014, CAS, 2009, DSW, 2011). However, in recent times the trend is changing as studies have shown that many of the children stays in Tamale. Studies by Alenoma, (2012), Adjei (2014), Neinen, (2010) and Fuseini (2016) have revealed Tamale has now witnessed a growing number of children on the street. Migrant street children from the communities in the North, move to Tamale instead of Accra, Kumasi and Takoradi.

Challenges Facing Street Children

Studies have shown that street children face several challenges whilst on the street. 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 natured and protected. Thus, street children are both spatially and socially oppressed, through multiple forms of social control, marginalization and powerlessness. They also suffer from physical, sexual and trafficking for the purpose of labor and sexual exploitation by unscrupulous adults.

For Van Rooyen & Hartel (2002) street children are mistreated, malnourished, raped, exploited, deprived socially, and 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 further indicated that 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) explained that street children are often intimidated on the street by their peers and the adults in the society. Anon (2003) supported West's view and added that street children are totally not welcome in some communities. They are viewed as problems, criminals and socially misfit, as a result the community tends to maltreat the children.

Anarfi (1997) in his study found a relationship between child streetism and 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 making money on the street.

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

Coping Strategies of Street Children

- Coping strategies are various ways in which an individual or people deal with the demands of living (Guernina, 2004). In the context of this study, the process of coping refers to the series of solutions street children creates to deal with the problem they face on the street.
- Street children rely on variety of survival strategies to cope with the day-to-day challenges associated with being on the street (Sherman et al., 2005).
- shoe shining, begging, singing on buses, vending, carrying loads in market, guarding, washing cars and prostitutions among others (Ennew, 2003).
- This involves cleaning and polishing the shoes of people on the street.
- According to a census conducted by the DSW et al. (2012), majority of the street children in Ghana, 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.

METHOD

Research Design

The case study design was used in this study (Yin, 2016). This study adopted the mixed research approach in conducting the study. The use of mixed approach in this study helps the researcher to maximize the strength and minimize the weaknesses of using exclusively either quantitative or qualitative approaches (Creswell, 2014).

Sampling

The population for this study included street children in the Tamale Metropolis, officials of the Social Welfare Department, and officials of the Tamale metropolitan Assembly, Catholic Action for Street Children (CAS) and Consortium for Street Child.

The total sample size for this study was fifty-five (55). Out of the fifty-five (55), twenty (20) were street children and thirty-five (35) were officials from Department of Social Welfare, Tamale Metropolitan Assembly, Catholic Action for Street Children (CAS), Consortium for street child.

In selecting the officials from the institutions, the expert sampling technique was used. Expert sampling is a type of purposive sampling that is used to obtain knowledge from individuals that have expertise in a particular field of study (see Singh, 2007; Bryman, 2016). Expert sampling was used in this research because it allowed the researchers to solicit information from people who have in-depth knowledge in the area of the current study. The technique is vital for this study as it enabled researchers gain deeper insight into the phenomenon by looking at the issue from more than one perspective (see, Singh, 2007; Bryman, 2016). This technique was used to select 35 respondents, including 9 from the social welfare department, 8 from Tamale metropolis, 9 from Consortium for Street Child (CSC) and 9 from Catholic Action for Street Children (CAS).

In selecting the street children, the snow ball sampling was used. Using this procedure, five (5) street children were initially identified with the help of some officials from CAS, consortium for street children included in the study using the expert sampling technique (see Singh, 2007). The five (5) identified street children 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) samples.

In this study, all street children who participated and five (5) officials from the selected institutions who work to address the phenomenon in Tamale metropolis were engaged in in-depth interview with the help of interview guide. To obtain the needed quantitative data from officials of the selected institutions, questionnaires consisting of both open-ended and closed ended questions were administered to respondents.

Data collection procedure

The instruments used for the data collection were piloted to ascertain the effectiveness of the instrument in answering the research question. After the piloting, the necessary editing was done and the final questionnaire and interview guide was taken to the field for the data collection. The questionnaire and interview were administered to the respondents who were selected from institutions who are key stakeholders in child rights protection. The respondents used 20 minutes to answer the questions. This was after an approval was sought from the institutions.

The qualitative data was obtained from the street children through an interview. In obtaining the data, an initial five (5) contacts were identified with the help of officials from the catholic action for street children and consortium for street child. The initial five contacts identified also recommended others for inclusion. This was done until 20 respondents were included in the study. The data was taken at the convenience of every participant. Any participant who at some point during the interview felt to opt out was allowed to do so. The researcher was also transparent to the respondents and their privacy and confidentiality was respected.

Data Analysis

The analysis for the quantitative data was done using the Statistical Package for Social Scientists (SPSS) version twenty- two (22). Using the graphical interface of the SPSS software, the tables and figures used to present the quantitative data was generated. In doing the qualitative data analysis, the data obtained were coded and the related codes were organized and categorized into themes (Creswell, 2013; Savin-Baden and Major, 2013). In order to ensure that no important theme was missed, the transcript was reviewed thoroughly. 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 qualitative data gathered from the field.

FINDINGS AND DISCUSSIONS

This aspect of the paper presents the findings and discussion from the data obtained. The analysis and discussions were done in line with the research questions for the study. The quantitative data were obtained from 30 respondents constituting 54.5% of the total sample from officials of the Social Welfare Department, Tamale metropolitan Assembly, and Catholic Action for Street Children (CAS) and Consortium for Street Child. Qualitative data was also obtained from 25 including 20 street children and 5 from officials of selected institutions working to address child streetism in Tamale constituting. Find below the details

Age distribution

Table 1 presents data on the age distribution of the street children who participated in the study. The age range used in this paper included below 10years, 10-13years and 14-17years. The distribution is provided in the table below;

Tab 1: Age Distribution of Respondents (Street Children)

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

Source: Field survey, 2020

From table 1 15% are below the age of 10years and 55% are within the age range of 10-13 years. Children within the age range of 14-17 years constituted 30% of the respondents. The results show that majority of street children who participated in this study were between the age ranges of 10-13 years of age. The findings corroborate with the survey carried out by the Social Welfare Department in 2011, which showed that most street children in Accra are between the ages of 11 and 15 years old (see Department of Social Welfare et al., 2011). The children of the above category are expected to be in upper primary or Junior High School. This level of education is expected to be free and compulsory.

Sex of Respondents (Street Children)

The figure below shows the sex distribution of the street children who have been included in the study.

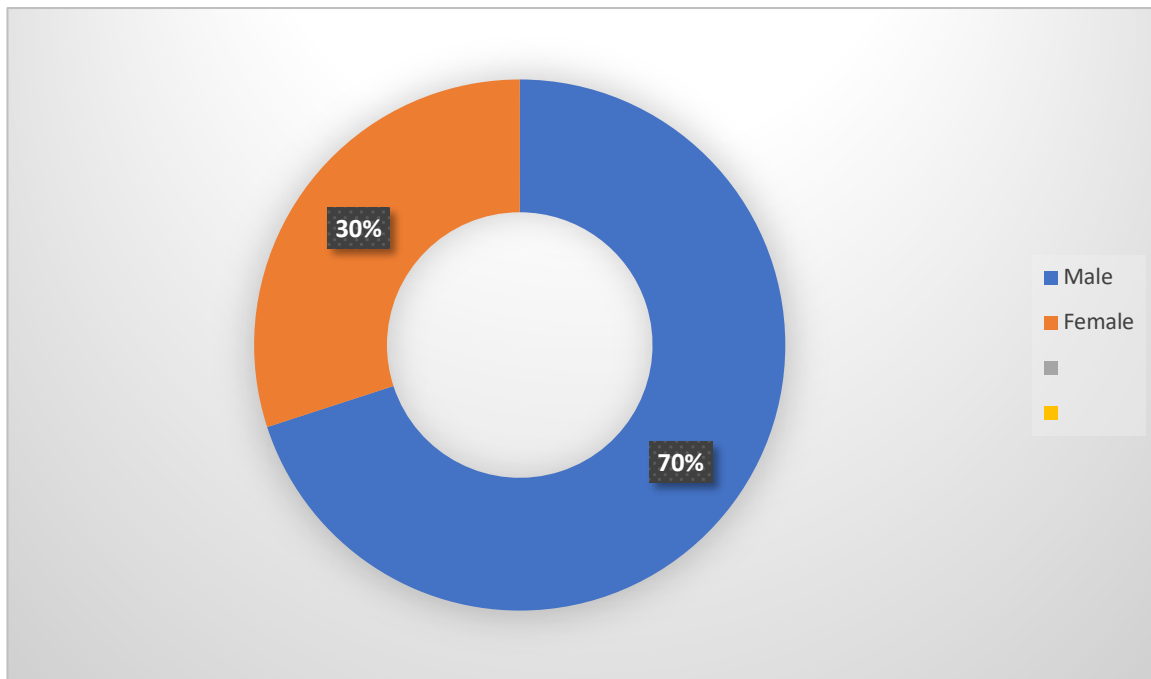


Figure 1: Sex Distributions of the Street Child Respondents
Source: Field survey, 2020

Figure 1 shows that 70% are males whilst the females are 30%. This suggests that majority of the respondents who are street children in this study are males. The results above is a sharp contrast with what has been found by the DSW (2011) Census conducted on child streetism in Accra which suggested that many of the street children in Accra are females.

Educational Background of the Respondents (Street Children)

The study also wanted to find out the educational background of the respondents. The options provided included 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 2 Education Levels of Street Child Respondents

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

Source: Field, Survey, 2020

Table 2 revealed that 6 respondents representing 30% of the total respondents who are street children have their highest education level to be Primary School. Three respondents representing 15% 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 in this study who are street children do not have any form of formal education. Those who have obtained formal education have ended it at the basic level.

Considering the age category of these children as presented in Table 1, the children are expected to be in the upper primary or Junior High School. As per the Free Compulsory Universal Basic Education (FCUBE) policy, this level of education in Ghana is expected to be free and compulsory for every Ghanaian child. The FCUBE policy is expected to ensure that children in Ghana, no matter their race, gender, religion and ethnicity must be in school. The state is expected to design strategies to ensure that no Ghanaian child of school going age is excluded from school. However, as the data in this study suggest, there is significant number of children who are living on the street.

To ensure that every child in Ghana who attains school going age is not permanently or temporarily excluded from school, thus, for the FCUBE Policy to effectively work in achieving its objective, the various supporting agencies must come together and work collaboratively. There is great deal of evidence to suggest that effective multi-disciplinary work depends on good inter-agency relations (see Davis, 1985; Lane, 1990). Inter-agency collaboration in this regard will ensure that there is wide range of skills, perspectives and knowledge to be brought to bear in ensuring that street children excluded from school are included (Ibrahim, 2019).

In establishing this inter-agency collaboration, it is important the agencies have a clear understanding of their own aims and objectives as well as being fully aware of the other agency's role. This helps to better understand their strengths and weakness as well as those of others. This allows the agencies to do a particular task for which they are best suited (Ibrahim, 2019).

Joint training during initial professional training, and some element of in-service training maybe helpful in strengthening inter-collaboration towards ensuring the proper implementation of the FCUBE policy to ensure that no child in Ghana, including street children, are excluded from school in Ghana. There should be a platform where information are exchanged, decisions are taken, recommendations are made, efforts of various agencies are coordinated, responsibilities are allocated and action plans are clearly formed towards making sure that no child is on the street when they supposed to be in school.

Challenges and Strategies adopted by Street Children in the Tamale Metropolis to cope with The Challenges on the Street

Studies have shown that street children often face challenges such as Education, Accommodation, Sexual Abuse, and Health Challenge among others. Street children like any other group of individuals have various ways they deal with the demands of living on the street. They device means to find solutions to some of the problem they face on the street. The following presents and discuss the findings relative to the coping strategies of street children in the Tamale metropolis.

How Street Children Cope with the Health Challenge

The figure below shows how street children in Tamale cope with the health challenge they face on the street. The data in this regard is presented in figure 2 below;

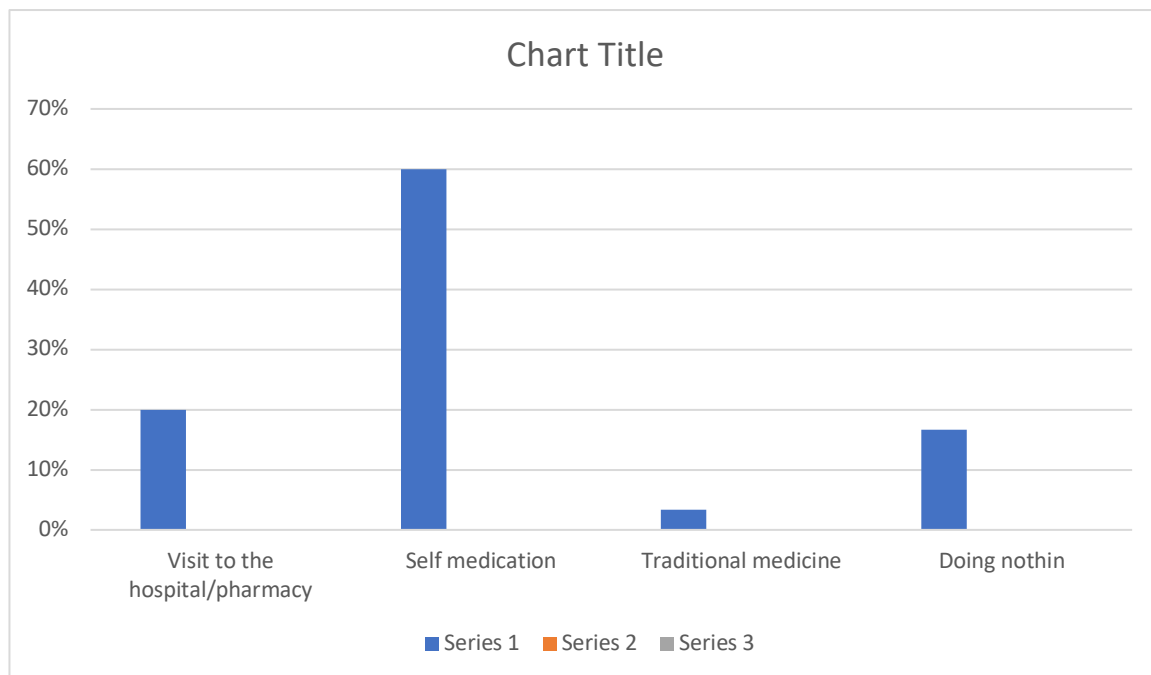


Figure 2 strategies to Cope with the Health Challenge
Source: Field survey, 2020

Figure 2 shows 60% of the respondents indicated that street children resort to self-medication when they are sick, 23.3% also indicated that street children visit the hospital when they are sick, 3.3% indicated that street children resort to traditional medicine when they are sick and 16.7% indicated that street children sleep with the sickness until they get well. Thus, they do nothing with the sickness.

One of the street children respondents revealed that *"...because we don't have health insurance, when I am sick my friends always buy drugs for me to take..."* (K 11, Female, 12 years) another one also said *"... I always buy drugs for myself because I don't have health insurance to go the hospital..."* (K 14, Male, 13 years).

The results show that street children in Tamale in their effort to cope with the health challenges they face on the street adopt variety of strategies including self-medication and sleeping over the sickness in order to cope with the health challenge they face on the street.

Strategies adopted by street children to cope with accommodation challenge

The table below shows how street children in the Tamale metropolis cope with the accommodation challenge they face whilst on the street. It was interesting to find out that contrary to what has been found in others cities like Accra, Kumasi and Takoradi and many other cities across the world, many street children in the Tamale metropolis sleep with their relatives and not on the street, suggesting that they face little accommodation challenge.

Table 5 Strategies adopted by street children to cope with accommodation challenge

Sleeping place	Frequency	Percentage
Sleeping in front of shops	4	13.3
Sleeping in the market	3	10
Sleeping with relatives	17	56.7
Sleeping at the lorry Station	6	20
Total	30	100

Source: Field survey, 2020

Figure 5 shows that out of the total 13.3% of the respondents indicated that street children often sleep in front of shops, 3 respondent representing 10% indicated that street children sleep in the market, 56.7% responded that street children often sleep with their relatives and 20% indicated that street children often sleep in the lorry station.

Some of the interview conducted in relation to where street children sleep is provided below; *"...I sometimes go to the house to sleep if I like. If I don't feel like sleeping at home, I sleep at the station..." (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)*

However, for those who do not have relatives in the city and those who have completely left their house, their option is the street.

One of such children said *"...I sleep Infront one shop in the market. The owner gave it to my mother and me to sleep every night since we don't have any place to sleep..." (K 5, Male, 14 years)* Another respondent also said *"...my father chased me out of the house because he thinks I am bad boy so I sleep here with my friends..." (K 8, Male, 13 years)*

This research suggests that majority of street children in the Tamale metropolis belongs to the 'children-on-the street category as explained by Hatloy & Husser, (2005).

Economic activities street children engage to earn income

Street children in order to survive on the street engage in some activities to earn income in order to provide for their basic needs. Table 6 below shows the kind of income generating activities of street children in the Tamale metropolis engage.

Table 4.4.3 Economic activities street children engage to earn income

Response	Frequency	Percentages
Porting	6	20
Hawking	11	36.7
scavenging	3	10
Scrap dealing	4	13.3
Begging	6	20
Total	30	100

Source: field survey, 2020

Table 6 shows that 20% indicated that street children in Tamale engage in porting, 36.7% of the respondents indicated that street children in Tamale engage in hawking, 10% indicated that

street children engage in scavenging, 13.3% indicated that street children engage in scrap dealing, 20% indicated that street children engage in begging in order to survive on the street. 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 data suggest that suggest that hawking is the most common income generating activity among street children in the Tamale metropolis engage, thus street children in the Tamale metropolis are commonly seen carrying people’s loads for money.

CONCLUSION

This phenomenon of child streetism has grown steadily in the Tamale metropolis. Children of school going age between the ages of 8years to 17years are visible on the street engaging in activities that could potentially hinder their physical and mental development. This paper examined some of the challenge street children in the Tamale metropolis are facing and the coping strategies street children adopt to cope with the challenges they face on the street.

Child streetism is a phenomenon that must be of concern to all. In this direction, efforts must be channeled by the state, NGOs and civil society organization in dealing the phenomenon in the Tamale metropolis and the country at large. There is the need for government to explore policy opportunities to effectively address the phenomenon of child streetism in the country. The state can perhaps put more resources towards the implementation of the all-inclusive education policy and free basic to high school policy to ensure that children have access to quality education to prepare them for world of work.

Also, the government should also partner with the Non-governmental organization who works to address the issue child streetism to establish a drop-in or training centers. The drop-in centers 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.

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