

Street Children: Promising Practices and Approaches

Elena Volpi

WBI Working Papers



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In many regions of the world, the phenomenon of street children is unabated, while it is emerging in others where it was unknown so far. Behind child disconnection lie highly vulnerable families and communities, many struggling to come to terms with economic liberalization and growing inequality. Disconnection can also be traced to a lack of communication in the family and the weakening of social capital. Street children are an alarm signaling the dire need for social development and poverty reduction policies to improve the situation in the community at large, and to prevent more young people from becoming marginalized. While preventive interventions are essential, those children already facing the hardships of street life need immediate opportunities for human development via special protection programs. This report distills the main lessons learned from a number of programs that have attempted to meet the special needs of street children worldwide. Its purpose is to help potential donors understand activities in this area and identify promising practices.

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EXECUTIVE SUMMARY

The phenomenon of street children has long existed in many regions. Today it is also making unexpected appearances where it never existed before. Experts remain divided on how to quantify and define these children, especially since they seem to fall into many categories and their numbers are difficult to establish. What does seem clear, however, is that street children are the extreme manifestation of deteriorating social capital and social exclusion. While the immediate factors responsible for their condition are unique for each child, they generally represent some combination of low family income, lack of housing, failure in school, family neglect and abuse, armed conflicts, natural disasters and epidemics.

The central theme of this report is that life in the street is associated with child-specific physical and emotional problems that call for specialized and early programs. Appropriate social and economic policies are clearly essential to prevent the number of street children from growing in the future. Equally important, those now facing the hardship of street life need to be given an immediate opportunity for human development.

Programs that aim to increase these development opportunities cannot succeed without a number of essential ingredients:

Trained professionals. Goodwill alone cannot generate a sound program. The input of experts from different sectors is vital, and resources must go toward the training and retraining of their volunteers.

Focus on integration into the family, school, and labor market. Charity-oriented programs help perpetuate the street children problem by making street life easier and strengthening children's dependence on service providers. By contrast, development-oriented activities enable children to express their potential and to function effectively in both the family and society.

Reaching children where they are. Children cannot be forced to leave the street. Several established programs that have had a positive impact begin with a phased-in transition to allow children to gradually change their lifestyle if they wish.

Individualized attention and tailor-made services. Time and multidisciplinary expertise need to be invested in assessing the situation of each participant and in designing tailor-made life plans and services.

Children's participation. It is important to design program activities with children, and not only for them. Children can be involved as peer counselors and facilitators. Their special life experience makes them potential leaders and advocates of development in their communities.

Physical and mental health care. Programs must also pay close attention to physical and mental health needs. Public health staff need to be sensitized to the specific needs of street children.

Involving family and community. The situation of street children reflects the vulnerability of their social environment. It is therefore important to strengthen the capacity of the family and community (including the school) to receive and take care of their young members.

Lobbying and advocacy efforts. By becoming involved in lobbying and advocacy, nongovernmental organizations (NGOs) can instigate changes in the legal and political environment that affects children and thereby increase the impact of more typical services.

Integration of services. The health, education, survival, and emotional needs of street children should be addressed as an integrated system with the child's well-being at the center.

Networking and institutional cooperation. NGO programs alone are not enough to significantly reduce the number of children in the street, nor are they expected to do so. It is far more effective for NGOs to network and cooperate among themselves and with local governments if they hope to increase the long-term impact and sustainability of interventions in this area.

Link to programs at the first and second level of risk. When street children activities are integrated into community development programs, it becomes easier to tackle the multiple causes of child and youth distress, and to prepare a favorable environment for children who decide to leave the street.

Donors' funding to street children activities is needed not only to sustain and expand existing services, but also to assist NGOs in the monitoring and evaluation of their interventions, and to allow them to train staff and continuously increase their professionalism. Support to lobbying, advocacy and networking is a way to help NGOs to overcome their isolation, and to give a stronger voice to street children themselves. Finally, donors can encourage institutional cooperation by supporting municipal, multi-agency development programs with street children as one of the components.

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INTRODUCTION

In many regions of the world, the phenomenon of street children is unabated, while it is emerging in others where it was unknown so far. Behind child disconnection lie highly vulnerable families and communities, many struggling to come to terms with economic liberalization and growing inequality. Disconnection can also be traced to a lack of communication in the family and the weakening of social capital. Street children are an alarm signaling the dire need for social development and poverty reduction policies to improve the situation in the community at large, and to prevent more young people from becoming marginalized.

While preventive interventions are essential, those children already facing the hardships of street life need immediate opportunities for human development via special protection programs. This report distills the main lessons learned from a number of programs that have attempted to meet the special needs of street children worldwide. Its purpose is to help potential donors understand activities in this area and identify promising practices.

The report draws on literature on street children programs and on a direct analysis of eighteen programs. The core of programs was selected by asking nongovernmental organizations and donors who participated in the International Street Children Conference held in Washington, D.C., on April 9–14, 2000, to provide documentation on their particularly promising interventions. Preference was given to development-oriented initiatives, aimed at increasing children's opportunities to be integrated in school, family, and labor market. When possible, the existence of positive evaluations, and evidence of replicability, were used as criteria of choice. Most interventions were implemented by NGOs, but a few were cooperative ventures by NGOs and local governments in which street children activities were integrated into municipal development programs.

The term “promising practices” (rather than “good” or “effective” ones) was adopted as a humble reminder of the complexity of measuring impacts in this area. Change is particularly difficult to monitor because the number of participants in street children projects is highly variable. It is also difficult to identify quantitative indicators of children's successful integration into society. Qualitative monitoring (through interviews with children or life-stories) may be more appropriate but requires specialized knowledge and takes time. NGOs, especially the small ones, do not usually have the resources to conduct sophisticated evaluations. As noted elsewhere, however, “the zeal for measurement should not be allowed to smother the boldness of vision and spontaneity of action.”¹ Many of the programs considered produced significant results, have been replicated, and show potential for long-term positive impact.

The report opens with a brief comment on World Bank involvement in street children issues, the conceptual challenges in defining and measuring the street children phenomenon, its underlying and immediate causes, and the problems and resources children encounter once in the street. The

¹ S. Thomas de Benitez, “Children's Rights and the Convention on the Rights of the Child: A Study of Acceptance and Observance in Mexico and Ecuador,” paper presented at the meeting to commemorate the tenth anniversary of the Convention on the Rights of the Child, Geneva, Switzerland, February 2000, p. 12.

discussion then turns to 18 interventions considered effective or likely to succeed and provides a simple typology for classifying them. Next come the lessons learned, with a summary of good practices in selected programs. The discussion closes with some remarks on where donor support is needed.

1. THE WORLD BANK AND STREET CHILDREN

Children in need of protection, though not a traditional concern of the World Bank, have recently been the focus of several innovative Bank activities.² The Bank has also supported some research and dissemination of ideas on the subject, as attested by the launch of the Child Labor Program in 1998, the Street Children Initiative initiated in the same year, and the International Street Children Conference held in Washington, D.C., on April 9–14, 2000, which brought together NGOs and experts from different regions of the world to share their perspectives and intervention models, and to discuss possible World Bank contributions in this area.

In 1998, the World Bank Institute and the Street Children Initiative established cooperation with the Soros Foundation and the King Baudouin Foundation, to contribute to their program entitled Street Children/Children in the Street. The Program involves ten countries (Bulgaria, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Macedonia, Poland, Romania, Slovakia) and provides financial support and technical assistance to more than eighty local NGOs. The initiative aims at (i) raising the capacity of NGOs working in this sector (ii) promoting cohesion and co-ordination at the national level, to devise more effective and sustainable programs for Street Children (iii) raising the awareness of governments, the World Bank, and other stakeholders, and encourage everyone to assume their responsibilities in this area.

Within the program, the World Bank Street Children Initiative took charge of conducting a study to evaluate a sample of supported NGOs projects³. The main findings were presented at the International Street Children Conference. The specific role of the WBI includes providing technical assistance and training to participant NGOs and other program partners, assisting partners in the program evaluation process, and raising the awareness of Bank staff involved in Country Operations, through research dissemination and training on Street Children issues. In this context, the WBI has conducted a review of street children programs in different regions of the world, in order to identify and disseminate lesson learned. The present report is the first result of such effort.

2. STREET CHILDREN: WHO ARE THEY?

2.1 Defining “Street Children”

The United Nations defines street children as “boys and girls for whom ‘the street’ (including unoccupied dwellings, wasteland, etc.) has become their home and/or source of livelihood, and

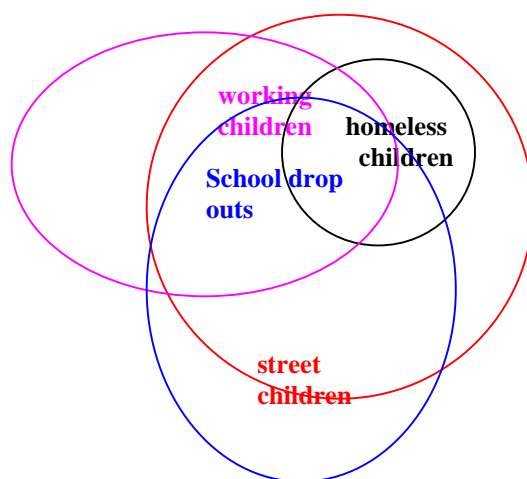
² Some examples are the Back to School Program in Indonesia, the Escola Cidadã Program in Brazil, the Social Policy and Community Social Services Development Project in Lithuania, the Child Welfare Projects in Romania and Bulgaria, the Social Development Project in Turkey, and the Ceara Water Management and Urban Development Project in Brazil. The Honduras Social Investment Fund (of which the World Bank is one of the largest donors) has financed an NGO drug rehabilitation program targeted to children in the street.

³ See research report *Who Cares? Street Children in their Own Words*, The World Bank, April 2000.

who are inadequately protected or supervised by responsible adults.”⁴ The definition suggests that a child in the street may be a working child, a school dropout, or a homeless boy or girl.

Some agencies argue that the term “street children” is inappropriate because it creates an artificial category and diverts attention from the interconnected dimensions of child vulnerability. Obviously, the street children phenomenon cannot be analyzed in isolation. However, as shown in figure 1, not all working children and school dropouts spend most of their time in the street, many street children are not homeless, and some of them still go to school. Several other intersecting circles could be added to this graphic, such as juvenile offenders and child prostitutes.

Figure 1. Street Children in Relation to Other Vulnerable Groups)



At the same time, street life has specific kinds of problems (drug addiction, sexual promiscuity and abuse, work exploitation, involvement in criminal activities, and violence by police, other adults, and rival gangs) and attractions (freedom, adventure, peer solidarity) that call for ad hoc interventions. No term has yet been coined to capture both the peculiar nature of street life and its interconnection with other aspects of vulnerability. The report will keep adopting the term street children, aware of its partially unsatisfactory character.

2.2 Street Children and Children At-risk

Children and youth may be categorized according to the level of risk they face in being disconnected from family and society (box 1).⁵ The lower the level of risk, the larger the scope for preventive and untargeted programs. Street children are at the so-called tertiary level, which is where risk has turned into concrete reality and targeted special protection programs are required. Obviously, action is also essential at the primary and secondary level to prevent more children from choosing the street in the future. The emphasis here is on tertiary level

⁴ See, M. Black, *Street and Working Children: Global Seminar Report*, UNICEF Innocenti Center, 1993; A.C Gomes da Costa, *Ninos Y Ninas de la calle: Vida, Passion Y Muerte*, UNICEF Argentina, 1997.

⁵ G. Barker and M. Fontes, *Review and Analysis of International Experience with Programs Targeted on At-Risk Youth* (Washington, D.C.: World Bank, July 1996); M. Schneidman, *Targeting At-Risk Youth: Rationale, Approaches to Service Delivery and Monitoring and Evaluation Issues*, July 1996.

interventions, however, to promote the positive development of children who are already in that situation.⁶

Box 1. Categories of At-Risk Youth

Youth in primary risk are still attached to the family, school, society, but because of poverty or other factors their situation could be compromised in the future. Programs at this level are of a preventive nature and typically include universal family and child benefits and services, along with programs targeted to poor communities such as school support, health promotion, recreation and social integration, vocational training, and support to family livelihood.

Youth in secondary risk have weaker social ties and are already exposed to some form of specific risk (such as school dropout, abuse, child labor). Programs at this level have a preventive nature but are focused on a specific target group and include specialized family support, protection and organization of working children, abuse prevention, dropout prevention, and other such services. One of the differences between primary and secondary prevention programs is that the latter require creative and costly assessment and detection of needs to determine which families and youth are at specific risk.

Youth in tertiary risk are those for whom one or more of the previously mentioned risks are concrete realities. Their ties with society and family are seriously weakened or severed. This group includes children in the street and of the street. This is the place for rehabilitative programs such as group homes, drop-in centers, targeted health and education services, psychological and legal support, job training, children organization, and family and school reintegration. Interventions can be center-based or take place in the street.

Source: G. Barker and M. Fontes, *Review and Analysis of International Experience with Programs Targeted on At-Risk Youth* (Washington, D.C.: World Bank, July 1996); and M. Schneidman, *Targeting At-Risk Youth: Rationale, Approaches to Service Delivery and Monitoring and Evaluation Issues* (Washington, D.C.: World Bank, July 1996).

2.3 Measurement Difficulties

Although street children are a well-known reality in many countries, it is difficult to provide a clear picture of them. These children spend intermittent periods with their families, or move from one city to another, depending on the time of year and their circumstances. Since many do not have identity papers or birth certificates, there are no official statistics on their number.

For any given country, figures on street children may oscillate with the source of information (the government, NGOs, research institutions) and whether the issue is a development priority. The United Nations International Children's Emergency Relief Fund (UNICEF) has estimated there are about 100 million street children worldwide, half of them in Latin America.⁷ Experts

⁶ Prevention, mitigation, and coping have been identified as three complementary strategies for dealing with risk (see the social risk management approach of R. Holtzmann and S. Jorgensen in *Social Risk Management: a New Conceptual Framework for Social Protection and Beyond, Social Protection*, Washington, D.C.: World Bank, February 2000). This report focuses on interventions aimed at coping with high levels of risk, although several of them also include preventive components in the form of family and community work, awareness raising, advocacy, and lobbying.

⁷ See, for instance, M. Takahashi and C. Cederlof, *Street Children in Central America: An Overview* (April 12, 2000), p. 5. However, the study does not report the source and the year.

consider this a guess estimate used for advocacy purposes, however, and recently the agency itself abandoned it.⁸

Needless to say, figures depend on definitions. If one distinguishes between children *in* the street (working or socializing in the street, but going home at night) and those *of* the street (having little or not contact with family, permanently living on the street), the second group is actually fairly small worldwide, but the figures increase when the first is included.⁹ In Eastern Europe, for instance, where street children represent an alarming recent phenomenon, most of them maintain a relation with their family and sometimes with school.¹⁰ While the number of children of the street is considered very low in Western Europe and the United States, if children in Roma communities and youth ‘hanging around’ in street gangs are included, the picture changes dramatically.¹¹

Because ‘counting’ street children is so complex and the results often uncertain, all figures should be treated with caution. Additional research would be needed to quantify the actual levels in different countries. ‘Flows’ rather than ‘stocks’ should be considered, given the ever-changing nature of the phenomenon. These problems should not hinder countries from devoting time and resources to urgent interventions. Even where street children are few in number, there is no excuse for lack of action: on the contrary, early interventions are more likely to prevent the problem from escalating in the future.

2.4 Underlying and Immediate Causes of the Problem

Child disconnection is closely associated with the vulnerability of segments of society, often in a context of economic liberalization and growing inequality.¹² Reduced land security contributes to the swelling of urban slums where many street children work to support their family.¹³ In some countries, inadequate public expenditures undermine the education system’s capacity to cater the needs of vulnerable children. The transition from state to market-dominated society temporarily weakens communities’ capacity to protect their young members. In both poor and rich countries, family isolation and the weakening of social capital may aggravate parent’s abusive behaviors.¹⁴ These issues can only be addressed through a detailed and region-specific analysis, which, however, is beyond the scope of the present report. Nevertheless, some general observations can be made about the immediate factors that lead children to choose a street life, as these should inform the content and modalities of ad hoc interventions.

⁸ Conversation with Francisco Pilotti, social policies coordinator of the Organization of American States (OAS), January 9, 2001.

⁹ Conference Brief, Street Children Initiative International Conference, April 13–14, 2000, Washington D.C.

¹⁰ Country reports of Bulgaria, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Macedonia, Poland, Romania, and Slovakia, in *Street Children: Children in the Street*, Joint Programme of the King Baudouin Foundation and the Soros Foundations in partnership with the World Bank, June 1999–January 2000.

¹¹ Minutes of Conference, Children at Risk in Latin America and the Caribbean, Washington D.C., March 29, 2000; R. A. Mickelson, ed., *Children on the Streets of the Americas* (London: Routledge, 2000); C. Szanton Blanc, *Urban Children in Distress* (Florence 1994).

¹² See: Dewees, A., Klees, S. J. ‘‘Social Movements and the Transformation of National Policy: Street and Working Children in Brazil’’, in *Comparative Education Review*, 1995, vol.39, n.1 Moran, R., de Moura Castro, C., *Street Children and the Inter-American Development Bank: Lessons from Brazil*, Inter-American Development Bank, March 13, 1997; Street Children Initiative International Conference, April 13&14, 2000, Washington DC – Conference Brief ; Mickelson, R.A (ed.), *Children on the Streets of the Americas*, Routledge London and New York, 2000.

¹³ Moran, R., de Moura Castro, C., *Street Children and the Inter-American Development Bank: Lessons from Brazil*, Inter-American Development Bank, March 13, 1997.

¹⁴ See for instance The Monee Project Regional Monitoring Report n.4, *Children at Risk in Central and Eastern Europe: Perils and Promises*, Florence 1997.

- Children end up on the streets for one or more of the following reasons:
- Low family income. Many work in the street to contribute to family survival.
- Homelessness. In both rich and poor countries, the lack of proper housing pushes entire families into the street.¹⁵
- Neglect and abuse. This problem may be associated with parents' drug addiction and alcoholism,¹⁶ or the lack of time spent in significant interaction.¹⁷
- School failure.
- Loss of parents due to armed conflicts, natural disasters, HIV/AIDS and other epidemics, and refugee problems.

Each street child's history is a unique blend of several of those elements. While material hardship is a major factor in putting children at high risk, not all materially deprived children become disconnected from the family. Evidence suggests that the quality of family relationships plays a fundamental role. In Brazil, for example, children of the street reported higher incidents of corporal punishment (63 percent) compared with children working in the street but still in contact with family (23 percent). In Ethiopia, children of the street reported significantly higher levels of abuse at home than family-based street children.¹⁸ As already mentioned, lack of communication in the family and other emotional problems are crucial factors of child disconnection in industrialized countries. In addition, peer pressure can be an important trigger. Many young children have been encouraged or even forced into the street by older siblings and friends who have already set foot on that path.¹⁹

2.5 Characteristics, Problems, and Resources of Street Children

The majority of street children in the world are aged 10 or older. Street children reached by existing programs tend to be somewhere between the ages of 8 and 18. However, there is evidence that the average age of street initiation may be decreasing in some regions.²⁰

Most countries appear to have more street boys than girls. Street girls may be less visible, but they are clearly an understudied reality.²¹ They are also exposed to violence and sexual abuse by peers and adults, and more likely to be engaged in prostitution.²² In Europe and Latin America, street children frequently belong to ethnic minorities, such as Roma in Southeastern Europe, Afro-Caribbean peoples in the United Kingdom, and descendants of Africans in Brazil.

Street work includes odd jobs, petty trading, and services. Because of the lack of protection in these jobs, there is a greater risk of exploitation and of encountering health hazards. Many children make a living through illegal activities such as begging, selling drugs, petty theft, and prostitution. Street work is less common in poor communities in the United States and Europe.

¹⁵ Mickelson, *Children on the Streets of the Americas*.

¹⁶ UNICEF, "Children at Risk in Central and Eastern Europe: Perils and Promises."

¹⁷ The last factor is particularly relevant in Europe and the United States. See, for instance, Szanton Blanc, *Urban Children in Distress*; "In Strada con Bambini e Ragazzi" (In the street with children and adolescents), *Quaderni del Pianeta Infanzia* (Childhood planet), Monographic Series, no. 2, (Florence, December 1999).

¹⁸ "Resource Pack: Prevention of Street Migration," Consortium for Street Children U.K., University College Cork, Ireland, 1999, p. 21.

¹⁹ Conversation with Francisco Pilotti, social policies coordinator, OAS, January 2001

²⁰ Patrick Shanahan, "Street Child Africa," paper presented at Street Children Initiative International Conference, April 13–14, 2000, Washington D.C.

²¹ Casa Alianza, Web page.

²² *Ibid.*; country reports, Street Children: Children in the Street.

Instead, children there just “hang around” in gangs and often become involved in deviant behavior.²³

Many street children do not go to school; others perform poorly in class and are at high risk of dropping out. Because of the peculiar nature of their life and problems, the skills required to survive on the street, and the lack of parental support, these children find it difficult to adjust to standard school curricula and school discipline.²⁴ Also, as mentioned earlier, many street children have never had, or have lost, their birth certificates, a document vital to legal and civic existence.²⁵

Although underlying and immediate causes of the street children phenomenon may differ, the range of problems that children suffer once in the street present some similarities across regions: poor education status, low self-esteem, and emotional disorders, violence and exploitation by peers and adults, early and unwanted pregnancies, sexually transmitted diseases and HIV/AIDS, and drug abuse. In Latin and Central America, a very high number of street children are victims of brutality by police and other adults.²⁶ The specific nature of these problems calls for specialized, ad hoc programs. The fact that these problems get worse the longer children have been in the street provides a strong rationale for early interventions.

Street children are not merely a problem that needs to be addressed. They are resourceful human beings, many of whom have decided to seek a better life. In a number of countries, some have even become community leaders and activists in social movements, not to mention valuable peer facilitators in NGO programs. The idea of focusing on street children as resources—not just as victims or threats to society—is in line with the U.N. Convention of the Right of the Child, which underlines the need for the empowerment and participation of children.

In sum, street children fall into a variety of categories, and their number is difficult to determine. The phenomenon has long existed in many regions, but in others it is just emerging. Underlying and immediate causes include deteriorating social capital and poverty, low family income, lack of housing, school failure, neglect and abuse, armed conflicts, and epidemics. Life in the street is associated with child-specific physical and emotional problems that call for specialized and early programs. Various interventions are available to address street children’s problems.

3. EXAMPLES OF STREET CHILDREN PROGRAMS

The 18 programs considered in this report encompass a wide range of activities. Education is a key component of all, usually combined with health, job training, basic assistance, or income generation. A simple classification can be drawn up on the basis of their main features (see tables 1 and 2). The first distinction is between programs providing services directed primarily at the child and those that involve schools, families, and communities as well, or that include advocacy, lobbying, and social mobilization. Another difference is that some provide residential services for a small number of children (sometimes with their families) for a certain amount of time, while others focus on nonresidential or outreach services to a larger number of children on a less continuous base. However, most residential programs carry out some outreach work in the street to establish the first contact with their beneficiaries. Interventions also vary with the age of the

²³ Mickelson, *Children on the Streets of the Americas*; Szanton Blanc, *Urban Children in Distress*.

²⁴ *Ibid.*; and M. Griesbach Guizar and G. Sauri Suarez, *Con la Calle en Las Venas, Ednica* (Ciudad de Mexico, 1997).

²⁵ Mickelson, *Children on the Streets of the Americas*.

²⁶ Casa Alianza Web Page.

target group. Those geared to young children concentrate on basic assistance and school and family reintegration, while activities aimed at adolescents also include job training, legal defense, housing, and sexual health.

Table 1. Street Children Programs by level of intervention, approach, and implementing agency

Level		Child		Family		School	Community	Policies and Laws
Approach		Residential Residential	Non residential/ outreach	Residential	Non residential/ outreach			
Implementing Agency	NGO	Ex: Ciudad Don Bosco (Colombia)	Ex: Vivere (Italy); Health Peer Counseling (Ghana); Axe (Brazil)	Ex: American Family Inns (USA)	Ex: Juconi (Mexico)	Ex: En Familla Para Crescer (Portugal); Axe (Brazil)	Ex: Crucero (Mexico); Community mobilization on Girls Prostitution (The Philippines); Undugu Society (Kenya)	Ex: Street Children Movement (Brazil); Street Children Program (Bulgaria)
	NGO - Local GOV						Ex: Support to Social Reform in Ceara State (Brazil);	

Table 2 Street Children Programs by age of target group

Age	Young Children	Adolescents
Program	Basic assistance School reintegration Family reintegration	Also: Job training Housing Sexual health MCH

Most of the 18 programs are carried out by NGOs, although some are components of multiagency development programs at the municipal level. Some of these interventions are still in an initial stage, and information on their impact is not available. Nevertheless, they represent interesting models of partnership between NGOs and local government in this area.

3.1 NGO Programs for the Child

3.1.1 Ciudad Don Bosco

Location: Medellin, Colombia (1965–present)

Implementing agency: Ciudad Don Bosco (Salesian Fathers)

Target group: Young children and adolescents (0–18)

Number of children reached: About 400 a year

Type: Residential comprehensive services

Description: The program consists of four stages. First, children are contacted in the street and encouraged to spend a night at the program shelter. Second, activities begin for children who decide to stay in the center, focusing on behavioral changes, basic schooling, socialization, and developing self-esteem skills. Third, children attend formal primary and secondary school

provided by the program. And fourth, technical training for the labor market is provided for adolescents. Throughout the four stages, the program evaluates and takes care of participants' basic health, nutrition, psychological, social, dental, and occupational needs.

A period of time is spent observing, conducting medical tests on, and holding discussions with each child, after which an interdisciplinary group of professionals prepares a strategic plan for each. These plans recommend how best to respond to psychological, educational, nutritional, and health needs, and they are regularly revised. Children also provide input by expressing their feelings in open groups and therapy sessions. The collective work of professionals ensures that recommendations follow an integrated approach and are tailored to stimulate self-awareness and self-confidence in each child.

Evidence of impact: Each year a large number of children graduate from the program with a diploma. Because of this record, the center is regarded as the most experienced and effective in the city and has gained the continuous financial support of both the private and public sector.

3.1.2 Work with Street Children: Growing within the Family

Location: Lisbon, Portugal (1989–present)

Implementing agency: Instituto de Apoio a Crianca.

Target group: Young children

Type: Outreach education services

Number of children reached: More than 100 a year

Description: This program is an “innovative initiative” of Portugal’s Third Program of Fight against Poverty. The target group consists of children in downtown Lisbon who have broken away from their families in a more or less radical way, often depend on illegal activities for their livelihood, stay overnight in places frequented by vagabonds, and have begun to exhibit antisocial behavior. The aim is to reestablish connections between street children and their families and communities, through street work, the transmission of positive values, family counseling, and the creation of a network of community resources and services in support of street children.

The project team is composed of professional educators. A number of youth who were once street children themselves now assist the team in reaching their peers in the street. The implementing agency (Instituto de Apoio a Crianca) collaborates with the Ministry of Education and public schools to reintegrate children into the schools or to prevent them from dropping out. A key activity has been to train public school teachers to facilitate communication between children at risk, community services, and the family. This approach makes it possible to closely monitor difficult cases and help them do better at school.

An “Alternative School” for street children has also been established that draws on the skills of educators and teachers after regular school hours to help children do their homework and to increase their knowledge of school curricula; they organize field trips and visits to city museums, parks, libraries, and other educational centers. The program coordinates with school cafeterias to provide extra meals to needy children and organizes awareness-raising sessions concerning children at risk and how to prevent them from dropping out of school.

Evidence of impact: Between 1989 and 1994, 59 percent of the children participating in the program changed their way of living by returning to school, improving school performance, or

acquiring the habits of a normal life. In addition, 33 percent stopped frequenting the area to which they had fled and returned to the family or institution they had run away from.

3.1.3 Axê Program, Salvador

Location: Brazil (1990–present)

Implementing agency: Axê Center for the Defense and Protection of Children and Adolescents

Target group: Young children and adolescents

Type: Outreach comprehensive services

Number of children reached: 3,000 (about 20 street children in Salvador)

Description: Project Axê has received international recognition for its imaginative educational work with marginalized children in Salvador. Practicing what Axê calls the pedagogy of desire, project facilitators stimulate the child to develop interest in school through artistic and recreational activities, as well as other non formal methods of education. Axê's approach is designed to reach children on the streets and strengthen their desire to stay in school and learn. Through a strong partnership with the State Secretariat of Education, Project Axê has been able to integrate its pedagogy into the public school system. Following are some specific program activities:

- **Outreach services.** A bus parked in the city center is used to reach out to children spending time in the streets and to raise their curiosity. A street educator informs children about the fun-filled activities taking place on the bus and invites them on board, where they can watch a video, draw, and sing or read books. If the children show an interest, they are also invited to become students at any of Axê's educational or training centers. The project also provides food, medical care, legal protection, assistance with identity documents, and some financial aid to replace what was being earned in the street.

Early childhood education project. Using theater, dance, and song, the program engages children from marginal neighborhoods in learning activities relevant to their reality and cultural heritage. Currently, educators are using African theater to teach children about their rights and responsibilities as Brazilian citizens. Artistic techniques of this kind allow children to actively participate in their own learning. The project also provides literacy classes and attempts to reintegrate children in regular schools.

School monitoring. Through a partnership with the Secretariat of Education and more than sixty public schools in the state of Bahia, Axê is able to enroll street children into the public school system and monitor their performance. A condition of enrollment is that a family member sponsor the child. Once enrolled, the child spends the morning in instructional classes, while afternoons are devoted to the arts (dancing, theater, singing, or drawing). The School Monitoring Program also trains teachers in alternative methods of education.

Production workshops. Children participate in productive activities such as paper-recycling, printing, and a fashion workshop. The emphasis is on quality, and the goods produced are sold at competitive, non subsidized prices in two shops in the tourist area of downtown Salvador. Workshops are also meant to prepare participants to enter the world of work by increasing their ability to concentrate, reinforcing their motor skills and emotional equilibrium, and helping them form new habits and behaviors.

Vocational training for those aged 16 and older. Agreements are signed with public and private companies able to give children job training and eventually hire them.

The program works closely with the local municipality to avoid duplicating services already offered to street children. It also tries to coordinate its activities with programs geared to children at primary and secondary risk, which can refer their difficult cases to Axê. Given the importance of learning in its philosophy, the program relies on highly skilled educators rather than volunteer staff.

Evidence of impact: Many children have developed new life plans, have returned to their families and to school, and, though still poor, enjoy more dignified conditions. Of the 823 adolescents contacted by the program in 1990, 768 went back to live with their families. Because of its success in Salvador, Project Axê has received numerous requests to replicate its programs nationally and regionally. The program has been least successful with finding children jobs and integrating them into the labor market, in large part because of the high level of unemployment in the country. Further information on this program can be found on the web, at www.elogica.com.br/users/faiguen/project.html.

3.1.4 Cultural Support for the Social Integration of Street Children

Location: Bucharest, Romania (1994–present)

Implementing agency: Support for Social Integration Association (ASIS)

Target group: Adolescents

Number of children reached: 145

Type: Residential and outreach comprehensive services

Description: The ASIS program has three main components: (1) outreach services, such as medical assistance and help in obtaining identity papers; (2) incentives to join the program residential center, when feasible; and (3) activities at the center designed promote the social and professional integration of teenagers and youth. ASIS's approach is to design an individualized educational plan that draws on a young person's cultural background, capacities, and aspirations. Integration in the labor market is seen as a process that requires not only professional skills, but also the capacity to obtain information, formulate realistic plans and expectations, find jobs, and constantly update knowledge. The ASIS project team working toward these ends includes teachers, social workers, medical staff, and psychologists.

An important part of this process is to provide information on short- and long-term job opportunities and the advantages/disadvantages of each (for instance, some jobs may pay less but be more stable whereas others may pay well but be seasonal). In addition, ASIS provides training in skills that are in demand in the labor market, support and advice during the job search process, continuous follow-up with employers once the youth has been hired, and training in additional/alternative occupations to enable the youth to obtain extra revenues or a fuller social reintegration. It also encourages young people to do volunteer and community work, to cultivate skills needed to increase their marketability (such as the basic elements of a foreign language or new technical skills), to reestablish contact with their families and, when this is not feasible, to search for independent housing. ASIS teaches youth how to communicate better and tries to convey the practical and psychological skills that are needed to live independently, such as how to manage one's money and time. To assess the program's impact, the staff keeps track of all beneficiaries who have left the residential center.

Evidence of impact: Of the 27 youth accepted in the residential program, 15 are now able to support themselves and live outside the center, 6 have returned to their families, 7 have continued or completed their studies, and 18 have stayed in the same job for the past seven months. The ASIS approach has been well received by international donors who expect to

provide funds for future activities. The Social Work Faculty of Bucharest has assigned students to the project to give them some practical experience in such endeavors, and plans are under way to replicate the ASIS model in other cities of Romania.

3.1.5 The Bridge over Troubled Waters

Location: Boston, USA (1970–present)

Implementing agency: Bridge over Troubled Waters, Inc.

Target group: adolescents (16–22)

Number of children reached: 4,000 a year

Type: Residential and outreach comprehensive services

Description: Bridge over Troubled Waters, Inc. was founded in Boston in 1970 to serve runaways, homeless youth, and other youth in the street through a multiservice approach. One of its services, called street outreach, consists of having street workers meet daily with runaways, homeless youth, and other young people at risk in areas where they gather, to explain Bridge services and refer them to appropriate community services. Recognizing that street youth are usually wary of social service agencies and mistrustful of adults in general, educators try to establish trust through non threatening dialogue and a consistently caring attitude.

As part of its health services, Bridge places a mobile medical van on the street every weekday, offering free health care and teaching youth how to seek assistance at hospitals and clinics. Bridge's dental clinic offers a full range of oral treatments. The in-house medical clinic provides physical exams when clients begin substance abuse counseling or enter the residential program.

Runaway services consist of a 24-hour/7-day-a-week response, which offers emergency housing and counseling. Educators attempt to reconcile families of runaway or high-risk youth, and to facilitate contact and communication between them and those in Bridge's care. When family reunification is not an option, they also provide stable alternative living arrangements.

Bridge also provides the following services:

- Transitional day program. It has an open day center where youth can take part in recreational and confidence-building activities. Breakfast and lunch are provided.
- Counseling services. These include long-term substance abuse counseling, personal counseling, basic survival services, family counseling, and referrals. Because the youth are not forced to attend sessions, they feel comfortable talking freely, and are able to begin addressing the root of their problems.
- Education/preemployment program. Bridge provides educational, preemployment, guidance, and job development services necessary for youth to enter and advance in jobs, training programs, or higher education. It offers adult education classes to help young people meet the literacy standards required for the high school equivalency degree. Courses combine academic instruction with training in professional, computer, job search, and life skills.
- Residential components. Bridge's Transitional Living Program, single-parent house, and cooperative apartments offer youth an opportunity to acquire life, social, and educational skills in a safe, drug-free, and nurturing environment, while enjoying the full range of other Bridge services. The objective is to help young residents develop the self-esteem and capacities that will enable them to return to their communities as responsible adults.

- Referral services. Bridge maintains a wide network of affiliations with agencies that provide specialized services, including hospitals, mental health centers, educational programs, homeless shelters, and multicultural services.

Evidence of impact: Of those who participated in the education/preemployment program in 1999, 90 (72 percent of total) improved their scores on TABE and GED predictor tests, 43 participants (35 percent of total) earned their GED, 3 (53 percent) who earned their GED entered higher education and training; 95 (80 percent) who were never employed obtained jobs, and 67 (56 percent) who were never employed maintained jobs for three months. In the runaway program, 56 participants (35 percent of the total) were reunited with their families. Finally, 193 participants (54 percent) in counseling services reduced drug/alcohol abuse. Widely considered to offer a successful integrated approach, the program was replicated throughout the United States.

3.1.6 Casa Alianza Program

Location: Guatemala, Honduras, Nicaragua, and Mexico (1981–present)

Implementing agency: Casa Alianza

Target group: Young children and adolescents

Number of children reached: 8,961 a year

Type: Residential comprehensive services

Description: Casa Alianza is an NGO dedicated to the rehabilitation and defense of street children in Central America. Its ultimate purpose is to provide children with an opportunity to leave the street, rather than improve street life. For this reason, educators do not offer food or clothes to street children but encourage them to join a crisis center, followed by transition homes and group homes only in cases where family reintegration is impossible.

One of Casa Alianza's primary goals is to reintegrate the child in the family. To this end, it offers phased-in support for children and families to reunite and find solutions to their difficulties. Each phase lasts about one month. The first phase consists of meeting the basic needs of children in a crisis center and building trust. In the second phase, educators hold preliminary interviews with families and explore the feasibility of reunification. Each child has his/her own plan, tailored to the specific situation and individual's needs. Phase three includes counseling to families and children, self-help groups and therapy, financial assistance to parents, job training, and identification of a support network in the community. In the fourth phase, children gradually reunite with their families, under the supervision of educators. The program provides for a minimum two-year follow-up, which in some cases includes material support to enable families to take care of the child.

Services in Guatemala City and Mexico include a mums-and-babies program to address the problems of street girls who have become pregnant against their will, most of them as a consequence of sexual abuse or prostitution. This program offers individual and group therapy, child-care training, vocational training, and pediatric and gynecological treatment.

Drug rehabilitation residential centers have been established in Guatemala, Honduras, and Mexico. Here, children receive intensive occupational, individual, and group therapy and some vocational training. After about three months, they are accepted in the program's transitional homes or are reintegrated into their families.

The program has also set up a legal aid office in each participating country. The first center was opened in response to the brutal murder of a street child by the police in Guatemala. These four offices provide legal defense to hundreds of children who are victims of violence at the hands of the authorities and bring cases of the violation of children's rights before specialized regional and international commissions. They also assist children with matters of civil law, such as the acquisition of birth certificates and identity cards.

The HIV/AIDS program, another important endeavor, provides sex education and information on the prevention of sexually transmitted diseases. Casa Alianza in Mexico has a residential program for children at the terminal stage of AIDS.

Evidence of impact: According to the data available on family reintegration activities, Casa Alianza has had a success rate of more than 88 percent over the past five years (this refers to the percentage of children who have been reintegrated into their families). The remaining 12 percent leave the family again after a while, although most of these return to Casa Alianza's center rather than to the street. For more information on this program, see www.casa-alianza.org.

3.1.7 "Vivere" (Living) Program

Location: Florence, Italy (1995–97)

Implementing agency: C.A.T (Cooperativa Animazione Tricche e Ballacche)

Target group: Adolescents

Number of children reached: 500–1,000 a year

Type: Outreach health services

Description: C.A.T. is an Italian NGO with a long history of working with drug addicts, prostitutes, juvenile offenders, and youth who spend much of their time roaming in the streets. It works in close cooperation with Florence's municipal and social services. The "Vivere" program consists of a mobile unit (van) that travels in neighborhoods where adolescents spend much of their time in the street. At each stop, educators organize parties and concerts and offer friendship and counseling, and information on drug abuse, contraceptives, and AIDS. They distribute free condoms and provide instructions on their use. The van provides a space for young people to meet and talk. Children with specific problems are referred to local public services. The program is sponsored by the local municipality, in collaboration with a local radio station, which advertises its street activities and events.

In its first phase, the program focused on observing street activities and mapping streets, to compile information on the daily itinerary and gathering places of adolescents in the city. Educators then established the first contact with youth by spending time in the places identified (bars, discos, public gardens) and initiating casual conversations and recreational activities. This led to daily interaction, with educators and adolescents discussing, planning, and organizing activities and projects together, including video production, dances and musical events, focus groups and surveys, and artistic expression. The program invited youth to design a questionnaire on HIV-related behaviors, which was to be distributed among their peers.

Educators also help youth obtain access to community services. The van is equipped with a bulletin board posting information on job opportunities, municipal sports and recreation activities, available public services. Educators meet public service providers regularly to make them aware of the specific needs of young people in the street.

Evidence of impact: Focus groups indicated that the program gave youth a forum in which to express themselves without fear of being judged, even when discussing their sex-related, illegal, or deviant behaviors. Young people who have participated have developed self-confidence, a better knowledge and use of existing community services, and a more proactive approach to the search for jobs.

About 2,000 adolescents have been informed about the prevention of HIV/AIDS and instructed on how to use condoms. A number in this group have become actively involved in disseminating information on HIV/AIDS prevention among their peers.

The municipality of Florence recently adopted the program model, by supporting street work projects in other deprived city neighborhoods.

3.1.8 Health Peer Counseling

Location: Kumasi, Ghana (1987–93)

Implementing agency: Youth for Population Information & Communication (YPIC)

Target group: Children and adolescents (10–24)

Number of children reached: 1,500

Type: Outreach health services

Description: YPIC is a youth-serving NGO with an integrated approach that includes health services, population and environment education, job creation, life skills, and rural and community development. The activities most focused on youth in the street are its health services.

The program selects young people between the ages of 10 and 24 and trains them in different aspects of HIV/AIDS control and prevention, so they can reach out to their peers in the street. Individuals are selected for this task on the basis of their commitment and leadership skills. These “peer promoters” are trained by Ministry of Health representatives in seven-day workshops on the necessary skills in health education, counseling, and service delivery. Youth are taught communication skills and how to use information, education, and communication material such as flash cards, posters, and brochures.

Trained peer promoters are then put in charge of HIV/AIDS education in villages and schools, and one-to-one counseling in the street. Peer promoters listen to other youth to learn their needs, spread information, and refer difficult cases to program staff when requested. They use photos, video, and drama to communicate messages and maintain interest among participants. The same youth-to-youth approach is used to provide condoms and other contraceptives at subsidized rates, or free, and to teach other youth how to use condoms. In addition, the program provides continuous training to staff members as well as to peer counselors in leadership, youth work, management, and planning.

Evidence of impact. An external evaluation of the HIV/AIDS component of the program concluded that participants had become better informed about the issue and that the program had exceeded its targets in the distribution of information, education, and communication materials. About 2,500 youth requested additional information after initial street counseling activities. The model has been replicated in all 10 regions of Ghana and Cameroon. Plans are under way to replicate the program in Kenya, Mauritius, Uganda, and Burkina Faso.

3.2 Family-Level Programs

3.2.1 The 'JUCONI Model'²⁷

Location: Puebla, Mexico (1988–present)

Implementing agency: Fundacion Junto con los Ninos de Puebla (Juconi)

Target group. Young children and adolescents (5–19) and their families

Number of children reached: 450 a year

Type: Residential and outreach comprehensive services

Description: JUCONI's services are designed to help children leave the street and to prevent their siblings from taking to street life. Their target includes three specific groups: (1) children who live in the street, (2) those who work in the street and live with the family, and (3) those who work in street markets but do not always live with the family.

The primary objective of this program is reintegration, which is to be achieved via three phases. In the first or "operation friendship" phase (1–6 months), educators have intensive contact with children in the street, providing them with recreation and counseling. Street children are offered emergency medical services and prepared for life away from the street. Activities with working children also involve the family and include complementary schooling and help with identifying new sources of livelihood.

The second step toward family and social integration consists of "intensive change" service. Depending on their individual circumstances and needs, children are involved in informal education, complementary schooling, recreation and life skills, and visits to the child's school and workplace. Children working in the market readily participate in a group environment and are therefore attended in day centers located near the market. Working street children receive help at home, as part of their family unit. Street-living children need particular attention, especially if they are to return to their family, and thus are hosted in a transitional half-way house. At the same time, the program provides counseling and other services to their families, to prepare them to reintegrate the child.

The third phase is the "sustaining change" phase, also called the follow-on. For two to three years after the child has left the intensive change service, program educators continue to visit the child and his or her family and provide counseling and therapy. Follow-on can take place either in the family or in any other structure where a child has found a place (own house, foster family, community home).

The second objective of the program is prevention (among siblings and families). Once street-living children are back home, the program begins to work with the entire family, including brothers and sisters. The siblings of street-working children participate in program activities almost from the beginning of the "operation friendship" phase. Younger brothers and sisters of market-working children are introduced to a Montessori-type kindergarten, while their older siblings take part in day centers in the "intensive change" phase.

Evidence of impact: More than 80 percent of children improve their opportunities in education, work, and personal development after participating in the program for one year. In 1994, UNESCO called it the most innovative and promising program of its kind.

²⁷ META Collective, "Making Operation Friendship Work"

3.2.2 American Family Inns

Location: New York City (1991–present)²⁸

Implementing agency: American Family Inns

Target group: Young children (0–13) in homeless families

Number of children reached: 2,000 in after-school program since 1991

Type: Residential education services

Description: Since 1991 American Family Inns has provided transitional housing to homeless families and has integrated educational, vocational, and family support services into the residential setting. This stable, structured environment provides parents and children with access to a wide variety of programs, one of which is offered through the child development center (for preschool children and infants). The center follows a variation of the High/Scope curriculum, developed at the University of Michigan and aimed at developing a child’s sense of control and initiative. Teachers organize weekly conferences with parents to discuss the child’s needs and progress and to involve the family in all aspects of early childhood education.

Another aspect of the program is the Brownstone School, which provides after-school education to children aged 5 to 13, to compensate for their limited access to education opportunities. The theory behind this endeavor is that children who are behind should not be placed in a “slow lane” or a remedial program to catch up, but in a program similar to those for “gifted” children. The model developed by Henry Levin emphasizes a low student-to-teacher ratio, active teaching of concepts, analysis and problems solving, interactive learning tools, and fieldwork. High expectations, clear deadlines, and stimulating didactic material are also key components of the process. The program motivates parents to work with teachers and children. “Learning contracts” based on subject areas chosen by the children are drawn up to involve parents in monitoring school performance. The organization also offers family literacy workshops, family trips, and family projects such as community gardens.

Still other services are provided through the Healthy Living Center for recreational and cultural activities. Children are encouraged to express themselves in drama, dance, and poetry. By participating in sports teams and boy scout groups, children learn cooperation and social skills. The center also organizes workshops on substance abuse, AIDS, pregnancy, and crime. Parents are encouraged to meet staff members regularly and discuss the capacities and needs of their child.

Evidence of impact: Children attending the Brownstone School have a 92 percent public school attendance rate, compared with the 63 percent rate of homeless children throughout the city. After six months of participation, the children’s scores in reading go up from less than 40 percent to 60 percent. Their math scores double from 23 percent to almost 50 percent. Many students win academic awards from their public schools. Furthermore, 86 percent of Family Inns parents with children in the program visit the public school and their child’s teacher, whereas the proportion is only 26 percent for parents whose children are not enrolled in the program. Half of parents whose children are in the program are now working toward completing their own GED. The program’s positive impact is a joint effect of the three integrated program components (the Brownstone School, the Child Development Center, and the Healthy Living Center), and of the high level of parent involvement in all activities. This approach can be replicated by all service providers working with homeless children.³³

²⁸ Mickelson, *Children on the Streets of the Americas*.

3.3 Community-Level Programs

3.3.1 Crucero Program

Location: Mexico City

Implementing agency: EDNICA

Target group: Young children, adolescents, and their communities

Number of children reached:

Type: Community awareness-raising

Description: EDNICA is a Mexican NGO dedicated since 1989 to the development of community initiatives in favor of street and at-risk children and youth. EDNICA offers special education, medical attention, and drug treatment; youth leadership training and involvement in community affairs; and opportunities to work off the street, in existing local economic activities.

The organization believes that the problems of street children need to be addressed through family and community efforts rather than short-term assistance. The NGO's activities are guided by two main principles. The first is that community institutions should be involved. Therefore EDNICA implements its programs in partnership with existing local organizations. After an initial period of capacity-raising, it gradually transfers the implementation and planning responsibilities to community hands and moves to other city neighborhoods. The second is that existing community resources should be mobilized in support of program activities. To this end, EDNICA has established a pool of locally available resources (through private business, local government, and civil society initiatives) to devote to addressing the problems of street children. This involves community mapping and the establishment of formal agreements among community members and services.

The EDNICA Crucero Program (Indios Verdes, north of Mexico City) works through the local parish San Pedro Apostol. This parish is active in awareness-raising activities that can help to modify attitudes toward street children among local merchants, taxi and bus drivers, and small business owners. These members of the community tend to discriminate against and sometimes harass children in the street. The program gradually involves them in finding solutions to the problem. Shop owners, for instance, are asked to monitor the number of new children joining the street so as to facilitate early intervention.

The parish also helps reestablish positive relations between street children and their families through counseling and referral to community services. By working with families, the program also reaches street children's siblings and helps prevent them from getting into the street. A similar program has been implemented by the San Felipe de Jesus Parish west of Mexico City.

Evidence of impact: Community members now have a more positive attitude toward street children; family ties with community services have been strengthened, making child rearing easier; and after four years of collaboration with EDNICA, the San Felipe de Jesus Parish is now implementing the program independently from the NGO's funding and supervision. For more information, see www.ednica@laneta.apc.org.

3.3.2 Community Mobilization for the Protection and Rehabilitation of Street Girls' Prostitution

Location: Pasay City (the Philippines) (1995–99)

Implementing agency: CHILDHOPe the Philippines

Target group: Children and adolescent girls, and their communities

Number of children reached: unknown

Type: Community awareness-raising and education

Description: CHILDDHOPE initiated this program in late 1995 in Pasay City, an area known for widespread child prostitution. Its objectives were to (1) raise community awareness of the problem; (2) develop a local capacity for advocacy and service provision among NGOs, government workers, and volunteers; (3) reach out to children in streets and bars and provide shelter, care, and rehabilitation services to prostitutes and abused girls under 18 years of age; (4) involve families in the rehabilitation process; and (5) improve girls' self-esteem and awareness of their rights.

The program has established a municipal task force that works with churches, schools, NGOs, police, and local government. Its function is to train local officers and community stakeholders to promote support for young prostitutes; train volunteers in family counseling and group therapy; lobby for the passage of a law protecting sexually exploited children; conduct outreach work in the street; operate a drop-in center for girls; and help rehabilitate and reintegrate prostitutes in the community.

Task force members oversee various program activities. For example, a local religious group that runs a day-care center and shelter is in charge of the girls' rehabilitation, and NGO street educators help reach girls in the streets. Twenty-two local schools have formulated a plan of action to fight prostitution, which includes incorporating child rights in school education, identifying abused and prostituted school children, counseling them, referring them to appropriate services, and conducting orientation sessions on child prostitution with parents. In addition, 195 community volunteers have been trained in advocating support for these girls in their neighborhoods and places of work.

Evidence of impact: No data are available on the program's impact. However the program appears to show potential for sustainability and replicability: after one year of operation, the Pasay City task force took over management of the program, with CHILDDHOPE providing technical assistance when needed. A similar program has been initiated in the nearby city of Kalookan.

3.3.3 The Undugu Society

Location: Nairobi, Kenya (1972–present)

Target group: Young children, adolescent, and their communities

Number of children reached: unknown

Type: Community development, vocational training, and job placement

Description: The program was established to address the needs of young street workers in Nairobi, the so-called parking boys and girls. Initially focused on child rehabilitation, it gradually turned its attention to the communities where children originated, recognizing that it needed to address not only the symptoms but also the root of the problem. The Undugu Society carries out a variety of urban community development projects as well as providing direct services to street and working children. Activities are identified and designed in consultation with the community. These include (1) an alternative primary education program for children in low-income neighborhoods; (2) primary and secondary school scholarship programs to assist low-income children and youth who want to remain in formal schools; (3) an urban agriculture project that serves to generate income for youth who live in the street; (4) a community health program that includes primary health care, family planning, and AIDS prevention; (5) a housing assistance

program that upgrades slum dwellings; (6) production units that provide training in practical skills of trade and technical assistance in marketing goods and services; and (7) job placement. In this last area, the Undugu Society's strategy is to link street youth with informal sector artisans. When youth enter the program, Undugu asks them to identify an artisan in their own neighborhood with whom they would like to work. If the situation is suitable, Undugu negotiates an agreement with the youth and the artisan under which the NGO will provide training in marketing and basic practical skills while he or she works with the artisan. After the apprenticeship, the youth returns to Undugu for training in small business management skills. A business Advisory Unit and Industrial Design Department offer loans and help participants improve their marketing and product design.

Evidence of impact: At least 2,000 young people have been trained through this program and now contribute toward the national economy. Between 1990 and 1995 Undugu helped establish 106 small businesses, and in 1991 it obtained scholarships for 399 youth from slums and saw 700 children enrolled in community-based primary schools.

One problem that has yet to be ironed out, however, is that Undugu alternative school is not formally recognized by the government, which makes it difficult for youth who want to return to regular schools. For more information on this program, see www.peoplink.org/undugu.

3. 4 Programs Geared toward Policies and Laws

3.4.1 The Street Children (Meninos de Rua) Movement in Brazil

This movement was initiated in the early 1980s, when a number of government agencies and UNICEF signed an agreement to study street and working children in Brazil. Known as the Alternative Street Children Project, this endeavor focused on supporting national seminars and other dissemination activities that would allow educators and NGOs from different regions to organize a common platform. By 1985 a directorate was elected for the new organization taking shape, now called the National Movement of Street Boys and Street Girls. The movement captured the attention of the media when the first national meeting was held in Brasilia in May 1986. At that time, Brazil was beginning a transition to civilian democracy. The meeting was attended by about 500 children delegates who reported on their experiences with police violence, which eventually led the Brazilian Parliament to hold special hearings on the issue.

The movement upheld the principles of the International Child Right Convention (ICRC) promulgated by the United Nations and struggled to incorporate them into the new legal system that was being formed in Brazil. In the late 1980s, various government ministries, NGOs, and other organizations (including UNICEF) joined in the process that led to the formation of the National Commission on the Child and the Constitution, in order to coordinate various advocacy efforts and to help draft a constitutional clause on children's rights. On November 20, 1988, the government approved Article 227 of the new Brazilian Constitution, which incorporates and extends the basic content of the ICRC. On July 13, 1990, legislation was passed implementing the Child and Adolescent Statute. The statute calls for radical changes in the rights accorded to children, the way children in trouble should be helped, and in decision making about these issues.

3.4.2 Street Children Program and Legal Changes in Bulgaria

In the past two years, the Bulgarian government has been preparing a national Child Welfare Reform, with the assistance of UNICEF, the United Nations Development Program (UNDP), and, lately, the World Bank. Under this reform, Bulgaria's child care system will be reorganized to better address the needs of institutionalized children and of children from disadvantaged families and economically depressed areas.

Bulgaria is one of the 10 countries supported by the King Baudouin Foundation and Soros Foundations program for street children, which operates in partnership with the World Bank (see the background section). Bulgaria's program has provided grants to nine NGO projects and has financed training and networking activities and public awareness campaigns. With the training and funding obtained under this program, the selected NGOs were able to upgrade the quality of their interventions and to gain funding and recognition by public authorities. Systematic cooperation was established with key government agencies at the local and central level. The program's support of public awareness campaigns also brought media and public attention to street children issues. Funded NGOs increased their cooperation and new incentive was given to lobbying activities. Street children organizations supported by the program, in cooperation with other NGOs dealing with children, and put pressure on legislators to incorporate a component on street children in the new legislation. Thus the Child Welfare Reform includes provisions to ensure financial support for street children programs.

3.5 Multiagency Programs

3.5.1 UNICEF: Urban Basic Services Program

Location: Olongapo City, the Philippines (1985–92)

Implementing agencies: Olongapo municipality, Columban College, NGOs

Target group: Young children, adolescents, and their community

Number of children reached: unknown

Description: The Urban Basic Services Program originated in an initiative spearheaded in the late 1970s by a local university. The aim was to address Olongapo's acute social problems. As part of this venture, social researchers at the university helped create neighborhood and municipal committees and trained community volunteers to identify local needs and propose interventions. In 1985 the initiative gained UNICEF support and was incorporated into the agency's Urban Basic Service Program. Cooperation was established with the City Health Office, which consulted volunteers and researchers on how to design its primary health care system.

Research conducted under the program revealed the magnitude of the street children problem and the lack of government interventions in this area. It was concluded that to be effective a program for street children had to have an integrated approach. Furthermore, community action had to aim at reducing the pressures that led children to leave home in the first place, as well as provide rehabilitation services.

In 1987 Olongapo municipality took charge of the Urban Basic Services Program and established an Inter-Agency Council (IAC) to coordinate services for urban poor women and children. The IAC was composed of representatives of 13 government departments and 13 NGOs organized into steering committees on health and nutrition, education, water and sanitation, livelihood, community organizing, and services for street and working children. An education program for street children was launched with the objective of reintegrating children into the formal school system. The local government agreed to reduce the costs of books and uniforms, to waive school fees to poor families, and, through the Philippines Educational Placement Test, to allow children to reenter school at their level of competence, often skipping several grades. The program is an important example of what can be achieved through the collaboration of community, government, and NGOs.

Evidence of impact: Almost 1,000 street and working children had been reintegrated into the formal education system by 1992. The degree of violence in the community has also declined. As one observer has noted: “This was a very violent place, there was no unity here . . . there was no hope. Now the violence is greatly reduced. The gambling and drug taking is reduced. We are close to each other.”²⁹ In addition, water and sanitation conditions have significantly improved thanks to local government investments and community voluntary work.

3.5.2 Inter-American Development Bank Support to Social Reforms for the Development of Children and Youth

Location: Ceara State, Brazil (1997–2000)

Implementing agencies: Government of Brazil

Target group: Children aged 0–17

Number of children to be reached: About 100,000 (and 15,000 families)

Description: The aim of the program is to support the development of children through their better integration in the family, school, and community. It is divided into two components: municipal participatory plans and institutional strengthening.

The municipal participatory plans are prepared in 20 municipalities by a commission comprising members of local government, NGOs, and community organizations. Plans are based on a diagnosis of local problems affecting children and must emphasize cooperation among different sectors. Activities eligible for program funding include early childhood development, preventive health, education and dropout prevention, recreation and culture, violence prevention, rehabilitation and protection of street and working children, reproductive health, and family and community strengthening. New components may be added if shown to be a cost-effective way to tackle community problems. By the end of the program, local governments are expected to assume full financial responsibility for the execution of the plans.

The objective of institutional strengthening is to raise the public sector’s capacity to design, support, and supervise decentralized and multisectoral interventions for the development of children through the efforts of community organizations and NGOs. This component includes training, special studies, strategic planning, education campaigns, and monitoring and evaluation of state and municipal activities.

Evidence of impact: No data are yet available.

3.5.3 NOVIB Social Co-investment Program

Location: Mexico City, Mexico (1998–2000)

Implementing agency: Mexico City municipality, local NGOs

Target group: Vulnerable community groups, including street children

Number of children reached: unknown

Description: This program was launched by Mexico City Municipality, with the support of the Dutch NGO Novib, as an experimental approach to meeting the needs of vulnerable groups in the city. The basic purpose was to support better coordination among public sector and civic

²⁹ Szanton Blanc, *Urban Children in Distress*, p. 142.

organizations in order to maximize resources and increase the impact and sustainability of interventions.

The initiative provided grants to eight NGO projects dealing with the sexual and reproductive health of women, cultural activities for youth, support to indigenous immigrants, participatory rehabilitation of city historical center, social center, community child development center, and a street children project (the EDNICA “Crucero” Program mentioned earlier in this section). A program general committee was established that included the selected NGOs, other civic organizations, the municipality, and donors. The committee was in charge of defining the program development strategy, planning activities, and monitoring and evaluation, to ensure that the overall aim of meeting the needs of vulnerable social groups would be achieved.

Participants consider the program to be a first important step toward complementing the efforts, resources, and methodologies of public and civic sectors of society. Participation in the program also helped NGOs mobilize additional resources.

Evidence of impact: Data on the program’s impact are not yet available.

4. LESSONS LEARNED

The chances for positive, long-term child development will depend in part on the lessons learned from past experience. The lessons of the programs just discussed revolve around the use of trained professionals, a development-related focus, reaching children where they are, individualized attention and tailor-made services, children’s participation, inclusion of physical and mental care, involving family and community, lobbying and advocacy, integration of services, networking and institutional cooperation, and links with programs at first and second level of risk.

4.1 Trained Professionals

Goodwill is not enough to ensure a positive, long-term impact on children. As the programs described earlier demonstrate, little can be accomplished without the help of experts. The Axê program, for instance, relies on highly trained professionals for its education activities, and the Casa Don Bosco makes use of interdisciplinary teams of experts to assess children’s needs and build life plans. Some programs, such as the Health Peer Counseling in Ghana, include continuous training activities for their volunteers and staff.

4.2 Development-Related Focus

Good programs are not limited to basic assistance to children in the street. Rather, they incorporate development-oriented activities through integration into the family, school, and labor market. In the long term, mere assistance does not in fact motivate children to strengthen connections with the family and society. The ongoing provision of food, clothes, medicines, and shelter may even help to perpetuate the problem by making street life bearable and intensifying a child’s dependence on programs. In some cases, children have learned “to make use of street educators as a survival strategy,” taking advantage of the most attractive outreach or residential services offered by the educators, “who often, quite literally, competed for the child’s attention.”³⁰ By contrast, development-oriented practices actively promote links between children and social institutions. They teach their participants a wide array of practical and emotional skills

³⁰ M. Griesbach Guizar, “If One Could Turn Back the Clock, conclusions gained from the Mexican experience that may be useful to Eastern Europe in order to prevent the growth of street children population, May 2000, p. 4.

(from communication to money management) that will enable them to function in different social contexts. Integration is a long-term process, and good programs follow up their cases sometimes for several years.

4.2.1 Family Reintegration

In principle, reuniting the child with the family is the most desirable outcome of a program. This general objective must, however, take into account the family's capabilities and will to receive and protect its child, and the child's wish to go back. In some cases, families are ready to have their child back if programs can help them get a job or a house. In others, parents have died, moved to other marriages or cities, have lost interest, or are not psychologically fit to raise a child. Whatever the circumstances, reintegration is a gradual and delicate process that requires counseling for children and parents, confidence building, conflict resolution, and, sometimes, financial help.

In cases when it is not advisable for the child to rejoin the natural family, programs need to identify alternative solutions such as foster families, adoption, or community homes. Flexible and individualized approaches are those most likely to succeed. Follow-up activities are also necessary to make sure that reintegration is a long-term success. The Casa Alianza Program in Central America provides a possible model in this sector.

4.2.2 School Reintegration

Helping children return to school—or remain in it—presents many challenges. For one thing, children may have developed health, psychological, and behavioral problems that affect concentration, discipline, and school social relations. For another, many street children have more skills and life experience than their peers, but these are not taken into account in normal school curricula. Furthermore, teachers and pupils may not be ready to accept the street child.³¹ For these reasons, education programs should emphasize learning and critical abilities and general life skills, rather than traditional pedagogy. At the same time, they should teach the standard curricula to enable children to enter the mainstream of the education system and labor market.

It is also essential to train and sensitize school staff to overcome stereotypes, accept and integrate street children, and pay attention to their specific skills and needs.³² The Axe' program provides a good example of how this can be done.

4.2.3 Integration in the Labor Market

Traditional job-training programs based on the simple transmission of technical skills have failed in the past because the imparted skills do not meet labor market needs, children are unable to adjust to the working environment, employers are reluctant to accept them, and the labor market imposes structural constraints.³³ Some of the programs discussed in this report attempt to address the long-term employment needs and interests of children, help them develop a work ethic and life skills, and work in close cooperation with the business sector.³⁴ The experience of Axê in Brazil, however, shows that even these efforts will have a limited chance of success in contexts of high unemployment.

³¹ Instituto de Apoio a Crianca, Travail Aupres Des Enfants Des Rues, 1993.

³² Ibid.

³³ Minutes of conference, Children at Risk in Latin America and the Caribbean, Washington D.C., March 29, 2000.

³⁴ Barker and Fontes, Review and Analysis of International Experience with Programs Targeted on At-Risk Youth.

Integration into the labor market should be based on the young person's specific capacities and desires. As demonstrated by the ASIS program, particularly promising interventions seem to be those that follow participants step by step through the various professional and emotional challenges involved in entering the world of work, from spelling out professional aspirations to holding down a job.

4.3 Reaching Children Where They Are

Children cannot be forced to leave the street, and programs need to respect their right to stay there if they wish. The correct approach is for educators to socialize and initiate dialogue right in the street, hoping that at some point the young person will become aware of other possibilities and be ready to change his or her life. Building trust is fundamental, as many young street people have had traumatic experiences with adults and do not trust them. Educators are nonjudgmental, and the modalities of interaction are based on children's schedule and rhythm of daily life. Several of the programs establish a phased-in transition to allow the child to gradually leave his or her street habits: after a period of befriending in the street, children are encouraged to join center-based activities and residential structures. The Axê project in Salvador, JUCONI project in Mexico City, and Ciudad Don Bosco all take this approach.

4.4 Individualized Attention and Tailor-Made Services

Every street child has its own needs, medical and family history, skills, and aspirations. The complex combination of reasons that have taken him or her into the street is also unique, as is the situation that he or she would face once back in the family. Promising programs thus invest time and multidisciplinary expertise in assessing the individual situation of each participant and in designing tailor-made life plans and services. In Ciudad Don Bosco, for instance, participants are divided into groups, and activities are designed according to the stage of a child's life transition. Programs must also build on the positive resources—skills, cultural background—of the children involved, to enhance their self-confidence and chances for a successfully independent life.

4.5 Children's Participation

Much of the literature on children's programs emphasizes that children should participate in their design in order to ensure positive and long-lasting outcomes. All the programs in this report view children as subjects of their own development and therefore have designed activities in accordance with children's aspirations and life plans. Some of them involve children as peer counselors and facilitators.

The special life experience of street children makes them potential leaders and advocates for the development of their communities. Thus it is also important to recognize them as one of the powerless groups in society.³⁵ In the 1980s, street children involved in NGO programs in Brazil became part of a national struggle for political, economic, and legal changes in their favor. Their participation contributed to the movement's positive achievements at the end of that decade.³⁶

4.6 Physical and Mental Health Care

Programs need to pay special attention to physical and mental health, either through their own specialists or by referring children to community services. Because of the special nature of their physical condition, street children tend to require immediate treatment, most often for injuries

³⁵ See Freire, Paulo, *Pedagogy of the Oppressed*, New York: Continuum, 1970.

³⁶ Anthony Swift, *Children for Social Change: Education for Citizenship of Street and Working Children in Brazil* (Oxford: Educational Heretics Press, 1996).

from accidents or abuse, malnutrition, respiratory and intestinal infections, skin diseases, sexually transmitted diseases, HIV/AIDS, and drug addiction. They are usually the survivors of traumatic experiences in the family and in the street itself, and they need to reconcile themselves with their life history to find meaning and healing. Many children will need individual or group therapy and counseling to turn their lives around.³⁷

Public health workers should become familiar with the specific needs of street children, and children need to know where services are and how to ask for help. The program Bridge over Troubled Waters is one that puts such effort into mediating between its young participants and community health services. Medical issues can also be addressed by having peer volunteers obtain information in a nonjudgmental way on subjects such as sexual health and drug addiction, or to convey educational messages and information. Substance abuse or HIV/AIDS infection cannot be prevented or controlled without an understanding of the specific needs and behavioral patterns of those affected.

4.7 Involving Family and Community

The circumstances in which street children find themselves are a reflection of the vulnerability of their social environment. The street gives them a new sense of belonging and of emotional and material function that the community and family failed to provide. That is why many go back to street life after periods in shelters and foster homes, or after being reunited with their parents. Therefore it is important to strengthen the capacity of the family and community (including the school) to receive and take care of their young members.

As the Family Inns Program shows, parent involvement can increase the chances of school reintegration. In particular, a family's recognition of the importance of education and its active participation in learning activities have been found to help children succeed in their studies. Poor families may also need help to cover education expenses. In response to this need, some programs provide scholarships for a certain length of time.

Family-level programs can also have a preventive function. The Juconi Program works with street children's siblings who are still with the family to prevent them from following the same path.³⁸ Note, too, that it is also essential prevent and treat violence and sexual abuse at the hands of the family. This kind of abuse is among the first reasons that children leave home.

Community-level programs in the sample focus on job creation, education, advocacy among relevant stakeholders, the improvement of school and other basic services, and the strengthening of social capital. To help overcome negative stereotypes, they also call for greater awareness of the problems and risks faced by street children, and of the reasons why they are in this situation. Promising programs are ones that identify and strengthen the network of community resources available for street children and that train community members who play a significant role in a child's life, such as the police, shop owners, health staff, and teachers. Recall that the Pasay City Program fought girl prostitution by having all significant community members involved in the advocacy and rehabilitation efforts.

³⁷ META Collective, "Making Operation Friendship Work."

³⁸ *Ibid.*

4.8 Lobbying and Advocacy Efforts

*“It is not the lack of knowledge or means that is at the root of our most serious social problems. We basically know what to do and how to do it. What is lacking is the power to effect change.”*³⁹

No matter how technically sound, stand-alone programs provide only partial solutions to the problems of street children. Their opportunities in life are directly affected by national laws and policies on education, social protection, health, child labor, juvenile crime, social work, adoption, and many other factors. NGO involvement in lobbying and advocacy at this level can spur changes in the environment affecting children and strengthen the impact of more typical services. The massive social mobilization of street children and educators resulted in the introduction of the Brazilian Child and Adolescent Statute, and with the contribution of NGOs’ lobbying, a street children component has been included in the Child Welfare Reform in Bulgaria.

A lesson learned from these experiences is that strong NGO networks make the public aware of the street children’s cause. The involvement of the mass media and the quality of information that they provide are also key factors. In all the cases mentioned, support by international agencies and donors⁴⁰ provided further legitimacy to NGO efforts in the eyes of their governments. In Bulgaria, donor support has increased the capacity for local lobbying and campaigning, which contributed to NGOs’ positive achievements.⁴¹ Finally, the Casa Alianza Program shows that advocacy and legal defense are essential to protect the rights of street children from police violence and the abuse of other adults and to raise public awareness of this issue.

4.9 Integration of Services

Many of the programs mentioned in this report cover more than one sector. In fact, the health, educational, survival, and emotional needs of street children are often impossible to address separately. A drug-addicted, ill, or malnourished child will not be able to benefit from education; children require psychological support before being ready to reunite with their families; job training works better if it is provided in conjunction with counseling on health and life skills; recreation, sport, and culture are essential to gain children’s trust, and to motivate them to participate in other program activities.⁴²

4.10 Networking and Institutional Cooperation

Up to now, NGOs have played a central role in street children programs, in most cases providing those services that local and national government could not afford. Compared to public service staff, their educators are more experienced in street work and outreach services, flexible methodologies, and the capacity to involve and mobilize poor communities. However, with their limited reach and duration, NGO programs alone are not enough to significantly reduce the number of children in the street, nor are meant to be. Many of them are in fact more effective when they remain small scale.

³⁹ Dewees, A., Klees, S. J. “Social Movements and the Transformation of National Policy: Street and Working Children in Brazil”, in *Comparative Education Review*, 1995, vol.39, n.1, p.18.

⁴⁰ UNICEF in Brazil; UNDP, UNICEF, Soros Foundations/King Badouin Foundations, and The World Bank in Bulgaria.

⁴¹ See E. Volpi, “King Badouin Foundation-Soros Foundation Street Children/Children in the Street Program (1998-2000): Achievements and Lesson Learned”, The World Bank Institute, unpublished paper, December 2000.

⁴² Griesbach Guizar and Sauri Suarez, *Con la Calle en Las Venas, Ednica*.

A better division of roles and models of institutional cooperation between NGOs and public sector seems necessary to adequately promote the positive development of street vulnerable children. The experience of some programs suggests that, thorough networking with other governmental and nongovernmental service providers at the local level, NGOs can overcome their isolation and increase their impact. Several programs for instance contemplate training schoolteachers, health staff, social workers, and police to enable them to meet the specific needs of street children. Axe' works in network with service providers in the city, so that information on children at risk is shared, and an effective case management can take place.

In some cases, NGOs innovative experiences, rather than being a substitute for government action, have been used as a model to be replicated and mainstreamed by public services. The HIV/AIDS services and transitional living structures experimented by the "Bridge Over Troubled Waters" program have been replicated by national health and social services.

It must be noted that the role of street children NGOs vis a vis public services differs from poor to rich countries in our sample. In the first, nongovernmental organizations tend to provide separate services in areas where the public network is absent or low quality. In rich countries (see for instance Portugal and the USA) the network exists and quality is higher, but children at risk may not have access to it. The purpose of NGOs here is to be a link between young people and available services.

4.11 Link to Programs at the First and Second Level of Risk

Some NGO activities mentioned in this report are integrated into municipal development programs for children at the first, second, and third levels of risk. Such partnerships have the potential to go beyond sectoral and remedial interventions by tackling the multiple determinants of child and youth distress. The involvement of local governments, schools, health services, and other public institutions is also necessary to create a favorable environment for children who decide to leave the street. Interesting examples are the Urban Basic Services in the Philippines and the Ceara Program in Brazil. In both cases, international donor agencies are involved in facilitating and supporting the institutional cooperation.

CONCLUSIONS

The street children issue can best be addressed through preventive programs and policies that will strike at its social and economic causes. Special protection measures are also needed to increase development opportunities for young persons currently suffering the hardships of street life.

As mentioned earlier, goodwill alone cannot guarantee a positive, lasting impact on the lives of children. Focusing only on assistance is just as ineffective and can even make the problem worse, by increasing the child's dependence on charity and destroying its incentive to leave the street. The right kind of program is one that will help young participants strengthen their connections with family, school, and the community. Lobbying and advocacy can make the voices of street children heard, by producing changes in policies and laws that affect their life. The impact and sustainability of NGO programs can be increased by networking and cooperating with municipalities and local services in developing initiatives geared to a broad range of vulnerable groups.

To date, few programs for street children have been adequately evaluated. Those that are able to show and quantify their results are usually operated by the largest and the best-endowed NGOs. But a significant part of the work in this field is carried out by small, low-funded organizations,

whose results are undocumented and unavailable to the public at large.⁵⁰ As this report makes clear, funding can assist street children programs in various ways, depending on each donor's mandate and ultimate goals.

The following list outlines areas in greatest need of support at present.

- *Program services, including salaries or incentives for expert staff.* The Bulgaria experience shows that the quality of programs increases in proportion to the extent that funding is continuous over a defined period of time. Better quality in turn enables NGOs to raise public support and become sustainable.
- *Training of program staff.* Funding allows programs to continuously upgrade their level of professionalism. This is particularly important for small young NGOs.
- *Monitoring and evaluation.* Small NGOs need to be able to train staff in this area of expertise and to conduct regular monitoring activities. Donors could not only contribute financial support but also provide guidelines or conduct external evaluations.
- *Institutional cooperation.* Donors should facilitate and support the establishment of municipal, multiagency development programs with street children as one of their components.
- *Lobbying, advocacy, and networking.* Funding these activities is a way to help NGOs overcome their isolation and give a stronger voice to street children themselves.

Finally, not all donors have the mandate and experience to directly support street children activities. Some of them can however play an important role in promoting policies and legislation that encourage the positive development of all children in need of special protection and that help governments remove some of the social and economic causes of child vulnerability.

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