

STREET CHILDREN: HEALTH CHALLENGES AND THE WAY FORWARD

Ajibola, Clement A.

*Department of Human Kinetics and Health Education,
University of Calabar-Nigeria*

Nkere, Effioanwan Irene Duke

*Department of Nursing, University of Calabar
Teaching Hospital, Nigeria*

Abstract

The key root cause of most health problems in many of the developing countries around the world, including Nigeria has been identified to be poverty. In Nigeria, half of the total population of 210 million, is aged less than 18 years. 7 million of these populations are street children mainly due to poverty. The Street children are constantly being exposed to varying unhealthy conditions predisposing them to all kinds of health risks thereby affecting their health status in diverse ways. Against this background, this paper focuses on the concepts of street children and the root causes, the health challenges of the street children phenomenon in Nigeria and the way forward. The paper proposed that government, non-governmental organizations, individuals, teachers, church leaders and the entire community all have a role to play to alleviate the suffering, preventing health challenges and promoting the health of the street child. It therefore, recommends that the community health educators should exercise their roles in promoting the health of members of the community including the street children.

Keywords: *Street children, Health challenges, Way forward*

Introduction

The street children phenomenon is a worldwide social and environmental menace relating to the faulty upbringing, neglect and poor welfare of a certain group of children all around the world. While such children are called “street children” in some parts of the world, they are called “homeless children” in Western Europe. The street children phenomenon is a global challenge because no nation across the world is exempted from the challenge of childhood neglect and parental unreadiness or care difficulty that results in abandonment and outright lack of care that drives such children unto the street to find ways and means of fending for themselves (Abdi, Saeieh, Roozbeh & Yazdkhasti, 2017). The key root cause of

most health problems in many of the developing countries around the world, including Nigeria has been identified to be poverty. Due to the present economic and social situation, the family institution is in great difficulty coping with its function of child-rearing and upbringing of its young members.

Street children are a common eyesore in major cities across the world but the problem is more prominent and rampant in developing and underdeveloped nations. The “Street children” challenge has gradually become an index capable of being used to measure the level of development in nations across the globe. In other words, there are more “street children” in poor, underdeveloped and developing countries whereas, the sight and population of street children in developed countries are limited and under some relative control as a result of the citizens' welfare system of developed nations which at all times cater for and give attention and support to such children and their parents (Alawiye-Adams & Babatunde, 2013). Today the majority of scholars consider the phenomenon of the street child as an increasing social problem.

Life on the street is a different experience faced by children who lack parental care and guidance and are exposed to physical, environmental, psychological, emotional and social trauma from themselves and members of society (Myburgh, Moolla and Poggenpoel, 2015). The streets are unhealthy places with particularly high risks of infection and injury. Children are especially vulnerable, and the combination of malnutrition and other physical and psychological factors leads to stunted growth and longer-term effects on cognitive development (Stephen and Udisi, 2016).

The street children are threatened by the bitter experience of being separated from their families, losing hygiene, education and good health care. They encounter poverty and some other dangers that harm their health. Studying this phenomenon may prevent health and social problems from happening (Myburgh, Moolla & Poggenpoel, 2015). This paper reviews the concept of street children, what factors put children on the street, the various health challenges of the street child, how they survive and the way forward.

The Street Child

A street is a public thoroughfare in a built environment, a quintessential public space. Its functions include serving as the setting for movement, accessibility, congregation, also, leisure (Mayorga and Pia-Fontana, 2018). Portions may also be smoothed with asphalt, embedded with rails, or otherwise prepared to accommodate non-pedestrian traffic (Basu, 2017).

Who is a Street child?

The term “street children” was first used in 1951 by the United Nations Educational, Scientific and Cultural Organization (hereafter, UNESCO) to refer to vagrant children following world war the second (Adeboye, 2019). Street Children

are a global phenomenon. South America, Asia, and African countries are more affected by the problem than other nations (Kassaw, 2019). The number of children on the street doubled in the last ten years, however, its size, nature and causes vary from continent to continent, country to country, society to society and even from one child to the other depending on the level of economic development, cultural and traditional setting, institutional interventions, peace and the level of social harmony (Kuada, 2020).

According to Pietkiewicz-Pareek (2012), street children are children for whom the street more than their family has become their real home. United Nations defines the term as: “Any boy or girl --- for whom the street in the widest sense of the word --- has become his or her habitual abode and/or source of livelihood, and who is inadequately protected, supervised, or directed by responsible adults” (UN, 2012: p. 4). The United Nations Children’s Fund (UNICEF)(2012), has labelled street children as children in difficult circumstances, which represent a minority population and have been under-represented for too long in health research. When referring to street children, it is fundamental to establish the difference between children *on* and *of* the street. Both carry out their activities on the streets, selling articles, watching over cars, polishing shoes or begging. The two overlapping groups of street children are:

- i Children *of the street*, who are children having no contact with family and hardly ever return home. A ‘child-of-the-streets’ has no home but the streets.
- ii Children *on-the-street*, who often sleep at home but are based on the street during the day. A ‘child-on-the-street’, might return every night to sleep at home, but spends most days and some nights on the street because of poverty,

All these children possess the following common feature although they differ in some ways:

- i They spend most of their time in the streets.
- ii They are deprived of their basic rights, that is, education, hygiene, nutrition, and security.
- iii Due to their long presence in the street, they experience many health problems.

They are one of the most vulnerable and invisible groups of the whole population. In Nigeria, half of the total population of 210 million, is aged less than 18 years and those aged up to four years old are the largest age group. Children are minors and most decisions about them, including their health, are done for them. Every child deserves a healthy start in life, they all have the right to survive and thrive. Yet, all children especially street children, still face significant challenges in their environment, surviving past infancy and developing to their full potential.

Diseases, environmental hazards and the devastating effects of conflict, insecurity and demographic change also take a toll. Despite the progress by national and international governmental and non-governmental bodies in the provision of support, there are still too many children, sick and dying—mostly from causes that could have been prevented. In 2018, statistics revealed that 6.2 million children died globally, mostly from preventable causes and 99% of these deaths occur in developing countries (Salihu, 2018). More than one in four deaths of children is attributed to unhealthful environments and Street children are constantly being exposed to varying unhealthy conditions predisposing them to all kinds of health risks thereby affecting their health status in diverse ways.

The increasing problem of street children in Nigeria has become a serious concern over the years (Abegunde *et al.*, 2016). Their vulnerability on the streets places them at high risk of experiencing varying health problems (UNICEF, 2012). The developmental and health-related problems experienced during childhood affect street children more, in the present and are likely to follow them into adulthood (UNICEF, 2011).

The reasons why street children live on the street vary. However, some explanations hold for both developed and developing countries

Poverty: Most street children go on to the street to look for a better way of life. WHO (2015), has identified the following as some of the common reasons: To;

- i *Support their families by earning money.* Family poverty and the quest to improve the economic conditions of families have been documented as key reasons given by street children for their state of homelessness (Orme and Seipel 2012). They can earn money by begging, carrying or bearing load, car washing, drug trafficking, juggling, performing music, running errands, scavenging, sex work, shoe shining or vending (Adeyemi & Oluwaseun, 2012). In poverty, parents are unable to feed their children, much less pay for their education, some parents send their children out into the streets to beg or look for work, or parents abandon their children when faced with unemployment, they leave their homes in search of work in other regions or countries (Owobu *et al.*, 2020).
- ii *Shelter:* Some children leave home to create room or space for elders or other siblings and so avoid overcrowding. Others are on the streets because they do not have an alternative (Asante, 2016).
- iii *Rejection and abuse:* Many children leave home because of abuse and conflict with parents, physical or sexual abuse or neglect (e.g. an abandoned disabled child). Some children are forced to leave home by their families because the family does not approve of a child's behaviour or its consequences, e.g. pregnancy, homosexuality or substance use (Adeyemi & Oluwaseun, 2012)

- iv *Escape from work demands in the home*: sometimes the children are exposed to work more than their capabilities, therefore, resulting in child labour. This leads to the child feeling that he or she is a slave or a servant. Such children leave home in search of freedom from adult demands. Others leave home for freedom and escape from parental restrictions (Asante, 2015).

These factors vary over time, and economic poverty plays a major role, although other factors like family-related and situation-related factors are of equally high importance. (Alawiye-Adams and Babatunde, 2013). The existence of children on the street is directly and indirectly influenced by society, and this is also influenced by other global elements. These influences are reciprocal and are not only one way.

Population and distribution of “street children”

Estimating the statistical data of “street children” across the world, on continents or even within nations, has been an uphill task over the last two and a half decades. The Exact number of street children is difficult to quantify but globally, street children are estimated to be about a 120million (Abdullah *et al*, 2014), Salihu (2018), has estimated that they are about 552,830 in the US, Ghasemi (2019) estimates 136,000 in England. According to an estimate by the Consortium of Street Children, in Africa there are over 150,000 street children in Ethiopia; 30,000 in Accra, Ghana (Ogutu, 2020). Nigeria as a nation has an estimate of 7million “street children”, ranking the third position, among countries with the highest incidence of street children (Owobu *et al*, 2020). About 1.5 million children are street children in the Northeast region of Nigeria (Afolabi.2018),

An estimated 90% of the street children are exposed to different unhealthy practices like being addicted to inhalants such as shoe glue and paint thinner which suppresses feelings of hunger, cold, and loneliness in these children (Eshita, 2018).

Health Challenges of the Street Child

The health problems of street children have a greater burden than other poor children who are supervised by adults (Ngaku, 2015). According to WHO (2015), their problems could be grouped into three classes: social, physical, and psychological.

Social problems: Such as

- i *Poverty and illiteracy*. Street children are deficient in basic possessions to sustain a healthy living. The basic physiological needs, crucial for child development like food, water, and clothing are difficult commodities for the street child. Also, because of the costs of services, most street children cannot afford to go to school or access health care services (Ayaya and

Esamai, 2011). Even where these services are free, many children cannot afford to buy uniforms, shoes, books or transportation. They hardly have access to facilities that they require for hygiene and sanitation, such as toilets and a clean and safe water supply. They are therefore more vulnerable to health problems resulting from poor sanitation (WHO, 2015). Moreover, being undernourished from such a very young age causes bad side effects on their health like malnutrition which affects their immune system and as a result shorter life expectancy (Heijden, Gray, Stringer, Rahman, Akhter, Kalon, Dada & Biswas, 2019).

- ii *Discrimination and lack of accessible resources*: Street children tend to be excluded from participating in most of the activities and facilities of other children. When a community makes plans, it does not take into consideration the plight of the street children. Widely recognized as being acutely vulnerable and marginalized, these children routinely experience severe and persistent rights violations and health challenges (Cappa and Hereward, 2019). This is one reason why street children often do not have access to medical, educational, recreational and vocational resources. They face problems such as lack of vaccinations; poor health, illiteracy and they cannot acquire the skills needed for finding jobs (WHO, 2015).
- iii *Violent Environment*: The street is an unprotected environment and street children are exploited frequently. In some places, street children may even face the possibility of physical injuries or death from violence (Ashitey, 2015). Common sources of violence are the police, gangs, drug syndicates, those who operate commercial sex businesses, death squads, other street children, families and sexual partners (WHO, 2015).
- iv *Stigmatization*: Street children are perceived with negative fame. They are known to be uncontrollable and violent, miscreants who steal to survive, have substance use problems, have no morals, have lost all the ability to feel emotions such as love and that they turn into terrorists and revolutionaries. The public tends to be unsympathetic to the street children's plight (Ayaya and Esamai, 2011). Street children perceive themselves as discriminated against and hated, leaving behind children with injured personalities and self-worth. This negative attitude may be a result of society's inability to care for its people.

Physical problems

- i *Lack of adequate nutrition*: Even though some street children can usually get enough to eat through begging and eating leftover food, they do not have nutritious diets. This leads to malnutrition, anaemia and vitamin deficiencies (WHO, 2015).
- ii *Injuries*: Street children are prone to serious physical injury due to an accident such as falling, drowning, fire, or ingesting poison (Heijden et al.,

2019). Injuries may be caused intentionally (including self-inflicted while intoxicated or when depressed) and unintentionally, e.g. due to the use of tools that have been designed for adults. The rate of injuries is usually higher for males than for female street children (Ashitey, 2015).

- iii *Sexual and reproductive health problems:* Sexual and reproductive health problems affect both girls and boys. However, street girls are more vulnerable to physical and sexual abuse and exploitation. (Heijden et al., 2019). Streetlife creates fertile grounds for child prostitution, drug abuse, child trafficking, child labour and rape. Most of the street children, especially females, become victims of varying degrees of crime including rape and prostitution, with its attendant problems of sexually transmitted diseases, including HIV-AIDS, and unwanted pregnancy which leads to early parenthood, deepening the issue of poverty (Nyarko, 2018).
- iv *Common diseases:* Street children experience many common diseases such as tuberculosis, skin diseases, dental problems and parasitic diseases which can be prevented easily if these children have enough resources and their basic needs are met (WHO, 2015).

Psychological/mental problems

- i *Stressful Past:* Many situations and events that pushed these children onto the street in the first place (like natural disasters, man-made disasters, exploitation and conflicts) may have a lasting impact on their wellbeing (Ayaya and Esamai, 2011). The psychological consequences of street life include the immediate effects of isolation, fear, and an inability to trust. When children cannot trust that someone will be there to meet their needs, they tend to develop low self-esteem, anxiety, depression, and hopelessness (Ayaya & Esamai, 2011). These difficulties can lead to life-long relationship problems and may also lead to violent behaviours, personality disorders, and the development of anti-social behavioural traits (Ashitey, 2015).
- ii *A Transitory Lifestyle:* Street children in some large cities move frequently from district to district or between cities. Sometimes they do this by choice, but at other times they are forced to move to hide from the police, welfare authorities, gangs, and drug syndicates. This type of lifestyle leads to problems of social isolation and loneliness and difficulties in developing emotional attachments to special individuals (WHO, 2015).

How do street children survive?

Survival for street children means obtaining food, clothing and shelter, and protecting themselves against violence and other forms of abuse. WHO (2015) documents that the survival of street children depends on their resourcefulness,

resilience, peer group, the first people they meet on the street, the exploiters and other support mechanisms among the street children

Way Forward

Various bodies and organizations could carry out different activities to reduce or relieve the problems of the street children, these activities should be increased or intensified and additional bodies and philanthropists should also be involved in this course.

- i *Government*: –most governments of developing countries pay little or no attention to the plight of children generally. As minors children have no representation in the governance process. Government should therefore implement programs to deal with the issues of street children, by creating conducive homes like orphanages, juvenile homes or correctional Institutes with qualified personnel to manage and provide health services to these children. Policies favouring these children should be implemented.
- ii *Non-Governmental Organizations (NGO)*: should evolve certain outstanding strategies to address the needs and rights of street children, these include: Advocacy through the media and government and non-governmental contacts, Conscientization of the public, Preventive programmes that work to prevent children from taking to the streets, family and community support and education, introduction and implementation of street-based programmes like Feeding programmes medical services, family reunification, Legal assistance, Drop-in centres/right shelters, Street education and outreach programmes
- iii *Teachers/Parents/Guardians*: teachers play a key role in averting negative lifestyle formation in children and could stop a child from drifting into negative attitudes and becoming street children, they contribute more than fifty per cent to the character formation and attitudinal development of children. While parents and guardians have the most important role to play in the early stages of their children’s character formation. They should show love and care towards their children even amid evidence of already developing bad character or in the company of suspicious friends. Love and attention can draw them back to the control of their parents and avert losing them finally to the company of bad friends already on the street.
- iv *Religious Leaders And Counsellors and Community Leaders*: all are stakeholders in the moulding of youth and children, A Yoruba adage says only one father gives birth to a child but hundreds of other surrogate parents are waiting outside there to train and bring up the child, so these groups

have a major role to play in moulding the character of the growing children in communities.

- v *Community Health Nurse*: The role of the community health provider and educator is to ensure protection from the ill, promotion of health education and alleviation of the suffering of the street child. Therefore, the community health provider has to be the advocate for the street child, liaise with the government and NGO on matters concerning the street child, assess and diagnose the problem of the street and proffer appropriate solutions and care. Also should carry out research, teach or create awareness within the community on the needs of the street child and encourage more volunteers to help the street children.

Implications for Health Education

The issue of street children and the health challenges has several implications for health education. The community health educator has the responsibility to promote health, prevent illness, and alleviate the suffering of the people within the community through health education. Street children form a part of the vulnerable population within the community that needs extra health attention and care. The Community health educator is a case finder, an advocate, a researcher and an educator, therefore the health consequences would provide information on the functional and psychosocial profile of street children. This might be applied serially to monitor the natural history of disease or responses to standard interventions, for research and policy formation and implementation.

Conclusion and recommendations

Looking at issues relating to “street children” the causes, dangers, consequences and the way forward in resolving the big challenge “street children” constitute to nation, community and family life. This subject is a broad-based negative phenomenon that requires continuous appraisal, analysis and discussion. Despite the global shift from the eradication of street children phenomenon, to providing support for street children right on the streets, reviewed literature revealed that this paradigm shift has a very weak root in Nigeria. Therefore, all members of the community should treat the street children as part of their families and the Government should take a portion of our national budget for these victimized children. From the review, the following recommendations are made:

1. There is a need for proper implementation of the Nigeria Child Rights Act promulgated in the year 2003, which could improve the standard of practice presently obtainable in Social Welfare Department and other government agencies.

2. There is also the need to provide more financial support by the government to the NGOs already supporting street children while new NGOs are encouraged.
3. There is a need for community enlightenment programmes by government and community members, which will target positive attitudinal change towards street children. To help improve the level of trust between the street children and the community members.
4. Government should establish special health programmes and services in health facilities specifically for street children who are easily accessible and affordable so as to enhance utilization and improve health.

References

- Abdi, F., Saeieh, S. E., Roozbeh, N., & Yazdkhasti, M. (2017). Health policy making for street children: challenges and strategies. *International Journal of Adolescent Medicine and Health*, 11 (2), 112-123.
- Adeboye, T.K., Guerreiro, M. D. & Höjer, I. (2019). Unveiling the experiences of young people in foster care: Perspectives from Portugal and Nigeria. *International Social Work*, 62(1), 433–446
- Adeyemi, O.S. & Oluwaseun, O. (2012). Cultural Factors Promoting Streetism among Urban Children in Ibadan Metropolis, Nigeria. *Research on Humanities and Social Sciences*, 2(9), 12-19.
- Alawiye-Adams, A. A. & Babatunde, A. (2013). Street Children Phenomenon in Nigeria: The Challenges and Way Forward. Retrieved October 12, 2020, from https://www.researchgate.net/profile/Babatunde-Afolabi/publication/272219479_Street_Children_Phenomenon_in_Nigeria_The_Challenges_and_Way_Forward/links/570787ec08aefb22b096826e/Street-Children-Phenomenon-in-Nigeria-The-Challenges-and-Way-Forward.pdf
- Asante, K. O. (2016). Street Children and Adolescents in Ghana: A Qualitative Study of Trajectory and Behavioural Experiences of Homelessness. *Global Social Welf.* 3:33–43
- Asante, O. (2015). Exploring Age and Gender Differences in Health Risk Behaviors and Psychological Functioning among Homeless Children and Adolescents. *International Journal of Mental Health Promotion*, 17, 278-292
- Ashitey, E. (2015, January 2). Streetism: Its Impact On Society. *Ghana News*. Retrieved from <https://newsghana.com.gh/streetism-its-impact-on-society/>
- Ayaya, S. O., & Esamai, F. O. (2011). Health problems of street children in Eldoret, Kenya. *East African Medical Journal*, 78(12), 624-630
- Basu, S. (2017). Happiness on the street. Retrieved 20/2/2021 via www.thehindu.com.
- Cappa & Hereward, M. (2019). Fulfilling the right of street children to be counted. UNICEF Evidence for Action. Retrieved from <https://blogs.unicef.org/evidence-for-action/fulfilling-right-street-children-counted/>
- Endris, S., & Sitota, G. (2019). Causes and Consequences of Streetism among Street Children in Harar City, Ethiopia. *International Journal of Education & Literacy Studies*. 7,2,1-7

- Eshita, I. R. (2018). Health problems and health care seeking behaviour of street children in Dhaka city. *MOJ Cell Science and Report*, 5(1),9-13. DOI: 10.15406/mojcsr.2018.05.00107
- Ghasemi, A., Roshanfekar, P., Mehrabi, A., Faraji, B., & Vamaghi, M. (2019). Socio-Demographic Characteristics of Street Children and Related Factors of Becoming a Street Child in Kermanshah: A Rapid Assessment of the Situation Study. *Quarterly of social studies in Iran*, 8(1), 87-114
- Heijden, J.V., Gray, N., Stringer, B., Rahman, A., Akhter, S., Kalon, S., Dada, M., & Biswas, A. (2019). Working to stay healthy', health-seeking behaviour in Bangladesh's urban slums: a qualitative study. *BMC Public Health*, 19(600)
- Kassaw, E. S. (2019). Major Problems in Street Life of People at 'Risk', the Case of Selected Areas of Harari Region, Ethiopia. *International Journal of Education & Literacy Studies*. 7 (1), 66-67.
- Kuada, J. (2020). Culture and economic development in Africa – opportunities and challenges. *African Journal of Religion, Philosophy and Culture* 12,11-19
- Mayorga, M., & Pia Fontana, M. (2018). Street Life, Neighborhood Life. Proposals and Centrality Strategies for Poblenou – 22@, Barcelona. Retrieved from "Street Life, Neighborhood Life". *Proposals and Centrality Strategies for Poblenou – 22@, Barcelona / urban next*
- Myburgh, C., Moolla, A., Poggenpoel, M. (2015). The lived experiences of children living on the streets of Hillbrow. *Curationis*.38(1), 1274.
- Myburgh, C, Moolla, A, Poggenpoel, M (2015). The lived experiences of children living on the streets of Hillbrow. *Curationis*, 38(1), 1–8.
- Ngaku, M. S. (2015). Factors Contributing to the Increase of Street Children in Meru Municipality. A Research Project Report Submitted In Partial Fulfilment Of The Requirements For The Award Of Degree Of Master Of Project Planning And Management Of The University Of Nairobi
- Nyarko, B. O. (2018), The Menace Of Streetism, Its Causes, Effects And How It Can Be Remedied. *Classic Ghana*. Retrieved from <http://www.classicghana.com/the-menace-of-streetism-its-causes-effects-and-how-it-can-be-remedied/>
- Ogotu, M. (2020). Under The Bridge: The Invisible Lives Of Street Children. *Young African Magazine*. Retrieved from <https://www.mandelarhodes.org/ideas/under-the-bridge-the-invisible-lives-of-street-children/#:~:text=Exact%20numbers%20are%20difficult%20to,250%2C000%20and%20300%2C000%20in%20Kenya>.
- Owobu, A., Ibadin, M. O., Ofovwe, G. E. & Abiodun, P. O. (2020). Prevalence, profile and effects of adolescent street children in Benin City, Nigeria. *Annals of Biomedical Sciences*. 19 (1), 51-63.
- Owobu, A., Ibadin, O. M., Ofovwe, E. G. & Abiodun, O.P. (2020). Street Children In Benin City, Nigeria: Nutritional Status, Physical Characteristics And Their Determinants. *Journal of Medicine & Biomedical Research*. 19, 33-42
- Pietkiewicz-Pareek, B. (2012). Common Social Problems among Street Children in India. *Advanced Research in Scientific Areas*, 981-984
- Rioux, D. (2016). Assessing Risk and Resilience Factors for Early Childhood Development (Honors Bachelor of Art Theses from Rollins College). Retrieved from <https://scholarship.rollins.edu/>

- Salihu, H. A. (2018). The Growing Phenomenon of Street Children in Tehran: An Empirical Analysis. *UKH Journal of Social Sciences*. 3 (1), 1-10
- UN. (2012). UN Office of the High Commissioner for Human Rights: Protection and Promotion of the Rights of Children Working and/or Living on the Street, UN: Geneva– Switzerland
- UNICEF (2011). *The state of the world's children, 2011: Adolescence, an age of opportunity*. Available from: http://www.unicef.org/publications/index_57468.html.
- UNICEF(2012). The state of the world's children. Excluded and invisible: United Nations Publications Report No. 9280639161. https://scholar.google.com/scholar_lookup?journal=The+state+of+the+world%E2%80%99s+children,+2012:+Excluded+and+invisible:+United+Nations+Publications+Report+No.+9280639161&
- World Health Organization (WHO)(2015). A Profile of Street Children. Working With Street Children. A Training Package on Substance Use, Sexual and Reproductive Health including HIV/AIDS and STDs. Mental Health Determinants and Populations Department of Mental Health and Substance Dependence. Geneva, Switzerland