

Girls at Risk on the Streets



A report commissioned by
Africa KidSAFE
Project Concern International
May 2007



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May 2007
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*With thanks to everybody who took the time to speak with me about their work
and their hopes and aspirations for future services to assist the girls on the
streets.*

*With special thanks to the members of the group Bakashana Twampane (Girls
Together) including: Susan, Tika, Sharon, Karen, Bridget, Anna, Mary, Mary,
Nelly, Promise, Natasha, Eve, Mildred and Chitalu, from all of whom I have learnt
the most by far.*

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GIRLS AT RISK ON THE STREETS

EXECUTIVE SUMMARY

This report aims to identify the gaps in service provision for girls on the streets and to propose some practical ways forward for meeting those needs.

Numerous **gaps in service** provision are identified, including:

1. Services specific to girls i.e. girls only services
2. Female workers
3. More extensive outreach or street work targeting girls
4. Protection from sexual abuse
5. A drop in centre for girls
6. Places to sleep / stay for girls
7. Support for pregnant girls and new mothers
8. Help in addressing the problem of drugs (inhalants)
9. Improved health care services
10. Services addressing mental well being and emotional needs
11. Education and skills training
12. Improved family reintegration services
13. Alternatives to centres where family reintegration is not an option
14. Recreation opportunities for girls
15. Workshops and camps for girls
16. Role models for girls

In addition to the views of those working with girls on the streets; models of good practice from services across Africa, the views of the girls in the girls group 'Bakashana Twampane', and published research with girls living on the streets worldwide helped to shape the recommendations in the report.

It is **recommended** that various **principles** be put into practice in the **planning and delivery of services**. These include addressing the following issues:

1. Sexual exploitation and abuse
2. Acknowledging the challenge of how to assist girls on the streets
3. The development of gender specific or gender sensitive services
4. Respecting the girls and the life they have chosen
5. Operating street based programmes
6. Developing programmes in response to individual needs
7. Building on the girls' strengths
8. Children's rights
9. Girls' participation in defining programmes
10. Gender inequality
11. Violence
12. Mental health problems

13. Income generating skills

14. Involving the girls in decision making about services

Because of the immediate dangers faced daily by some of the girls, **service development recommendations** are focussed mainly on the girls who are currently on the streets. The safety of these girls is seen as a priority, followed by the importance of a concerted effort to find a way to work with these girls so that they have the prospect of a brighter future.

There is a core of girls aged 14 – 18 who are seen as being harder to engage and for whom there are currently very few services. This report recommends a step by step or ‘phased in’ (Mutingh 2006) approach, which offers five levels of intervention with the girls.

The first level is **developing trusting relationships with girls on the streets through outreach or street work**; followed by offering **short term learning programmes or camps** to offer skills and support to those still on the streets; level three recommends the **immediate provision of adequate safe sleeping spaces for girls, including the provision of a girls’ night shelter**; level four proposes the provision of **good quality counselling and psychosocial support through a daytime drop in support centre**; and level five includes the variety of medium and longer term support options, but specifically recommends provision of **group houses for 12 – 18 year old girls and girls who are pregnant or new mothers**. In prioritising the recommendations, levels three, four and five are particularly highlighted for immediate attention.

Finally, it is recommended that the organisation and coordination of services for children on the streets be given renewed attention. Specific recommendations propose the **development of a shared model or continuum of care**, including a **key worker and individual plan for each child**, and regular multidisciplinary **case reviews** to ensure that each child’s needs and rights are addressed and fulfilled.

Girls at Risk on the Streets

1. Introduction

I was commissioned by Africa KidSAFE to begin an initiative to address some of the many unmet needs of girls living on the streets of Zambia.

The aim was to identify the gaps in service provision for the girls, and to make some recommendations about how to improve support to girls living on the streets.

It was not the intention to conduct a formal piece of research on this topic, firstly as the situational analysis of street children in Zambia has recently been completed, and secondly, as it felt important to use the majority of the available time and resources in coordinating the development of some much needed initiatives rather than conducting more research.

2. Methods

My finding out about possible ways forward for girls on the streets involved a number of different methods. These were:

- The formation of a KidSAFE working group on girls
- Interviews and discussions with people involved in working with girls on the streets
- Distribution of questionnaires to members of the KidSAFE network
- Visits to centres working with girls
- Visits with the mobile health and outreach workers to town
- Beginning a weekly group on reproductive health for girls on the street
- Talking with the girls about their situations
- Presentations and information gathering at KidSAFE meetings
- Finding out about projects for girls on the streets worldwide
- Reading current research on working with girls on the streets

This report amalgamates the information received from all of these sources.

3. Limitations

This report describes work in progress and only the beginning of a process.

- Having started this initiative, I discovered that this is a highly complex area. In terms of the multiple needs of the girls, the variety of possible ways of meeting those needs, and the huge variety of views and methods of the people working in this field. It transpired that the time we initially allowed for this piece of work has not been enough to do it justice.

- There are many more people, both within and outside the KidSAFE network (e.g. Dept. of Social Welfare, YWCA, KidSAFE partners in Copperbelt, etc.) whose views and ideas have not yet been obtained and would enrich and strengthen this process. Therefore, I hope to continue the finding out process further, and view this as a report of work in progress.
- The views of the girls are paramount in this process. Bakashana Twampane – a group for girls living and working on the streets, focussing on reproductive health, has been running for a number of sessions and a great deal of information and views from the girls and the workers has been collected from this. One group discussion has been held with the girls about their wishes, but it is hoped that further group and individual discussions will provide more information in future.
- My research has been totally Lusaka based so far. The views and experiences of workers and girls in other provinces still need to be sought and included.
- I distributed two batches of questionnaires to KidSAFE staff and partners. However, from an estimated 80 questionnaires distributed, I received only three back. The first questionnaire was perhaps too long and complex, so the second comprised only 4 questions on one sheet of paper, however this modification did not appear to make a difference to respondents who still did not return it.
- Prevention is recognised as a vital approach to this issue, but this is not addressed by this piece of work which looks only at the problems faced by girls currently on the streets. The issue of prevention is currently being addressed under different branches of the KidSAFE network.

4. Identified Problems faced by Girls on the Streets

Everybody I spoke with identified many many problems faced by girls living on the streets, and they emphasised the severity of these problems.

The issue of sexual assault, rape and girls using sex as a commodity e.g. in exchange for shelter or protection, was highlighted by everyone and was often the first point they raised.

Difficulties highlighted included:

- Sexual assault and rape
- Child abuse and defilement
- Harassment including sexual harassment
- Being dependent on the boys
- Lack of shelter and a place to sleep
- Lack of food
- Lack of education
- Unsafe environment
- Vulnerability to violence

- Social Stigma
- Lack of love and emotional support
- Vulnerability to mental health problems
- Poor hygiene
- Coping with periods
- Lack of health education
- Minimal health care
- Pregnancy
- Unsafe abortion
- Vulnerability to HIV, STI's, pregnancy
- Trauma – past and current
- Drugs – sticka, inhalants
- Alcohol
- Loss of culture
- Lack of Guidance

5. Unmet Needs

Most of the problems highlighted above also constitute unmet needs of the girls. Although there are numerous services for street children in Zambia, including those provided by the Department of Social Welfare and the various youth and childcare centres, there are few services specifically addressing the needs of the girls on the streets. As far as I am aware, there are three centres focussing specifically on girls in Lusaka – Mapode in Kanyama, New Horizon Ministries in Chainama, and City of Hope in Makeni.

KidSAFE's 'Helping Children on the Streets in Zambia' does not list any other centres or projects specifically for girls, although this does not mean that they are not there, and there are a number of centres which cater to both girls and boys. Participants named the mobile health service, the outreach team and Judy Mwape and the Dept. of Social Welfare reintegration team, as other services which go some ways toward meeting some of the girls needs. In addition, many of the centres for boys and girls were mentioned, including Chisomo and Flame. The Victim Support Unit (VSU) and the Drug Enforcement Commission (DEC) were also seen as attempting to address some of the issues. Respondents also mentioned some individuals and churches who assist the children with shelter, food and clothes, although there were mixed feelings about whether some of this help enables the children to stay on the streets rather than encouraging them to find a better way of life.

6. Gaps in Service Provision

It should be noted that what we identify as gaps in service provision depends upon our perception of what services 'should' be provided and how they should be provided, in other words, it depends on our model of service provision.

Some of the identified gaps may be being addressed already, but the feeling was that there is not enough, or these services need to be provided in a different way. As a result, a number of 'gaps' identified are listed below:

Main gaps identified (not in any order of priority) were:

1. Services specific to girls i.e. girls only services

This was often highlighted as a need as it was felt that where boys and girls mix:

- boys readily take advantage of and often abuse the girls
- girls are distracted by the presence of boys
- boys can be more aggressive about getting their needs met, leaving the girls with less.

2. Female workers

- Particularly regarding outreach, a need for more trained female workers to work with girls was identified.
- For girls only services to be staffed exclusively by women. This would prevent – at least for the most part¹ - the likelihood of sexual harassment or abuse of girls in their place of safety, and create a space where issues pertaining to girls could be discussed freely.

3. More extensive outreach or street work targeting girls

- More female outreach workers
- Training for outreach workers on working with girls and issues pertaining to girls
- A more structured approach to outreach

4. Protection from Sexual Abuse

A Means is needed to offer the girls protection from sexual abuse and exploitation.

5. Drop in Centre for Girls

- a place girls can come to during the day for advice, support, counselling, protection, referral to other services and centres, washing facilities and food.

¹ It is acknowledged that women as well as men can sexually abuse and exploit children. However, it is estimated that around 95% of child abuse is perpetrated by men.

- a stepping stone to more comprehensive services e.g. centres, reintegration etc.

6. Places to sleep / stay for girls

- Enough girls only places for shelter and sleep
- Particularly places for older girls i.e. 12 – 18 years.
- Places to sleep where a girl does not need to commit to staying there full time.
- Fast track referral to centres

Because of the nature of street life, when a child is ready to be referred to a centre, this needs to be acted on immediately. The current referral process for getting a girl into a centre is seen as too slow, meaning at times the child has moved on (physically or mentally) by the time a centre place is found for them. A fast track process would enable the child's needs to be met as soon as they request this.

7. Support for pregnant girls and new mothers

This group of girls are in need of ante and post natal support and care for themselves and their babies.

8. Help in addressing the problem of drugs (inhalants)

A more comprehensive approach to addressing the use of inhalants among girls is needed.

9. Health Care

- The mobile health service is there, but there is a need for privacy for discussing or examining personal health problems such as STI s.
- Government clinics need to be more child friendly as well as street child friendly
- A need for more preventative health and health education e.g. reproductive health, HIV, drugs, alcohol, etc.
- Alcohol and drug rehabilitation programmes

10. Services addressing mental well being and emotional needs

- Counselling – to help girls overcome trauma, manage the challenges of daily life and make sound decisions for their futures.
- Alcohol and drug rehabilitation
- Psychosocial programmes such as life skills, emotional coping skills, interpersonal skills etc.
- As teenage girls, they need an environment in which they can feel secure and be nurtured, whilst at the same time they can develop their independence.
- The need for constant relationships with trusted adults who can act as role models and mentors.

11. Education and Skills training

- Access to education: Ensuring all girls have the opportunity to attend school and complete their education
- Basic literacy and numeracy teaching.
- Skills training e.g. business skills, domestic and home management skills, family and mothering skills, life skills
- Income generating activities
- Support in finding employment for older girls

12. Family Reintegration

- This is an established service from the Social Welfare Dept. and the reintegration officer working within KidSAFE. However, it was felt that resources in this crucial field are limited, leading to delays when a child is ready for reintegration and a lack of adequate follow up support.
- A programme to support families in reintegrating their children. Including support in income generation and psychosocial support. (This is partially to be addressed within Africa KidSAFE by the CETZAM programme.)
- Family counselling

13. Alternatives to centres where family reintegration is not an option

- Fostering
- Adoption
- Group homes with house parents

14. Recreation opportunities for girls

- Sports
- Arts, drama, music

15. Workshops and camps for girls

- Short term interventions with a specific focus e.g. psychosocial support, arts, life skills, etc.

16. Role Models for Girls

- Girls who have been on the streets themselves who are now working and developing a different lifestyle for themselves.

7. Models of Good Practice

Looking at models that work well can help us to plan our service based on these experiences.

7.1 Zambia

There are many models of good practice within Zambia, both Lusaka based, in the Copperbelt and in other provinces, further research and analysis is needed to identify and document these.

7.1.1 New Horizon Ministries

New Horizon is a residential center for orphaned and vulnerable girls between 7 and 15 years old. New Horizon provides food, shelter and education. The centre has a small community school, organises skills training, psychosocial training, training for caregivers (mothers), a farming project, poultry rearing, recreation and sport and Children's rights clubs.

New Horizon holds regular meetings where the children have a say in the rules of the centre, and they have a weekly staff meeting.

New Horizon has good links with the local community, where it supports some vulnerable children; offers food distribution with HIV education; local women come to the centre to cook for the children and help with laundry, and female headed families support the children by taking them to their homes for visits.

New Horizon also manages the mobile health service on behalf of the AKS network.

7.1.2 MAPODE

MAPODE operates two centers, one in Mtendere compound for boys and one in Kanyama for girls. MAPODE provides services that aim to withdraw young children, prostitutes, and at-risk-adults from the street by offering them options such as shelter, health-care, counselling and rehabilitation. In addition to this it gives literacy classes, and manual skills such as; block making, brick-laying, tailoring, and pottery etc. Outreach is done both during day and night and reintegration is sought when possible. Night outreach targeting teen prostitutes is conducted in Northmead and Emmasdale with counselling and condom distribution.

7.2 Africa

7.2.1 Street Girls Aid Ghana

Street Girls' Aid (S.AID) was founded in 1994 to care for those street girls, aged less than 18 years, who are pregnant or are already young mothers. S.AID runs a refuge for pregnant street girls, and also operates four crèches in different locations in Accra so that street girls can go to work while their children are being

cared for and fed. About 600 children aged between six months and five years visit these crèches every day. The crèches also offer healthcare to the young children. S.AID is supported by Street Child Africa.

7.2.2 Wema Centre – Mombasa, Kenya.

"It was not easy for me to adapt to Wema life immediately. I was on drugs and was used to a carefree lifestyle for two years and here I was being confined to rules and regulations.

"I ran back to the streets several times but Auntie Lucy was determined, she got me back to the centre and gave me a last warning. After a lot of counselling, I made up my mind I did not want street life anymore."

Jennifer, Wema Centre

(from the website: www.wemacentre.org)

A. Drop in Centre

The drop in is located in central Mombasa within walking distance of the areas where street children spend their time. The centre offers lunch, individual and group counselling, medical care and monitoring, arts, drama and recreation. Outreach workers from the centre go on the streets every day to build trusting relationships with the children and tell them about the drop in. Counsellors at the centre work intensively with the children through group discussions and group and individual counselling until the child and the counsellor together decide on a course of action for the child, e.g. to move to a centre, family reunification, to go to boarding school etc. It is only when a counsellor feels sure that a child is ready to go to a centre or try reunification that this goes ahead. This prevents unprepared children from going directly into a situation and having a bad experience when they 'fail' to meet expectations; as well as protecting the centres or families from an equally bad experience. The counselling supervisor at the drop in emphasised the importance of consistency of counsellors, i.e., counsellors should be employed for the long term, not volunteers who may leave or students on placement, trust being a huge issue for this group of children which takes a long time to build.

Children who attend the drop in are expected to attend for the full day, from 0800 until the afternoon meal at 1700, after which they leave.

There is a mother's day at the drop in once a week when mothers of the children are invited for lunch and a group counselling session.

B. Wema Centre

Wema is a centre for over 100 girls just outside Mombasa. As well as a home for the girls who have been abandoned or lived on the streets, it offers basic schooling to prepare the girls for mainstream school. There is also skills training – to identify and develop the girls latent talents. This includes tailoring, crafts, woodwork, mechanics etc. The centre also has successful income generating projects, mainly agriculture and dairy farming.

C. Half Way House

This is for the 16 to 18 year old girls who are preparing to leave Wema. In the house the girls become independent, shopping, cooking, and cleaning for themselves, and finishing their education or skills training in preparation for their independence and moving away from institutional living.

7.2.3 Streets Ahead – Harare, Zimbabwe

This is a programme for boys and girls.

Information taken from the Streets Ahead Website:

www.streetsahead.org.zw.

Streets Ahead strives to instill self-confidence, self-respect, moral and civic responsibility as well as spiritual strength to children. It also focuses on teaching children co-operation, rules of the road, good money skills, healthy hygiene practices and a happy adjustment to the community. This is achieved largely through association with our staff, our code of conduct and administration of discipline as well as the way we run the drop-in centre. Streets Ahead is also committed to promoting children's and citizen's rights at all times.

Outreach

This programme constitutes the core of the organisation's work. A team of qualified and experienced staff conduct outreach work on the streets of Harare during the day and at night. Their work is to identify new arrivals on the streets, initiate contact, form relationships and keep up-to-date records on every child. Outreach workers also assist children who want to be reunited with their families through research, counselling and follow up visits. In addition, they are responsible for implementing various aspects of the organisation's other programmes, such as micro-projects and welfare support schemes for children who remain on the streets.

Drop-in Centre

Streets Ahead is committed to providing a clean and safe environment to meet the basic living needs of children who are at risk on the streets. This is done at a Drop-in Centre close to the city centre. Youngsters can use toilet and bathroom facilities, wash their clothes, cook food and enjoy the companionship of their peers at the centre. It is a place where they can discuss their problems freely and seek guidance, besides having fun or simply relaxing with a book or watching television. Adult

supervision is always at hand and the facility is open Monday to Friday during day-time hours.

Foster Care Home

Streets Ahead runs a foster care home in Tafara, Harare. Established in 1999, the home caters for 15 to 20 young children, many of whom have been sexually abused on the streets. The home, which is an extension of the organisation's outreach programme, provides a safe and secure environment that promotes the children's re-integration into society. This is achieved through a family-based structure headed by a parent who ensures that the physical and emotional needs of every child at the home are met.

Micro-projects

This is an exit programme concerned with helping older youths on the streets develop their talents and become self-sufficient. They are taught income-generating skills such as basket weaving, book keeping, fabric dying and shoe repair among others.

Education

Children have access to formal school education as well as informal schooling and skills training through the education department, headed by a qualified teacher. They are also given the opportunity to participate in activities such as music, drama, art and sport.

Welfare Support

Many children are assisted in obtaining documentation such as birth certificates and identity cards. Medical care is also provided and burial expenses are paid when the occasion arises.

7.2.4 Street Child Africa – Street Workers

www.streetchildafrica.org.uk

Street Child Africa is a UK based organisation working with organisations in several African cities. In Zambia they work with 'The Rainbow Project' in Ndola and 'Friends of Street Children' in Kitwe.

Street Child Africa promotes the concept of 'street workers' rather than 'outreach workers'. The aim of a street worker is to accept and respect the child and their choice of living situation without necessarily having the aim of removing a child from the street. By spending time with the children on the streets, street workers

aim to validate the street as the child's choice of home at that time in their lives. Street workers aim to form trusting relationships with the children on the streets so that the children have some 'safe' adults in their lives. Street workers also offer street corner education in topics such as literacy and life skills. Street Child Africa offers a training for street workers called 'walk the walk'. For more information from Street Child Africa on street workers see Appendix 1.

7.2.5 Themba lethu Life Skills Centre, Johannesburg, South Africa.

Taken from the Themba lethu Life Skills Centre website:

The Themba lethu Life Skills Centre was set up in 1994. Its objective is to guide and assist homeless girls to re-integrate into society. Themba lethu targets young girls between the ages of 10-18 who have become separated from their families and live on the streets of Johannesburg, often turning to drug peddling or prostitution in order to survive. Many of these girls become objects of abuse, being 'used' by local gangs and back-street boys and are often unable to protect themselves.

The meaning of "Themba lethu" is "Trust in Ourselves". By providing a safe daytime care facility, the project aims to restore the confidence and self-respect that has been lost, and offers the girls a way out of a lifestyle from which it is otherwise virtually impossible to escape.

Our outreach workers approach the girls and endeavour to build up trust-relationships. They are offered guidance and support, and are encouraged to attend the centre where they are afforded the opportunity of life skills training, are able to wash themselves and their clothing, have a meal and be directed towards a suitable shelter rather than sleeping on the streets.

Themba lethu offers a comprehensive programme including life skills and vocational training thus empowering the girls to take charge of their own lives and create a better future for themselves.

The life skills programme is rooted in the experience of working with the girls. It is structured within seven goals, which are summarised as follows:

- To create contact and establish a relationship of trust between the Social Worker and each individual girl. Thereafter, to encourage family contact and (where practical) to re-unite her with her family.
- To address the basic welfare and physical needs of the girl.
- To promote health care and to encourage participation in informal discussions on personal hygiene, substance abuse, sexually transmitted diseases and other relevant subjects.

- To develop inter-personal and social skills.
- To develop practical skills for legitimate, independent living.
- To provide programmes for up-grading educational and vocational skills.
- To involve girls in the day-to-day operation of the project. To promote self-reliance and responsibility and to expose them to practical situations that will encourage them to function independently.

A vital part of the Thembaletu programme is to create opportunities where each girl is able to develop her potential.

Most of these girls have not grown up within stable environments and it often takes time for them to develop the commitment, emotional capability and perseverance required in learning new skills. A flexible time frame is therefore essential.

7.2.6 Masiye Camp, Zimbabwe. Salvation Army.

Masiye Camp is often used as a model example of psychosocial support to children. Its main aim is to offer psychosocial support and life skills to children affected by AIDS. The approach uses experiential learning and adventure programming, partially based on the UKs 'Outward Bound' programme. Every year over 1400 children and young people affected by HIV participate in short term life skills camps at Masiye.

Masiye offers psychosocial support using a variety of methods including:

- outdoor activities and games
- group and individual discussions about losing one's parents
- building relationships and trust
- facilitating grief and bereavement processes
- HIV education
- Talks on drug & alcohol use
- Arts and crafts
- Music and dance
- Teenage parenting and household management courses
- Kids Clubs for follow up support and group therapy

Masiye emphasises youth participation in its programmes. The kids Clubs are run for youth by youth. These clubs then provide many of the facilitators for the camps. Masiye also trains adults such as teachers, youth workers and counsellors in psychosocial support to children.

This programme has been seen to achieve results in improving the resilience and coping capacity of children. Particularly in the areas of:

- Restoring and strengthening self esteem and confidence
- Allowing and supporting grief processes and overcoming trauma

- Development of goal setting, decision making and negotiation skills
- Empowerment, strength and developing a healthy sense of responsibility for their lives
- (re-) instilling values and hope for a future.

This project is documented in the UNAIDS Best Practice Collection (Investing in Our Future, 2001).

8. Research on Street Girls - Africa and Beyond, with Recommendations on Service Delivery.

The experiences of street girls as described by the girls and those who work with them here in Zambia, are echoed in the literature from around the world.

Some principles and recommendations for working with street girls or children derived from research conducted across Africa and internationally may help us to fine tune service planning and development.

These pointers from the research help us to highlight important areas to focus on, therefore, from each section below follow recommendations to apply to services here in Zambia.

8.1 Sexual Exploitation and Abuse

The literature emphasises the many dangers that girls living on the streets are vulnerable to, particularly around sexual abuse, rape and violence.

Girls on the streets were perceived by street boys and girls to be at greater risk of sexual coercion, rape, survival sex, pregnancy and infection from sexually transmitted diseases, as one former street girl explained:

'A street girl is in a lot more danger than a boy. Many, many women at the bus stand are raped. You hear the older boys saying, "there are girls sleeping in a certain place, let's go and find them". But a boy can sleep anywhere, he doesn't have any problem because he's a boy.'

Evans 2002 (Tanzania)

Recommendation 1.1a:

Immediate action to be taken to afford greater **protection from sexual abuse and exploitation** to the girls currently living on the streets.

It is also well documented, that children in child care institutions worldwide are at high risk of being sexually and physically abused. Services need to be alert to this. It is known that paedophiles commonly find work in children's services, and that they are extremely skilled in appearing to everyone as conscientious, caring, and nothing like the public's perception of a child abuser.

Recommendation 1.1b:

Every programme working with girls to have a clear **policy on how to address the issue of sexual exploitation and abuse** regarding prevention, detection and action. This should address abuse both outside and within the institution or service.

Recommendation 1.1c:

All **institutions working with children to be regularly monitored**, using anonymous **feedback from the children** as part of this process.

8.2 The Challenge of how to Assist Girls on the Streets

The literature highlights the challenge of finding effective ways to assist girls on the streets. It recognises that once girls have tasted the freedom of street life, despite the hardships, it can be difficult for them to move on to a more restrictive way of living.

Living on the streets is not only risky and rough, but can also be humiliating and dehumanizing. However, once they have tasted the freedom and independence of the streets, and earned a quick income from sex, it is hard for them to adapt to any other kind of life.

Rurevo and Bourdillon, 2003 (Zimbabwe)

Most people in society can do little to help these girls. Even organizations dedicated to helping desperate children find it hard to provide street girls with a life that can be lived with dignity. From among the many interventions possible, however, the findings of our study highlight a few that can offer genuine, if limited, hope.

Rurevo and Bourdillon, 2003 (Zimbabwe)

Accounts from people who have worked with street girls in Zambia bear this out, many describe how they have brought girls into institutions numerous times, but each time, the girl returns to the streets. This begs the question – why? Is it purely the lure of freedom and quick money? Or should we also look to the nature and appropriateness of the institutions on offer?

In working with any challenging group, there is a real risk that workers become burnt out and cynical and lose motivation to help the group. This is especially the case when working with a group with many needs which are not being adequately met, and whose situation is alarming and sad. Workers can feel frustrated, hopeless and helpless. It takes a lot of resolve and perseverance to continue with efforts to make a difference in the face of such challenges.

There is a danger in this for the client group, as workers feeling helpless can not only lose motivation, they can 'forget' that these are children with aspirations and feelings, wounds and scars, and it can be easier to dehumanise the girls and blame them for their situation. Once this occurs the door is open to cruelty and abuse of all types. This is a common phenomenon in children's services worldwide. This psychological defence mechanism was described by Menzies in her seminal paper on nurses with mentally handicapped people in the 1960's.

Recommendation 1.2a:

To bring an awareness of the challenging nature of this work to programme planning and implementation through structures which support and encourage workers to **maintain clear goals** and to **persevere in striving for these** despite the challenges encountered.

Recommendation 1.2b:

To ensure **workers** in this field are properly **trained and supported**.

8.3 Gender Specific or Gender Sensitive Services

In line with the recommendations of many people spoken to in Zambia, the literature highlights the lack of appropriate services for girls, calls for specific services for girls, and for all services to take gender issues into account.

Non-governmental organisations working with street children should develop services to provide for girls and young women, integrate gender analysis into their work, and remain sensitive to the gendered experiences, vulnerabilities and needs of street girls and boys as identified by young people themselves.

Evans 2002 (Tanzania)

Recommendation 1.3:

To develop **girls only services** where possible, and existing services to address the specific needs of girls.

8.4 Respecting the Girls and the Life they have Chosen

Much of the literature emphasises the pathologising approach to street children and their lifestyle taken by society and many services aiming to help the children. It calls for society, services and workers to demonstrate respect for the girls as well as the choices they have made about their lives.

*Recent psychological literature suggests that rather than perceiving street life as a problem and reacting by trying to “normalize” the behavior of the children, one needs to understand and respect the children’s culture and worldview:[]
...the way forward may be to recognize the strengths that street children have developed and build upon their survival skills.
Thus, one may come to see these children’s lives not as “pathological”, but as signs of resiliency.*

Fujimura 2003 (Russia)

It is not clear how they can be helped. Restrictive programs that compel girls to enter homes and institutions have not been very successful. The girls resent such compulsion and the lack of dignity with which they are usually treated, and have difficulty in adapting to a more disciplined life after freedom in the streets. When rounded up and placed in institutions, they regularly abscond. Procedures that are not based on respect for these girls are unlikely to benefit them.

Rurevo and Bourdillon, Zimbabwe 2003

Recommendation 1.4:

Respect for the girls and their lifestyle should be demonstrated on all levels including the design of programmes, programme implementation and in the attitude and behaviour of all the workers who have contact with the girls.

8.5 Street Based Programmes

8.5 Street Based Programmes

Following on from the above theme, many researchers recommend a street based approach. This contrasts with a common assumption that children should only be worked with in centres.

From her research with children on the streets and in institutions in Egypt, Bibars recommends the following:

- *The street, the children's main habitat, should be the programme's main setting, thus limiting the institutionalization aspect.*
- *Street facilitators should build rapport and mutual trust with the children within their habitat.*
- *Care provision should not alienate the child from its environment, i.e. services should be offered to children near the areas where they live.*

Bibars 1998 (Egypt)

Rurevo and Bourdillon recognize that there is a group of children who find it hard to leave the street, and they advocate for the provision of facilities for these children.

Children who find it hard to leave the streets, and who are probably in any case infected by HIV, need services to enable them to live with some dignity and without infecting others. They need facilities for washing and food preparation, and to be able to relax and play. They need treatment when they are hurt or ill. They need education that treats them with respect. They need people who will listen to them with respect and understanding and who will give them some hope in a society that has treated them badly.

Rurevo and Bourdillon 2003 (Zimbabwe)

Although some people working with street children in Zambia felt that too much of a street based approach might serve to maintain the girls' life on the streets, the majority acknowledged that for a certain group of girls who were not currently being reached, services needed to be more street based in order to engage these girls.

Recommendation 1.5:

A recognition that some girls will find it hard to leave the streets, would allow services to develop the **street work approach**, offering a range of services to girls living on the street, **enabling the rights of these girls to be fulfilled**.

8.6 Developing Programmes in Response to Individual Needs

Ruth Payne (2004) in her research with street girls in Ghana, emphasised the importance of taking each girl as an individual and not assuming that all the girls have the same needs. This implies that a 'one size fits all' approach is not enough, but that services need to provide a variety of options if they are to ensure the well being and safety of all the girls on the streets.

I ask again, what is a 'street thing' to do? The answer, I think, is that there isn't one. As this dissertation has shown, street girls are an extremely diverse category, experiencing street life in contradictory and complex ways. This diversity must be properly acknowledged to improve interventions in their lives. While it is easier to label and 'box-up' street girls into a category with a set of similar problems and needs, this dissertation suggests that street girls are inherently individual and pose unlimited challenges to our perceptions and stereotypes.

Payne 2004 (Ghana)

Activities should be built around the child and her/his needs, and not on the negative and traditional perspective of an adult.

Bibars 1998 (Egypt)

...emphasise the importance of listening to street girls to ensure we offer realistic and appropriate 'help'. For it is only through listening to their voices that their dreams and plans for their futures and the futures of their children, can be heard, understood and realised.

Payne 2004 (Ghana)

Recommendation 1.6:

To build an **individual needs based approach** into programmes. Through:

- Ensuring outreach / street workers are trained in really **listening** to the girls, their needs and suggestions,
- Ensuring every girl has an identified **key worker** who works with her to develop an **individual plan** which outlines the girl's goals and agreed steps to work towards achieving them.

8.7 Building on the Girls' Strengths

A number of papers highlight the immense strength and resourcefulness of girls living on the streets, and recommend that services work with these strengths to enable girls to develop their full potential.

Despite being labelled a 'marginalised other', somehow 'out of place' in public spaces of the city, this dissertation is testimony to the astonishing ability of street girls to contest their exclusion and, ultimately, survive against the odds.

Payne 2004 (Ghana)

the way forward may be to recognize the strengths that street children have developed and build upon their survival skills.

Fujimura 2003 (Russia)

Recommendation 1.7:

Key workers to develop **individual plans** with their key girls, which identify and **build upon the strengths and talents** of each child.

8.8 A Rights Based Approach

Zambia has ratified the UN Convention on the Rights of the Child (CRC), and so the Government of Zambia has a legal duty to ensure that every child has these rights fulfilled. The CRC can be used as a framework within which to develop services appropriately.

This includes advocacy to protect children's, particularly girls', rights to education, health care, protection from exploitation, violence and abuse, and rights to participate in all decisions affecting them, within the family, community and street environment.

Evans 2002 (Tanzania)

....an advocacy and training component, where all the parties – including the children and their families as well as institutions dealing with them - learn about their legal rights and how to defend such rights.

Bibars 1998 (Egypt)

Recommendation 1.8a:

To regularly **evaluate services against the CRC.**

Recommendation 1.8b:

All youth and child care workers and children on the streets to participate in a **training session on the CRC**.

Recommendation 1.8c:

To start a **'Rights Club' for children** on the streets and in centres

8.9 Girls' Participation in Defining Programmes

Numerous researchers stress the importance of listening to and involving the children when planning services

They must maintain a respectful attitude toward the needs expressed by each child so that each child can participate in defining the programme's actions

Bibars 1998 (Egypt)

Another form of empowerment is to involve the children in making decisions that affect their lives, which may gain their greater co-operation in programs. In Brazil, for instance, including children's contributions to interventions that would improve their lives has had some effect (Swift 1997).

Rurevo and Bourdillon 2003 (Zimbabwe)

....rights to participate in all decisions affecting them, within the family, community and street environment.

Evans 2002 (Tanzania)

Recommendation 1.9:

To develop appropriate tools for girls' **participation in planning and running new and existing programmes**.

8.10 Addressing Gender Inequality

Hansson (2003) examines the role played by social economic and political 'macro level forces' in shaping the phenomenon of street children. She identifies gender

inequalities in South African society as playing a major role in the many problems faced by girls on the streets.

Female children are raised to believe that they are less capable than males of surviving autonomously, that is, without adults and males.

The majority (94 percent) of those interviewed by Keen (1989) saw themselves as being dependent upon males as protectors and/or providers for their long-term, future welfare.

As is the case with other females, however, the very males with whom females bond for protection against 'strange' males, frequently become a threat to these females (Stanko 1990).

Hansson 2003 (South Africa)

Another factor that drives girls into sexual activities is the view of many men in Zimbabwean society that they have a right to sex. This attitude becomes particularly dangerous to children when it is associated with a belief that sex with a virgin can cure them of illness or help them get rich. Men in the street community appear to feel free to have sex with young girls, sometimes against their will.

Rurevo and Bourdillon 2003 (Zimbabwe)

As well as highlighting the importance of addressing gender inequality in Zambian society, this analysis also points us towards the importance of addressing and challenging these ingrained perceptions with both boys and girls on the streets.

Recommendation 1.10:

Both workers and children to participate in **training programmes challenging gender stereotypes and behaviours.**

8.11 Addressing Violence

Females who stroll² commonly face the threat and actual use of violence at the hands of males with whom they are intimately involved. Thirty-five percent of those interviewed by Keen (1989) admitted that their boyfriends physically abused them regularly.

[] like the majority of females, those who stroll accept violence from males with whom they are intimately involved as legitimate:

89 percent felt that it was a man's right to hit a woman.[]

² Hansson refers to the girls living and working on the streets as 'females who stroll'.

19 percent actually felt that violence was an expression of a man's love for a woman, and only 11 percent believed that it was not acceptable for a man to hit a woman, under any circumstance (Keen 1989).

Hansson 2003 (Cape Town)

Recommendation 1.11a:

Both workers and children to participate in **teaching sessions on gender based violence.**

Recommendation 1.11b:

All network members to agree to and demonstrate an **anti violence policy.**

8.12 Mental Health Problems

It is recognised that separation from parents, particularly mothers, places children at high risk for developing depression and other mental health problems (Boyden & Mann 2001). Therefore we might assume that a significant number of the girls, particularly those whose parents have died, are highly vulnerable to developing mental health problems.

Although research specific to children on the streets is limited, the existing research highlights the high levels of mental health problems among this group. Guernina (2004) outlines some of the risk factors associated with street children which tend to lead to mental health problems. She highlights sexual exploitation, engaging in unsafe sex at an early age, and promiscuity and unplanned pregnancy as risk factors. The nature of these risk factors points to girls being even more at risk of developing mental health problems than boys. Guernina calls for more preventative measures to be put in place. Prevention of mental health problems in girls requires interventions at all stages – from preventing deaths of parents due to HIV and other preventable diseases, to prevention of poverty, to prevention of rape, neglect and so on. In addition to this, girls need good quality counselling and support to help them address emotional turmoil and trauma as a result of past and current experiences.

Recommendation 1.12:

To develop a **comprehensive and accessible counselling service** for children living and working on the streets. This would ensure the availability of qualified and supervised female counsellors for the girls.

8.13 Income Generating Skills

Many authors highlight the need for girls to be enabled with alternative ways of supporting themselves, although some are also realistic about the limitations of this approach in the current economic climate.

Girls in particular need knowledge and skills that will enable them to earn income and survive in less harmful ways, so training in general and specific income-generating skills might help. It is difficult, however, for disadvantaged children to earn their keep in a climate of economic collapse and severe poverty.

Rurevo and Bourdillon 2003 (Zimbabwe)

Recommendation 1.13:

To provide opportunities for girls to **learn and pursue income generating skills.**

9. Recommendations from the Girls

In the context of the Bakashana Twampane group for girls on the streets, the girls were asked about good and bad points of services they had been in contact with, and then to imagine that they were the government with money to develop a new service for girls like themselves living on the streets. Some of their recommendations were as follows:
(See Appendix 2 for full list of their recommendations.)

- **School**

Education and schooling was seen as very important. One girl suggested:

'A school in a different place to the centre to make things more interesting and to trust the girls and see if they run away.'

Another said:

'No bribing each other to write for you if you can't write. If you aren't intelligent you must start at Grade 1'

- **Structure**

Some girls felt that they should be allowed to come and go from a centre as they choose:

It's up to you if you want to stay or go.

Whilst others felt it should be compulsory to stay:

If we run away, trace us and bring us back

It was felt that for pregnant girls and girls who have moved on the support should continue:

Follow ups with those getting married, pregnant or going home

- **Expectations of the Workers**

Having friendly, understanding and trustworthy workers was also seen as a priority:

People who like us and understand us so we can also respect them.

Not to give false promises like - we'll buy you shoes and clothes, we'll take you to a centre, we'll give you an education – and they don't.

Not to get short tempered, becoming cheeky or shouting at us or saying 'go back on the street'.

- **Expectations of the Girls**

The girls stated that they needed clear boundaries for themselves:

Listen to what the workers tell you and be obedient

No getting angry with the workers and saying 'at my mums house I was never kept like this'

If we make a mistake we must learn to say sorry

Other elements they highlighted were:

- Skills training, e.g., Tailoring and design, Catering, Agriculture
- Health & hygiene
- Arts e.g., Traditional dance, Drama
- Recreation - TV, radio, video tapes, Holidays and trips
- Religion - Church
- Clothes
- Beds with bed sheets and pillows
- A place near town so easy to get to
- A good diet: *not taking the meat for themselves and giving us peas*

Recommendation 1.14:

To involve the girls in decision making about service developments and in **evaluating services** on a regular basis.

10. Recommendations for the Way Forward

In addition to the cross cutting recommendations for service delivery above, this section recommends some specific service developments to address the needs of girls living and working on the streets.

Muntingh in his Profile of Street Children in Zambia (2006) asked stakeholders what they perceived to be effective models of service provision, he reports:

The single most important characteristic of all these responses are that there is no sense of agreement amongst stakeholders on what are effective services.

This highlights again the challenge in taking this work forward in a way that involves all of the stakeholders.

However, from the meetings and conversations held so far, in addition to the research detailed above, the following has emerged:

Initially a two pronged approach to improving the situation of girls is recommended:

1. Develop facilities to ensure the safety and well being of the girls currently on the street
2. Awareness raising and action on girls' Issues and gender

This report will focus on the former, as this was recognised by the majority of respondents as the most urgent. Proposals for raising awareness about girls' issues and working with girls and boys on gender issues can be elaborated on further in the future.

In addition to this, some recommendations about the organisation and coordination of services are made.

10.1 Safety and Well Being of Girls Currently on the Streets

Many workers highlighted that there are a group of girls on the street who have been to many of the centres and left. These girls are mainly between the ages of 14 and 18 and are facing a number of risks daily, they use solvents, their health is poor, they are suffering sexual and/or physical abuse on a daily basis; and they are at high risk of becoming pregnant and developing STIs and HIV. Some of them have already had babies or are currently pregnant.

A model for engaging these 'hard to engage' or free spirited girls was outlined at the KidSAFE meeting in February '07. This model proposed a 'step by step' approach to gradually build the trust and confidence of the girls and to help them to make decisions about their lives and futures. Muntingh (2006) in the profile of the Street Children in Zambia, identified a similar approach.

A Step by Step approach to Engaging and Protecting Girls on the Streets:

Step 1

A comprehensive **street work (or outreach) programme** with the girls which includes a key worker system and an individual planning system.

Step 2

Short- term learning programmes such as groups or camps

Step 3

Increasing the number of **sleeping places for girls** through a night shelter and a fast track placement service.

Step 4

A psychosocial support centre in town for girls, offering counselling, psychosocial support and referral to other services.

Step 5

A variety of medium and longer term support options for girls i.e. centres, family or community reintegration, fostering, adoption, group homes, independence with support.

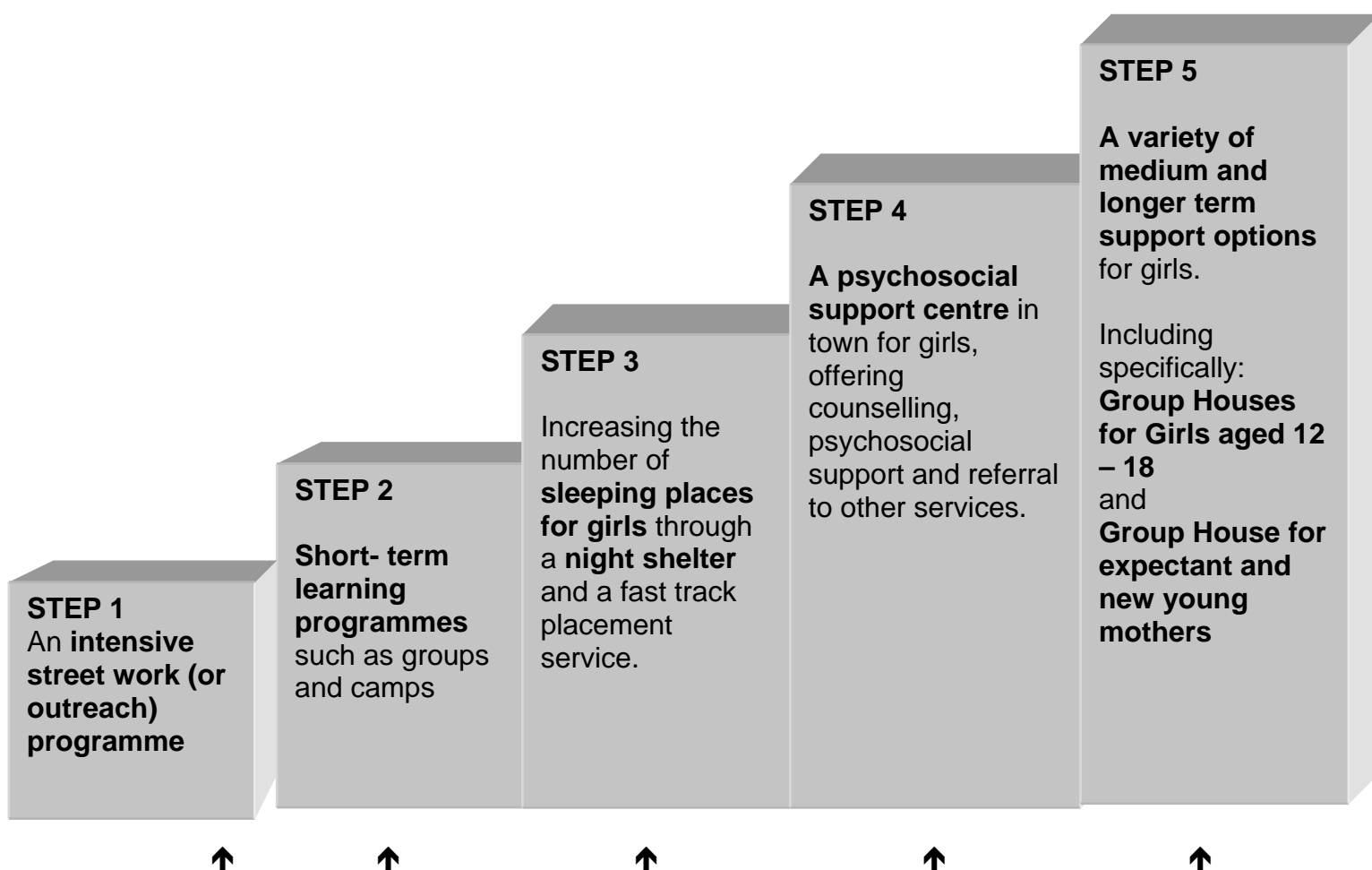
Including specifically: **group houses for girls aged 12 – 18,**
and a group house for those who are **expectant and new mothers**

This approach aims to offer each girl the opportunity to engage as much or as little as she chooses to. For example, for harder to engage girls, step 1 offers outreach workers and a specific key worker who can work on the street with the girl for as long as necessary, whilst holding the door open to more intensive engagement with services (steps 2 to 5) when the girl is ready. Other girls might engage more quickly at steps 4 and 5, without the need for intensive outreach.

See figure 1 below for this approach in diagram form.

Figure 1:

A Step by Step approach to Engaging and Protecting Girls on the Streets



Girls living or working on the streets engage at the most appropriate step for them and move to next step when they are ready with the support of workers.

10.1.1 Street Work or Outreach with Girls

The outreach and mobile health teams are already working with the children on the streets. Some capacity building to more effectively address the specific needs

Recommendation 2.1:

To build capacity in the outreach team to effectively address the needs of girls.

Recommendations for how to achieve this are as follows:

- A. Increasing the number of **trained female outreach/street workers**
- B. Female Street workers based at the support centre (see 9.3 below) spend time on the streets **building trusting relationships** with the girls, respecting and learning about their way of life, and listening more than advising. (Street Child Africa promotes this model of street work and are using it successfully in Zimbabwe with Streets Ahead, and in Ghana with Street Girls Aid. See section 7.2.4 p18 and appendix 1 for information on street workers.)
- C. **A key working system** in which each girl has an identified female key worker, someone who works on building a relationship with the girl and helping her to identify and achieve personal goals.
- D. **An individual planning system** in which each girl has their own individual plan. The child or young person, with the assistance of their key worker develops a plan for their future with goals and methods by which these can be achieved. The key worker works systematically with the child to help them to achieve their goals.
- E. Train street workers in **basic counselling and listening skills**. Street workers are not counsellors, but they should be armed with basic listening and counselling skills.
- F. Ensuring the **continuity of outreach workers** is crucial for developing trust and relationships with the girls
- G. Outreach workers to carry **identity cards** to enable their own safety and to prevent fake outreach workers from abusing the girls' trust.

of girls in this area is recommended.

Recommendation 2.1 (continued):

To **build capacity in the outreach team** to effectively address the needs of girls.

- H. Outreach workers should be **employed, trained, supported and monitored** to ensure a good quality service.
- I. Female outreach workers should be **paired with male workers** for night street work and day time work in dangerous areas.
- J. Outreach workers should have **access to resources** to enable them to support the girls effectively, e.g. talk time, petty cash, sanitary pads, condoms etc.
- K. Opportunities need to be created so that workers can **talk with the girls in a safe and private space** when the girls are not high on inhalants. For examples see sections 10.1.2 & 10.1.4 below.
- L. The **reintegration team** could be enlarged to enable a reintegration service which can respond more immediately to requests from children and make comprehensive follow ups.

10.1.2: Short- term Learning Programmes

Recommendation 2.2:

To offer appropriate **programmes, groups and camps** to the most vulnerable girls as part of a phased in transition to services (Muntingh 2006, Hepburn 2001) with the aims of:

- Assessing individual needs
- Building trusting supportive relationships
- Equipping the girls with life skills and survival skills,
- Helping the girls get used to functioning in a structured environment, and
- Linking the girls into appropriate services when they are ready for this.

Examples of such programmes are:

- **Bakashana Twampane Girls Group on Reproductive Health**

The weekly KidSAFE girls group Bakashana Twampane, run by an outreach worker, a worker from the mobile health team and a volunteer from one of the centres, aims to:

- educate the girls about reproductive health and hygiene,
- offer a place for the girls to wash themselves and their clothes,
- build trusting relationships and offer support,
- build self esteem,
- help the girls get used to functioning in a structured environment as a stepping stone to other services and
- find out more about the girls and their needs

- **The Street Life Programme**

This 12 session programme developed by Africa KidSAFE builds life skills such as evaluating life on the streets, knowledge of HIV transmission and prevention, saying no to unwanted advances, building self esteem, assertiveness, and planning for the future.

- **Psychosocial Support Camps**

Another way to work towards engaging the girls is to offer a 7 or 10 day psychosocial support camp for girls based on the Masiye model (see section 7.2.6 above). This would enable the girls to develop life skills, build their self esteem and reflect on themselves and their situations. The intensive nature of this type of intervention can allow the girls to learn, reflect and play in a safe and supportive environment which is free from the distractions of sticka, hunger, abuse and fear and can provide a powerful learning experience.

- **Arts Projects**

Such as the Bare Feet theatre and dance productions, and the Kuwala photography exhibition, both by children living and working on the streets.

NB The same programmes can also be beneficial for girls in centres or at risk of going on the streets, as well as for boys.

10.1.3 Adequate Safe Sleeping Places for Girls

This is a basic health and safety issue for girls, particularly to prevent the rape and sexual abuse and physical assault of girls sleeping on the streets at night. The girls who find it difficult to remain in a centre are seen as a challenging group to cater for, but provision of a basic night shelter along the following lines would offer them a place of safety at their most vulnerable time – night time.

10.1.3a A Girls only Night Shelter

Recommendation 2.3a:

To open a basic **night time sleeping shelter for girls** only.

This would offer:

- A walk in service i.e. no referral necessary
- Easy access (walking distance) from town
- Beds with sheets and blankets for sleeping
- An evening meal and breakfast
- Bathing facilities
- Information about, access and referral to other services
- No daytime facilities, opening at around 1900 until 0800
- All female staff.

10.1.3b A Fast Track Placement Service

- To allow a girl immediate access to an appropriate centre.

One of the difficulties highlighted within the current system was a cumbersome and lengthy process to get a girl a place at a centre. This seems to be due to a combination of factors including:

- A lack of clarity about what is whose responsibility e.g. between mobile health, girls group, outreach team, reintegration officer and Dept. of Social Welfare (see recommendations 4.1 and 4.2 below)
- Lack of clear guidelines on methods of placement.
- Some reticence to approach social welfare for assistance
- Lack of appropriate centre places for girls directly from the streets, 'harder to engage' girls and girls aged 14 – 18.

Recommendation 2.3b:

To develop a **fast track placement service for girls**, so that a girl requesting a centre placement could be placed within the same day to protect her from further danger that night.

10.1.4: A Psychosocial Support Centre for Girls

Recommendation 2.4:

To open a **daytime support centre** in town for girls, offering **counselling, psychosocial support and referral** to other services.

Such a support centre within easy reach of town would be a vital stepping stone to other services for girls. It would aim to work with each girl for as long as necessary through counselling and psychosocial support to enable her to reach a sound decision about how to move forward in her life.

This model is similar to that used by the Wema Centre Drop In, in Mombasa, Kenya. See section 7.2.2 p38 for details.

Below are some of recommended elements to be included.

- All female staff including:
 - Street / outreach / drop in workers
 - Counsellors
 - Centre manager
- Information about, access and referral to other services such as:
 - Social welfare dept.
 - Reintegration services
 - education
 - clinics
 - places to sleep
 - youth and child care centres
 - etc.
- Basic Hygiene Facilities
 - toilets
 - showers
 - clothes washing and drying areas
 - sanitary protection and disposal
- Nutritious Meals

Bibars (1998) recommends that street children are provided with 'meals that meet at least 60 per cent of their daily nutritional requirements'.

- **Counselling and Psychosocial Support**

To enable girls to overcome the effects of past traumas, build self esteem and self determination, to help the girls develop their own solutions and coherent plans for their futures.

- group counselling sessions
- individual counselling sessions
- group education and discussion sessions
- inhalant education and reduction programme
- life skills training
- an approach within the support centre which privileges emotional support and well being

- **Health**

- a weekly session from the mobile health team or a visiting doctor
- good links with the local clinic
- regular health education sessions e.g. HIV, STI's, reproductive health, hygiene, etc.

- **Registration of girls**

- a database in collaboration with the Dept. of Social Welfare, the outreach team, mobile health and the KidSAFE network.

- **Involvement of the girls in the organisation and running of the service.**

For example:

- Involving the girls in planning the service from the outset
- weekly community meetings
- daily household chores including meal preparation

- **Skills and Recreation**

- basic literacy and numeracy
- income generating skills
- arts, music and dance
- sports and games

- **Well Supported Staff**

- Experienced, trained female staff
- Staff employed on long term contracts to provide vital continuity for the girls
- A clear vision and mission statement for the project
- Regular staff meetings for good coordination
- Regular counselling supervision for counsellors

Not all services needed should be provided on the premises, adding to the institutionalisation of the girls and taking the centre's focus away from that of empowering the girls and providing psychosocial support. Where possible, girls should be referred to appropriate services (such as schools, clinics, vocational training centres) and supported in attending them.

10.1.5: Medium and Longer term support for girls

At this stage in the process there are numerous possibilities of medium and longer term support, depending on the needs of the girl and her existing family support, e.g., youth and child care centres, family and community reintegration, fostering, adoption, group homes, independence with support, skills training, educational support etc

There are medium and longer term options already in place, i.e. there are some existing centres for girls, and a reintegration service, although most of these services were reported to be under resourced and in need of greater capacity, and there is a lack of appropriate services for girls aged 12 – 18.

10.1.5a Group Houses for Girls aged 12 – 18

Recommendation 2.5a:

The establishment of small **group houses for 4 – 6 girls** aged 12 - 18, with a house mother, and where the girls are given a greater degree of independence and responsibility than in the centres.

10.1.5b Group House for Expectant and New Mothers

This is another group for whom there is currently no appropriate service.

Recommendation 2.5b:

The establishment of a **house for girls who are expectant and new mothers**, overseen by a house mother. Here girls would receive ante natal and post natal care, as well as assistance with planning for their futures.

The model used by Street Girls Aid in Ghana, see section 7.2.1 p.15, could be adapted for the Zambian context.

10.2 Awareness Raising and Action on Gender

Recommendation 3:

To develop a **strategy to promote** knowledge of and action on **issues pertaining to girls and gender** throughout all KidSAFE partner organisations.

10.3 Organisation and Coordination of Services

10.3.1 Development of a Model of Care

A clearly documented model or continuum of care for all children on the streets would assist all of the stakeholders to work more effectively within the system. The five stage approach outlined in section 9.1 above could be a starting point for such a model.

Recommendation 4.1:

To develop a shared **model or continuum of care** which documents a broad range of options and care packages for all children on the streets.

10.3.2 Improved Coordination and Transparency of Services

Recommendation 4.2:

To develop a strategy to **improve the coordination and transparency of all services** working with children on the streets.

Recommendations for how this might occur are:

10.3.2a A Key Working and Individual Planning System

The key working and individual planning systems (described in 10.1.1, recommendation 2.1 points C and D, p.37) should be part of a package of care for each child within the system, whether still on the streets, in a centre or in another facility. This would ensure that each child received a comprehensive and focussed intervention, built around her own aims and goals, and was assisted to achieve these at their own pace.

In addition, the key worker would play a coordinating role across all services. i.e., all services working with a particular child would know who the child's key worker was, and the key worker would ensure good communication between services working with the child, thus preventing overlaps or gaps in service provision.

Recommendation 4.2a:

To develop a **key working and individual planning system** as a continuous part of each child's package of care as they move throughout the system.

10.3.2b Regular Case Reviews for each Child

A case review for each child should be held at least every six months, more often if necessary. A case review would be a meeting to which all workers involved with the child, across all agencies, would be invited. The child and any involved members of her family would also be invited a relevant section of the meeting and the wishes and views of the child would be given high priority in the planning process.

At the case review, work with the child over the past six months would be reviewed; the child's unmet needs would be identified; and a plan to ensure those needs were met would be agreed. The various agencies would coordinate on who will do what with the child over the coming months and a record would be kept.

Recommendation 4.2b:

To develop a system for regular (at least 6 monthly) multidisciplinary case reviews for each child.

10.3.2c Structures for Sharing Information and Ideas on a Regular Basis

It is recognised that there are a number of agencies working with children on the streets in Zambia. Regular meetings for sharing information and ideas would be welcomed by most of these. This would ensure that resources were channelled in an effective manner avoiding gaps and overlaps in services. These would also act as a valuable forum for support and learning.

Recommendation 4.2c:

A regular forum for organisations working with children on the streets; for **information sharing, learning and support.**

11. Summary of Recommendations

1. Service Planning and Delivery Recommendations

1.1 Sexual Exploitation and Abuse

- a) Immediate action to be taken to afford **greater protection from sexual abuse** to the girls currently living on the streets.
- b) Every programme working with girls to have a clear **policy on how to address the issue of sexual exploitation and abuse** regarding prevention, detection and action. This should address abuse both outside and within the institution or service.
- c) All **institutions working with children to be regularly monitored**, using anonymous **feedback from the children** as part of this process.

1.2 The Challenge of How to Assist Girls on the Streets

- a) To bring an awareness of the challenging nature of this work to programme planning and implementation through structures which support and encourage workers to **maintain clear goals and to persevere in striving for these** despite the challenges encountered.
- b) To ensure **workers** in this field are properly **trained and supported**.

1.3 Gender Specific or Gender Sensitive Services

To develop **girls only services** where possible, and existing services to address the specific needs of girls.

1.4 Respecting the Girls and the Life they have Chosen

Respect for the girls and their lifestyle should be demonstrated on all levels including the design of programmes, programme implementation and in the attitude and behaviour of all the workers who have contact with the girls.

1.5 Street Based Programmes

A recognition that some girls will find it hard to leave the streets, would allow services to develop the **street work approach**, offering a range of services to girls living on the street, **enabling the rights of these girls to be fulfilled**.

1.6 Developing Programmes in Response to Individual Needs

To build an **individual needs based approach** into programmes. Through:

- Ensuring outreach / street workers are trained in really **listening** to the girls, their needs and suggestions,
- Ensuring every girl has an identified **key worker** who works with her to develop an **individual plan** which outlines the girl's goals and agreed steps to work towards achieving them.

1.7 Building on the Girls' Strengths

Key workers to develop **individual plans** with their key girls, which identify and **build upon the strengths and talents** of each child.

1.8 A Rights Based Approach

- a) To regularly **evaluate services against the CRC**.
- b) All youth and child care workers and children on the streets to participate in a **training session on the CRC**.
- c) To start a **'Rights Club' for children** on the streets and in centres.

1.9 Girls' Participation in Defining Programmes

To develop appropriate tools for girls participation in planning and running new and existing programmes.

1.10 Addressing Gender Inequality

Both workers and children to participate in **training programmes challenging gender stereotypes and behaviours**.

1.11 Addressing Violence

- a) Both workers and children to participate in **teaching sessions on gender based violence**.
- b) All network members to agree to and demonstrate an **anti violence policy**

1.12 Mental Health Problems

To develop a **comprehensive and accessible counselling service** for children living and working on the streets. This would ensure the availability of qualified and supervised female counsellors for the girls.

1.13 Income Generating Skills

Provide opportunities for girls to learn and pursue income generating skills.

1.14 Consultations with the Girls

To **involve the girls in decision making** about service developments and in **evaluating services** on a regular basis.

2. Recommendations for Service Developments

- To ensure the safety and well being of the girls currently on the streets

2.1 Street Work or Outreach with Girls

To **build capacity in the outreach team** to effectively address the needs of girls.

Recommendations for how to achieve this are as follows:

- A. Increasing the number of **trained female outreach/street workers**
- B. Female Street workers based at the support centre (see 10.1.4 below) spend time on the streets **building trusting relationships** with the girls, respecting and learning about their way of life, and listening more than advising. (Street Child Africa promotes this model of street work and are using it successfully in Zimbabwe with Streets Ahead, and in Ghana with Street Girls Aid. See section 7.2.4 p18 and appendix 1 for information on street workers)

- C. **A key working system** in which each girl has an identified female key worker, someone who works on building a relationship with the girl and helping her to identify and achieve personal goals.
- D. **An individual planning system** in which each girl has their own individual plan. The child or young person, with the assistance of their key worker develops a plan for their future with goals and methods by which these can be achieved. The key worker works systematically with the child to help them to achieve their goals.
- E. Train street workers in **basic counselling and listening skills**. Street workers are not counsellors, but they should be armed with basic listening and counselling skills.
- F. Ensuring the **continuity of outreach workers** is crucial for developing trust and relationships with the girls
- G. Outreach workers to carry **identity cards** to enable their own safety and to prevent fake outreach workers from abusing the girls' trust.
- H. Outreach workers should be **employed, trained, supported and monitored** to ensure a good quality service.
- I. Female outreach workers should be **paired with male workers** for night street work and day time work in dangerous areas.
- J. Outreach workers should have **access to resources** to enable them to support the girls effectively, e.g. talk time, petty cash, sanitary pads, condoms etc.
- K. Opportunities need to be created so that workers can **talk with the girls**
- L. The **reintegration team** could be enlarged to enable a reintegration service which can respond more immediately to requests from children and make comprehensive follow ups.

2.2 Short- term Learning Programmes

To offer appropriate **programmes, groups and camps** to the most vulnerable girls as part of a phased in transition to services (Muntingh 2006, Hepburn 2001) with the aims of:

- Assessing individual needs
- Building trusting supportive relationships

- Equipping the girls with life skills and survival skills,
- Helping the girls get used to functioning in a structured environment, and
- Linking the girls into appropriate services when they are ready for this.

2.3 Adequate Safe Sleeping Places for Girls

a) A Girls only Night Shelter

To open a basic night time sleeping shelter for girls only.

This would offer:

- A walk in service i.e. no referral necessary
- Easy access (walking distance) from town
- Beds with sheets and blankets for sleeping
- An evening meal and breakfast
- Bathing facilities
- Information about, access and referral to other services
- No daytime facilities, opening at around 1900 until 0800
- All female staff.

b) A Fast Track Placement Service

To develop a fast track placement service for girls, so that a girl requesting a centre placement could be placed within the same day to protect her from further danger that night.

2.4 A Psychosocial Support Centre for Girls

To open a **daytime support centre** in town for girls, offering **counselling, psychosocial support and referral** to other services.

Such a support centre within easy reach of town would be a vital stepping stone to other services for girls. It would aim to work with each girl for as long as necessary through counselling and psychosocial support to enable her to reach a sound decision about how to move forward in her life.

2.5 Medium and Longer Term Support for Girls

a) Group Houses for Girls aged 12 – 18

The establishment of small **group houses for 4 – 6 girls** aged 12 - 18, with a house mother, and where the girls are given a greater degree of independence and responsibility than in the centres.

b) Group House for Expectant and New Mothers

The establishment of a **house for girls who are expectant and new mothers**, overseen by a house mother. Here girls would receive ante natal and post natal care, as well as assistance with planning for their futures. The model used by Street Girls Aid in Ghana could be adapted for the Zambian context.

3. Awareness Raising and action on Girls' Issues and Gender

To develop a **strategy to promote** knowledge of and action on **issues pertaining to girls and gender** throughout all KidSAFE partner organisations.

4. Organisation and Coordination of Services

4.1 Development of a Model of Care

To develop a shared **model or continuum of care** which documents a broad range of options and care packages for all children on the streets.

4.2 Improved Coordination and Transparency of Services

To develop a strategy to improve the coordination and transparency of all services working with children on the streets.

a) To develop a **key working and individual planning system** as a continuous part of each child's package of care as they move throughout the system.

b) Regular Case Reviews for each Child

To develop a system for regular (at least 6 monthly) case reviews for each child.

c) Structures for Sharing Information and Ideas on a Regular Basis

A regular forum for organisations working with children on the streets; for information sharing, learning and support.

12. Prioritisation of Recommendations

All of the above recommendations are designed to work together to begin to meet some of the many needs of girls living on the streets and in the centres. However, as discussed earlier, the safety of the girls currently on the streets is viewed as a priority, as these girls are at high risk of physical and sexual abuse, HIV and STI's, on a daily basis. Therefore it is recommended that priority be given to the following recommendations:

2.3 Adequate Safe Sleeping Places for Girls

- a) A Girls only Night Shelter
 - b) A Fast Track Placement Service for girls
- See section 10.1.3 p39*

2.4 A Psychosocial Support Centre for Girls

A daytime support centre in town for girls, offering counselling, psychosocial support and referral to other services.

See section 10.1.4 p41

2.5 Medium and longer term interventions

Specifically:

- a) Group Houses for Girls aged 12 – 18
 - b) Group House for Expectant and New Mothers
- See section 10.1.5 p43*

13. Conclusion

It has been seen that the girls on the streets in Zambia are living hazardous lives and have very many unmet needs and unfulfilled rights. These include constant exposure to sexual abuse and exploitation, violence, lack of educational opportunities, vulnerability to HIV, STI's and pregnancy, lack of adequate health care, love and nurture, and many more.

Such is the seriousness and challenging nature of their situation that there is a danger of workers and services becoming overwhelmed through being faced with multiple unmet needs and no clear or agreed way to meet those needs.

This report recommends a way forward to ensure that the girls are safe, that they are afforded opportunities to engage in appropriate services at their own pace, and so that services take up the challenge of working with girls in relevant and gender sensitive ways.

It is hoped that the most urgent needs proposed: a night shelter for girls, the provision of counselling and psychosocial support at a daytime centre, and group houses for 12 – 18 year old girls and for those who are pregnant and new mothers, can be developed as soon as possible.

A number of recommendations are also made regarding methods of service delivery. These include: involvement of the girls in the planning and evaluation of services; good support to workers to enable persistence and prevent burnout and the subsequent loss of their humanity towards the girls; clear policies on dealing with sexual abuse, both within institutions and on the streets; programmes which meet and work with the girls on the streets until they are ready to move into a

different way of life; and offering good quality counselling services to enable the girls to overcome traumas and make sound decisions about the way forward for themselves.

It is also recommended that improved organisation and coordination of services would benefit the girls hugely. For example that a shared model of care be utilised across all services, that each child has an identified key worker who develops an individual plan with them, and that each child's situation be reviewed at least every six months in a multidisciplinary case review meeting.

I tend to agree with a comment from one of the workers interviewed:

*It's all about a conducive environment. Given the opportunity,
most of them would perform wonders.*

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Street Child Africa, UK: www.streetchildafrica.org.uk

Streets Ahead Zimbabwe: www.streetsahead.org.zw

Wema Centre, Kenya: www.wemacentre.org

APPENDIX 1

Street Child Africa: Street Workers

Taken from the Street Child Africa Website: www.streetchildafrica.org.uk

The importance of a street worker in a street child's life

A street worker establishes a relationship that is based on trust and friendship. A street worker takes the place of a family member, parent, older sibling to any street child who is alone on the street – the toughest environment in Africa.

There is no formality to this relationship and the relationship is understood to be mutually respectful and productive. We could describe this as 'success' if it results in outcomes that have been agreed by the street worker and street child as improving that child's quality of life in terms of basic human rights; and at Street Child Africa we would recognise these as those rights ratified in the UN Convention on the Rights of the Child (adopted by the UN General Assembly September 1990).

A street worker has no institutional authority to intervene in the life of a child; any action that is agreed upon is based upon a decision taken in conjunction with the child to address the child's needs at that particular time.

Street work is based on an intimate knowledge of the local community and how a street child interacts with every member of that community, be it a market, a bus station, a shanty compound or city street.

Examples of problems that a street worker might try to address on behalf of a street child:

- Juvenile justice: representing the child at a local police station or magistrate's court; as children they have no voice within many national legal systems; a street worker on behalf of a registered NGO is able to represent the child, advise, and advocate on their behalf.
- Conflicts on the streets – the streets are a harsh environment – limited resources are fought over by many children. Fights break out between rival gangs and a well-respected street worker who has no allegiance to any particular gang can be a powerful mediator to achieve an outcome that is just for all.
- Conflicts with local stakeholders – street children work to pay for basic amenities such as water, food, rent, even to pay for a bath or the right to shelter in cramped shanty dwellings. A street worker can advise a child or mediate on behalf of an angry stall holder in a market, or an unscrupulous trader who has employed a child to work for a day and then not paid them.

Methods that a street worker will use:

Familiarity with their locality is key to discerning who 'full-time' street children are, and who are children from chronically poor families with some reliance on the street.

To be on the streets and understanding the different interactions of local communities will lead to an understanding as to where the children are; **street mapping** allows a street worker

to see the street from the child's point of view. For example, for a child keen to earn money, bus stations are a source of revenue; opportunities to be a porter, to pick up rubbish, to sell small items such as plastic bags (recycled). This source of income can also become a highly charged location for conflict and dispute between rival street gangs as well as angry 'customers', police who view street children with suspicion and often contempt. Street workers will often come to these regular 'haunts' to catch up with the children and to catch up with news and events.

Conversation is key to getting to understand a child. Every street worker becomes wise to the many different 'stories' a child will tell about how they came to the street, where they are staying, what they do. It is only by getting to know the child in a non-interrogative way that the real 'truth' about their situation is revealed. Street children are by nature wary and often unhappy to talk too much about recent events in their lives that may have caused them great distress, shame, unhappiness (bereavement, sexual abuse from family members or wider community, fear of HIV/AIDS). A trusted street worker can counsel and assist a child adjusting to the implications of these life changing incidents.

Activities that open up conversation. Develop friendship and knowledge of the child as well as becoming useful conduits for information sharing: for all our partners, street corner education is such an activity. As well as providing a regular chance for a street child to leave their work and spend time learning, it provides a useful 'safe' environment for sharing of problems, life skills sharing and the first steps in engaging with children who are wary of Drop in centres and what they may perceive as more coercive methods of engagement.

The overall success of a street worker's relationship with any child is that a solution to that individuals' problems have been sought *together* and that the participation of the child in his own decision making is key to a successful new choice of life style - be it an adjustment in risk behaviour on the street leading to a healthier individual through to more long term interventions such as reintegration back to family and community.

Recognising other key stakeholders is also fundamental to reaching out to street children and youths.

Working with institutions where these exist. With our partners we always encourage good working relations with local clinics, police stations, schools, even supermarkets. Not only can these lead to opportunities for direct assistance, it does a great deal in reducing stigma within local communities who often cannot discern a street child from the many poor children in their neighbourhood.

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APPENDIX 2

Recommendations from the Girls

In the context of the Bakashana Twampane group for girls on the streets, the girls were asked about good and bad points of services they had been in contact with, and then to imagine that they were the government with money to develop a new service for girls like themselves living on the streets. Their recommendations were as follows:

- School
 - *You get an education*
 - *High school*
 - *Boarding school*
 - *Support families to support the children so they can send us to school*
 - *A school in a different place to the centre to make things more interesting and to trust the girls to get there and see if they run away*
 - *No bribing each other to write for you if you can't write. If you aren't intelligent you must start at Grade 1.*
- Knowledge & Skills training
 - *Tailoring and design*
 - *Catering*
 - *Agriculture, ploughing and gathering, gardening*
 - *Nursing*
 - *Teaching on HIV*
 - *We should have an idea about men and fear men*
 - *Learn how to get on with each other, not taking each others boyfriends*
- Expectations of the girls
 - *Some can live there, others just come to bath and eat*
 - *To clean the place properly*
 - *Listen to what the workers tell you and be obedient*
 - *No getting angry with the workers and saying 'at my mums house I was never kept lime this'*
 - *No refusing to work*
 - *If we make a mistake we must learn to say sorry*
- Expectations of the Workers
 - *Welcome every child who comes and not saying the centre is full*
 - *Welcome every child with good food*
 - *People who like us and understand us so we can also respect them*
 - *Workers who laugh with us and greet us happily*
 - *Not to give false promises e.g., we'll but you shoes and clothes, we'll take you to a centre, we'll give you an education – and they don't.*

- *to look after us well,*
- *not to get short tempered, becoming cheeky or shouting at us or saying 'go back on the street'.*
- *No favours, giving things to some and not to others*
- *If we run away, trace us and bring us back*
- Structure
 - *Its up to you if you want to stay or go*
 - *If girls run away they are taken to the police*
 - *Supporting those who want to go home*
 - *Follow ups with those getting married, pregnant or going home*
 - *Help for those who are pregnant*
 - *Don't give money to children*
 - *Work with the police*
- Arts
 - *Traditional dance*
 - *Drama*
- Recreation
 - *TV, radio, video tapes*
 - *Holidays and trips e.g. Kalinga Farm, Adventure City*
- Religion
 - *Church*
- Clothes
 - *Shoes, pants*
 - *Keeping clothes clean*
- Beds with bed sheets and pillows
- Health & hygiene
 - *Helped to get well when ill and taken to hospital*
 - *Bath and washing soap*
- Location
 - *A place near town so easy to get to*
- Food
 - *A good diet,*
 - *not taking the meat for themselves and giving us peas*

Things not liked about services:

- Telling lies to children
- Lying to donors
- Making promises they don't keep
- Workers who eat all the food and give us only a little
- Bad food, food with insects in
- Forcing me to stay there
- Not being allowed to go out
- Rejecting children
- Men who rape us and promise us money
- Getting up at 0300 to go running
- The government says it looks after street kids but it doesn't
- Grabbing our babies to look after them
- Being promised things because the minister is there then not getting them

*From consultation exercise with Bakashana Twampane Girls Group
April 2007*