YOUTH ON THE STREETS:

THE IMPORTANCE OF SOCIAL INTERACTIONS ON PSYCHOSOCIAL WELL-BEING IN AN AFRICAN CONTEXT

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ACRONYMS

CCF Christian Children's Fund

CHAD-ET Child Aid Ethiopia

CRC Convention on the Rights of the Child

CSW Commercial Sex Workers

DCOF Displaced Children and Orphans Fund

FSCE Forum on Street Children Ethiopia

GWU George Washington University

IRC International Rescue Committee

Jeccdo Jerusalem Children and Development Association

NGO Non-governmental organization

OVC Orphans and Vulnerable Children

OPRIFS Organization for the Prevention, Rehabilitation and Integration of Female

Street Children

PWG Psychosocial Working Group

UNICEF United Nations Children's Fund

USAID United States Agency for International Development

EXECUTIVE SUMMARY

Street youth are resilient, creative individuals who have a great capacity to contribute to their communities and to the future development of Africa. However, street youth's potentials are often not fully realized. In light of this, it is imperative to consider the significant numbers of these children who currently are finding their homes, livelihoods, and social networks on the street.

There exist a wide variety of push and pull factors for youth ending up on the streets, including poverty, war, abuse, urban migration, accusations of witchcraft and family breakdown. In harsh situations, life on the streets may offer more opportunities for youth than life at home. Consequently, many youth make a conscious choice to leave home and live on the streets, drawn by the increased economic incentives and independence it affords. Outside the constructs of the society, however, youth on the street severely compromise their opportunities for healthy physical, social, mental, emotional and spiritual development.

The number of young people on city streets is often indicative of the strains a society is experiencing, including conflict, poverty, and disease. Perhaps more importantly, the situation speaks of a society's inability to care for and absorb all of its children, often resulting in the ostracism of the child from the most important social context in African society – the family. In the case of youth on the streets, many have chosen or been forced to disassociate from community life and exist independently or dislocated from family and communal structures. In attempts to adapt and survive within the context of the street, youth actively seek to create or associate with other environments of belonging, such as street gangs or brothels that exhibit their own social hierarchies and behavior codes.

According to psychologists Elliot Aronson, Timothy Wilson and Robin Akert, "Humans are by nature a social species. Few of us could live happily as hermits, never seeing or talking to another person. Through interaction with others, we receive emotional support, affection, and love, and we partake of enjoyable experiences. Other people are extraordinarily important to our sense of well-being."

In line with this assertion, our research and field work corroborate that relationships are indeed indispensable to the psychosocial well-being of the individual. A child's identity is formulated by his or her environment, but more importantly, identity is understood to be co-constructed by the individual's internal perceptions of self and the perception of others towards that self. Furthermore, we assert that the primary source of psychosocial distress in children on the street originates from the child's perception—whether real or imagined—of exclusion, rejection and isolation, in some degree, from the community at large. Consequently, promotion of psychosocial well-being of street youth is best achieved through the facilitation of relationships with peers, the family and the various social domains of the community.

¹ Elliot Aronson, Timothy D. Wilson, Robin M. Akert, *Social Psychology: The Heart and the Mind*. (New York: Harper Collins College Publishers, 1994), 257.

We argue that a sense of belonging to a group is a crucial element of psychosocial well-being. Feelings of belonging contribute to identity formation and minimize perceptions of isolation while promoting acceptance, and most importantly, provide the foundation for relationships in which love is extended and received. Secure relationships, in which youth are convinced of the stability, commitment and long-term nature of the relationship, provide safe places that foster trust. Emotions, including anger, fear, hopes and desires can be expressed safely without the fear of rejection, abandonment, discrimination or isolation. It is the vocalization of these emotions, and the potential to share personal problems that provides the foundation for psychosocial healing. It is precisely these relationships that lay the foundation for child well-being in society or on the street.

This study reflects four months of research including a two-week field assignment to Ethiopia, with the overall goal of gaining greater understanding of the impact of street youth programming on psychosocial well-being. The research was conducted through a partnership between the Displaced Children and Orphans Fund (DCOF) and the George Washington University (GWU). It contains three deliverables, including a new framework for child well-being, the identification of five key program components of street children interventions that are most likely to successfully contribute to psychosocial well-being, and the development of indicators to measure outcomes and impacts within these five domains.

New Perspectives on Psychosocial Child Well-Being

Traditionally, 'psychosocial' has been used to include only the psychological and social dimensions of an individual's overall well-being. We find this definition to be limited and lacking in depth. Rather, we believe psychosocial well-being should be expanded to incorporate all aspects of individual functioning that contribute to overall well-being. For example, interventions that are directed towards meeting the physical and economic needs of an individual, while not directly psychosocial, can have psychosocial benefits. Consequently, a model of psychosocial well-being should include and reflect the interconnectedness of the various aspects of overall well-being.

While the Psychosocial Working Group (PWG) and John Williamson and Malia Robinson have put forward their paradigms of well-being, we build upon these models and emphasize the centrality of social relationships. In many socio-centric societies of Africa, the individual child's well-being is thought of in relation to his or her family or community. Consequently, the new framework for psychosocial child well-being is designed to reflect the interconnectedness of the child with the family and the community to demonstrate well-being in the African context.

As illustrated in the newly developed Psychosocial Child Well-being in Africa model², the child continuously gives to, and receives from, its family and community. The combination of these contextual and social interactions influences the shift of the child's identity and sense of belonging within the larger ecology. More specifically, the social, emotional, mental, spiritual, economic and physical components of individual child well-being must adequately be expressed and developed through fluid interactions with the family and ecology to promote overall

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² Figure 4, p.28.

psychosocial well-being. Therefore, we assert that the well-being of community and family members contributes greatly to the well-being of the child, and that a healthy child ultimately contributes to the well-being of his family and/or community.

Key Program Components

The second major deliverable of this research is the identification of key program components, which appear most likely to contribute to the successful change in street children's psychosocial well-being. In choosing these key components, we identified patterns within programs, which contribute to the psychosocial well-being of the individual child in relation to his family and community, in accordance with the aforementioned Psychosocial Child Well-being model. While these key program components do not necessarily comprise a perfect program in its entirety, they illustrate aspects of programs, which are likely to advance psychosocial development in street youth. The key program components identified were: (1) Community participation in all aspects of programming, (2) Youth participation and empowerment, (3) Economic incentives and skills development, (4) Spiritual development, and (5) Counseling for both youth and families.

In support of these key program components, examples of innovative program interventions for African street youth are included. These examples contribute to the argument that the promotion of psychosocial well-being among street youth is best achieved through enhancing their social connectedness of the community and their perceptions of belonging. Consequently, child-focused agencies have the powerful role of providing youth with the space, opportunities, tools and knowledge in order that they may be able to build the support networks needed to reintegrate into the community as active participants, thereby buttressing their psychosocial well-being.

Psychosocial Indicators

In examining these programs and their important contribution to psychosocial development, it is imperative to know how to provide proof to substantiate the benefits of street children's programs. On this note, we must consider how we actually understand program outcome and impact, and further, how they may be effectively measured. Outcome and impact measurements are necessary to ensure accountability, improve performance, and enhance learning. Additionally, there is a need for reliable and consistent information among programs in order to better inform research, create policies and develop programs that address street children's psychosocial needs.

Unfortunately, due to limited time and resources, the difficulty in proving causality, and the long-term aspects of attitudinal change, the field of psychosocial assistance remains relatively unsystematized and lacks the coherent base of evaluation research needed to guide evidence-based practice.³ In response to this identified gap, our research seeks to highlight the importance

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³ Mike Wessells, and Kathleen Kostelny, "Assessing Afghan Children's Psychosocial Well-Being: A Multi-Modal Study of Intervention Outcomes," Edinburgh: *CCF*, Oxford University and Queen Margaret's University College (2005), 12.

of psychosocial measurement, and further contribute to innovative research currently being conducted in this arena.

Consequently, the third major component of our research includes the identification and development of psychosocial outcome and impact indicators. Drawing from the aforementioned key program components, our research aims to bring to the attention of practitioners indicators of psychosocial well-being amongst street youth. These indicators are directed to monitor changes in behavior and attitude in both the individual and the community because of program interventions. They are examples which are illustrative of what outcome and impact indicators may look like if the program being evaluated included the key program components we highlight. They have been developed by field work conducted in Ethiopia, and should be further researched and piloted to fit other African contexts.

Options for Action

The last section of this report presents six options for action, targeted for donor and implementing agencies within the field of psychosocial assistance. In addition, it identifies a potential role DCOF can continue to play in promoting the psychosocial well-being of vulnerable youth. This report seeks to contribute to, and build upon, existing research on this topic and apply it specifically to the situation of street youth in sub-Saharan Africa.

With these goals in mind, the following considerations for further action have been identified:

- 1. Test and modify the model of psychosocial child well-being in other African contexts to advance the discussion on the conceptualization of the definition of a well child.
- 2. Conduct research to confirm the significance of the key program components as contributors to, and determinants of the psychosocial well-being of young people.
- 3. Investigate street youth culture and identity formation within peer groups to inform the hypothesis on identity formation and behavior change.
- 4. Strengthen monitoring and evaluation capacities for field staff.
- 5. Further test the hypothesis that relationship and asset-building programs should be encouraged with accompanying impact assessments.
- 6. Further explore how standard program interventions can be structured to incorporate relational development as a means of affecting psychosocial benefits in street youth.

INTRODUCTION

Due to a myriad of push and pull factors throughout the world, young people have been finding their livelihoods, social networks and homes on the streets. In response to this, international and national agencies have been working hard to help alleviate the psychosocial distress that adolescents experience while they are on the streets. There is now an increasing trend toward reintegrating youth who live and work on the streets back into communities – whether they be reintegrated with their biological nuclear families or other towns or villages. Targeting the psychosocial needs of these individuals, who may have felt rejected or alone in the world, is not a new issue, but one which calls for greater attention and understanding.

As a result of this immense problem, the United States Agency for International Development's (USAID) Displaced Children and Orphans Fund (DCOF) has seen an increased number of proposals requesting funding for street children programs – many of which aim to promote psychosocial well-being. In fiscal year 2004, 24 percent of DCOF's existing funding went towards street children's programs, and the requests have risen this year. Moreover, while there are numerous program interventions focusing on the psychosocial well-being of vulnerable children, the field of psychosocial assistance is still in its nascent stages. Many of the conceptual frameworks needed to guide program design and evaluation are still being refined.

In response to a need to continue pushing DCOF and other agencies' thinking forward, DCOF, in partnership with the George Washington University's (GWU) Elliott School of International Affairs, has commissioned this research. Overall, the research focuses on the psychosocial well-being of vulnerable youth with a particular focus on youth living and/or working on Africa's streets.

Our research is centered upon the assertion that humans are by nature social beings and that our relationships – whether they are with the nuclear family, peers or community at large - shape the way we perceive and interpret our life experiences. The internal and community perception of the strength of one's relationships and sense of belonging in any community forms that person's identity. Further, an identity shift impacts the young person's outward behaviors. We therefore argue that social relationships are key in helping youth shift their identity and sense of belonging off the streets and back into communities.

The report will first set the framework of the research by presenting the goals, research questions, and methodology. Secondly, this report will provide a new paradigm of psychosocial child well-being. Additionally, we will identify five key program components which we believe promote psychosocial well-being of street youth. Finally, the research investigates various methods, tools and indicators that measure psychosocial well-being. The report concludes with options for action to be considered by agencies concerned with vulnerable youth and their psychosocial well-being.

⁴ Interview, Lloyd Feinberg and Lynne Cripe, USAID – Displaced Children and Orphans Fund (DCOF), 23 February 2005.

PURPOSE OF THE STUDY

With the overarching goal of exploring the impact of street youth programming on psychosocial well-being, we intend to advance the dialogue around these issues. To accomplish this, the team first identified gaps in the understanding of psychosocial issues. The research was furthermore shaped around the areas listed below which are believed to require greater attention, in order that this report may be most useful for USAID-DCOF and other child focused implementing agencies.

First, the term "psychosocial well-being" is widely used, but defined in a myriad of ways. In academic literature and youth programming, this term encompasses a wide range of issues including, but not limited to, mental, emotional, social, physical, economic, cultural, and spiritual health. A definition of psychosocial well-being found in academic literature or used in program proposals may be very different from the understanding of the term at a community level. Additionally, culturally-specific definitions may be lacking in street children's programs. While programs naturally focus on current implementation of activities, it is important to question what one's ultimate goal in a street children's project may be. If our ultimate goal is to help improve the well-being of young people, it is vitally important that we understand this term in a tangible, usable, and culturally-specific manner.

Secondly, innovative practices in street children's programming are continually evolving. Many local programs offer fresh perspectives and ideas to international organizations. DCOF should be aware of these most current innovative practices—and what contributes to their success—in order to be more strategic in their funding and therein have the greatest possible impact on the lives of youth. In light of this, there should be a strong effort to further build bridges between the knowledge and supply bases in Washington D.C. and other locations, and the actual needs present in the field.

Thirdly, it is imperative to know how to provide proof to substantiate the benefits of street children's programs. On this note, we must consider how we actually understand program outcome and impact. As with the definition of psychosocial child well-being, an understanding of outcomes and impact may differ greatly between a Washington D.C. office and, for example, the streets of Addis Ababa. It is important that we consider ways to most effectively measure outcomes and impact in order to both track and encourage positive progress in street youth programs.

With the gaps of the psychosocial field in mind and DCOF's current role in funding many street children's programs, the key goal and four key objectives of this report are outlined below.

Goal:

To gain a greater understanding of the impact of street youth programming on psychosocial well-being.

Objectives:

- (1) To explore the importance of community and family relationships as protective factors in the psychosocial development of street youth.
- (2) To design a new framework for understanding psychosocial child well-being in an African context
- (3) To identify key components of street children's program which contribute to psychosocial well-being, and
- (4) To identify promising tools and indicators that measure psychosocial well-being.

MAJOR QUESTIONS ADDRESSED

- How is *psychosocial child well-being* understood?
 - What are the varying perspectives of program experts, academic literature, community members and street children themselves?
 - What is a conceptual framework, which is helpful and relevant to DCOF, child-focused agencies, and local community members, particularly in the African context?
- What are the *key program components*, which contribute to psychosocial development in street children?
 - What are some innovative examples from the field in Africa, which support these key program components?
- How do we understand *outcome* and *impact* for a street children's program?
- What are some promising *outcome* and *impact measurement tools* currently being used that measure psychosocial child well-being?
- What are some promising *indicators*, which measure psychosocial outcome and impact on street children?

DATA COLLECTION METHODOLOGY

Mode in Which Information was Gathered and Processed

An extensive literature review was conducted including reports and documents from various international and national organizations, journal articles, books, and websites. Additionally, several interviews in the Washington D.C. area were conducted with vulnerable children and psychosocial experts from organizations including USAID, the Christian Children's Fund (CCF), and Save the Children, in order to provide fresh perspectives to our research. It is important to recognize that the results of this research reflect the amount of material that it was possible to cover within the four-month scope of the project. Conclusions were drawn from this knowledge base with full recognition of their limitations.

Field research was conducted from March 5, 2005 through March 19, 2005 in Addis Ababa, the capital of Ethiopia, and Nazareth, a town approximately 100 km to the east of the capital. Forum on Street Children Ethiopia (FSCE) was our local host, and they provided us with several incountry contacts. In total, our team met with 15 child-focused organizations⁵, and approximately 90 children and youth.⁶ Qualitative methods were used in gathering data. At the end of our two-week visit, on March 18, 2005, we conducted an Information Sharing Session in Addis Ababa, at which eleven organizations with related interests in street children were represented.

The purpose of the session was to share our research findings, with the objectives of obtaining participants' input on the viability of our work in the Ethiopian context, and to provide a networking opportunity for our key informant organizations with others in Ethiopia who were working on similar issues and to share our research findings with the objective of obtaining their input and comments on the viability of our work in the Ethiopian context. We presented the newly created model of psychosocial child well-being, the five key program components, and discussed outcome indicators to measure psychosocial well-being. The session was rich with discussion and feedback relating to the model and key factors and the participants provided valuable comments in responses to the limitations they foresaw in the implementation of outcome evaluation methodology. Their comments have been integrated into this report with the intention of reflecting the participatory manner in which our products were developed.

Targeted groups in Ethiopia were program staff, psychologists, parents, religious group members, and street youth themselves. The qualitative research methods used were:

- semi-structured and unstructured interviews of targeted groups, such as program staff of street children's organizations,
- focus groups of adolescent street youth,

⁵ For a full listing of organizations, see Appendix A.

interview was held with one mother, however, other mothers of street children were difficult to locate and were not comfortable speaking with us when approached. Due to conflicting schedules, the meeting with the police did not materialize and our host organization expressed concern about the travel involved to locate and speak with a traditional healer.

⁶ The team had hoped to speak with a more diverse range of community members including mothers, police, religious leaders and traditional healers, however, access to these various constituencies was limited. A successful interview was held with one mother, however, other mothers of street children were difficult to locate and were not

- observations of programs, activities, and meetings for street children, and
- document review at the FSCE's documentation center

Information gathered was uniformly coded into major identified themes and classified in a data analysis chart. This information was compiled with the literature review, interviews, and field work data for review and analysis. The work plan and interview tools used in country are available in Appendices B and C.

In an effort to broaden the applicability of this research to sub-Saharan Africa and not just Ethiopia, we also conducted semi-structured interviews with African refugees and immigrants that live in the U.S. Specifically, we explored how they define psychosocial well-being in their culture. This was particularly important as we created the psychosocial child well-being model.

Limitations of the Research

Upon review of the information obtained, it is necessary to discuss the limitations affecting our research in the field so as to help guide future study on this topic, as well as to appropriately caveat the results of this present work. It is important to note that while we were able to conduct focus groups with a substantial number of youth, most of these youth were female and identified themselves as commercial sex workers. This was due to the fact that many of the programs we worked with targeted female youth with education and empowerment programs, including girls clubs, without providing an equivalent access to programs for boys. In addition, the sample of street youth involved in sex work reflects the directed approach of many of the organizations to provide drop-in centers and safe homes specifically for commercial sex workers (CSW) in areas of the city such as the bus terminal and Mercato market area in Addis Ababa. This is not representative of the more general street youth population that tends to be characterized by street boys and few commercial sex workers.

However, our research reflects a general selection bias caused by significantly easier access to commercial sex workers who spent time at the drop in centers during the day. This facilitated our access to them in comparison to many of the other street youth populations who were inaccessible in street markets and slum areas that we were advised not to explore outside of the program centers. Future research should look more evenly at the factors affecting girls and boys differentially, and the variety of street cultures that exist.

Our understanding of youth's own perceptions of well-being, community connectedness and psychosocial well-being was limited by the inability to obtain in-depth interviews with them due to limited access and the need for translation. In addition, our research could have been more informed with a comparison between child well-being and functionality within a normal context, and that of children on the street. It also could have benefited from more interviews with mothers of street youth that live at home, but work in the streets, traditional healers, and police officers with frequent contact with street youth. We experienced significant difficulty in locating both mothers of street youth and traditional healers, due in part to their unwillingness to speak with us, and the difficulty in accessing them. The planned interview with the police was cancelled due to a conflict in schedules.

We were conscious not to use distracting technical language to refer to the emotional, psychological and social needs of street youth, however, we found a varying degree of comprehension of the questions we asked about psychosocial well-being and we often had to approach the same question from different perspectives before the concept was communicated effectively. For example, counseling was well understood to have emotional and psychological benefits, but it was more difficult to obtain perspectives on the emotional and social benefits of activities such as education or skills training. As a result, we cannot be certain that the conceptualization or the responses to the questions we asked about psychosocial well-being were interpreted systematically across interviews. One person's understanding of psychosocial interventions differed from another's and this poses threats to the reliability of the data gathered.

In addition, all interviews with program representatives were conducted primarily in English, often with the assistance of informal translators. The quality of responses may have been hindered by translation difficulties caused by people being interviewed and responding in a language other than their language of origin. Similarly, differing qualities of translation during focus group discussions and interviews with the street youth may have impacted data collection. Consequently, the reliability of these interview tools in measuring the same phenomenon is questionable. In fact, the nature of our visit and our affiliation with USAID may have generated response bias through perceptions of social desirability or evaluation apprehension on the part of the people we met, thereby further impacting the reliability of our data.

It is important to recognize that this study has attempted to expound upon our in country findings and analyze the applicability of this research to other sub-Saharan African contexts. However, due to the limited scope of our in-country research in Ethiopia, and the rich diversity among African cultures, some results may not be fully generalizable to areas outside of Ethiopia. Specifically, Ethiopia's unique historical resistance to colonization, its severe experiences of drought and famine and the ongoing tension between Eritrea and Ethiopia may significantly impact the street youth experience in Ethiopia's cities, thereby making it unrepresentative of other street cultures in Africa.

In addition, political factors, including the government's general distrust of non-governmental organizations (NGOs), contribute to the unique environment in which NGOs in Addis Ababa are working. As with any research in the qualitative realm, an ongoing process of reevaluation defines all attempts to understand the many implications of working cross culturally. Consequently, we hope that in spite of its limitations, this research contributes to the stimulation of ideas that ultimately will propel and promote quality programming and effective interventions that benefit the psychosocial well-being of street youth.

Overview of Street Youth in Sub-Saharan Africa

Throughout Sub-Saharan Africa, street youth are an undeniably growing population. Poverty, war, urbanization, disease, and broken homes are creating an environment in which millions of young people are turning to the streets. Street children comprise a vast range of often unheard voices—including abandoned children of poverty-stricken or abusive homes, children separated because of war, orphans who have lost their parents to AIDS, or youth who make the rational decision to be on the streets. The vast number of children on the streets is in many ways indicative of major government, public policy, economic, public health, and even moral breakdowns in societies.

Street life can have detrimental effects on youth. In most cases, their opportunities for healthy physical, social, mental, emotional, moral and spiritual development are severely compromised. By nature of their unstable environments, children living on are especially vulnerable the streets victimization, exploitation, chronic illness, and the abuse of their civil and economic rights. Street life denies youth what Article 27 of the Convention on the Rights of the Child (CRC) asserts as "the right of every child to a standard of living adequate for the child's physical, mental, spiritual and social development."7

Sub-Saharan Africa is faced with a complex web of factors which gravely heighten the risks for youth on the streets. In a continent in which 315 million people, or more than half of the entire population, lives on less than one dollar a day, poverty threatens many families with the inability to adequately care for their children. In Accra, Ghana, for example, the population of street children has more than doubled in the last five years to 20,000

Just Because I'm a Street Girl

"I have something to say, But I'm a street girl and nobody cares. I have a point to make, But nobody listens. If a child lives with hostility, She learns to fight. If a child lives with encouragement, She learns confidence. If a child lives with praise and friendship, She learns to find love in the world. But I look around and ask myself "Where is my helper?" Just because I'm a street girl nobody cares. I beseech you be merciful to street children And come to their aid. They need food, clothing and education, But most of all they need love. Children are the pride of Africa."

- Anonymous Street Child from Kenya
- Child Hope UK

children and 6,000 babies. Previous and continuing conflicts, such as the genocide in Rwanda which claimed approximately 800,000 lives in 1994, or the continuing civil war in the Democratic Republic of Congo which to date has killed almost four million, 10 have left

⁷ UNICEF, Convention on the Rights of the Child, Article 27. 1989.

⁸ Author Unknown, "The Primacy of Pro-Poor Policies for Growth," UNDP, 2005, (1 May 2005). <www.undp.org> ⁹ Author Unknown, "About Street Children," *Street Child Africa*, 2003, (1 May 2005).

http://www.streetchildafrica.org.uk/about.htm

¹⁰ The International Rescue Committee, "DRC: 3.8 million dead in 6 year conflict," IRC, April 2005, (1 May 2005). < http://www.theirc.org/index.cfm/wwwID/2129>

lamentably massive numbers of youth orphaned or separated from their families. Natural disasters such as the droughts in Ethiopia and the December 2004 tsunami which reached to Somalia, have also raised the vulnerability of many African youth. Additionally, disease is one of the many the risk factors for youth on the streets of Africa. By the end of 2003, 12 million children in Africa alone will have lost one or both parents to AIDS. In the nations of Zimbabwe, Zambia, Mozambique, Lesotho, Malawi and Swaziland, approximately 1 in 4 adults are infected with HIV/AIDS. In light of this, the outlook for youth is particularly bleak. There are now about 4 million children orphaned by HIV/AIDS in the Southern Africa region, with Zambia registering the highest number of orphans in the world. Whether they are called *watoto wa mitaani* in Tanzania, *chokorra* in Kenya, or *moireaux* in the Democratic Republic of Congo, street youth throughout Africa are a rising population who desperately cry for greater attention.

In Ethiopia, our main country of focus, the plight of street children is also an increasing issue of concern in a nation in which 81.9 percent of the population lives on less than \$1 a day. According to UNICEF and actively engaged NGOs, there are approximately 500,000-700,000 street youth nationally, and according to the Ministry of Labor and Social Affairs, an additional 1 million are at risk for streetism. Moreover, with more than 1.5 million Ethiopians currently living with HIV, there is a heightened risk for AIDS orphans to end up on the streets unless they are cared for by other family members or community. Broken homes and single parent families also appear to be a major push factor of children in the streets. It is estimated that fifty-five percent of street youth in Addis Ababa have parents who are separated, widowed, or single. 18

In addition to their abject poverty that has most commonly led them to the streets, most of the Ethiopian street youth are involved in unhealthy behaviors, such as smoking marijuana, drinking 'tela' (local beer) and 'arake' (strong spirit, similar to vodka), chewing chat (a stimulant and mild narcotic) and sniffing Benson (petrol) at the gas stations. Some work as taxi boys, and obtain these drugs and spirits in exchange for their work. Many of the girls end up as prostitutes, sent by their families from the rural areas to find work, but who resort to commercial sex work in the absence of other forms of income. Many of the urban youth are particularly aggressive, often throwing stones, using profanity, having fist fights, or using sharp materials such as broken glass and scissors to attack each other. As a result, communities often ostracize street children and regard them as antisocial, dirty, and lacking in work ethic. Stigmatization compounds the street child's feelings of isolation and rejection and often becomes the major source of concern and

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¹¹ World Bank Group, "Launch of World Development Indicators 2005 Report," *The World Bank*, 2005, (1 May 2005) http://web.worldbank.org

¹² UNICEF, "Day of the African Child," UNICEF Ireland Press Release,, 16 June 2003, (29 April 2005).

< http://www.unicef.ie/unicef.php?content=16-06-2003.php>

¹³ Ibid.

¹⁴ Peter Anthony Kopoka, "The Problem of Street Children in Africa," *University of Dar-Es-Salaam*. (2000): 7.

¹⁵ UNDP, Human Development Report, 2001 statistics, New York, 2003, 200.

¹⁶ UNICEF, "The UNICEF Prevention, Rehabilitation and Protection of Street Children and Street Mothers Project" *UNICEF*, (29 April 2005). < http://www.unicef.org/ethiopia/ET_media_child_protection.pdf>.

¹⁷ UNAIDS, Report on Global AIDS, 2004.

¹⁸ Radda Barnen, "Survey on Street Children-Selected Areas in Addis Ababa." *Ministry of Labor and Social Affairs*, (1998).

¹⁹ Interview, Emebet, Forum on Street Children Ethiopia, 9 March 2005.

distress, thereby dwarfing any initial trauma that may have necessitated life on the street. According to Holly Dempsey, HIV/AIDS officer at USAID/Ethiopia, when asked if AIDS will bring down the country, she answered, "No, but street children will." Indeed, a significant number of young Ethiopians face daily realities of poverty and must fend for themselves on the streets without access to the necessary social networks and relationships that could lead them to an improved state of well-being.

It is true that common conceptualizations of street children regard them as innocent victims of poverty and conflict-ridden situations. According to the United Nations Interregional Crime and Justice Research Institute, "Street children are perhaps the most vulnerable group in any society. They have few advocates, can wield no political strength, and regardless of official views, are generally regarded by the low level officials at best, as nuisances to be tolerated, and at worst little more than vermin."²¹

Street children, however, would be wrongly branded as powerless victims of their environments. In reality, they are often vibrant, creative, and resilient young individuals with great potential. For many kids, being on the streets may actually be a *rational* choice. Some claim that street children are more accurately conceptualized as *ones who abandon their families* rather than are

Street youth are not simply helpless victims or threats to society, but valuable resources with tremendous potential for contributing to Africa's development.

abandoned by them.²² In a study conducted in Ethiopia, children perceived their involvement in street life as a method of actively addressing deprivations and problems in their home lives while expressing their wish for training, education, or shelter as short-and long-term alternatives to street life. Many street children have a strong perceived self-efficacy and high internal locus of control.²³ Moreover, many may voluntarily leave their homes for life on the streets in order to pursue economic opportunities in the informal sector, or to escape a home environment, which may be overly controlling or abusive. For some, a life of freedom on

the streets is an attractive alternative. As we examine the issue of street children in sub-Saharan Africa, it is important to begin with the assertion that street children are not just simply helpless victims or threats to society, but valuable resources with tremendous potential for contributing to Africa's development.

Working Definition: Street Children

The term street children has been used to encompass a wide gamut of kids at-risk: an overlapping population of young people impacted by the detriments of poverty, physical and/or cognitive developmental disorders, diseases such as HIV/AIDS, domestic violence and war. Because of the ambiguity of the term, as well as the often hidden and isolated nature of street children, accurate

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²⁰ Interview, Holly Fluty Dempsey, *USAID Ethiopia*, 10 March 2005.

²¹ K. Lalor, et al. "Victimization Amongst Street Children in Sudan and Ethiopia: A Preliminary Analysis," *UN Interregional Crime and Justice Research Institute.*, 2003, (10 February 2005). http://www.unicri.it.

²² Catherine Panter-Brick and Malcolm T. Smith, eds., *Abandoned Children* (Cambridge: Cambridge University Press, 2000), 135.

²³ Panter-Brick, 137.

numbers are nearly impossible to produce. Nonetheless, the United Nation's Children's Fund (UNICEF) has estimated that there are approximately 100 million street children worldwide.²⁴

The modern label of "street child" emerged from UNICEF and other organizations following the UN Year of the Child in 1979. It arose from attempts to develop a term free of negative implications, but has become a term loaded with powerful emotive and moral connotations. In 1985, an inter-NGO consensus was held in Switzerland which termed street children as: "Any girl or boy who has not reached adulthood, for whom the street (in the broadest sense of the word, including unoccupied dwellings, wasteland, etc.) more than their family has become her or his real home, abode and/or sources of livelihood, and who is inadequately protected, supervised, or directed by responsible adults." 25

Of course, this definition raises a large number of unavoidable ambiguities, which must be taken into consideration, such as the definitions of "family," "real home," or "protection." There is also an important distinction among youth who have varying levels of relational support. USAID defines four major categories of street children as seen below. ²⁶

CATEGORIES OF STREET CHILDREN

- <u>"Children ON the Streets":</u> These children may have regular contact with their families and an educational system, and may even return every night to sleep at home. Nonetheless, they spend most days and some nights working and socializing on the street because of, for example, poverty, overcrowding, sexual or physical abuse at home. Of the different categories, this is the most numerous.
- <u>"Children OF the Streets":</u> These children have little or no contact with relatives, are homeless, and fully lack parental, emotional and psychological support. They often move from place to place, living in shelters and abandoned buildings. This number, although difficult to measure, is relatively small worldwide.
- <u>"Children who are Part of a Street Family":</u> These children live on the streets with the rest of their families. They may be displaced due to poverty, wars, or natural disasters. The families often live a nomadic life, carrying their possessions with them. Children in this case often work on the streets with other members of their families.
- <u>"Children in Institutionalized Care":</u> These children come from a situation of homelessness, have been provided temporary institutionalized care, and are at risk of returning to a life on the street.

²⁵ UNICEF. "A Study on Street Children in Zimbabwe," *United Nations Children's Fund*, 1 February 2005, (1 February 2005). http://www.unicef.org/evaldatabase/files/ZIM_01-805.pdf>.

²⁴ Amod K. Kanth, et al. eds. "Street Children and Homeless." *Youth Advocate Program International.* 17 May 2004. (26 February 2005). < http://www.yapi.org/street/>.

²⁶ USAID cited in Amod K. Kanth, et al. eds. "Street Children and Homeless." *Youth Advocate Program International.* 17 May 2004. (26 February 2005). < http://www.yapi.org/street/>.

For the purposes of our study, we considered the whole gamut of street children—those "on" the street, "of" the street, in institutionalized care, and those who are part of a street family. Because we examined a number of programs which do not differentiate among young people and who may have varied reasons for being on the streets, we further acknowledge that our definitions, examples, and recommendations may provide a more generalized perspective on the population of street kids when in fact they are individuals with several specific needs. Nonetheless, these generalizations were made for the purpose of encompassing a wider population which may be of interest to DCOF.

In terms of age, the majority of street children are above age 10.²⁷ For the purposes of this study, however, we looked most closely at what we term as "youth"—adolescents aged 12 to 18. This is because adolescence, along with infancy, marks a transitional period in human development. It is a time of rapid qualitative change in behavior and cognition. These transitional periods are thought to be stages when negative contexts have greater chances of permanently scarring or stunting the normal development of a child.²⁸ Secondly, until recently, few agencies focused exclusively on the special needs of adolescents, and so there is a greater need to understand the interests of this age group. Lastly, for the purposes of carrying out focus groups with youth on the streets, we felt that this age group may be the most responsive to our research due to their levels of cognitive ability, as well as the transitional time of life which they are at, in which many are in search of a sense of identity and belonging to a group.

The Important Role of Relationships

Our research is grounded in the assertion that humans are by nature social beings. Social interactions with family, friends, community and culture shape the way life experiences are perceived and interpreted. According to John Williamson and Malia Robinson, "membership and participation in a social or cultural group is integral to the identity and daily functioning of most people..." This is particularly true during the period of adolescence where one of the main developmental goals is for the young person to form his or her identity. Conforming or changing one's behavior due to the real or imagined influence of other people allows teenagers to mold an identity and feel a sense of belonging. While relationships are important in all cultural contexts, they are particularly crucial to a youth's image or identity of him/herself in many African countries because these cultures/societies operate in a socio-centric manner. In these societies, social relationships between adolescents and their peers, parents, community members and dead ancestors are central to defining individual health and illness. Williamson

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²⁷ Andrew Dawes, et al. *Going Global with Indicators of Child Well-being: Indicators of South African Children's Psychosocial Development in the Early Childhood Period*, (Capetown: Child, Youth and Family Development Human Sciences Research Council and UNICEF, Work in Progress, 2004) 27.

²⁸ Michael Cole and Sheila Cole. *The Development of Children*. (New York: W.H. Freeman and Company, 1996), 666-669.

Dawes, 27.

²⁹ John Williamson and Malia Robinson, "An Alternative to Psychosocial Programming", unpublished document, 16.

³⁰ Aronson et al., 245

³¹ Kathy Vandergrift, "Working with children in conflict: A skill-building workshop," Quebec: *Canadian International Development Agency*, 2002, 12.

and Robinson, for example, argue that "the disruption of social functioning undermines wellbeing..."³² In light of this, rejection and exclusion from a social or cultural group and the resulting loss of identity can cause significant psychosocial distress.

Street youth are one of the many groups of vulnerable children that experience mental anguish when they do not feel a sense of belonging. Children end up on the streets for many reasons, including poverty, domestic violence, a desire to break free from the constraints of traditional customs or peer influences. They may have chosen or been forced to disassociate from community life and exist independently or dislocated from family and communal structures. In attempts to adapt and survive within the context of the street, children actively seek to create or associate with other environments of belonging such as street gangs or brothels that exhibit their own social hierarchies and behavior codes. Some street youth may assert that the social networks they develop on the streets are actually more benevolent than the household situations from which they come. Further research is drawn from the premise that children with access to the protective environment of the culture and society are better off than children who are ostracized and isolated.

According to Dr. Mike Wessells, for adolescents to be able to successfully function off the streets and in traditional communities, an identity shift occurs whereby they are able to perceive

of themselves as part of a more traditional community. Furthermore, young people need to feel that their identity is validated in that context. Dr. Wessells hypothesizes that this identity shift precedes the behavioral intentionality of the child to comply with the rules and values of the society.³³ Many street children feel they have nothing because they live or work on the streets. They do not see their own agency and abilities that have allowed them to survive on the streets despite the myriad negative influences.³⁴ We argue that social relationships with their peers, families, community members and/or religious deities are crucial in helping shift street youth's identity and sense of belonging off the streets and back into communities in which they can envision themselves as productive members of society.

Social relationships with peers, families, community members and religious deities are crucial in helping shift street youth's identity and sense of belonging off the streets and back into communities where they can envision themselves productive members of the society.

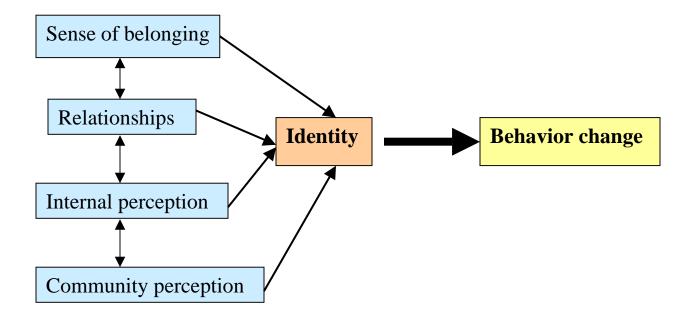
In support of this argument, this research proposes a new model for psychosocial well being, key program components that result in the successful promotion of psychosocial well-being, as well as program outcome and impact indicators and tools that can measure this change. This point is illustrated in Figure 1.

³² Williamson and Robinson, 16.

³³ Interview, Dr. Mike Wessells, CCF,11 April 2005.

³⁴ Focus groups sessions conducted with street youth in Addis Ababa and Nazareth, Ethiopia, between 6 March to 18 March 2005.

Figure 1:



UNDERSTANDING PSYCHOSOCIAL WELL-BEING

Psychological distress among youth has conventionally been addressed through Western mental health methodologies such as one-on-one counseling. However, the variety of experiences that young people suffer as a result of living in situations of poverty, war, natural disasters or threatened by the stigma of HIV/AIDS challenge this approach and have encouraged practitioners to seek more culturally appropriate methodologies. According to Dr. Mike Wessells, one cannot assume how a young person will react to stressors in his or her life. Each adolescent will react differently and have varying levels of resiliency based on his or her personality, background experiences, and whether the stressors occur at one time or are ongoing.³⁵

At the end of the twentieth century, North American and European psychologists coined the term 'psychosocial' in an effort to recognize both the limitations of 'mental health' and the impact of social influences on child development. In this definition, 'psychosocial' encompasses both the psychological and social aspects of an individual.³⁶ Psychosocial specifically addresses the variety of gradual psychological, emotional and social changes that children go through as they mature.³⁷ The psychological dimensions of these interventions aim to address cognitive capacity, stabilize emotional experiences and improve understanding of self. The social aspects encourage youth in their ability to form attachments and meaningful relationships, to maintain satisfying reciprocal social relationships, and to learn and follow the social code of behavior of their culture.³⁸ Consequently, the individual achieves the expected developmental, cognitive, social and emotional milestones and develops secure attachments, satisfying social relationships and effective coping skills and resiliency.³⁹

However, there are continuing debates among donor and child focused implementing agencies as how best to promote positive psychosocial well-being among all vulnerable youth, including street youth. Many organizations feel that the concepts of mental health and the traditional conceptualization of psychosocial well-being are insufficient. They have therefore designed broader frameworks for understanding this so as to guide future programming. The next section explores some existing paradigms that have advanced the dialogue beyond the traditional definitions of mental and psychosocial well-being.

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³⁵ Interview, Dr. Mike Wessells, CCF, 11 April 2005..

³⁶ Psychosocial Working Group, "Psychological Intervention in Complex Emergencies: A Conceptual Framework." *The Psychosocial Working Group* (5 February 2005). http://www.forcedmigration.org/psychosocial.>

³⁷ John Duncan and Laura Arntson, "Children in Crisis: Good Practices in Evaluating Psychosocial Programming", New York: *Save the Children Federation, Inc.*, 2003, 7. (2 February 2005).

http://www.savethechildren.org/publications/Good_Practices_in_Evaluating_Psychosocial_Programming.pdf

³⁹ David Satcher, Surgeon General, "Children and Mental Health," in *Mental Health: A Report of the Surgeon General* (Washington, DC, 1999) 124. (14 February 2005),

http://www.surgeongeneral.gov/library/mentalhealth/toc.html#chapter3

Existing Frameworks for Child Well-being

Numerous frameworks exist for describing psychosocial well-being, however two models that have informed our thinking include the Psychosocial Working Group (PWG)⁴⁰ (see Figure 2) and John Williamson and Malia Robinson's models of well-being⁴¹ (Figure 3). Both models illustrate that overall well-being is dependent upon a number of closely interrelated factors including an individual's ability to improve in physical, mental, cognitive, emotional, spiritual, social and economic areas of his or her life. A person who does well in many of these domains increases his or her chances of overall well-being and can then be considered healthy. Unfortunately, due to the various stressors in their lives, most vulnerable children are not able to completely fulfill all of these aspects.⁴² It is crucial for donors and practitioners who design programs focusing on child well-being to fully understand and come to a consensus on how this concept is defined within various cultural contexts.

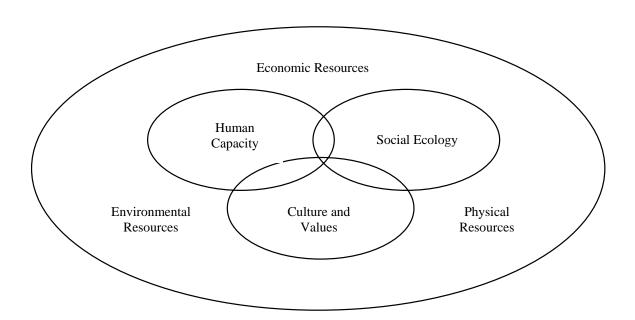


Figure 2: Psychosocial Working Group's Model of Individual Well-Being

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⁴⁰ Psychosocial Working Group. "Psychological Intervention in Complex Emergencies: A Conceptual Framework." *The Psychosocial Working Group* (5 February 2005). http://www.forcedmigration.org/psychosocial>.

⁴¹ Williamson and Robinson. draft paper being prepared for publication by *Intervention: International Journal of Mental Health, Psychosocial Work and Counseling in Areas of Armed Conflict.*

⁴² Interview, John Williamson, USAID-DCOF, 24 January 2005.

The Psychosocial Working Group (PWG), composed of ten academic and implementing agencies, has created a paradigm called the model of Individual Psychosocial Well-Being that can guide programming in complex emergencies. This is illustrated in Figure 2. The model is

founded upon the assumption that in the context of complex emergencies, the needs of the individuals are ideally met within the context of the family located within the 'affected' community'. The nature of emergencies diminishes the economic, environmental and physical resources of the community, thereby impacting the psychosocial well-being of individual Within the context of economic, children. environmental and physical resources, exist the three domains of well-being. These areas include human capacity (physical and mental health, knowledge and skills), social ecology (social connections and support structures), and culture and values (cultural constructions of experience, wider rights issues). Examples of interventions that promote human capacity education and skills trainings. are Promoting social ecology might involve giving children space and opportunities to build relationships and social networks, both with peers and with adults. Lastly, the third domain of culture and values indicates that programming should take into

<u>Psychosocial Working Group's</u> <u>Model for Well-Being</u>

- A person's well-being is in the context of a community's diminished economic, environmental and physical resources
- Three domains of well-being that impact the individual
 - Human Capacity (physical and mental health, knowledge and skills)
 - Social Ecology (social connections and support structures)
 - Culture and Values (cultural constructions of experience, wider rights issues)

consideration the specific cultural knowledge and understanding of child rights. While these three domains of psychosocial well-being are specific aspects that programs want to help develop in individuals, once developed, they also represent additional human, social and cultural capital for the community as it deals with healing.⁴³

Figure 3 illustrates John Williamson and Malia Robinson's unpublished model of child well-being. Even though Williamson and Robinson are still refining this model, it has proved useful in conceptualizing the specific aspects of child well-being. Rather than combining the domains of well-being, their model dissects those larger domains to encourage a greater understanding of the specific factors affecting a young person. They argue that child well-being "depends upon a number of different factors which to an extent are inter-related, but which can also be understood and addressed as distinct." The resulting well-being milestones, and the interventions that lead to change, are all inter-related and integrated. Furthermore, Williamson and Robinson argue that child well-being "depends in part on some minimum level of satisfaction in all these domains." This model identifies eight key areas of positive overall health. The first and all encompassing aspect of well-being is the *Developmental*, meaning that changes over time in a child due to his or her own human development may buttress or undermine individual well-being. Within the developmental realm exists seven additional factors including:

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⁴³ PWG

⁴⁴ Williamson and Robinson, 7.

⁴⁵ Williamson and Robinson, 7.

- Biological (physical health and nutrition),
- Mental (Cognitive abilities, knowledge, skills),
- *Material* (non-biological aspects of the physical environment and all that is in it; includes economic resources),
- Emotional (a child's feelings and emotions),
- Social (social interactions and relationships with peers and adults),
- Spiritual (belief in and a relationship with some higher power) and
- *Cultural* (thoughts, behaviors, values at the country, community and family levels). 46

While all of these domains affect an individual's overall psychosocial well-being, John Williamson suggests that the Emotional, Mental, Social, Spiritual and Cultural domains are the most obviously relevant to psychosocial well-being.⁴⁷

Biological Material

Well-being

Spiritual

Cultural

Developmental

Figure 3: Williamson-Robinson Model of Child Well-being

⁴⁶ Williamson and Robinson.

⁴⁷ Interview, John Williamson, USAID – DCOF, 24 January 2005.

New Perspectives on Psychosocial Child Well-being

Continuing the discussion put forward by the PWG and Williamson/Malia on the conceptualization of psychosocial well-being, we argue that traditional definitions of psychosocial well-being are limited and do not accurately capture the depth of what young people experience in difficult circumstances. Nor do these definitions reflect the potential benefits that different types of interventions can have on psychosocial well-being. Economic, physical, emotional, social and psychological interventions can all positively benefit psychosocial well-being either directly or indirectly. While both of these models give valuable insight into what needs to guide children's programming, neither model highlights a priority component to the overall psychosocial well-being of a child.

Using research gathered from in-depth interviews with practitioners and street youth in Ethiopia and discussions with immigrants and refugees from other African countries, we have created our own paradigm, and of psychosocial well-being. While no one model can be a perfect fit for every community, frameworks can help conceptualize, and thereby, guide programming in ways that are more specific to the contexts in which they operate. While our model is based on what we believe best represents the cultures and values of Africa, it is still a continent of many cultures and some of the components of our model may not work in each African country. We therefore intend our model not be a perfect end product, but a suggestion that may further stimulate dialogue.

We take the Williamson/Robinson model a step further and position social interactions as the core of psychosocial well-being. This is based on our discussions with Africans from Ethiopia, Democratic Republic of Congo (DRC), Sierra Leone, and Sudan and a review of secondary documents on Africa. Furthermore, we have understood that a child's well-being can only be sufficiently addressed in Africa by looking at the family and particularly the mother's well-being. Our claim is further substantiated by Senegalese psychiatrist Sow who argues that in many African countries, a person is considered ill when the equilibrium in their personality, as influenced by their family, community and ancestors is disturbed.⁴⁸

⁴⁸ John W. Berry, Ype H. Poortinga, Marshall H. Segall, Pierre R. Dasen, *Cross Cultural Psychology: Research and applications*, Cambridge University Press, United States, 1992, 91.



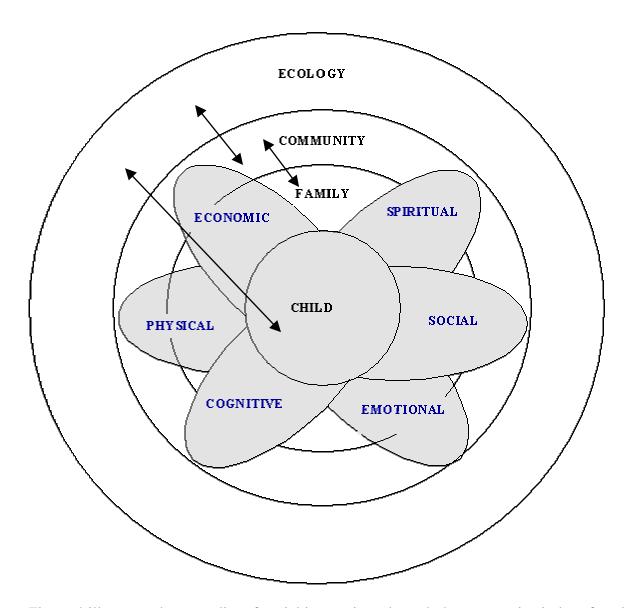


Figure 4 illustrates the centrality of social interactions through the concentric circles of ecology, community and family that surround the child. Arrows represent the interaction that occurs between these spheres and the permeability of each sphere to influences the others. The larger ecological environment of the child is defined to include the culture, socio-political context of the country, economy and material resources that affect the stability of the child's external environment. The child, family and community are consequently conceived as interactive components of the overarching ecology. Program interventions that target any of these spheres can have indirect effects on the psychosocial well-being of the child. Similarly, interventions directed primarily to the child, can have a long-term positive effect or impact on the community and cultural ecology.

The six shaded ellipses in Figure 4 exhibit the most prominent domains in which child well-being is centralized. They again reiterate the importance of social relationships and the interactions between the concentric circles made visible by the fact that they overlapping the concentric circles. These domains are defined as the social, emotional, cognitive, economic, spiritual and physical needs of a child. Together, these independent domains combine to affect child psychosocial well-being.

Social, emotional and spiritual components of health are often discussed as being most closely associated with psychosocial well-being because of their more direct focus on young people's internal thoughts and feelings. These internal aspects of children and youth are also the most neglected, especially in emergency situations. Furthermore, they are difficult to observe and measure. Social well-being incorporates all social relationships and associations available to a youth within the immediate family, peer environment, and community. Emotional well-being relates to a youth's sense of belonging and comfort in his or her identity. This area could also include feelings of happiness, sadness, fear and hope. Spirituality and religion are tightly intertwined within many African cultures. This was a theme that ran throughout our interviews in Ethiopia. Dr. Sow's Model of African personality also puts spirituality at the core of Africans' personalities and identities. ⁴⁹ In Angola, for example, deceased ancestors are believed to not only protect, but participate in community life. Spiritual attributions surrounding life events have profound psychological implications and may actually be the primary source of stress.⁵⁰ Achieving spiritual well-being could include a child's relationship with God, a priest or imam. Furthermore, a spiritual connection gives children hope for the future as we saw among street children in Ethiopia.

Cognitive, physical and economic well-being is often disassociated from psychosocial well-being. This is due to the fact that achieving visible and measurable outcomes in these areas is significantly easier than measuring similar outcomes in the social and emotional domains. However, these three aspects indirectly contribute to a young person's psychological and social state. Interventions developing cognitive, physical and economic abilities of young people thereby impact their overall psychosocial well-being. Cognitive well-being relates to a youth's intellectual abilities, skills and knowledge, and the degree of self-esteem and self-worth obtained through demonstration of achievements and success within this domain. Likewise, physical well-being, while not directly related to psychosocial well-being, influences a youth's self perception, self-esteem and confidence in his or her own abilities. Finally, economic well-being contributes to psychosocial well-being, for example, by alleviating the distress caused by poverty. Since poverty is often one of the main push factors for street youth, equipping them with skills that can increase their chances of obtaining a job is very important. By securing employment, a child's sense of contribution to his/her family and the community improves, and therefore, helps promote and nurture a sense of belonging and self-worth.

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⁴⁹ Berry et al., 90

⁵⁰ Michael Wessells and Carlinda Monteiro, "Psychosocial Interventions and Post-War Reconstruction in Angola: Interweaving Western and Traditional Approaches", In *Peace, Conflict and Violence: Peace Psychology for the 21*st *Century*, edited by Daniel J. Christie, Richard V. Wagner, Deborah DuNannWinter, Prentice Hall, New Jersey, 2001, 268.

The six areas of a child's psychosocial well-being as defined in this model can be conceived as the factors influencing the child's internal self-perception. The family, community and cultural ecology spheres impact these domains in varying degrees and conversely, deficiencies in these domains within the child can negatively impact the surrounding spheres. The ultimate objective of program interventions, therefore, is to substantiate the child's ability to fulfill their internal psychosocial needs through improved access and connectedness to the family, community and culture whereby both the young person and the community can benefit from the improved psychosocial well-being of the individual child.

This demonstrates the dual responsibility that the community has to the child, and that the young person has in response to the community. For the population of street youth who feel rejected and isolated from their societies, there exists hope for the improvement of their psychosocial well-being through the promotion of reintegration and re-association with the society. If this interdependent relationship is encouraged and fostered, the long-term impacts of program interventions are more likely to see street youth adopting productive roles in society as their perceptions of acceptance and belonging improve.

This transition however, requires commitment and a transformation in the way the community and the street children view their identities. Consider, for example, how this framework may be applied to the Ethiopian context. FSCE, an organization currently adopting this approach to reintegration, provides opportunities for street girls who work as commercial sex workers to build relationships with peers, their biological or extended family and the community through various activities. For the drop in centers at this program, the process of re-conceptualizing identity is conducted through peer-to-peer counseling referred to as *lib le lib* (heart to heart), individual counseling, and the demonstration of long term commitment to behavior change. Through our interviews with FSCE staff and counselors, focus group sessions with the youth, and observations, we did see demonstrations of a shift in identity from girls who had just entered the program as commercial sex workers to the girls who were near completion of the program and went to school, had a job, and felt more a part of a positive environment.

PROMOTING PSYCHOSOCIAL CHILD WELL-BEING: KEY PROGRAM COMPONENTS

With the Child Well-Being Model in an African Context (Figure 4) in mind, the team further investigated different types of programs that particularly address the various aforementioned psychosocial aspects of street youth development. From a broad-based review of street children's programs in Africa, and particularly through recurrent themes we identified in our discussions with NGO practitioners, the following five key factors were identified as components most likely to contribute to psychosocial well-being. While of course there exist several other important components of street children's programs, the following five key program factors were those which came up most frequently in our discussions and research as essential components of successful street children's programs, and were affirmed by street children's experts in Ethiopia.

These key program components address psychosocial development not only in the child himself/herself, but also the family and the community. Ultimately, they focus on transforming both the attitudes of the community towards street children, and the perception of the street child's identity and sense of belonging in relation to the family and community. More specifically, these key program components highlight the importance of relationships as protective factors in youths' psychosocial development by the following means:

- (1) transforming the attitudes of the community towards street children through their active participation in programming,
- (2) enhancing youths' sense of their ability to contribute to the community by providing opportunities for their empowerment as powerful agents of change,
- (3) promoting the successful reintegration of youth into families and communities by increasing their ability to contribute economically and intellectually,
- (4) providing important accountability networks through orientation to the spiritual beliefs and religious groups of the community,
- (5) encouraging communication, reconciliation and forgiveness through counseling with their peers, families and communities.

This section will further discuss these key program components, their importance in psychosocial child well-being, as well as supporting examples from Africa. The examples identified below each key program component highlight the diversity with which these program components can be implemented in different African contexts.

Table 1: Key Program Components Which Contribute to Psychosocial Development

KEY PROGRAM COMPONENT	WELL-BEING MODEL COMPONENT	INFLUENCE ON PSYCHOSOCIAL DEVELOPMENT
(1) Community participation in all aspects of street children's programming	Social	 Encourages community ownership and sustainability Promotes community responsibility in reintegration of street youth Helps to transform the attitude of community members towards street youth
(2) Youth Participation and Empowerment	Social Emotional	-Promotes positive use of talents and skills for sustainable solutions -Builds confidence and leadership-skills for youth -Contributes to youth's sense of their ability to contribute positively to society
(3) Economic incentives and skill development	Economic Cognitive Emotional Social	-Builds assets for youth both financially and mentally in order to better integrate them into communities -Builds self-confidence in youth
(4) Spiritual development	Spiritual Emotional Social	-Promotes culturally-appropriate value formation and positive behavior change -Provides a source of hope, inspiration, and positive self-identity -Encourages a sense of belonging
(5) Counseling for both families and children	Emotional Social	-Promotes successful reunification and reintegration through dialogue and reconciliation -Strengthens the family as the fabric of African society

Key Program Component #1:

Community Participation in all aspects of street children's programming

The first key program component particularly addresses the social ellipse in the Child Well-Being Model. According to Goal Ethiopia, and reaffirmed by other children's experts at an Information Sharing Session held on March 18, 2005 in Addis Ababa, Ethiopia, "Community participation is the most important aspect of programming. No single organization can change the problem alone." In addition to different organizations' collaboration, holistic community participation in street children's issues must include actors such as government, police, employers, schools, families, and of course, the youth themselves.

Street children's programs ultimately build upon what a community has (i.e. resources and assets) and knows (i.e. cultural background and knowledge base). Indeed, the most sustainable and culturally appropriate solutions originate from community members themselves. Community participation is also of great value in promoting community responsibility and cohesiveness which is important in providing a healthy atmosphere for reintegration of street youth. Beyond simply asking for community "consultation" or "buy-in" for program implementation, community participation is vital at all steps of street children's programming, including: awareness raising, needs assessment, program development, program implementation, monitoring and evaluation. One example of a vulnerable youth program in which community participation begins at the vital first steps of awareness raising is the Separated and Abandoned Children Program in the Democratic Republic of Congo, a Save the Children UK program. In this program, sensitization of the plight of street children is conducted at many levels in the community, including sensitization of local authorities, parents, religious leaders, and the wider community through street performances.⁵² At *Child Aid Ethiopia* (CHAD-ET), operating in Addis Ababa, extensive research from an internal perspective is first conducted to assess the actual and felt community needs of targeted street youth.

Street children's programs ultimately build upon what a community has and knows. Indeed, the most sustainable and culturally-appropriate solutions originate from the communities themselves.

The importance of community participation is corroborated by the International Rescue Committee's (IRC) Principles upon which their reunification and reintegration programs in Rwanda are based. Some of these principles include:

- "Children are best cared for in community and family environments," and
- "Communities are ultimately responsible for the welfare of their children."⁵³

⁵¹ Statement made by the representative from Goal Ethiopia at an Information Sharing session on 18 March 2005.

⁵² Save the Children UK, "Separated and Abandoned Children Program in the DRC, Quarterly Report", *USAID*, October - December 2004, 5.

⁵³ John Williamson et al., "A Participatory Review of the Reunification, Reintegration, and Youth Development Program of the IRC in Rwanda," Washington D.C.: *USAID*, 2001, 10-11.

Traditionally in African societies, it was a point of honor for family, community, and society to take collective responsibility for children when one or both of their parents died. However, in light of the hardships of poverty and civil war, in some cases families are intentionally abandoning their children and considering institutions a better place for them.⁵⁴ Community participation is therefore imperative in order for communities to be the basis of African societies. It also is a powerful means by which a community's perceptions towards street children may be transformed in a positive manner. Further, DCOF supports the development hypothesis that stronger structures in communities specifically designed to address the needs of vulnerable children improve the protection, status, and well-being of children.⁵⁵

Examples:

- Jerusalem Children and Community Development Association Jeccdo (Ethiopia): Since 1995, a community-based child care program has been used to promote reintegration of street youth back into families. Movement away from institutionalized care and an increased focus on community-based child care promotion is reported to be the trend throughout the country. They use an integrated approach in which community members are trained to participate in several aspects of reintegration, such as identification of suitable foster homes, setting priorities, monitoring of reunified children, and program implementation.
- Forum on Street Children Ethiopia (FSCE): Traditional coffee ceremonies are used as forums to bring communities together for discussion on issues such as child-rearing. Child protection is encouraged through the active involvement of police, courts, and other government officials. The FSCE also aims to sensitize local employers about the plight of street girls.
- Initiative Privée et Communautaire de la Lutte Contre le VIH/SIDA (Alliance, Burkina Faso)—The main orphans and vulnerable children's (OVC) strategy is community mobilization and youth to youth response for prevention, care, support, and improving social environment. They use an effective 4-step approach to community mobilization:

 1) awareness campaign, 2) situation analysis, 3) community planning, 4) community participation. 56
- Abandonment and Separation of Children Program in the DRC (Save UK): Community Child Protection Committees provide a valuable "network" for members of a specific community to discuss child protection concerns and identify steps towards taking actions and finding solutions. Each child protection committee varies in size between 15-40 members, and includes representatives from local authorities, elders, religious organizations, local NGOs, service providers, parents, and at least two children. There have been many promising results of these child protection committees, including the Bunyakiri committee's involvement in the pacification of two armed groups. Through concerted community action and mediation, another committee negotiated the release and improvement of conditions for children being exploited by an orphanage.⁵⁷

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⁵⁴ Williamson et al., (2001), 15.

⁵⁵ Lynne Cripe, et al., "Abandonment and Separation of Children in the Democratic Republic of Congo," Washington, D.C.: *USAID*, 2002, 28.

⁵⁶ John Williamson and Brigette De Lay, "Assessment of the Alliance IPC OVC Project in Burkina Faso," Washington, D.C.: *USAID*, 2002, 8.

⁵⁷ Cripe, et al., 21.

<u>Key Program Component #2</u>: Youth Participation and Empowerment

While community participation in programming ultimately should always integrate youth participation, we have chosen to accentuate children's participation and empowerment as an indispensable key component in the promotion of psychosocial development because this is often overlooked. Youth participation not only strengthens the social development of youth, but it provides powerful opportunities for the youths' emotional development. The power of children is often understood in terms of their civil and political participation.⁵⁸ Children's participation can therefore be considered both as a powerful program approach, as well as an indicator of success.

Participation can have significant psychosocial implications for youth, because it gives them a valuable voice and a feeling of control over their life situations. According to Jason Hart, "Negative effects of conflict upon the provision of care by families appear to be countered through participatory projects." Additionally, participation is key in meeting the actual needs of target populations (youth), and in creating sustainable solutions. It is important to encourage youth to identify the positive traits they already possess, and help them in channeling their skills in a positive manner. Organizations such as FSCE and Chad-ET, strategically use former street youth as role models and teachers for current street youth, and give youth choices and responsibility from the beginning. The familiar adage that the future is in the hands of the children is a powerful statement considering that children's involvement in societal and peace-building issues may be pivotal in ending the cycles of conflict and poverty.

"A child's ability to participate is either constrained or encouraged by the framework of interpersonal relationships and socio-economic and cultural infrastructures linking an individual child to his/her environment."

-Marie Wernham

Beyond the many personal benefits of self-esteem and confidence-building associated with children's participation, there is also a key component of community allowance and encouragement for the participation of their youth. According Marie Wernham, "[a] child's ability to participate is either constrained or encouraged by the framework of interpersonal relationships and socio-economic and cultural infrastructures linking an individual child to his/her environment." It is furthermore vital that the environment is an enabling and empowering one for youth. This potentially

⁵⁹ Jason Hart, "Children's Participation in Humanitarian Action: Learning from Zones of Armed Conflict," Oxford: *Refugee Studies Center*, 2004, 1.

⁵⁸ CRC, Articles 12-15.

⁶⁰ Marie Wernham, "Participation, Power, and Poverty," Consortium for Street Children, *Interights Bulletin*, Vol. 14, No. 2., 2003, 1.

contributes to the social well-being of a community because participation promotes supportive relationships among peers and a sense of solidarity. Additionally, young people's efforts as community members reinforce their social and cultural identity.

Examples:

- Ethiopian Evangelical Church Mekkonen Yesus (Addis Ababa, Ethiopia): Children in hostels and day care centers are organized into committees (spiritual, education, sports, purchasing, etc.) to allow them to make personal decisions on their daily activities. Youth peers are used to advise problem children. Child empowerment is central to activities such as skill development and encouragement to continue school through university.
- *IRC- Reunification, Reintegration, and Youth Development Program* (Rwanda):⁶¹ A strategic Participatory Youth Development component of the IRC Program is sponsored by the IRC and the Ministry of Youth, Culture, and Sports. It was created in response to an acknowledgement by the Rwandan government that it must actively encourage youth to engage in national efforts to reconstruct the country and that young people must be able to set a reconciliatory tone of nondiscrimination and inclusion. Members of organized youth groups, with the assistance of the IRC, manage activities in four areas: sports and culture, economic opportunities, conflict mediation, HIV/AIDS

(Note: For a helpful framework that can be used to assess levels of child participation in each step of the traditional project cycle, see Appendix D.)

<u>Key Program Component #3:</u> *Economic Incentives and Skills Development*

Poverty is often argued to be the major underlying cause of youth on the streets. In light of this, supplying low-income families with economic incentives, such as micro-enterprise lending, is an important factor, which gives poor families more of an incentive to welcome their children back into families. Skills development is also an important component of many street youth programs, and can take a variety of forms, such as courses in weaving, cooking, woodwork, and metalwork. It is also important to provide youth with education of broad-based applicability in order to build upon their potential for contribution into society. In line with this, Feinberg and Williamson in the WAYS (War Affect Youth Support) Project Assessment in Liberia, give the recommendations that training of vulnerable youth should give more emphasis to literacy, numeracy, life skills (including HIV prevention) and other skills of broad applicability in order to promote successful reunification and reintegration of marginalized youth. 62

This Key Program Component particularly highlights the economic, cognitive, emotional, and social ellipses in the well-being model. Beyond the more obvious financial and intellectual benefits associated with economic incentives and skills development, income-related projects

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⁶¹ Williamson, et al., (2001), 11.

⁶² Feinberg, Lloyd and John Williamson, "Liberia's WAYS Project Assessment," USAID, 1999, iv.

have important psychosocial benefits for street youth. It ultimately contributes to a youth's sense of self-esteem and self-worth. It also may improve community members' response to them and help street youth to develop social networks. Additionally, it builds upon the important assertion that street children have great potential to be active contributors to society.

Examples:

- Jeccdo (Ethiopia): Reintegrated children are given chickens, sheep, pigs, etc. to help generate income for their families. Home gardens are also encouraged for income generation, nutrition, and environmentalism. According to Jeccdo's Director, Ato Mulugeta, the perception that youth do not drain family resources has been reported to decrease levels of child abuse.⁶³
- The Undugu Society (Kenya): Street youth are linked with informal sector artisans, by first asking them to identify an artisan in their neighborhood with whom they would like to work. Undugu then negotiates an apprenticeship with a suitable artisan, and also teaches the youth small business management skills. Additionally, a business Advisory Unit and Industrial Design department offers loans and helps participants improve their marketing skills and product design. Undugu also considers the community component of economic development. They provide alternative primary school education for low-income families, primary and secondary school scholarships, urban agriculture projects, community health programs, slum upgrading, trade skills development, and job placement.⁶⁴

Key Program Component #4:Spiritual Development

Spirituality plays an important role in most African cultures and contributes to the holistic development of youth. Children who face difficult obstacles are often in need of hope and security beyond their current circumstances. Many children who lack comfort, inspiration, or a sense of belonging find this in a belief in God or another higher being. Additionally, in many societies, activities and social networks are fashioned around church groups, congregations, or other religious or spiritual activities. In the Western world, the component of spiritual development is often undervalued, while in many African societies, it is most frequently an assumed aspect of one's life. Particularly in Africa, where spirituality is central to most cultures, it is essential in addressing psychosocial development and must be considered in the development of effective, culturally specific interventions.

Spirituality informs a wide variety of important psychosocial phenomena. These include overall well-being, positive life-attitude, satisfaction and hope for the future, altruism and service, access

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⁶³ Interview, Ato Mulugeta, Jeccdo, 8 March 2005.

⁶⁴ Elaina Volpi, "Street Children: Promising Practices and Approaches," Washington, D.C.: World Bank Institute, 2002, 19.

⁶⁵ Berry et al., 91.

to internal and external developmental resources that contribute to risk reduction and well being, resiliency and coping, physical health, and positive identity formation. According to Ato Belachew of Ethiopian Evangelical Church - *Mekonnen Yesus*, an Evangelical church group which reaches out to over 3,000 vulnerable youth in Ethiopia, "Meeting their spiritual needs is key to meeting them and their other needs because it plays into the after life – their ability to perceive of things beyond this life. Providing them with a way to explore spirituality allows them to find meaning in life and recognition of the temporary nature of their earthly experiences. They are often intrigued and want to know more." In communities with some kind of spiritual belief that are facing desperate situations, involvement of faith-based organizations can be critical. Households with vulnerable children, often value the combination of practical, emotional, and spiritual support.

"Providing them (street youth)
with a way to explore
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often intrigued and want to
know more."

- Ato Belachew, Ethiopian Evangelical Church

The emotional and relational support provided by faith-based organizations is immense. At the St. Lawrence Home of Hope for Street Children in Zambia, rather than specialized technical skills, "demonstrating love and friendship for street children is the key to working successfully with them.",70 Faith-based organizations which often outreaches conduct and sponsor programs specifically for underprivileged outcast or individuals in society, provide a valuable social vulnerable network for youth disconnected from other community members. In

Jeccdo, for example, priests or deacons are assigned to each child to help them in the reintegration process.⁷¹ In examples of ostracism from their communities due to a street child's involvement as a child soldier or a prostitute, churches or other faith-based groups can serve as meaningful bridges between a street child and the community.⁷²

Additionally, faith-based organizations in developing countries often have a high sense of social responsibility. Within the Christian church, there is a trend towards "liberation theology", i.e. the idea that people have options to escape poverty, and an emphasis on action for change. ⁷³ In this way, liberation theology is both a means of understanding poverty, and a means of challenging it. Furthermore, faith-based organizations are often very active in social affairs. According to a statement borne out by independent observers of street children's projects in

⁷⁰ Samuel Hickey, "Exploring the Catholic Church's response to urban poor: An agenda for change." London: *Street Child Africa*, 2000, 60.

⁶⁶ Peter L. Benson, Eugene C. Roehlkepartan, Stacey P. Rude, "Spiritual Development in Childhood and Adolescence: Toward a Field of Inquiry," *Applied Developmental Science*. Vol.7, No.3 (2003): 205-213

⁶⁷ Interview, Ato Belachew, 9 March 2005.

⁶⁸ Tearfund, "Reaching Out?" *Tearfund HIV-AIDS briefing paper*, 2004.

⁶⁹ Ibid

⁷¹ Interview, Ato Mulugeta, Jeccdo, 8 March 2005.

 ⁷² Citizens for Global Solutions Panel Discussion, Waruzi, Bukeni. Ajedi-Ka, Washington, DC: Speaker's Event at the Woodrow International Center for Scholars, 13 March 2005.
 ⁷³ Hickey. 42.

Lusaka, Zambia, "Arguably, Catholic related NGOs, congregations, and parishes are making the most impressive responses to the city of any agency."⁷⁴

Due to the fact that our field research was in a predominantly Christian area in Ethiopia, our examples draw more upon the involvement of Christian organizations in street children's programming. However, we do not discount the fact that several Muslim groups or other religious societies may also be heavily involved in outreach to street youth, but often do not have a defined separate program apart from the local mosque. Additionally, we have given emphasis in our research to organized, monotheistic religions rather than animistic religions also commonly practiced throughout Africa. This was due to the information available and not because any less importance is attributed to them.

Examples:

- Welfare for Street Mothers and Children (Addis Ababa, Ethiopia): While not an explicitly religious organization, counseling for youth is conducted by a theologian who views hope in God as the key to children's transformation. Fear of God is also identified as effective in disciplining youth and promoting responsibility in their parents. Awareness of spirituality acts as a form of accountability to keep parents responsible to their children and children responsible to their parents.
- Ethiopian Muslims Relief and Development Association (Addis Ababa, Ethiopia): This organization was founded on the belief that development is not complete without addressing spiritual development. Youth are subsequently offered optional Koranic teachings, but are not discouraged to attend Christian teaching if they are Christian. Humanitarian initiatives are also instrumental in helping society to dispel incorrect ideas about Islam which often marginalize these populations.

Key Program Component #5:Counseling for youth and families

While counseling is sometimes an assumed component of programs addressing psychological well-being, counseling for both families and children is necessary for addressing deeper psychosocial issues, and is an important step preceding reunification and reintegration of street youth. In this way, counseling particularly addresses the emotional and social ellipses of the child well-being model. It allows for open discussion of concerns, and reconciliation as necessary. Counseling sessions may include both individual and group counseling on a wide variety of issues such as relationships, health, career development, financial responsibility, and effective parenting. They may include a professional psychologist, or be more informal peer-to-peer counseling. In our fieldwork in Ethiopia, the role of the family was continually stressed in counseling sessions. An emphasis was placed on allowing parents and children to recognize the vital relationship in the biological family—an important step in re-establishing the family as the fabric of African society. While counseling can have a number of focuses, for the purposes of

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⁷⁴ Hickey, 63.

our research, we will focus most closely on the important role of counseling in promoting communication, reconciliation, and communication between street youth and their family members.

Counseling, of course, can vary greatly in both technique and quality. It can take the form of formal counseling with professional psychologists as is most common in Western contexts, an

informal one-on-one meeting between a program staff and a young person, or informative peer group discussions. For example, FSCE implemented an intensive half hour per day counseling program for a period of fifteen days in response to a court order issued for one young woman previously accused of witchcraft and terrorizing the community. This counseling, which was given by a trained psychologist, was pivotal in her

"Now I have nothing.
In the future
all I want is love."
- Commercial Sex Worker, age
15, Ethiopia

personal transformation. Her behavior and attitudes towards the community dramatically changed as a result of the relationships she built with the psychologist and the opportunity she had to express her emotions and tell her story. As a result, she held a traditional Ethiopian coffee ceremony to ask for and receive forgiveness from the members of the community she had most directly victimized.⁷⁵ This would be contrasted with counseling implemented by social workers of the Ethiopian Orthodox Church, for which more than two hundred youth may be assigned a single counselor.⁷⁶ While counseling appears to be an essential key program component in successful street children's programs, it would be advisable for implementers to engage in a consensus-building process for the standardization of quality counseling programs.⁷⁷

Examples:

- Organization for the Prevention, Rehabilitation, and Integration of Female Street Children OPRIFS (Addis Ababa, Ethiopia): Prior to reunification, youth and parents are counseled to recognize the biological family as the most important relationship in society. Through individual and group counseling, as well as non-conventional teaching techniques such as drama, issues such as morality and self-confidence are addressed.
- Akmeni-PACT (Lubumbashi, DR Congo): In order to provide psychosocial support, Nkambos (elders) are trained by PACT to play the role traditionally played by village elders. Nkambos make routine visits to assigned households to assist families to find solutions to internal conflicts and other problems. Reunification is greatly strengthened through this creative and culturally appropriate approach. 78
- *FSCE* (Ethiopia): Counseling can also take the form of group counseling. With the use of coffee ceremonies, youth at FSCE have *lib* le *lib* ("heart to heart"), which are informal peer counseling sessions that allow young people to share their stories and build trust and relationships with each other.

Working on the premise that psychosocial well-being is promoted through access to relationships and the perception of belonging to a social group, organizations working with street children have the important opportunity to significantly enhance the psychosocial well being of street

⁷⁵ Interview, Ato Belete, FSCE, 12 March 2005.

⁷⁶ Interview, Ato Lilay, Ethiopian Orthodox Church, 10 March 2005.

⁷⁷ Interview, Ato Alemu, CHAD-ET, 18 March 2005.

⁷⁸ PACT, "Akmeni Program, Quarterly Report," Lubumbashi: USAID, October-December 2005, 3.

children through the promotion of relationships and the enhancement of their perception of belonging to the community and culture. In view of the aforementioned program components, we continue in our assertion that relationships are the key factor in promoting psychosocial well-being of street youth. However, a vital identity shift must occur whereby a child is able to perceive of himself within a community and accept others' validation of his identity within that context. Consequently, the ultimate goal of street children programming should be the reintegration of the child into the community through the formation of relationships in as many social domains as possible—including the familial, communal, economic, and spiritual domains—so as to facilitate the child's ability to successfully shift their identity away from the street and towards envisioning themselves as a productive member of society.

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⁷⁹ Interview, Dr. Mike Wessells, CCF, 11 April 2005.

MEASURING PSYCHOSOCIAL WELL-BEING

The five key program components of street children interventions appear to be some of the most promising mechanisms by which practitioners can foster the psychosocial well-being of street youth. Conceptually, reintegration of youth into the society through relationship building in various social domains helps to minimize perceptions of social exclusion, and thereby, promote psychosocial well-being. However, while this argument is substantiated by the theory underlying the psychosocial model of child well-being, more specific, measurable data is needed to support this assertion. Programs that aim to directly impact the psychosocial well-being of street children must be supported by quantitative and qualitative methods that measure their success in reintegrating children into the society through the establishment of key relationships.

This section provides a rationale for institutionalizing monitoring and evaluation methodologies within psychosocial programming for street youth, giving particular attention to the formulation of outcome and impact indicators. The primary objective is to measure the observable behavior changes that result from the establishment of a secure relationship between a street youth and a trusted adult or peer in each of the key program areas discussed above. The behavioral indicators, adapted from the Ethiopian context, provide more tangible evidence of the attitudinal changes that are believed to take place as the psychosocial well-being of youth improves. Table 3 on page fifty provides examples of indicators that correspond directly to the five key program domains.

The Need for Indicators

Within the context of international development, it is recognized that the field of psychosocial assistance lacks standardization of evaluation procedures and has yet to develop a solid

As awareness of the psychosocial needs of street children increases, a demand for reliable and consistent information on program impact will follow. Monitoring and evaluation within the field of psychosocial assistance will therefore become imperative.

knowledge base upon which to apply evidence-based practices. This is due, in part, to the various limitations that make it difficult to collect reliable and accurate data on psychosocial development in youth. It is hard to prove causality between the program intervention and behavior change due to a lack of isolated treatment and control group measurement. In addition, it is recognized that attitudinal change is difficult to measure and usually occurs over a long period of time far beyond the scope of one project funding cycle. Consequently, it is generally felt that program personnel, resources and time can be better spent

collecting data on more easily measured program results—often at the activity or output level.

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⁸⁰ Mike Wessells and Kathleen Kostelny, "Assessing Afghan Children's Psychosocial Well-Being: A Multi-modal study of intervention outcomes." Edinburgh: *CCF*, *Oxford University and Queen Margaret's University College*, 2005, 2.

However, program evaluation of outcome and impact is essential to ensure that psychosocial interventions are not only culturally appropriate, but that they are actually helping and not harming their intended beneficiaries. As awareness of the psychosocial needs of street youth increases, a demand for reliable and consistent information on program impact will follow. Monitoring and evaluation of psychosocial programs will therefore become imperative. Indeed, institutionalizing monitoring and evaluation processes within these programs establishes a system of accountability while enhancing institutional learning and facilitating communication between all stakeholders. The ultimate goal, however, is to provide experiential evidence to inform practitioners in the field of psychosocial assistance on which programs achieve the intended goals, and subsequently, how to improve program performance to ensure a positive impact on the psychosocial well-being of youth.

Indicator Development

Broadly, indicators are defined as "measures to assist us in our monitoring of project implementation and in our evaluation of achievement of project objectives." They should be valid, reliable, relevant, sensitive, specific, cost-effective and timely in the context in which they are applied. Indicators are commonly categorized into four types, which compose inputs and outputs of monitoring and evaluation, as evidenced in Table 2.

Table 2: Indicator Types

Monitoring		Evaluation		
"Process Evaluation"		"Effectiveness Evaluation"		
Inputs	Outputs	Outcome	Impact	
		Short term and	Long term effects	
		intermediate effects		
Number of	Number of girls that	Number of girls able	Girls do not engage	
counseling sessions	attended individual	to speak freely	in prostitution	
held	counseling sessions	about their problems		
Number of focus	Number of girls	Number of girls	Girls reintegrate	
groups held.	attending focus	who have a secure	into society.	
	groups	attachment to a	-	
		caring adult.		

Adapted from UNICEF, "Guide to Monitoring and Evaluation of the National Response for Children Orphaned and made vulnerable by HIV/AIDS" 2005, p.19.

The table provides a breakdown of evaluation and indicator types and provides an example of the information that would be gathered for a counseling program. Process evaluations, concerned with monitoring program implementation, use input indicators to measure the resources,

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⁸¹ Miranda Armstrong, Jo Boyden, Galapatti, Hart, "Piloting Methods for the Evaluation of Psychosocial Programme Impact on Eastern Sri Lanka." Oxford University: *Refugee Studies Centre*, 2004, 11.

⁸² Dunan and Arnston, 41.

⁸³ UNICEF, 19

activities, financial support, materials, staff and training that go into a project, and output indicators to measure the immediate accomplishments of the project inputs. ⁸⁴ Effectiveness (or impact) evaluations on the other hand, are concerned with the outcome and impact of the project. Outcome indicators are used to identify what observable change in condition or behavior resulted following program implementation, whereas impact indicators refer to long-term outcomes and attempt to measure the difference in outcome if the program had never been instituted. ⁸⁵ In some cases these outcome and impact indicators are considered interchangeable, but for the purpose of this report, they are considered separately.

Psychosocial Outcome Indicator Creation

Indicators have been developed to reflect changes in both the individual and the community's behavioral and attitudinal changes that show a desire to reconnect and reestablish a relationship with the community. For the street youth population aged 12 to 18, direct reintegration with their family of origin may not be the priority, as many of these youth have experienced a degree of autonomy and self-sufficiency. As a result, the establishment of other significant relationships within the community can act as sufficient substitutes. The focus for organizations is, therefore, the adequate provision of resources and the facilitation of social interaction and relationships between street youth and sectors of society in such a way as to help the youth reconstruct their identity and self-image as an acceptable member of the community, and thereby, enhance their psychosocial well-being.

The indicators were developed for each of the key program components, and are illustrative examples of what outcome and impact indicators may look like if a program had these components. In addition, indicators were created to reflect changes in the individual and in the community as a result of the relationships fostered by the programs. The indicators were further broken down to address the behavioral and attitudinal changes that occur both within the individual and within the community as the relationship process takes effect. This was an attempt to integrate both qualitative and quantitative approaches and establish a more holistic approach to monitoring and evaluation.

Informal Indicators

While it is recognized that attitudinal change is difficult to monitor, especially in cultures where self-expression is not encouraged within group-based societies, we noted that many of the programs already used informal ways of monitoring the success of their programs. The team was able to gather information from one program psychologist from FSCE who described a variety of coping strategies specific to female sex workers in Ethiopia that he used to identify if a street youth was exhibiting psychosocial distress in trying to deal with a significant stressor in their lives. The strategies were described as occurring sequentially; however, further investigation should be conducted to determine the reliability of using these coping strategies to determine the degree of a youth's level of psychosocial distress. The coping strategies include:

⁸⁴ Duncan and Arnston, 36.

⁸⁵ Duncan and Arnston, 37.

- **Shock**: Often have very dry lips, cry frequently, stammer and find it difficult to speak. Or can be very angry, aggressive and shout a lot.
- **Denial**: Inability to accept the problem, or decision to pretend the situation is not happening. Often use projection to pretend it is not their problem.
- Loss of sleep, appetite: Think back on their problem and relive the whole situation, which causes more disruption.
- **Stress** Become physically and mentally weak and attention span shortens. Find it difficult to keep the train of a conversation and talk about all sorts of things.
- **Anxiety**: Fear of rejection by the community and from the society is strong as well as neglect from friends, classmates, teachers, or police etc. Fear of isolation is huge.
- **Intervention** leads to expression of emotions, development of a secure relationship and a sense of security

OR

• Loss of hope leads to high risk behaviors, addictions and eventually suicidal behavior.

Alternatively, program staff and counselors who were interviewed in Ethiopia made reference to several characteristics they used as indication that a youth had a high ability to absorb shock or was demonstrating a positive response to a psychosocial program intervention. These characteristics included:

- Free expression of feelings in non-violent ways
- Discussion of emotions either with an adult or in a safe space with peers
- Recognition that they are not alone
- Awareness of available resources, personnel, and programs that can help them
- Acceptance of encouragement
- Improvement of their self-image and changes in their attitudes towards themselves
- Willingness to accept advice

Cultural Appropriateness of Indicators

An interesting discussion that continued to emerge throughout the team's research was the issue of cultural appropriateness in creating and evaluating psychosocial interventions. The informal indicators discussed above should not be interpreted as universally applicable. Similarly, when creating formal indicators it is important to utilize cultural expectations of well-being as the foundation for measuring program success. Consequently, a discussion of the Ethiopian expectations of well-being precedes the presentation of the outcome indicators so as to provide the cultural context from which the indicators have been derived.

The team explored the spectrum of behaviors and attitudes that were considered to represent well-being in the Ethiopian culture through numerous in-depth interviews. The components of well-being were also reflected in a study, "Child Right Abuse and Neglect within the Family Environment in Addis Ababa" in 1998 available in the FSCE documentation center.

Characteristics of Well-being

Youth who demonstrated healthy or socially acceptable behaviors were described as those with strong relationships, were involved in religious activities, adhered to cultural values and attended school. School attendance was strongly promoted because of the belief that the school

environment cultivates diligence, competition, personal achievement, logical and critical thinking skills, purpose for life and self-reliance. In addition, youth who demonstrated well-being were concerned with their personal hygiene, avoided addictions and provided assistance to their parents. ⁸⁶ Healthy attitudes were described as respect, discipline, obedience and honesty.

Characteristics of Street Youth

Most street youth fall far outside these paradigms of healthy behaviors and attitudes. Within their own street culture, young people may well be functioning at high levels of cognition, working within a hierarchical system of leadership and prescribing their own values and regulations. However, from the perspective of the community, they are "living outside the norms and values of the society," and are therefore considered "antisocial and involved in illegal activities."

Through in-depth interviews in Ethiopia, it became apparent that street culture was perceived as frequently fostering a carelessness and aggression in which youth live without a longitudinal view of the future and they lack any respect for, or fear of authority. In addition, the street youth were described as often exhibiting high-risk behaviors, engaging in immoral activities, and insulting people to the point at which the community feels terrorized by them. The situation in Ethiopia was described as a reciprocal relationship in which the youth lose respect for the societal values, and the society loses respect for the youth who do not adhere to their guidelines. Consequently, the community does not trust street adolescents and they are perceived as having dangerous influences on the other children, including "pick-pocketing, holdups, beating weaker persons or small children and girls." While these findings were derived from the Ethiopian context, it should be possible to find similar spectrums of acceptable behaviors and attitudes that contribute to well-being in other African cultures.

Figure 5 below reflects the juxtaposition of the characteristics pertaining to 'well' youth and those pertaining to street youth. The figure portrays the behavioral and attitudinal changes that street-youth programs attempt to promote in order for street youth to gain acceptance and integration into the society.

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⁸⁶ Haile Gabriel Dagne, "A Study on Child Right Abuse and Neglect within the Family Environment in Addis Ababa." *Focus on Children at Risk and Swedish Save the Children*, 1998, 25.

⁸⁷ Interview, Ato. Mulugeta, Jeccdo, 8 March 2005.

⁸⁸ Interview, Ato. Amakelew, FSCE, 17 March 2005.

⁸⁹ Interview, Ato. Mulugeta, Jeccdo, 8 March 2005

⁹⁰ Dagne, 25.

Figure 5: Community Youth and Street Youth Behavioral and Attitudinal Characteristics

CHARACTERISTICS OF STREET YOUTH

Social rejection
Involved in illegal activities
Substance Abuse
Lack of personal hygiene
Lack of Respect
Avoidance of parents
Immediate gratification
High Risk Behaviors
Aggression
Isolation



CHARACTERISTICS OF WELL-BEING

Social relationships
Involved in religious activities
Avoid addictions
Personal hygiene
Respect
Assist parents
Purpose for life
Obedience
Discipline
Honesty
School attendance

Interestingly, the loss of societal acceptance, respect and protection that results from the perceptions of street youth described above was acknowledged as a cause of great anxiety to many street children in Ethiopia. In fact, "they fear rejection by the community, from the society and they fear neglect from their friends, classmates, teachers and the police." Their fear of isolation is one of, if not the most significant factor contributing to psychosocial distress amongst street youth. The fear of isolation is compounded in the Ethiopian context as "within the Ethiopian family based community structure, you always find people around you and you can't stay on your own long. Therefore, healthy social interactions are imperative."

While children's resiliency and coping strategies often result in the creation of street gangs with sophisticated functioning and loyalties, the youth still remain outside the context of the community and are therefore frequently excluded from family, housing, food, care, guidance, education, and protection against discrimination and exploitation. Consequently, program interventions target one or several of the behavioral arenas identified in an attempt to encourage street youth to shift their behavior, attitudes and identity to better represent those characteristics on the right hand side as illustrated in Figure 5.

Formal Indicator Creation

The formal indicators presented in this report attempt to measure program success in assisting youth to make behavioral and attitudinal changes that reflect higher levels of psychosocial well-being. These changes represent adaptations in street youth's identity formation and increased responsiveness to social reintegration as a result of their involvement in a long-term, committed relationship with a trusted adult or peer. In addition to the psychosocial benefits of receiving social support and attention through this relationship, youth who demonstrate more culturally

⁹¹ Interview, Ato Belete, FSCE, 12 March 2005.

⁹² Ibid.

⁹³ Interview, Ato Mulugeta, Jeccdo, 8 March 2005.

acceptable behaviors may experience a higher degree of psychosocial well-being as a result of feeling more accepted and able to identify with their society.

Ideally, indicators are developed for a specific program based on the stated goals and objectives of that program. However, the formal indicators presented reflect the communal desired outcomes of NGOs working with street youth in Ethiopia, which were determined through indepth interviews conducted by the team on the cultural expectations of youth in that society. They are intended to illustrate possible indicators to be used in the measurement of psychosocial well-being of street youth in Africa, and to challenge implementing agencies to consider incorporating measurement of psychosocial development in both the individual and the community into their monitoring and evaluation strategies. While they are not all-inclusive, these outcome indicators help to conceptualize the longer-term benefits of relationship building on the psychosocial well-being of street youth within each of the five key program components.

- Community participation indicators measure the existence of relationships with members of the community. The expectation is that this interaction will enhance the youth's perceived levels of social support, thereby improving their psychosocial well-being. Additionally, as relationships develop, levels of protection of street youth within the community should improve further reducing the youth's vulnerability.
- Youth empowerment and participation indicators measure the youth's perceptions of the future. Establishing a strong mentor relationship promotes youth empowerment and participation by providing a safe environment in which youth are encouraged to explore the assets and skills they possess and begin to conceptualize how they can be used in a positive way to affect their future trajectory. Consequently, an indicator that attempts to measure this change should measure whether a child is able to make a plan for the future and understand their ability to contribute to society. As the program takes effect and more adults are involved in relationships with street youth, it will become possible to measure the behavioral and attitudinal changes within the community.
- Outcome indicators of economic incentives and skill development programs can be designed to measure youth success in obtaining a job and confidence in their ability to work, as well as the community's perception of street youths' employability. However, these indicators must be developed within the specific cultural environment taking into consideration the state of the economy, job market and employment expectations of youth who are not receiving services.
- Spiritual development indicators can measure the results of relationships developed between youth and religious community members. As relationships within this context develop, the youth will receive instruction on the religious values the culture respects and upholds. Youth who can identify and begin to respect these values often find themselves more easily accepted by the society, and further along the spectrum towards the behaviors and attitudes that characterize a well child in that society.

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⁹⁴ For a more detailed guide to program specific indicator development, please refer to chapters 3, 4, and 5 of Joan Duncan and Laura Arntson's "Good Practices in Evaluating Psychosocial Programming."

• Outcome indicators of individual, family and group counseling specifically measure the role of counseling in promoting forgiveness and reconciliation amongst important people in the youth's lives. As youth are able to extend and receive forgiveness from the community their perceptions of isolation and rejection should decrease, thereby improving levels of psychosocial well-being.

The ultimate goal, therefore, of many of the child-focused organizations should be to facilitate relationship formation between street youth and members of society so as to "reintegrate the youth into the community." Establishing relationships between street youth and adults or peers in the various key social domains in society helps the youth and the community conceptualize street youth in a new way. The youth begin to identify with the society's values and change their behaviors accordingly, and the community gains greater understanding and acceptance of the challenges street youth face. Outcome indicators help measure these changes.

⁹⁵ Interview, Emebet, 10 March 2005.

Table 2: Outcome Indicators that Measure Psychosocial Well-being

Key Program Component	Individual		8 1		Community		
	Behavioral	Attitudinal	Behavioral	Attitudinal			
1. Youth empowerment and participation (vision for the future)	Percentage of youth who develop a plan to achieve their personal goals.	Percentage of youth who understand how their assets contribute to society.	Number of community members who actively involve youth in community activities	Number of community members who believe street youth can positively contribute to the society			
2. Community participation (awareness raising)	Percentage of youth with a positive adult or peer relationship	Percentage of youth who perceive high levels of social support	Number of community adults who are aware of the rights of the child and understand concepts of child development	Number of community adults who think exploitation of street youth, sexual or otherwise, is wrong			
3. Economic incentives / skills development (self esteem/ confidence)	Percentage of street youth employed six months after program end.	Percentage of youth confident in obtaining employment or continuing their education	Number of community members engaged in trade/skill mentoring programs with street youth.	Number of employers willing to employ street youth			
4. Spiritual development (social values)	Percentage of youth able to identify the religious values respected by the society	Percentage of youth respecting religious values	Number of religious community members engaged in religious values teaching programs for street youth	Number of religious community members with an improved opinion of street youth			
5. Counseling (family reintegration)	Percentage of youth who participate in a cultural ceremony as a means of reconciliation with family members	Percentage of street youth willing to integrate with their family of origin	Number of integrated families that remain united for at least one year	Number of families willing to integrate street youth			

Factors Affecting Outcomes

It is important to recognize that individual traits such as a youth's predisposition, temperament, physical health, social status, resiliency or coping mechanisms may affect the degree to which a child is interested in, takes advantage of, or responds to psychosocial programming, especially relationship formation. ⁹⁶ Consequently, the individuality of street youth should be taken into consideration when gathering information on indicators as the right dynamic between the street youth and the adult or peer with whom they are encouraged to establish a relationship is an important factor in program success. Within the street youth population there are numerous differences that must be accommodated including the different occupations of street youth and their subsequent exposure to exploitation or violence, and their different experiences based on age and gender.

Psychological and social mediating factors such as the age and gender of the youth, as well as the number of years the youth has been on the street, also affect youth responses. For example, a clear distinction was made in Addis Ababa between the commercial sex worker girls who had originated from urban settings as compared to those girls who entered the brothels having been transported from their rural homes. The urban girls were described as much more self-assured, aggressive and defiant while the rural girls, by contrast, were shy and unwilling to discuss personal or sexual matters. Program staff explained that it was often much easier for rural girls to excel in their programs and seek to return home, whereas the urban girls found it very difficult to break their habits and become convinced of the benefits of living off the street. 98

In meeting the individualized needs of youth, one of the key factors in promoting positive psychosocial development remains the presence of a secure attachment to a caregiver or the presence of a mentor, positive role model, or person in leadership. Consequently, the key impact indicator of any program that focuses on relationship building could be the percentage of youth who have established a key, long-term, supportive relationship with an adult or peer. Especially in situations were only one indicator can be used to quantify success in promoting psychosocial well-being, such as is required by USAID missions, the relationship indicator would be the most pertinent.

Impact Indicators

Impact indicators, in general, are more hypothetical in nature and require a longitudinal view of program outcomes. Often impact indicators are the same as outcome indicators because program staff generally intend for the positive change that occurred at the end of the program (outcome) to continue for a long period of time. Due to the limitations constraining the scope of this report, the team was inhibited from developing more in-depth impact indicators. Consequently, impact indicators have not been the focus of this study. However, some possible examples of impact indicators related to street children interventions in the key programmatic areas include:

⁹⁶ CIDA, 11.

⁹⁷ "Working with Children in Conflict: A Skill Building Workshop." Quebec: *Canadian International Development Agency (CIDA)*,11.

⁹⁸ Interview, Emebet, 10 March 2005.

⁹⁹ Ibid., 11.

- Percentage of youth on the street with a secure attachment to a trusted adult or peer.
- Number of modified government policies towards street children to afford street youth greater protection from exploitation,
- Percentage of street youth able to care and provide for families of their own within the traditional culture
- Percentage of children after over one year have not returned to work or live on the streets

Tools for Measuring Psychosocial Child Well-being

Outcome and impact indicators provide evidence of changes in individual and community behaviors and attitudes as a result of program implementation. However, practitioners need the appropriate tools to measure these changes. Measurement tools can be quantitative or qualitative. Quantitative tools, such as surveys, are designed to provide numerical statistics, whereas, qualitative tools, such as in-depth interviews and observations, perceive the less tangible changes such as attitudinal and emotional perceptions of participants. While efforts have been made to pilot various quantitative and qualitative methods in developing countries, a great deal of work is still required to adapt these techniques before the field can most appropriately assess psychosocial child well-being. This section highlights some examples of promising tools that could be used in evaluating street children's psychosocial well-being.

Quantitative Methods

Donor agencies usually require a numeric illustration of program success. Practitioners in the field working with vulnerable children understand how difficult quantifying subjective feelings, emotions and thoughts can be. For this reason, several of the indicators in Table 3 are easily quantifiable through the use of attendance records, self-reporting mechanisms and program files. These include statistics of the number of police trained in a child rights curriculum, the number of youth employed six months after program end, the number of community members engaged in trade skill mentoring of street youth, or the number of mothers and families receiving counseling.

However, several of the indicators attempt to measure changes in self-perceptions. There are many North American and European psychometric tools based in the field of psychology such as the Eyberg Child Behavior Inventory (Eyberg, 1999), Achenbach Child Behavior Checklist (Achenbach, 1991), Rosenberg's Self-Esteem Scale (Rosenberg, 1965), and Measures of Psychosocial Development (Hawley, 1988) that track psychosocial changes in a child. These are promising because they are already in use in the west, but they need to be adapted to the African and larger developing country context. A promising survey that DCOF has used in Zambia to evaluate emotional well-being in children is called the Survey of Emotional Well-being of Orphans and Vulnerable Children. Integrating approaches from the tools already mentioned, an adapted psychometric tool relevant to the indicators in Table 3 should include questions that address street youth perceptions of social support. For example, relevant tools could illicit the

¹⁰⁰ Interview, Dr. Mike Wessells, CCF, 11 April 2005.

¹⁰¹ USAID/Zambia, DCOF, SCOPE-OVC/Zambia and Family Health International: "Findings of the Orphans and Vulnerable Children Psychosocial Survey," Washington D.C.: *Displaced Children and Orphans Fund* (2003).

number of non-street friends a street youth reports to have, the scale of youth readiness to conduct a coffee ceremony as an act of reconciliation, expressions of optimism about future employment or ability to continue education and levels of community connection through religious activities.

Qualitative Methods

Rather than use psychometric and other survey-based tools, some practitioners have begun qualitatively assessing psychosocial child well-being. While raw data with many types of qualitative data collection techniques are in the form of descriptions and drawings, this type of data can be quantified if a scale is added for analysis. 102 Qualitative Data Collection techniques broadly include personal interviews (structured, semi-structured or unstructured), focus groups, observations and document review. Document review can include looking at a journal that a child keeps or assessing drawings youth create. This approach would be the most appropriate when attempting to gather data on changes in youth perceptions of empowerment and participation. Asking youth to draw or

Creative Assessment Tools

- Mobility Mapping
- Spider Diagrams
- Body Mapping
- Risk and Resource Maps
- Role Play/Drama
- Interpretive Drawing
- Writing poetry and lyrics
- Interactive Games

narrate their hopes and goals at different intervals enables program staff to monitor changes in the youth's perception of the future. In addition, asking youth to brainstorm their contributions to society and either draw their ideas or use drama to convey their thoughts, provides alternative, creative and more participatory information gathering mechanisms that can be easily observed and monitored by program staff.

Games and other activities such as dance choreography or lyrics and poetry writing can also be used to obtain qualitative information about children and their experiences. Role playing can be implemented to monitor the way youth behave towards police, parents and elders in the community and even to observe their ideas of conflict resolution in a variety of situations. Encouraging the youth to write poetry in praise of the most important people in their lives and perform them before the staff or other youth provides another approach to gathering information relevant to the indicators in Table 3. These methods are creatively being used in the field to evaluate changes in children, but their use is in its nascent stages. Researchers and practitioners are in the process of piloting creative qualitative data collection methods for various cultural contexts.

One such qualitative method the IRC has used with street children and other vulnerable children is Mobility Mapping, which is a drawing activity used to elicit information about children's environments before and after they were separated. The IRC used Mobility Mapping in Rwanda to help re-unite separated children with their families. Drawing activity where conducted with children to encourage them to draw images from their lives before they were

¹⁰² Duncan and Arntson, 44.

¹⁰³ Bridgett De Lay, "Mobility Mapping and Flow Diagrams: Tools for Family Tracing and Social Reintegration Work with Separated Children."

separated. This technique is used with children to facilitate drawing images of their environments before the traumatic event occurred. The drawing may therefore include the village they lived in and any lakes, rivers or other characteristics of their surroundings. The facilitator then discusses with the children what they have drawn and uses the landmarks to help them find their village and families. ¹⁰⁴

Mobility mapping can also be adapted for street youth where it can help researchers, program staff and youth understand what social networks children have and what alternatives for social relationships can be developed. Drawing allows children, especially illiterate children, to express themselves in a different way. Moreover, children see it as a fun activity rather than a researcher probing them about their lives. While in Ethiopia, our team conducted a drawing activity with adolescent female sex workers in a drop in center in Nazareth. The girls were asked to draw on one side of the paper, the way they see themselves in their daily lives, and on the other side of the paper, to draw how they would like to see themselves in the future. When presented with paper and markers, the youth were excited and really enjoyed the activity despite the fact that drawing is not a traditionally Ethiopian activity. Many expressed a desire to play professional soccer or to become a world gymnast. Older girls who had been at the center for a longer time had more realistic future goals such as having a house, a job and a family. Resource restrictions limit the applicability of this activity to local contexts and may require extra funding allocations.

Miranda Armstrong, Jo Boyden, Ananda Galappatti and Jason Hart of the Refugee Studies Centre piloted qualitative methods for evaluating psychosocial program impact in Eastern Sri Lanka. Some of the data collection techniques they used include Risk and Resource Maps, which are similar to mobility maps through which children draw the various risks and resources they perceive in their environment. Creating problem trees is another way to assess children's sources of anxiety. The Refugee Studies Centre research team also used Spider Diagrams that were used to generate data about children's social networks. Lastly, Armstrong et al. used Body Maps and a well-being exercise to evaluate children's well-being.

The body map activity aims to generate children's ideas about physical, psychological and emotional well and ill-being. Adolescents work in groups and have to identify parts of their bodies that feel bad and what causes those feelings. The well-being exercise, which was adapted from Jon Hubbard's Functioning Exercise, elicits the characteristics that children and/or adults associate with children's well-being at different stages of development and for different genders. Again, this exercise includes both drawing and discussions. ¹⁰⁶

A consistent theme throughout the implementation of these tools is the high degree of child participation that leads to self-exploration, self-discovery and ultimately a renewed sense of self-esteem. As young people are encouraged to express their emotions and explain their surroundings in a conducive environment, their own healing can begin. This can happen as a

 ¹⁰⁴ Bridgette De Lay, "Family Reunification, Alternative Care and Community Participation of Separated Children in Post-Conflict Rwanda", *Protecting Children and Adolescents During and After Conflict: Innovative Approaches and Practices*, Number 1, International Rescue Committee, 2003.
 ¹⁰⁵ De Lay. 33.

¹⁰⁶ Armstrong, et al., 22-47.

result of the child building trusting relationships with the counselor and gaining confidence in their ability to be heard and understood. Sufficient training in the psychosocial needs of children in a particular context along with adequate training in a variety of these measurement tools is necessary before adolescents are encouraged to open up. This is important to protect and support the agency of youth and their feelings of efficacy towards making an internal identity transformation. It is recommended that the indicators presented be piloted and tested using the tools discussed to further inform the literature and programming of organizations attempting to positively impact the psychosocial well-being of street youth.

OPTIONS FOR ACTION

This study has sought to present DCOF with informative insight into new conceptualizations of psychosocial child well-being that provides a foundation for understanding the key components of street children programs. These key components have been identified through our research, and illustrative indicators have been developed to serve practitioners in the monitoring and evaluation of program outcomes within the realm of psychosocial assistance. However, this report is simply a starting point from which to continue exploring the issue of psychosocial well-being of vulnerable children, and particularly to further develop tools and indicators that are culturally appropriate and accurate. Consequently, options for action have been developed to represent useful directions to further the field of psychosocial assistance. While DCOF may play a role in facilitating such progress, the options for action are directed towards the field at large.

Options for future research

- 1. Testing and modification of the child well-being model in other African contexts is necessary to advance the discussion on the conceptualization of a well child. As a result, indicators of psychosocial well-being will be more easily identifiable. While testing conceptual models may not be a reality for DCOF, it is a necessary step forward for the field.
- 2. Research is needed to confirm the significance of the key program components as contributors to, and determinants of, youth psychosocial well-being. This is essential to understand the impact of these programs on psychosocial well-being.
 - a. Ideally, a methodology using control group measurement to compare youth who receive the intervention, compared to those who do not, would provide a methodologically rigorous evaluation that includes strong outcome results to prove causality between the key program components and improvements in psychosocial well-being.
 - b. DCOF has a rich opportunity to play a significant role in the promotion of such research through the implementation of methodologies in existing in DCOF supported programs in Georgia, Azerbaijan, and Zambia.
- 3. Research that investigates street youth culture and identity formation within peer groups could greatly inform the hypothesis on identity formation and behavior change. This has the potential to progress research inquiry into the psychosocial protective factors of group identity that are directly related to the development of a sense of belonging.
- 4. There is a recognized need for strengthened monitoring and evaluation capacities for field staff. The transferal of knowledge and training skills to practitioners involved in impact assessments is essential.
 - a. DCOF may have a role to play in introducing a broad based approach to Monitoring and Evaluation across its funded programs. This approach could include encouraging the hiring of Monitoring and Evaluation staff or instituting

trainings for field staff relevant to psychosocial measurement and indicator utilization.

- 5. The work demonstrated in this report suggests that relationship building and asset focused programs should be encouraged with accompanying impact assessments. This hypothesis needs to be tested further to prove the connection between relationship formation and improved psychosocial well-being.
- 6. Finally, the findings of this report emphasize the integrated nature of psychosocial programming and encourage further exploration of how standard program interventions can be structured to incorporate relational development as a means of affecting psychosocial benefits for street youth. Consequently, it is advocated that practitioners and program architects envision the physical and psychosocial changes that are desired in the youth as a result of the program, and correspondingly design programs to incorporate opportunities for the promotion of psychosocial development and well-being within all aspects of programming.

DCOF is demonstrating exemplary leadership in the exploration of psychosocial impact in street youth programming. They play an important role in legitimizing and promoting an investigative and open-minded approach to these topics. It is a privilege to be able to present our findings and options for action. The hope is that they will advance the relevant knowledge base on psychosocial programming from which street youth and other vulnerable young people will reap the benefits.

CONCLUSION

Today, the African continent is filled with young people living and working on the streets because of push and pull factors such as poverty, conflict and a desire for independence. These large numbers of street youth are indicative of major tears in the very fabric of society that is supposed to protect them. While people often brand street adolescents as powerless victims who simply cause trouble, they often possess valuable skills by working and living through the harsh conditions of street life. These youth are able to survive and sometimes flourish on the streets because of the sense of belonging and identity they find in that environment. These affiliations may not always be the most positive, as in the case of gangs and brothels, but they do allow for a certain level of psychosocial well-being. Social psychologist Vygotsky believes that "[d]evelopment is a social process and it is through relationships that the child learns about the world and how it works" Consequently, depriving a child of social relationships results in the retardation of the development process.

As the field of international development considers ways to combat the significant problem of street youth in Africa, it is vital that young people's own agencies are mobilized, and that they are provided with the opportunities and the space to build positive social relationships. Furthermore, the overarching goal must be to facilitate a change in their identities and sense of belonging from the streets and back into communities. Our new psychosocial child well-being model, key program components and proposed psychosocial measurement tools and indicators support the claim that the development of social relationships is crucial in promoting psychosocial development of vulnerable youth. Finally, this research is not meant to be a conclusive work, but a continuation of the dialogue on psychosocial well-being. The end vision, to which we hope this research contributes, is an environment where vulnerable youth find their identities and sense of belonging in their community, and are positive contributors to it.

¹⁰⁷ James Garbarino and Kathleen Kostelny, "What Do We Need to Know To Understand Children in War and Community Violence?", In Roberta J. Apfel and Bennett Simon (eds.), *Minefields in the Heart*,(*Yale University Press, New Haven and London, 1996*,) 44.

¹⁰⁸ Ibid.

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APPENDIX A: ORGANIZATIONS INVOLVED IN FIELD WORK

- 1) Abebich Gobena Orphanage
- 2) Child Aid Ethiopia
- 3) Ethiopian Evangelical Church, Mekkonen Yesus
- 4) Ethiopian Muslim Relief and Development Association
- 5) Ethiopian Orthodox Church, Child and Family Center
- 6) Forum on Street Children Ethiopia (Addis Ababa and Nazareth programs)
- 7) GOAL- Ethiopia
- 8) Handicap International
- 9) Jerusalem Children and Community Development Organization
- 10) Love for Children
- 11) Organization for the Prevention, Rehabilitation and Integration of Female Street Children
- 12) Save the Children Sweden
- 13) Save the Children USA
- 14) USAID Ethiopia Mission
- 15) Welfare for Street Mothers and Children Organization

APPENDIX B: FIELD WORK ITINERARY

Date	Activities
Monday,	 Interview with local host-Forum on Street Children
7 March 2005	Ethiopia (FSCE)
(Addis Ababa)	
Tuesday,	 Interview with Jerusalem Children and Community
8 March 2005	Development Organization
(Addis Ababa)	 Document Review at the FSCE Documentation Center
Wednesday,	 Interview with Ethiopian Evangelical Church
9 March 2005	 Document Review at the FSCE Documentation Center
(Addis Ababa)	
Thursday,	 Interview with USAID/Ethiopia
10 March 2005	 Interview with Ethiopian Orthodox Church
(Addis Ababa)	 Interview with Child Aid Ethiopia (Chad-ET)
Friday,	 Visit and observe at main hospital and main city court that
11 March 2005	work with FSCE and street kids
(Nazareth)	 Observe FSCE Girls Club, an after-school preventive
	program, targeting at-risk youth
	 Focus Group interviews at FSCE Drop-In Center
	 Participate in coffee ceremony with street youth and a
	community that FSCE has a relationship.
Saturday,	 Field visit to Nazareth
12 March 2005	 Focus Group interviews at FSCE Drop-In Center
(Nazareth)	 Focus Group interviews with youth at Girls Club
	 Observations of FSCE programs
Monday,	 Focus groups interviews and observations at Ethiopian
14 March 2005	Evangelical Church day care program
(Addis Ababa)	 Interview with Welfare for Mothers and Street Children
	 House visits to sponsored families of Ethiopian Orthodox
	Church
	 Focus Group interviews at FSCE Safe Home
Tuesday,	Interview with OPRIFS
15 March 2005	 Interview with program staff at Chad-ET
(Addis Ababa)	 Focus Group interviews with youth at Chad-ET Drop-in
	Center
Wednesday,	 Observations at Abebech Gobena Orphanage
16 March 2005	 Interview with Abebech Gobena Orphanage
(Addis Ababa)	 Focus Group interviews at FSCE Drop-in Center
Thursday,	 Meeting with Ethiopian Muslims Relief and Development
17 March 2005	Association
(Addis Ababa)	 House visits to youth leaders of Chad-ET
Friday,	 Information-Sharing Session with Child-Focused
18 March 2005	Agencies
(Addis Ababa)	

APPENDIX C: SAMPLE FIELD WORK INTERVIEW QUESTIONS

The team conducted semi-structured and unstructured interviews with local and international NGOs, community members and adolescents. The following are only sample guiding questions and were not always asked in the same exact manner, depending on the interviewer, interviewee, and the environment. Discussions often went beyond the questions posed.

A) Questions to Ask Non-governmental Organizations

- 1) How would you describe a mentally and physically healthy child? How is that child able to function or how does he/she behave that is different from a child that is not well? What is considered 'normal' and 'abnormal' in your culture?
- 2) In your opinion, what is essential for the well-being of a child?
- 3) What is the successful implementation of an intervention look like with children? How should a child benefit from your interventions?
- 4) What do you do to help children reintegrate back into society and reach the stage of development they should be in based on their age?
- 5) What ways do you measure your successes if you do so regularly at all?
- 6) Do you think that living on the streets damages children's abilities to build social networks and meaningful relationships? Is so, how?
- 7) What do you think can be done to help kids trust in social relationships?
- 8) Do you do anything to strengthen children's abilities to use parents, other adults or their peers to help them succeed in the world? Do you have a ways of measuring this and if so what is it?
- 9) How do you know that kids are benefiting from these relationships?

B) Questions to ask Community Groups

- 1) How would you describe a mentally and physically healthy child? How is that child able to function or how does he/she behave that is different from a child that is not well?
- 2) In your opinion, what is the #1 thing that is essential for the well-being of a child?
- 3) Does your group do anything to help children who live on the streets? Is so, what do you do?
- 4) Do you do different things for kids of different age groups?
- 5) What is your main goal with the kids that live on the streets? Do you want them to return to their homes? Do they need to go through certain ceremonies?
- 6) Are your activities based on your cultural values and/or religious beliefs? If so, what are your group's values and beliefs?
- 7) What do you think is the role of a male and female adolescent in your country?
- 8) How are you able to reach out to the kids and allow them to accept your assistance?
- 9) How can you prove that you have succeeded in what you wanted to do?
- 10) Do you think that living on the streets damages children's abilities to build social networks and meaningful relationships? Is so, how?
- 11) What do you think can be done to help kids trust in social relationships?
- 12) Do you do anything to strengthen children's abilities to use parents, other adults or their peers to help them succeed in the world? Do you have a ways of measuring this and if so what is it?
- 13) How do you know that kids are benefiting from these relationships?

C) Questions to Ask Adolescents

- 1) What is your name?
- 2) Where in Ethiopia are you from?
- 3) How old are you?
- 4) What do you like to do? What is your favorite activity?
- 5) Do you like school?
- 6) Do you currently go to school? Did you go to school before? Is you stopped, why did you stop?
- 7) How did you find this place to sleep?
- 8) Do you have contact with your family?
- 9) Do you want to go back home?
- 10) Why are you living on the streets?
- 11) Are you working? Is so, how did you find this job?
- 12) Who are your friends? Are they the same age as you?
- 13) Are you involved in any groups with other young people? Is so, how did you find them? Why did you get involved?
- 14) Do you like this program that you participate in? If so, why do you like it?
- 15) What makes you happy?
- 16) What makes you angry or sad?
- 17) What do you hope to do in the future?

APPENDIX D: LEVELS OF CHILDREN'S PARTICIPATIONS

Levels of Children's Participation

This framework can be used by NGO projects to assess levels of child participation in each step of the traditional project cycle. Level 1 involves little or no participation; level 2, some participation; and level 3, control by children. The level of children's participation possible and appropriate should be considered at each stage of a program.

Assessment

- 1. Children's situation is studied by adults (e.g., surveys, adult focus groups).
- 2. Children actively participate with adults in a joint assessment (e.g., village-wide PLA activities).
- 3. Children initiate and direct their own assessment exercise (e.g., child-to-child activities).

Planning

- 1. Children are absent during planning sessions (adult-led planning).
- 2. Children are actively consulted and their ideas incorporated into general village planning.
- 3. Children actively participate with adults in the planning process and their ideas influence decisions.
- 4. Children develop their own action plans.

Implementation

- 1. Children are told what to do by adults.
- 2. Children work jointly with adults to carry out village activities.
- 3. Children organize and manage their own activities.

Monitoring and Evaluation

- 1. Activities for children are monitored and evaluated by adults.
- 2. Children work with adults to develop criteria and may actively participate in monitoring and evaluation.
- 3. Children develop their own criteria, monitor the project, and evaluate community actions.

Source: Williamson, John and Brigette de Lay, Assessment of the Alliance/IPC OVC Project ir Burkina Faso, 2/2002, 33.

APPENDIX E:SAMPLE PSYCHOSOCIAL MEASUREMENT TOOLS

Rosenberg Self-Esteem Scale

INSTRUCTIONS: Please circle the appropriate number for each statement depending on whether you strongly agree, agree, disagree, or strongly disagree with it.

Strong Agree 1	gly 2	3	4	dis	ong agr 5			
1.	On the whole, I am satisfied	with myself.		1	2	3	4	5
2.	At times I think I am no goo	od at all.		1	2	3	4	5
3.	I feel that I have a number o	f good qualities.		1	2	3	4	5
4.	I am able to do things as well as most other people.				2	3	4	5
5.	I feel I do not have much to	be proud of.		1	2	3	4	5
6.	I certainly feel useless at tim	es.		1	2	3	4	5
7.	I feel that I'm a person of w	orth, at least on an equ	al plane with others.	1	2	3	4	5
8.	I wish I could have more res	pect for myself.		1	2	3	4	5
9.	All in all, I am inclined to fe	el that I am a failure.		1	2	3	4	5
10.	I take a positive attitude tow	ard myself.		1	2	3	4	5

Emotional Well-being Checklist: Questions and Findings

SECTION 6: EMOTIONAL WELL-BEING CHECKLIST

No.	Questions and Filters	Coding categories		Skip to
		Often	1	
Q601	How often would you say that you have scary dreams	Sometimes	2	
	or nightmares?	Never	3	
		DON'T KNOW	88	
		NO RESPONSE	99	
		Often	1	
Q602	How often would you say that you ever feel unhappy?	Sometimes	2	
Q002	How often would you say that you ever leef unhappy:	Never	3	
		DON'T KNOW	88	
		NO RESPONSE	99	
		Often	1	
Q603	How often would you say that you ever get into fights	Sometimes	2	
	with other children?	Never	3	
		DON'T KNOW	88	
		NO RESPONSE	99	
		Often	1	
Q604	How often would you say that you prefer to be alone,	Sometimes	2	
Q004		Never	3	
	instead of playing with other children?			
		DON'T KNOW	88	
		NO RESPONSE	99	
Q605	Who do you play with?			
		No one	0	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q606	How often would you say that you ever feel worried?	Often	1	If never,
		Sometimes	2	skip to
		Never	3	Q608
				4,000
		DON'T KNOW	88	
		NO RESPONSE	99	
		NO RESPONSE	33	
Q607	What kinds of things do you worry about?			
		Nothing	0	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q608	How often would you say that you feel frustrated	Often	1	
-,	easily when something does not go your way?	Sometimes	2	
	tatal, initial definiting december go your may:	Never	3	
		Hevel	5	
		DON'T KNOW	88	
		NO RESPONSE	99	
		NO RESPONSE	33	
		Office	1	
Ocoo	How often do you feel happy?	Often	1	If nove:
Q609	How often do you feel happy?	Sometimes	2	If never
Q609	How often do you feel happy?		-	skip to
Q609	How often do you feel happy?	Sometimes Never	2	
Q609	How often do you feel happy?	Sometimes	2	skip to

Q610	What makes you happy?	Na dhin -	0	
		Nothing		
		DON'T KNOW NO RESPONSE	88 99	
	How often would you say that you ever become very	Often	1	
Q611	angry?	Sometimes Never	2 3	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q612	How often would you say that you ever feel afraid of	Often	1	
	new situations?	Sometimes Never	2 3	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q613	How often would you say that you ever have trouble	Often	1	
	falling asleep?	Sometimes Never	2	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q614	How often would you say that you ever have difficulty	Often	1	
	making friends?	Sometimes Never	2	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q615	How often do you feel hopeful?	Often Sometimes	1 2	If never,
40.0	now often do you for noperal.	Never	3	skip to Q617
		DON'T KNOW NO RESPONSE	88 99	3011
Q616	What are live your feel have ful?	NO RESPONSE	33	
Qoto	What makes you feel hopeful?	Nothing	0	
		DON'T KNOW	88	
		NO RESPONSE	99	
Q617	How often would you say that you ever feel like running away from home?	Often Sometimes	1 2	
		Never	3	If Never, skip to
		DON'T KNOW NO RESPONSE	88 99	Q620
Q618	When did you start feeling like this?			
		BOUT WITH		
		DON'T KNOW NO RESPONSE	88 99	
Q619	How many times in the last 6 months have you actually run away from home?	NUMBER OF TIMES IN THE LAST 6 MONTHS		
		DON'T KNOW		
		NO RESPONSE	88 99	

	1			
Q620	How often would you say that you ever refuse eating at mealtimes?	Often Sometimes Never	1 2 3	
		DON'T KNOW NO RESPONSE	88 99	
Q621	What is something you can do tonight to have fun?	Nothing DON'T KNOW NO RESPONSE	0 88 99	
Q622	What is something that you are looking forward to doing in the next week?	Nothing DON'T KNOW NO RESPONSE	0 88 99	
Q623	Tell me something about your life that makes you happy?	Nothing DON'T KNOW NO RESPONSE	0 88 99	
Q624	Who do you admire <u>most</u> ? (Interviewer, please indicate name of person admired and profession)	DON'T KNOW NO RESPONSE	88 99	

Source: USAID/Zambia, DCOF, SCOPE-OVC/Zambia and Family Health International :"Findings of the Orphans and Vulnerable Children Psychosocial Survey," Washington D.C.: *Displaced Children and Orphans Fund* (January 2003), 116-118.

Child/Guardian relationship Questionnaire: Questions and Findings

3.4 Child/Guardian relationship

No.	Questions and Filters	Coding categories		Skip to
Q353	With whom do you spend most time? (RELATIONSHIP TO CHILD) (Only one response possible)	Guardian Guardian's husband Guardian's wife Guardian's relative Child's brothers Child's sisters Child's foster brother Child's foster sister Guardian's friend Child's friends No one, keep to myself Mother Calerdian's friend	Y N 1 2 a 1 2 b 1 2 c 1 2 d 1 2 e 1 2 f 1 2 g 1 2 i 1 2 j 1 2 k 1 2 l	
		DON'T KNOW NO RESPONSE	88 99	
Q354	What do you do when you have a problem?	Talk to somebody Cry Ignore it Pray Nothing (keep it to myself) Other DON'T KNOW NO RESPONSE	1 2 3 4 5	
Q355	Who is the <u>first person</u> you talk to when you have a problem or a worry? (ONLY ONE RESPONSE POSSIBLE) [Do not read out responses]	Guardian Guardian's husband Guardian's wife Guardian's relative Child's brothers Child's sisters Child's foster brother Child's foster sister Guardian's friend Child's friends No one, keep to myself Mother Father Other	1 2 f 1 2 g 1 2 h 1 2 i	If 'no one/ keep to my self' skip to Q357
Q356	If this person is not available to talk to, who is the <u>next person</u> you go to when you have a problem? (ONLY ONE RESPONSE POSSIBLE) [Do not read out responses]	Guardian Guardian's husband Guardian's wife Guardian's relative Child's brothers Child's sisters Child's foster brother Child's foster sister Guardian's friend Child's friends No one, keep to myself Mother Father Other	Y N 1 2 a 1 2 b 1 2 c 1 2 d 1 2 e 1 2 f 1 2 g 1 2 h 1 2 i 1 2 j 1 2 k 1 2 l 1 2 m	

Source: USAID/Zambia, DCOF, SCOPE-OVC/Zambia and Family Health International :"Findings of the Orphans and Vulnerable Children Psychosocial Survey," Washington D.C.: *Displaced Children and Orphans Fund* (January 2003), 109-110.