THE REHABILITATION AND EDUCATION FOR STREET CHILDREN, THE CASE OF MAKADARA AND KAMUKUNJI DISTRICTS, NAIROBI.

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DECLARATION

This is my original work and has not been presented for any of the study programmes in any other university.

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ABSTRACT:

Street children is a major social problem in the entire world practicing in the third world with their number increasing rapidly. The main study objective was to assess the type of services being offered in the rehabilitation centers including education for street children in the rehabilitation centers and the referral schools and also their performance in the referral schools. The study was an explanatory study based on a sample of street children in three referral schools and two rehabilitation centers. Purposive sampling was used to choose the rehabilitation centers. Snowball and Quota Sampling was used to get the respondents in Mary Immaculate Rehabilitation Center and Snowball sampling was used to get the respondents in Bahati Rehabilitation Center.

The referral schools comprised of St. Bakita, St. Elizabeth and Morisson Primary School. The study was indepth, prompting the researcher to use quantitative research method. The study sampled 50 street children in the two rehabilitation centers, 43 teachers in the referral schools, 4 Caregivers and 1 District Advisor to Schools making a total of 98 respondents. Tracer study was used to follow up rehabilitation and education for street children in the referral schools and the centers in order to evaluate the phenomenon.

The study found out that there were structures put up by the government and the NGOs in the rehabilitation centers, Juvenile homes/Correctional centers despite the squaling conditions prompting the street children to go back to the streets. Various education approaches were used to retain street children in the schools till completion of their basic education, quality education was still lacking. As street children were integrated into the referral schools, they had a sense of belonging raising their self esteem. This enhanced competition in co curricular and curricular activities, they formed peers and had self confidence. Rehabilitation as a service prompted responsible behavior and refrained them from substance abuse. Vocational training made learners to acquire skills to make a living which would later help them in the job market.
LIST OF ABBREVIATIONS

AC       Action International
AIDS     Acquired Immune Deficiency Syndrome
ACC      African Children's Charter
BRC      Bahati Rehabilitation Center
CSC      Consortium for Street Children
CEDAW    Convention on Elimination of Discrimination Against Women
CRC      Convention on the Rights of the Child
CED      City Education Department
CPS      Central Police Station
CBD      Central Business District
CA       Children's Act
DCS      Department of Children's Services
DAE      Department of Adult Education
EFA      Education For All
GTC      German Technical Coorporation
HIV      Human immunodeficiency Virus
KARDS    Kenya African Research Development Society
KIPE     Kenya Interim Poverty Eradication
KIE      Kenya Institute of Education
MHA      Ministry of Home Affairs
MOEST    Ministry of Education, Science and Technology
MPC      Mukuru Promotion Center
MDG      Milenium Development Goal
MPS      Morrison Primary School
NGO      Non Governmental Organisation
NFE      Non Formal Education
NCCS     National Council for Children Services
NHCR     National Council for Human Rights
STDs     Sexually Transmitted Disease
UNICEF   United Nations International Children's Fund
UNESCO   United Nations Educational, Scientific and Cultural Organization
UN       United Nations
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CHAPTER ONE
INTRODUCTION

1.1. Background

Street children are an old social problem in the world, with the current estimate of abandoned and street children being between one hundred and two hundred million (Brighton, 1997). It is also envisaged by Action International (2000) as cited by (Goyal; 2005) that by the Year 2020, the number of street children will increase to eight hundred million. According to a study conducted by Consortium for Street Children in 2009, the increase in the number of street children is due to child abuse both at home or at work, peer pressure, sensation seeking and also due to the fact that some of their brothers and sisters are already in the streets (CSC, 2009). There are many institutions at the international, regional and national level which are concerned with street children. UNICEF for instance has developed an integrated child protection system that seeks to ensure that the street children have access to education and health care. The organisation is keen in bringing on board various stakeholders to address the problem of street children (UNICEF, 2010).

The major benchmarks in dealing with the problem of street children have been included in the ratification on the Convention on Elimination of All Forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC). For example, the convention on the rights of the child states clearly that, “every child has the right to quality education that is relevant to his or her individual life and personal development. Accordingly, the convention perspective on quality education encompasses the childrens’ cognitive needs, their physical, social, moral, emotional and spiritual development (UNICEF; 1999, ANPPCAN, 1995). Street childrens’ lack of access to education is therefore considered a violation of fundamental human rights (UNICEF; 199).

According to a UNICEF report of 2005, developing countries had more street children than the developed countries due to poverty and ineffective policies. An estimated 10 million were in Africa while 25 million were in Asia. India is home to the world’s largest population of street children, estimated at 18 million (UNICEF, 2005). Owing to unemployment, increasing rural-urban migration, attraction of city life and a lack of political will, the number of street children in developing countries is increasing rapidly (Giles; 2001). However there should be strategies of dealing with unemployment to curb down poverty.
In Africa, an estimated 10 million children live without families mostly in towns as street children (UNICEF; 1984). The number of street children has also increased in places experiencing armed conflict namely Freetown (Sierra Leone) and Monrovia (Liberia), where parents or caretakers have been killed, the economy disrupted and family and community ties severed (Kopoka; 2000). They are also victims of an uncaring community that is increasingly being characterized by poverty, breakdown of family life, violence and economic hardships (Kopoka; 2001). According to a survey by Kenya African Research Development Studies (KARDS; 2010), the contributing factors of the increasing number of street children include, global economic recession, rapid urbanization, high unemployment rate, rising cost of living, social disintegration, family breakdowns and AIDS pandemic.

Many African countries, have made significant efforts in addressing the issue of street children by formulating child development policies, setting up departments and ministries dealing with youths, gender and children. For example the Ministry of Home Affairs who run preventive programs and support for street children. The Government of Kenya established the Children's Department under the Ministry of Home Affairs (MHA) to run public, supportive and preventive programmes for the benefit of actual and potential street children. This has been in the form of approved schools and juvenile remand homes which although not initially set up for street children, their delinquent nature has made them the main beneficiaries. Although the focus of these institutions is rehabilitation, education alongside vocational training. Some of the graduates of these institutions proceed to public secondary schools, while others are prepared for Government Trade Tests for future employment.

The Non Governmental Organizations (NGOs) and City Education Departments have since established rehabilitation centres for street children. The institutions identifies street children who live and/ or work due to factors such as poverty and family disintegration (BRC; 2004). The centres put up facilities for rehabilitation, education, health and recreational activities. The government centres include Joseph Kang'ethe, Kayole, Pumwani and Bahati. The named institutions continue to face technical, social and cultural challenges which constrain its ability to achieve their goal of rehabilitation, provision of services and education of street children. However, the problem of street children is still persistence in the country though there should be laid down strategies through which the problem of street children can be
solved, the problem of the poor be given much consideration and hence the need to assess the rehabilitation and education services for street children.

1.2 Problem statement

Street children face many risks in the streets that can jeopardise their normal growth and development. Being away from their families, they lack the normal protection and supervision most children get from their families. Hence, they are exposed to exploitation by adults and young persons, which leads, at times, to criminal activities. There are situations whereby these children have been used to break into houses or peddle drugs for those older than them. In most cases, threats are used, and the children have to comply. In some studies when street children were asked what they feared most, the majority mentioned 'dying a violent death', as their major worry (Gutman, 1987). Therefore, there is a need to enhance efficiency of street children rehabilitation centres to protect them from such exploitation. The main focus here is services in the centres, the street childrens’ deviant behaviors and the education in the referral schools and the centers provided by the government in Nairobi.

Although the problem of street children has been appreciated, efforts to redress it have for many years been left to a handful of NGOs, the police rounding the street children up and the city council askaris inclusive. Above all, governmental institutions such as approved schools were never designed specifically for street children. Therefore the kind of education and services offered is not consistent with the needs of the street children. The result is that the street children do not benefit from the services offered and education, some even run away from these institutions and back to the streets hence aggravating the problem. The fact that NFE in Kenya is provided and managed by communities and NGOs implies a disconnect with the formal education. The sub sector also suffers from lack of adequate teaching and learning resources, poor physical facilities and prioritization by Government in terms of budgetary allocation. Despite the fact that 1.5 million out of school children were absorbed in the Free Primary Education (FPE) centres following its introduction, an estimated 1.5 million children still remain out of the formal school system (GOK, 2004). Others are dropping day in and out. Urgent measures should be put to address the persistent problem facing the NFE sector so as to reduce the number of children who are out of the school system.
With the Ministry of Education policy on NFE which caters for street children’s needs as in physical, psychological and cognitive needs. Therefore promoting their social responsibility, respect and love for own country, for harmony and co existence and the awareness and appreciation of the role in technology in national development. (Ministry of Education; 2005). Basically, the structure and management of Non Formal Education (NFE) has not been effective. According to a report by the Ministry of Education, the structure in place do not acknowledge the importance of NFE especially in street children rehabilitation centres. According to the report, NFE has not been supported to deliver quality education for children who for one reason or another are not fit in the formal system. Pre service teacher training does not cater for an all inclusive education with respect to special education, multi grade, multi shift, non formal and information and technology. School drop outs, street children and the displaced therefore find it difficult to fit in the formal system due to its rigidity, in addition to the opportunity cost of being in school as the majority are household heads.

1.3.1 Research questions
The study will be guided by the following research questions;

1. What type of rehabilitation services are street children being offered?
2. What are the various approaches for education of street children in the rehabilitation centers and the referral schools?
3. What is the performance of street children in the referral schools?

1.3.2 Objectives:
1.3.2.1 The broad objective
The broad objective of this study is:
To assess the education for street children.

1.3.2.2 Specific objectives:
The study will be guided by the following:

i. To assess the type of services being offered in the rehabilitation centre.

ii. To assess the education for street children in the rehabilitation centers and the referral schools

iii. To determine the extent of the performance of street children in the referral schools.
1.4 Significance of the study

It is no longer in doubt that street children as a phenomenon of modernisation is indeed a social and security problem that requires attention in Kenya. Furthermore, its rapid increase calls for an urgent response. However, appropriate response requires sound and basic information. The findings of this study will be useful to the rehabilitation center managers, teachers, social workers and the caregivers who are charged with the responsibilities of enhancing the rehabilitation and education of street children. The study assessed the rehabilitation services, the education and the extent of the performance of street children in the referral schools and the rehabilitation centers where they do receive NFE. Specifically, the findings will contribute knowledge to future researchers by providing data which can act as a basis for other related research on conditions of rehabilitation to prevent street children from going back to the streets. The findings will also act as beneficial evaluation for curriculum developers in order to develop necessary modification on NFE and formal education in the referral schools. To provide teachers and other education officials with important information on education of street children. To provide information to the Ministry of Childrens’ Department to put up more emphasis on rehabilitation of street children.

1.5 Scope and limitations of the study

The study was limited to Bahati and Mary Immaculate Rehabilitation centres in Makadara District, where street children are received and the referral schools. The referral schools were Morrison Primary, St.Bakita and St. Elizabeth where street children are integrated with other regular children. The study also focused on teachers in the referral schools and teachers in the referral centers, the caregivers in the centers, the District advisor to schools in the district. The study did not include all those involved in the education provision of street children and this regard, chances were that some information was left out. Street girls were also left out because girls are a minority among the street children. In many cultures, there is much pressure for girls to stay at home than boys, in the face of abuse, girls are more reluctant to leave home. Girls are less visible on the streets as those who take to the streets do not stay for long because they make easy prey for prostitution, ring operators and other forms of exploitation. Majority of the population are street boys and many centers accommodate boys with regard to girls. The study also looked at the educational policies and how they impact on street children. The study was limited to street children of ages 10 to 17 because that is the age bracket as per the response to the questionnaires.
1.6 Definition of key concepts

Non Formal Education
Organized learning events catering to people who are not participating in formal education.

Street children
Street children are a term used to refer to children who live on the streets of a city.

Rehabilitation
An institution where street children are taken, reformed and educated so as to become responsible people in the society.

Education
Where street children are taken to either schools or rehabilitation centers and taught either formal or non formal education.

Formal education
Learning that follows the correct official methods.
2.0 Introduction

The chapter reviewed education for street children, rehabilitation, education policies, Non Formal Education and empirical studies conducted internationally and within Nairobi on the education for street children. The chapter further discussed the theoretical framework and study variables.

2.1 Education for street children

The main purpose for street children education should not be limited to imparting information which is relevant for examination but rather to seek to provide education that is relevant to the childrens’ impoverished circumstances and to the need they have to earn a living. (Shorter & Onyancha 1999). In 1990, the world conference on Education For All (EFA) and Milenium Development Goals (MDG) took off to ensure that no child was locked out in basic education. Other stakeholders had already started providing basic education. The media did highlight on Free Primary Education (FPE), bilateral and multilateral donor agencies, the NGOs and the civil society among others. However, with all these strategies, the global efforts of attaining the EFA goals has failed as per the UNESCO report of 2007 which showed a dropout of children in schools as alarming as evident in Sub Saharan Africa to be 45 million, in South Asia 42 million, in Malawi 91% and surprisingly enough 31% of children in Malawi reach a certain grade and then drop out with 5.61% due to the alarming poverty and other related factors. However the high drop out rate of school children needs attention globally.

The education goal objective strategies is on children increasing the completion rate and retainment of children into schools through basic education, however, poverty is also a challenge in attaining the educational goals. The two main strategies has necessitated policy adjustment in education. (Kenya Interim Poverty Eradication. 2000-2003) (KIPE). According to Wandera; 2004 concurs with the statement that many students drop out of school due to increased household poverty. According to MOEST, Budget 2002, 2003 & 2004, the budget for the School Feeding Program (SFP) increased from Kenyan Shillings 172,000 to 250,000 and then to Ksh. 267,485 in order for the children to be fed in schools, for higher
concentration and to enhance retention in the schools. Therefore a child should reach a certain level of education and if a child drops in between the classes, it's termed as a dropout. According to Rono; 1990, Gachungi; 2005 & Ngau 1991 have carried out studies among others, on factors leading to dropout in schools as learning disabilities, behaviour disorder, irrelevant curriculum, punishments, poor academic performance, poverty leading to children dropping out of school to work. Raju 1973 identified some causes of educational wastage as economic problems, poor living conditions, irrelevant curriculum, lack of parental guidance discouragement and poor medical care. Therefore the dropout rates needs to be addressed by the educational stakeholders as per the researchers. Many parents are too busy, therefore they have surrendered their responsibilities to various educational institutions. Gakuru; 1997). In the 1960s doors were opened for formal education through development and modernization. Therefore, this prompted the third world countries to adopt the western model of education as it provided solutions to the third world development problems.

The allocation of education budgets in various developing countries has increased namely, in Asia, Latin America and Africa. Most donor agencies and countries have either through bilateral or multilateral assistance program focused their efforts on the development of formal education. Oxford University Press of 1965 analyzed two reports commissioned by the World Bank and the UNICEF, prepared by Gathenya; 2004 and advocated for alternative approaches to formal education as addressing the needs of marginalized, the left outs, the push outs and those who have never been to school. According to Coombs, 1968; Non Formal Education (NFE) program should replace the complimentary form of education due to the crisis in world education, taking several forms of expression such as lack of funds, unemployment among school leavers and lack of educational equality. Coombs further argues that both rural and urban areas receive less attention in terms of educational needs and development. Furthermore due to rural urban migration, there is lack of efficiency of other problems afflicting the existing educational systems. In February, 2005, a meeting was held between German Technical Co operation (GTC), the National Council for Children Services (MOEST, Ministry of Home Affairs (MHA), Department of Children Services (DCS), Kenya Institute of Education (KIE) and Department of Adult Education (DAE). The main agenda of the meeting was to improve the quality of service provided to the disadvantaged children (street children inclusive) through promotion of oriented networking and collaboration and through a better utilization of synergy effects between the government
and NGO partners. However, various stakeholders have volunteered to deal with the provision of education and social services of street children.

2.2 Non-Formal Education (NFE) and educational activities for street children

NFE is any systematic learning activity outside the framework of formal education system. It may take place both within and outside the educational institutions and may cater for persons of all ages (Government of Kenya/UNICEF, 1995, UNESCO, 1998). NFE is learner centered and flexible enough to accommodate the needs of the learners without compromising the quality of inputs or outputs. It is hierarchical in nature in that learning is from known to unknown. This type of education can be delivered anywhere, namely in church halls, front rooms or under shady trees. The characteristics of NFE is that it can be done by anybody regardless on whether the educator is trained or not and it focuses on the less fortunate and the marginalized (Thompson; 2000). In NFE, various activities are carried out in the centers and the referral schools to prepare the street children for formal education since they have been out of school for sometime. Recreational activities are used to make initial contact with street children by breaking down psychological barriers. It can enhance their physical, social and emotional development by encouraging the children to follow rules, interact with peers, share, cope with conflict situations and generally improve self-esteem by allowing them to meet personal challenges successfully (UNESCO; 1987).

Recreational facilities offered by the center for street children should provide space for games, activities where children can come to play, relax and meet other children in an environment in which they feel comfortable and safe. Community facilities such as school playing grounds, libraries and community centers can also be used. Street children are always streetwise, sharp and have plenty of independence. They may however have short attention spans due to poor health or inhaling of glue fumes (Swart; 1990). An education program needs to be interesting, innovative and related to their everyday lives so as to capture and sustain their imagination and commitment. Activities may include more traditional school subjects such as basic numeracy and literacy, self expression and communication activities like theatre, music, dances and personal awareness and role playing.

Drama and music can help children to understand themselves and others by reenacting personal experiences or fantasies for confidence and improve their ability to express
themselves. Most studies have shown that street children do not respond very well to structured teaching sessions. (Schwart; 1990). Educational activities can take place in spaces like street corners, parks (Brink; 1997). Children can participate in design process, design sets, choose colours or design for flexibility in taking group sizes and presentation of subject matter. Design for individual work as well as small and large interactive group work.

2.3 Education policies

Education is a key to the protection of democratic institutions and human rights through well informed citizens. All children should enroll in schools to achieve their basic education including the vulnerable and disadvantaged children. The policy of integration and inclusion has been implemented to reach the majority of children with special needs estimated at 750,000 within primary school going age with only 26000 enrolled. (MOEST Statistics, 2004). The marginalized groups like the orphans, children involved in labor, street children and girls is a challenge which has prompted the government to put up boarding primary schools in the Arid and Semi Arid areas (ASAL), providing School Feeding Program (SFP) to retain children in schools and to enhance concentration.

The government has taken measures to resuscitate the community through uplifting the people out of poverty and making them afford the basic necessities of life including education. (National Government Plan 2000-2008). In the primary level, there was an increase of school going children in 1990 to 10.5% but a decline in 8.6% in 2002. Every effort is required to sustain the current enrolment and address the key issues of improved access, equity and quality of education. Policy attention is also being required since the dropout is 37% and a repetition rate is 14% in order to attain EFA goals. The United Nation (UN) policy on education is that it is a human right (UN; 1948) and that all children must receive basic primary education. The Kenya government passes that every child shall be entitled to education, the provision of which shall be the responsibility of the government and parent. (Kenya Gazette; 2001). This means that NFE for street children is a right and they should not be denied. The study looks into policy implications particularly with regards to long term culturally framed solutions to this complex and growing problem of street children.
2.4 Rehabilitation of street children

These are treatment centers where those who are addicted and abuse various substances or have weird behaviors at different levels are counseled. Bearing in mind that the said children were also involved in many undesirable activities before they joined the centers, like stealing, mugging and drug trafficking. (Phillip; 2002).

2.4.1 Steps of rehabilitation process

The children on the streets, pavements, railway platforms and their other habitats had developed a queer and paradoxical attachment to the streets. The street educator or the social worker becomes a part of the street child’s struggles and adventurers. The social workers constant presence on the streets instills on the youths reason to love for the divine and loving kindness. The educators/social workers constant presence also builds up the confidence of the street children which helps them facilitate to keep the children on the right track towards their complete rehabilitation. The second step is weaning. The educator/social worker makes the child to understand that he has not been forsaken. He too can have a home of his own, enjoy the rights and privileges offered to his own age group and interact with other boys and girls in the rehabilitation center.

Once the street child becomes sure that there is a better place than the squalor and misery of the street (grooming takes place). The educator/social worker begins to influence the street child to change his wild and reckless behavior patterns of the street by love, kindness, reasoning and discipline. When the street child is acclimatized to his new surrounding and his new found home, the fourth stage starts where the educator/social worker has recourse to the training process. The street child is given the option of education/vocational training. In the vocational training, the street child has the freedom to choose a trade, excel in it and bring out his talents, side by side, he is also to stand on his own feet through education and training.

The duration of stay in the centers can either be long or short depending on the seriousness of addiction to drugs or to other harmful substances they use, attitudes towards life, level of education and so forth. The centers have organized activities to keep the children busy all the time, to make them be self disciplined and responsible. (Gorham; 1980). The activities are attending classes, vocational training, taking meals together, cleaning and games. Street
children are further referred to formal schools for continuation of education and those who are negative towards continuing with education or have attained 18 years and above are enrolled for vocational training. Vocational training and income generating activities assists children in the process of reintegration into mainstream society in the centers. Not only does this produce immediate visible results but the objects made can also generate income for children/ prepare them to work, thus improving their self esteem and confidence. This program will often revolve around in the job training where children are integrated into existing workshops as trainees. Theoretical sessions will back up the practical training. When designing a workshop, savings can be made by sharing furniture, spaces and equipment. Workshops to have space for easy movement and enough storage space for easy movement and enough storage space for materials, tools and finished work. (Brink; 1997).

According to (Wambui; 2003 & Alcolm; 1969) in relation to rehabilitation, therapeutic methods were developed to work with young offenders, whereby the treatment of offenders was dominated by methods following psychodynamic principles with counseling and group therapy in particular. In addition, education programs were also inclusive and proved popular during that period and it’s still evident today. (Schweinhert, Barner & Barners, Welkart; 1993). While the treatment with psychodynamic tradition continued today. (Conders & Cox; 1996) the decades 1970s, 1980s & 1990s have been upsurge in offender treatment programs based on behavioral and cognitive behavioral principles. (Hoolin; 1999; Macquire; 1995, Nitzel; 1979; Ross & Fasino 1985). Certainly by the late 1950s and 1960s a position had been reached in which psychological theories had been applied to criminal behaviors and associated treatments were relatively widely used for a range of offender groups.

However, studies done on effects of offenders’ shows that treatment can have a small but significant effect in terms of reducing, reoffending further when certain treatment factors are combined. Meta-analyzes, suggests that this small effect can be considerably enhanced. It has therefore proved possible to describe the characteristics of high impact programs for the offenders. Briefly high impact programs would be delivered by highly trained practitioners; organizations would support management and evaluate the program to ensure high treatment integrity. (Hoolin; 1995, Epos & Kendrick; 1995). In Latin America, Casa Alianza is a branch of the New York based covenant house. It serves about 4000 street children a year. It is dedicated to helping children from the streets to their meaningful and productive life, through
a four termed program that fosters stability and restores hope. (Casa; 2000). The program is
designed to utilize their needs by first reaching the children on the streets, in parks, in
darkened hall alleys, around garbage sites and the bus terminals. They provide emergency
medical care, counseling, NFE and other basic needs. (Casa, 2000).

In Pakistan, the Edhi Foundation runs a centre called Ana Guar (our home) for street
children and mentally ill, orphans and runaway children. There are 10 such homes in the
country, out of which several are located in Karachi. About 6000 people live in Edhi Home; a
destitute or homeless person becomes a member of Edhi family, once she/he enters the
premises. (Mohammed; 2000). Marie Adelaide rehabilitation program has centers which are
among those actively pursuing the cause of street children based on Burns Road Karachi. It is
one of the few centers providing meaningful services to these children where they can take
baths and have access to medical checkup, services and consultations with street counselors.
They are also provided with clothes. There are around 60 children from different parts of
Karachi who regularly visit the centers and use the facilities. Since the children who were in it
were reluctant to visit the centers, they were eventually convinced and started to bring their
friends involved in glue sniffing and are being rehabilitated as well. (Phases; 2005).

2.5. Theoretical Framework

Theories are points of view from which certain decisions are made and conclusion are
derived. The study will be guided by Anomie theory. The concept of Anomie was introduced
to modern Sociology by Emile Durkeim to describe the confused condition that exists in both
individual and society when social norms are weak, absent or conflicting. A society with a
high level of Anomie risks disintegration for it’s members no longer share common goals and
values. Individuals in a state of Anomie lack guidelines for behavior, for they feel little sense
of discipline over their personal desire and acts. (Levis & Rosenberg; 1965). Robert K.
Merton; 1968) has modified this concept of anomie and applied it to deviant behavior which
is quite common among the street youth. To Merton, Anomie is a situation that arises when
there is a discrepancy between socially approved goals and the availability of socially
approved means of achieving them.

In anomie theory, if a society places a high value of material goods and affluent living for all
but denies people equal access to socially reaching these goals, it invites theft, fraud and
crimes. Posing insecurity to the public by the street children/youth. Merton asserts that small traditional communities, the goals offered to the general population are usually matched with the opportunities for achieving them whereas in large modern societies, many people may not have access to the approved means of achieving valued social goals. (Robertson; 1978). People who accept the goal of success but find approved avenues to block success may fall into a state of anomie and seek success through illegitimate means. Society itself through discrepancies between it's institutionalized opportunities to reach the goals exerts a definite pressure on some people to behave in a deviant rather than conformist ways and people who live under difficult circumstances like street children. Merton suggests that people may respond to this situation in one of five different ways depending on their acceptance/rejection of the socially approved goals or the socially approved means of achieving goals. The five ways are conformity, innovation, ritualism, retreatism and rebellion.

A conformist internalizes success goals but has access of approved means to realize the goals, an innovator role gets disvalued means like theft, a ritualist follows rules obsessively but looses sight of overall goals (inflexible bureaucrat), a retreatist abandons both success goals and means to realize them like a street child who is a drug addict and a rebel rejects both traditional goals and means and envisions new ones as a basis for a new social order. Social pressure exerted on street children makes them to conform to different adaptations. Once they realize that the goals set by the society are too high for them to attain, they resolve to the conflict by conforming to a particular suitable adaptation. One may move from one adaptation to another depending on the prevailing circumstances. Most street children live under difficult circumstances and have no access to basic needs, this makes them to conform to certain adaptations for survival purposes. The theory of Anomie explains why children take to the streets. They simply try to resolve conflicts and also to bring down social pressure exerted on them at family level and school. Conformists can only be found in stable societies where goals and means of achieving those goals are available to all persons equally. The street children who maintain work through discipline become conformists. Those who unsuccessfully complete rehabilitation and education do not get jobs and may adapt to innovation, ritualism, retreatism or rebellion. Some street youth join institutions and stay, they conform to rules and expectations.
2.5.1 Social behavior theory

Human beings define behavior according to what is observed and individual action which is either positive or negative and as a result of the way one was brought up. The behaviorist approach is derived from Pavlov and Watson (Preston; 1989) and both argue that behavior is basically composed of observable elements of personality and that behavioral theorists should be concerned with these observable elements of personality in order to explain behavior and not mental processes such as memory, perception, attitudes and emotions which are internal processes which cannot be observed and studied scientifically. John Krumboltz & Thoresen 1966 defines behavior as the function of interaction of heredity and the environment and according to him, the environment and heredity have a role to play in shaping a person’s behavior. Reinforcement is one of the techniques used by behaviorists to make people to conform and it strengthens the probability of a particular response which can either be negative or positive depending on the knowledge one has. One can argue that by taking a child to school means that money is being wasted.

A street child should be taken to school so as to make informed choices about their lives. Behavior can be acquired in culture where one is born, taught by peers and so on. Man learns what he learns from society through organized learning and it shapes the behavior of an individual. The way people behave depends on how they acquired the responses either directly, indirectly, physically or mentally. An individual is a social self and cannot afford to be a true self because as long as one lives in a society one has to do what others want. Therefore street children needs to behave the way the society would like them to behave. Bad behavior can be learnt through peer pressure and good behavior can be learned through converted efforts of the learner, the trainer and the environment because environment contributes to ones behavior. Rewards should be for good behavior and punishment for bad behavior.

Street children have not socialized properly hence they have picked deviant behavior and attitudes that they copy from other street children that are wrong. Street children should be put in the rehabilitation centers and counseled using the professionals with techniques/ training. They should be allowed to air their views through discussion and they should recognize that the lives they were living on the streets was illegitimate and irrational. They should be taught vocational skills so that they can benefit later through a world of work either employed or self
employment and to mainstream easily in the society. (Anderson; 1947). Rewards, learning and punishment are incorporated in the concepts of behavior which facilitates and promotes learning and internalization of cultural norms and suitable behavior as well as inhibit deviant and unacceptable behavior. A behavior that has been repeatedly rewarded tends to recur while that which has been punished leads to be avoided and finally eradicated. As street children interact and get exposed as a sign of rehabilitation, they repeat behavior that is rewarded and avoid behavior that is punishable and this rewarded behavior will come to them naturally.

In social behavior theory, Sociologists argue that people learn their behavior. They do not inherit whatever behavior they exhibit. (Western, 1979, Palmer; 1977). In behavior theory, learning of behavior starts soon after birth. Learning is through various methods like identification, modeling, and observation and through conditioning. Psychologists argue that behavior can be learned through conditioning as well. (Turner; 1991). Socialization agents are parents/caregivers, teachers and many others. A child will learn basic behavior patterns of a society through primary socialization (family), secondary socialization and through a wider range of persons and institutions. (Haralambos; 1983). As a child grows up, it moves to the wider society and tends to conform to peer norms and if they fail to conform, they are rejected by the group. Parents are powerful in developing the conscience of the child by using the techniques such as rewards and threats which control their behavior. Children’s’ behavior can be shaped by copying or imitating their parents, whereby boys will tend to copy their fathers and girls their mothers.

Psychologists B. F. Skinner and Thorndike agree with Haralambos that people behave the way they do because of anticipated economic gains. B. F. Skinner argues that all human behavior can be understood as learned responses to the environmental events and that the behavior is conditioned. The learning process is easier when the child is young but as they get older, learning of new habits becomes slow and difficult. Punishment extinguishes undesired habits and impels individual to new behavior. With time, individuals come to anticipate punishment in new learning institutions. Religion or belief is some form of supernatural beings and its power to assist or harm man is an effective mechanism of social control. It promises rewards such as everlasting bliss to those who follow the teachings and punishments or internal damnation for those who do not. Children play an active role in their development by actively trying to understand the world and modifying and analyzing their experiences.
They just don’t absorb information. The dependent variable will include acquisition of new norms, patterns of behavior and skills for easier integration into the society.

2.5.2. Deprivation theory

Deprivation theory is based on the assumption that “progress is achieved by spreading modernism to backward areas through the application of technology and capital” (La Bella 1976:329). As traditional social structures and value systems cannot be used to achieve modern society goals, the emphasis is placed on the creation of a literate and skilled human resource. Deprivation theories view education as a mechanism for creating skilled personnel who will contribute to development. In relation to vocational training, the child is acclamatised to his new surrounding and his new found home. The teachers/caregivers in the center now has recourse to the training process. The child is given the option of either academic/vocational training. In the vocational training, the child has the freedom to choose a trade, excel in it and bring out his talents, side by side, he is also given basic education (NFE). The purpose is to help the child stand on his own feet through education and training. This relates to deprivation theory whereby the child will fit into into the market place. Non Formal Education programmes following the dependency-liberation line of thought are therefore geared towards critical reflection and gradual socio-economic change. They are proactive with a bottom-up approach usually at micro level. They defend the value of community based knowledge, national languages and cultures. By involving the community to manage education of the street children in order to eradicate illiteracy and re enroll those who had dropped out of school. The concept of “popular education” is a good example (Bosch 1998, La Belle 1987, Grossi 1984).

Programmes following the deprivation-development approach on the other hand seek to change peoples attitudes so that they can fit in the “capitalist marketplace”. The targets are the marginalized who are offered different forms of “adult literacy/fundamental/community education”. This human capital approach prescribes remedial education for integration (Bosch 1984) though there is no effort to link the experiences learnt/gained with the wider social system. “Participants are left with the difficult task of utilizing new, and probably inappropriate, behaviours in a physical and human environment which has continued to exist without alteration” (La Belle 1976:333).
The torch bearers project an international outlook in their discussion and definition of NFE may have based their views on research findings from Kenya and other parts of Africa like (Coombs, Ahmed & Prosser; 1974) but the overall aim is to merge the findings and define NFE universally. Additionally, the emphasis of NFE programs in Kenya mainly comprised complementary provisions (such as scouts), supplementary provisions (skill training) and alternative basic education programs for adults (literacy). The problem of OOS children was beginning to cause apprehension (Coombs & Kipkorir; 1974) and indeed some institutions were beginning to target them by default. But as an emerging concern, OOS basic education programs were not actively captured in the definition.

The inadequacy of the existing definition on Non Formal System is further evidenced in the rather contradictory stance adopted by policy and research documents when explaining the practice of NFS. For instance, the “Policy Guidelines on NFE” (MOEST 1999) define NFE as “any organized systematic learning activity outside the formal school system” but goes on to admit that some NFS follow regular primary school curriculum, and recommends that the Kenya National Examination Council ought to develop and administer examinations for them. These two issues of curriculum and examinations bring NFS within rather than outside of the formal school system as indicated in the definition. Ekundayo-Thompson (2001a) in his study of non-formal schools in urban Kenya defines NFE as “a curricular, organizational approach to the provision of basic education in Kenya.” However, his findings show that NFS are not “markedly different from normal primary schools in curricular content” and herein lies the limitation of his definition. These two examples serve to depict the gap between definition and practice of NFS today in Kenya. It was crucial to examine, based on evidence from both rural and urban based NFS, if in effect the non-formal school variations in place dictate a different description or whether it is the practice of NFS schools that needed streamlining. The current study attempted to address this gap.
2.6 Conceptual Framework

The conceptual framework below was a diagrammatic representation of how variables are linked. In this case, an attempt to establish the relationship between independent and dependent variable was made. Thus dependent variables, (education and rehabilitation) are seen to be linked to independent variables, (behavior change, acquisition of knowledge and integration of street children in education and rehabilitation services), respectively. In overall, these variables come into connect the main activity which is rehabilitation and education services enabling the street children to acquire knowledge and the expected outcome is behavior change, the end product is reformed children who are focused and productive members of society. However, when street children are reformed you will see changed behavior in them and this is as a result of rehabilitation and education services.

Figure 1. The linkage between factors of study

![Diagram showing the linkage between factors of study](image-url)
CHAPTER THREE
METHODOLOGY

3.0 Introduction

Chapter three describes the study site and how it was selected. The same chapter points out the research methodology, various types of data, the sample and its characteristics are explained.

3.1 Site description, location and size

The study was carried out in Nairobi City. It is divided into eleven districts mostly named after residential estates like Makadara and Kamukunji Districts. There are a total of 26 public schools in Nairobi District and the gross enrollment rate for Nairobi is 21.2%. (MOE; 2007), with 25.1% of boys and 17.3% for girls. Past studies on street children have been conducted in urban settings. These studies have elicited similar findings on poverty and irrelevant curriculum not delivered to children and this poses a dropout to children. In this context, two institutions for street children were identified on the basis of them being well established. The researcher assessed rehabilitation and education for street children. The referral schools were quite accessible. Nairobi city, the country’s capital is located within the district and serves as the headquarters of all key governmental agencies. All the various government departments like Gendar and Children affairs are based at the police headquarters and at vigilante house.

Table 3.1 Sample size

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street children in the center and the referral school</td>
<td>50</td>
</tr>
<tr>
<td>Teachers in the referral schools</td>
<td>43</td>
</tr>
<tr>
<td>Caregivers in the center</td>
<td>4</td>
</tr>
<tr>
<td>District Advisor to schools</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>98</td>
</tr>
</tbody>
</table>

Street children in Bahati Rehabilitation Center and Mary Immaculate Rehabilitation Center were a total of 50. Street children at Mary Immaculate Rehabilitation Center were 25 and
were chosen through Quota Sampling and in Bahati Rehabilitation Center were 25 and selected through Snowball Sampling. Teachers in the three referral schools were 43. Caregivers in the two centers were 4 and 1 District Advisor to schools.

3.2 Data, methods and techniques of data collection

The quantitative research design was utilized to assess the rehabilitation and education for street children. Triangulation technique was used to collect data from multiple sources, using both primary and secondary data. Data collection methods included key informants, interviews, questionnaires and direct observation as shown;

Table 3.2: Data methods and techniques

<table>
<thead>
<tr>
<th>Method</th>
<th>Tool</th>
<th>Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>In depth interviews</td>
<td>Interview guide</td>
<td>District Advisor to schools</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Teachers in the referral schools</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Caregivers/teachers in the centers</td>
</tr>
<tr>
<td>Direct observation</td>
<td>Observation checklist</td>
<td>Activities in the area of studies</td>
</tr>
</tbody>
</table>

Quantitative approach was mainly used in the study since techniques enabled the researcher to get detailed and in depth understanding of the phenomena, facilities, recognition of subjective aspects of human behavior and experiences that are meaningful, reasonable and normal to those concerned (Njeru E; 2004). The researcher also used sources of data. These included study findings that had been analyzed. The previous findings were used to complement the findings of the study and also to show the existing gaps of the study.

3.3 Sampling procedure

Sampling is a process by which a relatively small number of individual objects or events are selected and analyzed in order to find out something about the entire population from which it is selected (Singleton et al, 1998). According to Babbie, 1950, sampling is a situation where one selects a sample on the basis of one’s knowledge of the population, it’s elements and the
This study used purposive sampling to select sampling units in an attempt to obtain a sample that appears to be representative of the intended population. Mary Immaculate Rehabilitation center in Makadara district and Immaculate Rehabilitation center in Kamukunji district. First I went to the center, introduced to the required information. Then I went to the referral schools where street children were. Namely, St. Bakita, St. Elizabeth both in Makadara district and Morisson in one district.

In Mary Immaculate rehabilitation center, the method of getting the respondents was quota. Street children were divided into three categories according to their length of stay in one center. In the first group had stayed for less than 1 year, the second more than 1 year and more than 2 years. I interviewed 7 respondents from each group, making a total of 21 respondents in one center. In Bahati rehabilitation center, I used snow ball sampling. I began with respondents who were available at that time due to the tight schedule of the center and the referral schools program. The respondents were interviewed and after they went to bring the others until there were no more respondents to be interviewed. The respondents interviewed here was 29. This made a total of 50 respondents in the two rehabilitation centers. To obtain a representative sample, the target population included 50 street children in the rehabilitation centers and the referral schools. The age gap was between 10 to 17 years.

Unit of observation

According to Mugenda & Mugenda 2003, a unit of observation is defined as the subject, or entity from which one measures the characteristics or obtains the data required for the research study. The unit of observation is the parameter from which the characteristics required or data required in the research are obtained. The unit of observation in this study is the street children in the rehabilitation centers and the referral schools.

Unit of analysis

According to Babbie, 1994, the unit of analysis is the social entity whose social characteristics and relationships are studied. The same view is held by Babbie, 1995 that it is what a researcher understands. The unit of analysis can therefore be the individual, people, social role, and the street children. The unit of analysis in this study is the street children.
nature of the research. This study used purposive sampling to select sampling units subjectively in an attempt to obtain a sample that appears to be representative of the population. I selected purposively, Mary Immaculate Rehabilitation center in Makadara district and Bahati Rehabilitation center in Kamukunji district. First I went to the center, introduced myself, got the required information. Then I went to the referral schools where street children are integrated. Namely, St. Bakita, St. Elizabeth both in Makadara district and Morisson in Kamukunji district.

In Mary Immaculate rehabilitation center, the method of getting the respondents was quota sampling. Street children were divided into three categories according to their length of stay in the center. The first group had stayed for less than 1 year, the second more than 1 year and the third more than 2 years. I interviewed 7 respondents from each group, making a total of 21 respondents in one center. In Bahati rehabilitation center, I used snowball sampling. I began with the respondents who were available at that time due to the tight schedule of the center program and the referral schools program. The respondents were interviewed and after they were through, they went to bring the others until there were no more respondents to be interviewed. The respondents interviewed here was 29. This made a total of 50 respondents in the two centers. To obtain a representative sample, the target population included 50 street children in the two rehabilitation centers. The age gap was between 10 to 17 years.

3.4 Unit of observation
According to Mugenda & Mugenda 2003, a unit of observation is defined as the subject, object, item or entity from which one measures the characteristics or obtains the data required in the research study. The unit of observation is the parameter from which the characteristics are measured or data required in the research are obtained. The unit of observation in this study was the street children in the rehabilitation centers and the referral schools.

3.5 Unit of analysis
According to Baker; 1994, the unit of analysis is the social entity whose social characteristics are the focus of study. The same view is held by Babbie; 1995 that it is what a researcher seeks to understand. The unit of analysis can therefore be the individual, people, social role, positions and relationships. The unit of analysis in this study is the street children.
3.6 Data analysis

This concerns methods and ideas for organizing and describing data using graphs, numerical summaries and more elaborate mathematical descriptions with the aid of a computer. Quantitative data received from the interviews was analyzed to assist presentation and collection of research findings using Statistical Package for Social Scientists (SPSS). Applicable tables and figures were made to provide answers to research questions. Analysis of the research findings were based on the conceptual framework of the study. Qualitative data derived from semi structured interviews and field notes were evaluated and analyzed to determine the adequacy of the information and the credibility, usefulness, consistency and validation of the hypothesis.

3.7 Problems encountered

Street boys were highly suspicious of strangers and it took them time to be acquainted and open up to the researcher.

The researcher was left alone with the street boys and the boys went as far as walking out and making faces at the researcher. This instilled fear in the researcher.

Arranging time to meet the street children in the center was a bit critical because of the tight center schedule and the referral schools schedule.

Due to low self esteem as in branded names with non street children, the researcher had to change the schedule and only meet the street boys in the centers for interviewing.

Sensitive issues like substance abuse made street children not to open up and tell the truth unless they were assured of confidentiality.

The centers and the referral schools were far apart such that the researcher did experience financial constraint.
CHAPTER FOUR
DATA PRESENTATION AND ANALYSIS

4.0 Introduction
This chapter presents data obtained from 98 respondents who were interviewed. In addition, the chapter is divided into study objectives. The first study objective was to assess the type of services being offered at the rehabilitation center. The second was to assess the education of street children in the referral schools and the rehabilitation centers. The third was to determine the performance of street children in the referral schools.

4.1 BACKGROUND INFORMATION OF THE RESPONDENTS
The main respondents were 50 street children between 10 and 17 years. The years were meant to capture those who were already in the rehabilitation centers. They were drawn from 3 referral schools and two rehabilitation centers. The referral schools were St. Elizabeth, St. Bakita in Makadara District and Morisson in Kamukunji District. I also interviewed the respondents in the centers namely; 43 teachers in the referral schools and the centers, 4 caregivers and 1 District Advisor to schools. Mary Immaculate offers NFE before taking street children to the referral schools. There are teachers in the referral schools and Mary Immaculate Rehabilitation centers. Mary Immaculate Rehabilitation Center takes street children who are fresh from the streets and offers them NFE for some time to prepare them for integration in the referral schools. Bahati Rehabilitation Center admits street children from other centers and does not offer NFE.
4.1.1 Street children and teachers in the rehabilitation centers and the referral schools

Table 4.1 below presents the distribution of the sample of street children, the rehabilitation centers, the referral schools and teachers in the referral schools and the rehabilitation centers.

Table 4.1: Distribution of the samples of the rehabilitation centers, referral schools, street children in the centers, teachers in the centers and the referral schools

<table>
<thead>
<tr>
<th>Rehabilitation centers</th>
<th>Referral Schools</th>
<th>Street children</th>
<th>Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mary Immaculate</td>
<td>Mary Immaculate</td>
<td>20 (40%)</td>
<td>3 (6.9%)</td>
</tr>
<tr>
<td></td>
<td>St. Elizabeth</td>
<td>4 (8%)</td>
<td>13 (30.24%)</td>
</tr>
<tr>
<td>Bahati Rehabilitation</td>
<td>St. Bakita</td>
<td>5 (10%)</td>
<td>12 (27.9%)</td>
</tr>
<tr>
<td></td>
<td>Morisson</td>
<td>21 (42%)</td>
<td>15 (34.88%)</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>50</td>
<td>43 (100)</td>
</tr>
</tbody>
</table>

4.1.2 The rehabilitation centers

Street children in Bahati Rehabilitation Center are taken directly to the referral schools. This makes the percentage to be higher as compared to the number of street children in Mary Immaculate Rehabilitation Center as shown in table 4.1. Teachers in Mary Immaculate Center are few because they only do placement and take most of the children to the referral schools where as those in the referral schools are many because they handle both street and non street children. Street children in Mary Immaculate Center and taking NFE are 40%, those integrated in the referral schools from Mary Immaculate rehabilitation center are 8% from St. Elizabeth, 10% from St. Bakita and those from Bahati Rehabilitation center and integrated at Morisson primary are 42% being the largest population of street children integrated in the referral school. Teachers teaching at Mary Immaculate Center are 6.9%, at St. Elizabeth 30.24%; St. Bakita 27.9% and Morisson Primary School are 34.88% being the largest population.
Table 4.2: Characteristics of teachers

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age</th>
<th>Teachers' qualification</th>
<th>Gender</th>
<th>Age</th>
<th>Qualification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>50-60</td>
<td>PI</td>
<td>38 (88.37%)</td>
<td>4 (9.3%)</td>
<td>5 (11.62%)</td>
</tr>
<tr>
<td>Male</td>
<td>40-50</td>
<td>Diploma</td>
<td>5 (11.62%)</td>
<td>29 (67.44%)</td>
<td>28 (68.68%)</td>
</tr>
<tr>
<td></td>
<td>30-40</td>
<td>Degree</td>
<td></td>
<td>10 (23.25%)</td>
<td>10 (20%)</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>43 (100)</td>
<td>43 (100)</td>
<td>43 (100)</td>
</tr>
</tbody>
</table>

4.1.3 Distribution of teachers by gender and age

Due to economic crisis, many male teachers prefer working in rural areas or small towns where life is relatively cheap. Female teachers are supported by their husbands who are working in other sectors apart from the education sector as shown in table 4.2. Most of the teachers comprising of 88.37% were females while the rest 11.62% were males. This is due to economic crisis; less male teachers prefer working in the rural areas or small towns where life is relatively cheap. There was an increase of retirement age for Civil Servants, teachers included as evidenced in the response of teachers and a lapse in the employment for quite some time bringing a big age gap of teachers and a huge shortage. Teachers interviewed in terms of their age were between 50-60 were 9.3%, 40-50 were 67.44% and 30-40 were 23.26%. These ages are in line with different appointments of teachers.

For a teacher to qualify to teach in a primary school, he/she should be a PI Certificate holder then upgrade the status after completion of the PI Certificate Course by going for studies either in a Diploma College for two years or for a degree course which takes a period of four years. A clear majority of teachers have attained Diploma level of education of 68.38%. This indicates that teachers have moved a level higher in education after their Primary Teachers Course. Degree level was 20% and Certificate 11.62%.
4.1.4: Distribution of the respondent’s age and the parent’s economic status

Majority of the street children in the centers are between 16 and 17 years old. The age corresponds to the identity crisis age whereby they revenge in different ways according to the way they are handled by the parents/guardians or peers. This is the time the child needs dialogue not commands because some will feel that they can earn a living in the streets by any means whether stealing, drug peddling or doing odd jobs like carrying luggage and many others. The age of the pupils interviewed from the two centers ranged from 13-17 years as shown in table 4.3 above. The majority were between 16 and 17 years with 40% each. Between 15 and 16 years were 24%, between 14 and 15 years were 26% and between 13 and 14 years were 16%. A clear majority of street children in the rehabilitation centers are between 16 to 17 years old.

4.1.5 Status of the parents of street children

Data was collected on the status of the parents through interviews from street children as shown in table 4.3 above. From the information, the street children reported various ways which make them to prefer staying in the centers. Namely, lack of provision of basic needs, harsh parents, and parental drunkenness or orphanage conditions. Similar data is also reported by Anyang’ (1991), that the major factors of children staying in the centers is due to poverty, decreased levels of welfare, family disorganization, instability and urbanization. Street children with both parents alive were 44%, one parent alive was 20%, total orphans 10% and those who had one parent alive were 26%.

Most parents are working in the informal sector and the Street children in the centers responded on where their parents/guardians were employed. They reported that their
parents/guardians do engage in business, informal labor or employed at least somewhere with meager wages or salaries. A clear majority of parents who were involved in informal labor was 62%. This represents a population that is not economically stable, forcing the parents to send their children to the streets to look for some other means of substituting the family income and to fend for themselves. Those employed were 20% then those who owned small businesses with 10% and 8% didn't know what their parents/guardians do.

4.2 REHABILITATION SERVICES IN THE CENTERS

4.2.1 Knowledge, Attitude and Practice

Table 4.4: Services offered at the Rehabilitation Centers.

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>20</td>
<td>40%</td>
</tr>
<tr>
<td>Counseling</td>
<td>15</td>
<td>30%</td>
</tr>
<tr>
<td>Keeping off drugs</td>
<td>6</td>
<td>12%</td>
</tr>
<tr>
<td>Not to run back to the streets</td>
<td>7</td>
<td>14%</td>
</tr>
<tr>
<td>How to make furniture</td>
<td>2</td>
<td>4%</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

Although the street boys at the centers managed to state the services being offered as shown in table 4.4 above, 40% were happy on the education which will later change their lives due to provision of the school requirements which their parents/guardians were not able to afford. 30% responded to counseling which has made them to have behavior change and be positive to life, 14% revealed that they would not go back to the streets as long as they are being treated humanely in the centers and 4% liked carpentry being offered in the centers since they had acquired skills in carpentry and could get employment and a noble way of earning a living.
### Table 4.5: Street children’s’ preference to the centers and spending leisure time

<table>
<thead>
<tr>
<th>Preference to the center</th>
<th>Spending leisure time</th>
<th>Preference to the centers (Frequency)</th>
<th>Spending leisure time (Frequencies)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peace</td>
<td>Institution</td>
<td>10 (20%)</td>
<td>13 (26%)</td>
</tr>
<tr>
<td>Food</td>
<td>Street observation</td>
<td>2 (4%)</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>Clothing</td>
<td>Games</td>
<td>5 (10%)</td>
<td>20 (40%)</td>
</tr>
<tr>
<td>Shelter</td>
<td>Acrobatic training</td>
<td>8 (16%)</td>
<td>10 (20%)</td>
</tr>
<tr>
<td>Medical care</td>
<td>Library</td>
<td>5 (10%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td>15 (30%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Love</td>
<td></td>
<td>5 (10%)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>50 (100)</td>
<td>50 (100)</td>
</tr>
</tbody>
</table>

#### 4.2.2 Life in the Rehabilitation Centers as reported by the street children

Street children prefer staying at some centers due to the provision of basic needs. They complain of mistreatment and abuse by some centers, being beaten up and many others. The same statement has been reported by (Wara; 2007). When street children were probed on their preference of living at the centers as opposed to their homes, their responses as was shown in table 4.5 above; those who were happy because of being given food without scavenging for it or sometimes nothing to eat were 4%, 30% preferred access to education which was going to make them responsible people in the society, being far from their harsh parents and guardians applying corporal punishment and inflicting pain on them were 5%. Clothing was 10% and shelter 8% since they were able to wash and change to clean clothes and sleep in warm beddings. Street children preferred living in some centers as opposed to their homes because there is peace, food, provision of clothing, shelter, medical care, love, being taken to school (education). According to (Hoolin; 1999, Marquire; 1995, Nitzel; 1979, Ross & Fasino; 1985). Marie Adalaide program based in Karachi in India provides meaningful services for street children with full comfort. This attracts street children to like the rehabilitation center.

#### 4.2.3 Street children’s’ leisure time

Street children responded that they do spend their leisure time in the centers in different ways as shown in table 4.5 above. Some street children played together showing teamwork. As they learn and follow the rules of the game, discipline was being instilled in them. As they
socialize, they learn a lot from each other by sharing experiences, counseling one another and having future expectations. As they do assignments and discuss, they brainstorm and learn from each other. Those who indulge in Acrobatic training develop skills for later self employment. Majority of street children with 40% revealed that they like spending their leisure time playing games in the field, 26% responded that they like sitting in the institution socializing with friends and doing assignments, 20% liked getting involved in Acrobatic training, 10% liked going to the library and 4% prefer going to the street to watch vehicles moving.

Table 4.6: Reasons for drug use and visited institutions

<table>
<thead>
<tr>
<th>Drug use</th>
<th>Visited institutions</th>
<th>Drug use (Frequency)</th>
<th>Visited institutions (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identification</td>
<td>Approved school</td>
<td>20 (40%)</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>Peer pressure</td>
<td>Remand home</td>
<td>10 (20%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Stress</td>
<td>Children’s’ home</td>
<td>6 (12%)</td>
<td>28 (56%)</td>
</tr>
<tr>
<td>Courage</td>
<td>Juvenile home</td>
<td>3 (6%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Boredom</td>
<td>Joseph Kang’ethe</td>
<td>4 (8%)</td>
<td>7 (14%)</td>
</tr>
<tr>
<td>Forget problems</td>
<td>Kayole</td>
<td>5 (10%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Don’t know</td>
<td></td>
<td>2 (4%)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>50 (100)</td>
<td>50 (100)</td>
</tr>
</tbody>
</table>

4.2.4 Drug use as reported by teachers

Street children revealed as shown in table 4.6 above that they used drugs for various reasons. Most street children who take drugs for identification were the highest with 40%. This was a sign that they were in solidarity with fellow street children and they belonged to the same group, followed by 20% due to peer pressure, if not taken, they were punished by the gang leader, 12% were stressed and had given up in life, 10% took drugs to forget the problems they had experienced in their homes due to identity crisis, 8% took to kill boredom because they didn’t have routine jobs and no adult to monitor them, 6% to gather courage to be with the other street children and not to be ashamed because others come from wealthy homes and 4% had no for a reason. They didn’t know why they were taking drugs.
4.2.5 Street children’s’ report on being taken to the institutions before being transferred to the named center

Street children had visited various institutions before being taken to either of the named centers as shown in table 4.6 above. They had various reasons for being rounded up by the city council workers and the police. Majority of the street children with 56% were found loitering in the streets and taken to the children’s’ home as a way of reducing their number, 14% were found taking drugs (bhang) and taken to Joseph Kang’ethe which is the government dispatch center for street children to reform, 10% were found idling at Machakos bus terminus and another 10% refused to go to school and were taken to the remand homes for behavior change, 6% were found peddling drugs and were taken to Juvenile homes and 4% were involved in stealing (breaking up into people’s homes) and were taken to Approved school. All these were done for behavior change and to reduce the number of children in the streets.

Table 4.7: Sample distribution on truancy and future expectations on street children

<table>
<thead>
<tr>
<th>Truancy</th>
<th>Future expectations</th>
<th>Truancy (Frequency)</th>
<th>Future expectation (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer influence</td>
<td>Driver</td>
<td>3 (6%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Mishandling by teachers</td>
<td>Teacher</td>
<td>6 (12%)</td>
<td>18 (16%)</td>
</tr>
<tr>
<td>Mistreatment by guardians</td>
<td>Carpenter</td>
<td>3 (6%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Hates confinement</td>
<td>Pilot</td>
<td>3 (6%)</td>
<td>4 (8%)</td>
</tr>
<tr>
<td>Poverty</td>
<td>Acrobat</td>
<td>20 (40%)</td>
<td>12 (24%)</td>
</tr>
<tr>
<td>Political</td>
<td>Artist</td>
<td>4 (8%)</td>
<td>13 (26%)</td>
</tr>
<tr>
<td>Social problems</td>
<td>Engineer</td>
<td>11 (22%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>50 (100)</td>
<td>50 (100)</td>
</tr>
</tbody>
</table>

4.2.6 Truancy of street children as reported by teachers in the referral schools

Street children revealed as shown in table 4.6 above that before being taken to the centers, they used to attend various schools and dropped out of school due to various reasons. Poverty related reasons made 40% of the children to drop out of school as also stated by (National Government Plan 2000-2008) that the government uplifts people out of poverty and making them afford the necessities of life. I don’t concur with the statement because the poor cannot
neglect the necessities of life. The poor are dying due to hunger. Children are being forced to go to the streets to substitute the parents' meager income. 22% dropped out of school due to social problems like parents being harsh, parents who are drunkards and some abusing them, 12% due to mishandling by teachers with inadequate skills to handle children, 6% due to peer influence, mistreatment by guardian and hating confinement and 8% due to political problems like ethnic violence. The same factors that make children to drop out of school were also quoted by (Rono; 1990, Gachungi; 2005 & Ngau; 1991).

4.2.7 Future expectations as reported by street children
Street children who have developed a positive attitude towards education do admire people and do emulate the people whom they want to be. They responded differently as shown in Table 4.7 above. Street children who revealed that they wanted to be Artists were 26%, another 26% wanted to be acrobats. There was a tally of 10% who wanted to be drivers and carpenters respectively, 8% wanted to be pilots and 6% wanted to be engineers.

Table 4.8: Sample distribution on different ways of admission of street children in the referral schools

<table>
<thead>
<tr>
<th>Admission</th>
<th>Integration</th>
<th>Admission (Frequency)</th>
<th>Integration (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview</td>
<td>Change moral values</td>
<td>5 (11.63%)</td>
<td>25 (58.14%)</td>
</tr>
<tr>
<td>Integration</td>
<td>Emulation</td>
<td>38 (88.37%)</td>
<td>7 (16.27%)</td>
</tr>
<tr>
<td></td>
<td>Sense of belonging</td>
<td>6 (13.95%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Competition</td>
<td>5 (11.63%)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>43 (100)</td>
<td>43 (100)</td>
</tr>
</tbody>
</table>

4.2.8 Teachers report on admission of street children in the referral schools
Mary Immaculate Rehabilitation Center admits children in the center for a short duration, between one to three years depending on assessment and counseling given as shown in Table 4.8 above. When responsible guardians are located, street children go to stay with their guardians/parents, so fewer children remain as new street children are admitted. In Bahati Rehabilitation center, street children stay in the center till completion of their primary and secondary education.
Teachers revealed that as street children are admitted in the referral schools, they respond differently as shown in table 4.8 above. The responses from teachers on change of moral values was 58.14% since street children befriend the non street children and they don't want to be associated with bad behavior and the idea that they were ones street children, 16.27% was on emulating those they do admire and this promotes behavior change, a sense of belonging was 13.95% since they had given up hope in life and had taken themselves as segregated children, they were now happy that they were accommodated like the other non street children and 11.63% was on enhancing competition in co curricular activities and education among themselves as school children not non street children and street children.

### Table 4.9: Sample distribution on teachers for supporting integration

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thirst for knowledge</td>
<td>4</td>
<td>9.3%</td>
</tr>
<tr>
<td>Consultation in subjects not understood</td>
<td>4</td>
<td>9.3%</td>
</tr>
<tr>
<td>Behavior change</td>
<td>11</td>
<td>25.59%</td>
</tr>
<tr>
<td>Sense of belonging</td>
<td>9</td>
<td>20.93%</td>
</tr>
<tr>
<td>Enhances competition in co curricular activities</td>
<td>9</td>
<td>20.93%</td>
</tr>
<tr>
<td>Responsibilities given to change behavior</td>
<td>3</td>
<td>6.97%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>43</strong></td>
<td><strong>100 (100)</strong></td>
</tr>
</tbody>
</table>

The responses from teachers for supporting integration as shown in table 4.9 above were; Some street children consisting of 9.3% were positive towards education but poverty made them to drop out of school, they wanted to make up for the time wasted due to poverty related problems, another 9.3% were always eager to learn and could go for further consultation in the subjects not understood either from the peers or the teachers, 25.59% had changed the bad behaviors they had acquired from the streets and had fitted well in the referral schools, 20.93% were happy and had a sense of belonging since they could fit, do what other non street children were doing in the referral schools, 20.93% could compete with the non street children and defeat them in co curricular activities and this enhanced motivation, 6.97% were given responsibilities for behavior change.
Table 4.10: Sample distribution by teachers on challenges faced on integration and those accompanying children to school

<table>
<thead>
<tr>
<th>Integration</th>
<th>Accompanying street children</th>
<th>Challenges on integration (Frequency)</th>
<th>Accompanying street children (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad behavior</td>
<td>Parents</td>
<td>6 (13.95%)</td>
<td>3 (6.97%)</td>
</tr>
<tr>
<td>Peer influence (Substance abuse)</td>
<td>Guardians</td>
<td>5 (11.62%)</td>
<td>10 (23.25%)</td>
</tr>
<tr>
<td>Not participating in class</td>
<td>Social workers</td>
<td>14 (32.55%)</td>
<td>30 (69.76%)</td>
</tr>
<tr>
<td>Assignments not done</td>
<td></td>
<td>10 (23.25%)</td>
<td>100</td>
</tr>
<tr>
<td>Withdrawal</td>
<td></td>
<td>8 (18.6%)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>43 (100)</td>
<td>43 (100)</td>
</tr>
</tbody>
</table>

4.2.9 The report by teachers on challenges of integration

Responses from teachers as shown in table 4.10 above for supporting integration outweighs challenges in that this kind of behavior is only for a period of time. Teachers responded that even if they supported integration, there were challenges like 32.55% of street children not participating in class since they were still used to the street life whereby they were free in doing anything they wanted with no adult to monitor them, 23.25% were not doing assignments because of the kind of life they had been used to, 18.6% were withdrawn due to the effect of drug used or low self esteem which needed to be raised by the teachers gradually, 13.95% hadn't changed from their bad behavior and needed more time to change and counseling too, and 11.62% were influenced by peers on abusing substances and still needed counseling.

4.2.9.1 The report of teachers on people accompanying street children to school on admission

Teachers responded that for the first time, children are accompanied to school by various people as shown in table 4.10 above. Many children with 69.76% are accompanied to school for the first time by social workers because the parents are either too busy or UN corporative,
23.25% by guardians who were happy that they were re-united with their runaway children and had to recover the lost parental love and take their full responsibility. Those who were escorted for the first time to the referral schools by parents and guardians are the ones whose parents/guardians had already been traced and handed back to them but the sponsors were still taking care of their responsibilities.

4.3 Accommodation by non street children

As street children are integrated into schools, they meet the non street children. Teachers responded as shown in table 4.10 above that some street children are not accommodated by non street children because some are rough, immoral, associated with drugs making the non street children to develop a negative attitude towards them. Given time there is a behavior change and the street children are accommodated. Teachers revealed that they do give assignments to children to reinforce what has been taught and for further practice. Some street children don’t do assignments and do have excuses for not doing the assignments as revealed by teachers;

Table 4.11: Sample distribution of teachers’ on assignments given to street children

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of writing materials</td>
<td>5</td>
<td>11.63%</td>
</tr>
<tr>
<td>Lack of text books</td>
<td>20</td>
<td>46.51%</td>
</tr>
<tr>
<td>I don’t know</td>
<td>5</td>
<td>11.63%</td>
</tr>
<tr>
<td>Too much work at home</td>
<td>13</td>
<td>30.23%</td>
</tr>
<tr>
<td>Total</td>
<td>43</td>
<td>100</td>
</tr>
</tbody>
</table>

Street children had excuses for not doing assignments as shown in table 4.11 above. 46.51% complained of lack of text books and being forced to share in class among many children, 30.23% complained of too much work at home since they do attend referral schools and go back home to stay with their guardians/parents, 11.63% had a tally and the first excuse was lack of writing materials and the latter 11.63% responded that they had no reasons for not doing the assignments.
Table 4.12: Sample distribution on symptoms on drug abusers in the schools and the rehabilitation centers

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sleepy in class</td>
<td>5</td>
<td>11.62%</td>
</tr>
<tr>
<td>Absent minded</td>
<td>24</td>
<td>55.81%</td>
</tr>
<tr>
<td>Restlessness</td>
<td>3</td>
<td>6.97%</td>
</tr>
<tr>
<td>Unkempt hair</td>
<td>3</td>
<td>6.97%</td>
</tr>
<tr>
<td>Bloodshot eyes</td>
<td>2</td>
<td>5.65%</td>
</tr>
<tr>
<td>Colored finger nails</td>
<td>3</td>
<td>6.97%</td>
</tr>
<tr>
<td>Colored teeth</td>
<td>3</td>
<td>6.97%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>43</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Teachers views on the symptoms of street children who were ones drug abusers as shown in table 4.12 above were that the majority of street children comprising of 55.81% were absent minded in class as they were still used to the street life and the effect of drug used, 11.62% were sleepy in class as per the drug used, 6.97% were restless, unkempt hair, colored finger nails and teeth and 5.65% had bloodshot eyes due to the effect of drug used when they were in the streets and due to lack of hygiene too. These symptoms could take time before disappearing. However teachers suggested that counseling should be done from both peers who were ones drug users and had stopped taking drugs and the professional counselors.

Table 4.13: Sample distribution of teachers on the preparation of teaching resources

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Making occasionally</td>
<td>10</td>
<td>23.25%</td>
</tr>
<tr>
<td>Overwhelming lessons</td>
<td>13</td>
<td>30.23%</td>
</tr>
<tr>
<td>Inadequate time</td>
<td>20</td>
<td>86.95%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>43</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Due to the overwhelming number of street children 86.95% complained of inadequate time due to the low teacher pupil ratio as shown in table 4.13 above, 23.25% could make the teaching resources occasionally when time was available and 30.23% complained of the overwhelming number of lessons however denying them time to make the teaching resources.
The teachers who responded on the reduction of poverty as shown in table 4.14 above were 34.88% by stating that giving parents loans to start income generating activities and education awareness on the kind of business to put up, the location and ways of saving and proper use of the profit incurred, 20.93% revealed proper implementation on policy of street children and a follow up, 13.95% on colluding with city council askaris and policemen to round up children in the streets and take them to rehabilitation centers with proper treatment of the street children and facilities, 11.63% on sensitization on parents/guardians on the right parental bringing up so as to reduce the number of children running away from homes, a tally of 9.3% on the conditions on the rehabilitation centers be improved and be conducive and street children be rounded up from the streets anytime they are seen and caned seriously.
4.4 EDUCATION APPROACHES FOR STREET CHILDREN IN THE REHABILITATION CENTERS AND THE REFERRAL SCHOOLS

Table 4.15: Sample distribution by teachers on the approaches used when managing street children and the combination of Non Formal and Formal Education

<table>
<thead>
<tr>
<th>Managing street children</th>
<th>Combination of NFE and Formal Education</th>
<th>Approaches in education (Frequency)</th>
<th>Combination of NFE and Formal education (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group work</td>
<td>Formal</td>
<td>4 (9.3%)</td>
<td>3 (6.98%)</td>
</tr>
<tr>
<td>Discussion</td>
<td>Non Formal</td>
<td>2 (4.65%)</td>
<td>40 (93.02%)</td>
</tr>
<tr>
<td>Peer tutoring</td>
<td></td>
<td>4 (9.3%)</td>
<td></td>
</tr>
<tr>
<td>Resource person</td>
<td></td>
<td>2 (4.65%)</td>
<td></td>
</tr>
<tr>
<td>Role models</td>
<td></td>
<td>6 (13.95%)</td>
<td></td>
</tr>
<tr>
<td>NFE</td>
<td></td>
<td>25 (58.14%)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>43 (100)</td>
<td>43 (100)</td>
</tr>
</tbody>
</table>

4.4.1 Teachers report on the different approaches used when managing street children

Teachers revealed approaches used when managing street children in the referral schools as shown in table 4.15 above. The teachers who proposed Non Formal Education were 58.14% since the approach is flexible and bearing in mind that the street children’s’ concentration span is still low due to the effect of drugs and the kind of food they used to feed on, role models 13.95 as street children see the role model, they will be eager to learn to emulate the role model; 9.3% were tallying in group work and Peer tutoring as children enjoy learning from their peers and 4.65% tallied on discussion and resource person. Gathenya; 2004 Oxford University Press of 1965 and UNICEF advocated for alternative approaches to formal education as addressing the needs of marginalized, the left outs, the push outs and those who have never been to school. Teacher respondents revealed that both NFE and Formal education be combined when teaching street children in class especially at the beginning of integration for smooth transition from NFE to Formal education. The responses were 93.02 % for NFE and 6.98 % for formal education. Coombs 1968 NFE program should replace the complimentary form of education due to the crisis in world education because of lack of funds, unemployment among school leavers and lack of educational quality.
4.5 THE PERFORMANCE OF STREET CHILDREN IN THE REFERRAL SCHOOLS

4.5.1 Academic performance of street children

The third objective of the study was to determine the performance of street children in the referral schools. When street children are integrated into schools, they are taught alongside with the non street children. Teachers responded that after sometime, assignments are given, Continuous Assessment Tests and End Term Exams to gauge on their performance.

Table 4.16: Sample distribution on street children’s’ behavior change by teachers

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to make good and bad choices</td>
<td>7</td>
<td>16.28%</td>
</tr>
<tr>
<td>Stopped running away from class</td>
<td>15</td>
<td>34.88%</td>
</tr>
<tr>
<td>Stopped sniffing glue and fighting</td>
<td>6</td>
<td>13.95%</td>
</tr>
<tr>
<td>Learned to behave well and others like them</td>
<td>5</td>
<td>11.63%</td>
</tr>
<tr>
<td>Stopped fighting and can manage anger</td>
<td>10</td>
<td>23.26%</td>
</tr>
<tr>
<td>Total</td>
<td>43</td>
<td>100</td>
</tr>
</tbody>
</table>

The response from the teachers as the contributing factor to performance as shown in table 4.16 was; the attitude of children impacting negatively or positively on the children’s’ performance comprising of 44%. The motivation on the teacher’s’ was 40% to enhance learning of the child and those with learning disabilities were 16%. To enhance the learning disability, a teacher needs to be equipped with skills to handle the street child so as to be positive in learning and enhance the hidden talents in the street child because learning also takes place in the child’s talents for future employment.

4.5.2 Teachers report on street children’s’ behavior change in the classroom

The response were that 34.88% of street children had stopped running away from class, 23.26% had stopped fighting and could manage anger, 16.28% could make good and bad choices, 13.95 % stopped sniffing glue and fighting and 11.63% had learned to behave well and others could accommodate them. Teachers revealed that Street children are monitored, guided and counseled and records reviewed for a follow up in order to know the interventions to take to help mould the future of the street children.
Table 4.17: Sample distribution by the Caregivers in the rehabilitation centers on the admission and academic requirements of street children

<table>
<thead>
<tr>
<th>Admission</th>
<th>Academic requirements</th>
<th>Admission (Frequency)</th>
<th>Academic requirements (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Picked from the streets</td>
<td>Copying with academics</td>
<td>3 (75%)</td>
<td>45 (90%)</td>
</tr>
<tr>
<td>From the dispatch centers</td>
<td>Copying with co curricular activities</td>
<td>1 (25%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>4 (100)</td>
<td>50 (100)</td>
</tr>
</tbody>
</table>

4.6.1 Caregivers report on admission of street children in the institutions

Respondent caregivers revealed ways in which children are admitted in the institutions as shown in table 4.17 above as comprising of 75% of street children were brought to the centers by using various strategies because street children are always suspicious of strangers and they have to get used to strangers before agreeing to go and stay at the centers, 25% were taken to the centers from the dispatch centers and none of the children were picked from the streets and taken straight to the centers without any strategies used. The caregivers revealed that as street children were brought to the centers, assessment was done mainly to know the level of education of the street children and to find out if street children have any responsible parent/guardian. Those who have never been to school are taught NFE and those who have been to various schools are counseled on the importance of schooling and later taken to the referral schools. In the rehabilitation centers, during NFE, 90% of street children were copying with academic requirements and 10% were not copying with academic requirements but preferred co curricular activities.
Table 4.18: Sample distribution by the Caregivers on problems faced by street children and substance abuse

<table>
<thead>
<tr>
<th>Problems</th>
<th>Substance abused</th>
<th>Problems (Frequency)</th>
<th>Substance abused (Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjusting to the required behavior</td>
<td>Drugs and other substances</td>
<td>7 (14%)</td>
<td>3 (75%)</td>
</tr>
<tr>
<td>Abusive language</td>
<td>Abused none of the substances</td>
<td>3 (6%)</td>
<td>1 (25%)</td>
</tr>
<tr>
<td>Stubborn</td>
<td></td>
<td>40 (28%)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>50 (100)</td>
<td>4 (100)</td>
</tr>
</tbody>
</table>

4.6.2 The Caregivers report on problems faced by street children in the centers

The caregivers revealed that they had problems with the street children as shown on table 4.18 was stubbornness being more predominant, taking 28%, adjusting to the required behavior was 14% and 6% were still used to abusive language. Street children were used to being free with no confinement and no supervision from the adults and time was needed for behavior change. Caregivers revealed that when street children are brought to the centers, they found out that the majority had abused substances and minority had not. They had partly succeeded in rehabilitating those who were abusing drugs. Those who abused drugs and other substances and had stopped were 75% and those who had not were 25% but were on the process of stopping.

Table 4.19: Sample distribution on the educational achievements of street children in the centers

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moral values</td>
<td>20</td>
<td>40%</td>
</tr>
<tr>
<td>Life skills</td>
<td>5</td>
<td>10%</td>
</tr>
<tr>
<td>Literacy</td>
<td>9</td>
<td>18%</td>
</tr>
<tr>
<td>Vocational training (self employment)</td>
<td>16</td>
<td>32%</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>
4.6.3 The Caregivers report on the education achievements of street children in the centers

The respondent caregivers gave their opinion as shown in table 4.19 above on the educational achievements and street children phenomenon. Street children who had changed from immoral to moral values were 40%, those who had undergone vocational training were 32%, those who were now literate were 18% and those who had acquired life skills were 10%. This showed that some efforts was evident on the Caregivers and the street children and could now get money in a moral way after acquiring life skills through vocational training and could also be trusted when they are employed. Due to literacy, street children could also pursue their dream careers. The respondent caregivers revealed that street children should be taken to adoption centers, vocational training and the rehabilitation centers so as to be rehabilitated, educated and trained on vocational training.

4.6.4 Suggestion of the District Advisor to schools

The education policy on vulnerable children on inclusion and integration had already been implemented. The street children have not been spelt out on the policy implementation. The magnitude of the street children’s problems was harassment by other street children, bullying from older street children and child abuse from parents, guardians and adults in the streets. Efforts to solve the street children’s problems were budget funding on the most vulnerable, children being allocated into the referral schools that they do attend and not in the rehabilitation centers which offer NFE. The first group of street children was taken to the National Youth Service to be rehabilitated and trained and then was absorbed in the police force. Rehabilitation centers were put up by the government for the street children but they are in squalling conditions prompting street children to run back to the streets.

Approved schools, Remand homes and Juvenile homes have been put up for street children but they are only for correction purpose. Children mainly drop out of school due to poverty, harassment, peer influence and mismanagement by administration and social problems. Reform changes for the government and the education service providers were; sensitization of children to know their rights and report any mishandling to the chief. Strategies in place to ensure street children get education was the implementation of Free Primary Education, School feeding program had kicked off in schools. The chief had been given the mandate to
summon parents/guardians who were keeping school-going children at home and arresting those who were advocating for child labor.
5.1 Summary of findings
This chapter summarizes the study and presentations, conclusion and recommendations. It also gives suggestions for further research.

5.1.1 Services in the rehabilitation centers
Various services are carried out in the rehabilitation centers, namely guidance and counseling, assessment and vocational training. Activities done in the centers are organized to keep the children busy at all times, to be self disciplined and responsible. (Gorham; 1980). The activities are attending classes, vocational training, taking meals together, cleaning and games. In healthcare as in nutrition, disease control, the physical health of the children is in control. (Arockia: 1997). Assessment is measured by the right placement in the referral schools or parents/guardians traced to stay with the child. Counseling is measured by moral values. Vocational training is measured by being skilled or not or through the end product of an item made. Children like the centers because of the provision of the basic needs. In Mary Immaculate Rehabilitation Center, street children stay for a period of time then the social workers locate the guardians or parents.

Street children are then taken to the referral schools which are closer to their homes and integrated into the schools to learn alongside with other children. In Bahati rehabilitation center, the children stay in the centers and join others in the referral schools and those who are in secondary boarding schools join the rest during vacations. School requirements are taken care of by the sponsors and the social workers make a follow up of their progress. The rehabilitated street children are positive in life; they mentioned the people they want to emulate and what they would like to be when they grow up. However, with the continuation of rehabilitation and education, street children are bound to have positive behavior change, become reformed children, acquire knowledge, have future expectations and be self employed or employed as per the vocational training they do undergo.

5.2 Education of street children in the referral schools and the rehabilitation centers
The teachers named some approaches in education like calling a resource person to teach street children as per the relevance of the topic to break the monotony of the teacher, peer
teaching since children learn better by themselves as those who fear teachers benefit too. Field trips to break the classroom monotony and children learn better when they see with their eyes. Some suggested discussion groups to make those with fear towards the teacher contribute in their groups for competition when it comes to group reports. Others suggested role models to make the children work harder to emulate the role model. Some called for combining NFE and formal education to cater for diverse needs of all learners. According to (Coombs; 1968), NFE should replace formal education due to crisis in world education. The researcher concurs with the statement because diverse needs of different learners are not being taken care of and the result is children dropping out of school.

5.3 Performance of street children in the referral schools.

Performance is measured by the marklist of previous exams taken, being positive towards learning, participation in class and the assignments done. Co curricular activities is measured through participation or not participating. Most children are positive towards their education, they try as much as possible to do the assignments, to concentrate in class, to attend school regularly, to ask questions for clarification and to befriend those who are good in various subjects for clarification of the topic not understood. A few are reluctant and see learning as a waste of time due to the named reasons, being mishandled by teachers who have inadequate skills to handle them, learning disabilities, punishments from teachers and some hates confinement in class and loves their freedom.

A variety of reasons have made children to drop out of school like poverty making children to fend for themselves. Some dropped out of school due to ethnic wars and therefore displacement. Others are mishandled by guardians or parents. Responsibilities are also given to street children in schools in order to raise their self esteem, retainment and completion of their education. The policy of integrating street children in schools has been criticized by some teachers who argue that non street children pick up bad habits from street children. However, most teachers argue that once both groups are integrated, after a period of time, they open up quickly. They stop their habits of aggression, withdrawal and secrecy and this also contributes positively to rehabilitation as a service. Street children are regarded as very bright, and when they are fully integrated in stimulating atmosphere, become quick learners. This hunger for knowledge stimulates non street children in the learning process. Some
teachers responded that once street children and non street children come to know one another, they often form a good team in academic work and in co curricular activities.

5.4 Summary
The research questions were; what type of rehabilitation services are street children offered? what are the various approaches for the education of street children in the rehabilitation centers and the referral schools and what is the performance of street children in the referral schools? The study targeted Bahati Rehabilitation Center in Kamukunji district and Mary Immaculate Rehabilitation center in Makadara district. The referral schools were St. Elizabeth, St. Bakita and Morisson Primary Schools. The key informants were, the teachers in the referral schools and the rehabilitation centers, the caregivers in the rehabilitation centers and the District Advisor to schools in Makadara District.

The study found out that street children should be provided with a conducive environment in the rehabilitation centers, with proper sanitation and caregivers should be above 18 years old because too young a caregiver may not be taken seriously by the street children. In education, street children should be integrated with the non street children to have a sense of belonging, raise their self esteem, to emulate their role models and achieve their future expectations.

On academic qualifications of teachers, the study found out that the majority of the teachers had attained Diploma level in inclusive education to cater for the individual needs of all learners in the referral schools. This is a significance influence on pupil’s achievement. (Hyneman; 1976). On the parent’s status, 44% of the parents were alive and yet their children were staying at the rehabilitation centers. There was a variety of factors that led the children to stay at the centers namely, lack of provision of the basic needs, harsh parents, parental drunkenness and many others. According to Anyang; 1995, the major factors of children staying in the centers is due to poverty, decreased levels of welfare, family disorganization, instability and urbanization.

On the economic status of parents, 62% of the parents were involved in informal labor. This means that the economy is not stable. In households, the income to make the necessary food purchase is not available or in short supply. Household size also affects food security. Low income families face financial difficulties and find it hard to meet family food needs.
However, children have to move to the streets to look for food to substitute family income. In Kenya, the labor force aged 15-64 makes 52% of the total population. With the high unemployment rate estimated at 15%. (Labor Force Survey; 1999). This means that the working segment of the population is quite small. On street children’s’ age, 40% were between 16-17 years showing that these are mature children and if shown the right upbringing can be responsible people in the society.

Assessment, rehabilitation, counseling, health and education are the main services offered in the centers. The street children were happy to live at the centers and 40% revealed provision of adequate food as their main reason for liking the centers. According to Hoolin; 1999 & Fasino; 1985, Marie Adalaide Program based in Karachi in India provides meaningful services for street children. This attracts the street children to love staying at the center. As children are at the centers, there are various activities organized to keep children busy at all times, to be self disciplined and responsible. (Gorham; 1980). The activities are attending classes, vocational training, taking meals together, cleaning and games.

On substance abuse, street children took drugs due to various reasons. 40% took drugs for identification by other street children. However, proper counseling had to be done, a proper follow up on substance abuse and intervention measures taken. Street children had visited various institutions (dispatch centers) before being brought up to the centers where they are currently staying. 56% had visited other children’s’ homes. Some had visited correctional centers namely Approved schools, Remand homes and Juvenile homes due to breaking into peoples’ homes, peddling drugs and many others. This is misuse by adults because street children are vulnerable and they are paid a small fee/food for the service. If there were enough centers and street children were out of reach of adults then they could not have been misused. This is child labor and it’s most prevalent in Kenya.

Street children used to attend various schools before going to the streets. They revealed that various reasons made them to drop out of schools. 40% dropped out because of poverty. 22% left school due to social problem; some were being mishandled by teachers with inadequate skills. According to UNICEF & GOK; 1995), the challenges for schools for teachers is to be flexible enough to adopt to the needs of the disadvantaged children while offering education of sufficient quality, to train all children while they are in school. Rono; 1990, Gachungi 2005
Ngau, 1991 stresses that there are factors that lead to children dropping out of schools as learning disabilities, behavior disorder, punishments and poor academic performance. As much as street children dropped out of schools, (Black, 1999) stated that the consequences for dropping out of schools are a severe waste of human resource, an intergenerational perpetuation of poverty and under employment and an increased possibility of crime, violence and social unrest.

As street children admire and emulate their role models due to integration in the referral schools, 26% wanted to be Artists, 16% wanted to be teachers, 24% wanted to be Acrobats because they are taught acrobatic actions by a resource person at Mary Immaculate Rehabilitation center. In Mary Immaculate Rehabilitation center, street children are admitted for a short period as their guardians/parents are relocated and if they are responsible people, children are taken to stay with their parents/guardians. After undergoing rehabilitation, 60% of the street children had stayed at Mary Immaculate center and were on the exit of being taken to their parents and the referral schools to create room for others who were in the process of admission through various strategies.

When street children are admitted into referral schools, interviews and integration is done depending on the class the child is to be admitted in. Interviews are done for the right placement of children especially those who wanted to be admitted in classes seven and eight. 88.37% were admitted for integration while 11.36% were interviewed. Various responses were given by teachers on reasons for integration. As street children are learning with the non street children, 58.14% with loose moral values had changed since they do admire and emulate the non street children. 13.95% had a sense of belonging. This motivates the street children to feel that they are a part of the society.

Rehabilitation and education has influenced behavior change. The highest being 92%, meaning that there was a positivity in the majority of the street children. A small percentage did show emotional behaviors namely anger, stress, anxiety, depression, withdrawal, use of abusive language and fighting. However, the small percentage if given time was bound to change.
5.5 Conclusion

Based on these findings, the government’s initiatives is evidenced by putting the street children in the rehabilitation centers like children orphanages, Juvenile homes or correctional centers despite some institutions prompting street children to run back to the streets due to the squaring conditions and mistreatment by the workers. The first group of street children was taken to National Youth Service to be trained and that was the end of training. Various education approaches have also been used to keep street children in schools with the Ministry of Education policy of retaining children in primary schools till completion of basic education but quality education is still lacking. Many factors contribute to the dropping out of children from schools. Poverty makes children to drop out of school because setting a meal on the table becomes extremely hard for parents who earn less than a dollar per day and being that some children stay hungry however being forced to drop out of school to help their parents to supplement the families income by begging in the streets or getting involved in child labor. Some parents are not able to afford school uniform and other school requirements for their children. Some children are not able to do school assignments due to the pathetic conditions of their homes and this makes the teachers to punish them and therefore opting to drop out of school. Integration into referral schools should be encouraged to enhance competition in co-curricular and curricular activities, to have a sense of belonging, know one another as peers and form a good teamwork in academic work and co-curricular activities. Rehabilitation as a service promotes responsible behavior, self-confidence, equality and prevention of substance abuse. Vocational training should be externally efficient to make learners make a living out of the skills acquired. This will make the young people successful in the world of work.

5.6 Recommendations

Many rehabilitation centers should also be put up in order to cater for the increasing numbers of street children.

NFE teachers to be trained

Appropriate exploration of talents should be reinforced so as to help street children in their future career.

Families should be strengthened through increased attention to parenting skills and education of both parents and the public about children’s’ rights.
5.6.1 Recommendations for policy makers

The civil society should partner with the government for the hard to reach groups. They should be provided with quality and appropriate education.
There should be equitable distribution of learning and teaching materials even in the Non Formal Education Schools.

5.6.2 Recommendations for further research

More research should be carried out in the area of pedagogy for street children, their psychology and sociology. Studies should also be done in the area of curricular, teaching and learning resource for street children.
REFERENCES


Ekundayo J D 2001.”*Successful Experiences in Non formal Education and Alternatives approaches to Basic Education.*” Biannual Conference Tanzania

Floro M and Wolf J M 1990 *The Economic and social Impact of girls Primary Education in Developing countries*. Washington, USAID


Gorhan A 1980, Nonformal Training Programs for Rural Skill Development. Stolkholm, Sida


Appendix I

Letter of introduction to the respondents

University of Nairobi,
Department of Sociology,
P. O. Box 30197,
Nairobi.

Dear Sir/Madam,

Thank you very much for accepting to participate in this study. The purpose of this study is to establish the rehabilitation and education for street children in Makadara District, Nairobi.

Please read the instructions carefully and kindly respond to all the items in the questionnaire.

Yours faithfully,

Hildah .S. Ounah.

M.A. Student in Sociology.
APPENDIX II

REHABILITATION AND EDUCATION FOR STREET CHILDREN IN MAKADARA DISTRICT, NAIROBI.)

Hallo. You are kindly asked to fill this questionnaire. Your responses will be treated with highest confidentiality. Thank you in advance.

INTERVIEW GUIDE FOR STREET CHILDREN

Socio-demographic profile

1. How old are you? (list the exact number of years between 10-16)

2. What class are you in?

3. Are your parents still alive and staying together?
   Yes
   No

5. If No, explain

6. What do your parents do to earn a living?

Knowledge, attitude and practice

7. What services are being offered at the rehabilitation center?

8. Why do you prefer living in the center as opposed to your homes?

9. Where do you spend your free time?
   Institution
   Street
   Home
   Others (Specify)

11. Do you use any drugs? Please state the drugs that you use.

12. Why do you use the drug you have stated?

13. Among these institutions, which one have you been to?
Approved School
Remand Home
Street children homes
Juvenile Remand Home
(Others Specify)

14 If yes, what were the reasons that made you to go to these institutions?

15 Have you ever attended any kind of school? 
   If yes, why did you drop out?

16 What would you like to be when you grow up?

17 How often do you attend school now that you have been given the chance to learn?
   Regular
   Not regular

18 When did you come to this rehabilitation center?
APPENDIX III

INTERVIEW GUIDES FOR CAREGIVERS

Hallo, you are kindly requested to fill this questionnaire. Your responses will be treated with highest confidentiality. Thank you in advance.

Socio-demographic profile

1. Gender

   Male □
   Female □

2. How old are you?

   20-30 □
   31-40 □
   41-50 □
   51-60 □

Knowledge, attitude and practice

3. How were the children placed in your institution?

4. Are the children coping with their academic requirements? (explain)

5. Do you have any general problems with the children? (explain)

6. Based on your experience and ranking them on their prevalence, what are the 2 major drugs and substance abuse that your street children abuse?

   (i) ........................................
   (ii) ........................................
7. What is your opinion on the educational achievements of the street children in your institution and generally on the street children phenomenon?


8. In your opinion, based on your experience, what do you think should be done to street children?
APPENDIX IV

INTERVIEW GUIDE FOR TEACHERS

Hallo, you are kindly requested to fill this questionnaire. Your responses will be treated with highest confidentiality. Thank you in advance.

Socio-demographic profile

1. Gender.
   - Male □
   - Female □

2. How old are you?
   - 20-30 years □
   - 31-40 years □
   - 41-50 years □
   - Above 51 years □

Knowledge, attitude and practice

5. How are children admitted in this school?
   - Interview □
   - Integration □

6. Do you support the idea of integration?............
   - Yes □
   - No □

7. What are your reasons for supporting or not supporting integration

8. Who accompanies these children to school during their first time of admission?
   - Parent □
   - Guardian □
   - Social worker □

11. Do other non street children accommodate them?
12 Do they respond positively to the assignment given?

13 Which symptoms are you able to see on those who abuse drugs?

14 What can be done to reduce the number of children in the streets?

15 Which type of education best suits street children?
   - Formal
   - Non formal
   - Others, specify

16 Do you keep records of the childrens' behavior?

17 If yes how does your records help in terms of behavior change?

18 Are you trained to handle disadvantaged children?

19 If no, what challenges do you face?

20 If no, what are their major reasons for not attending school regularly?

21 If no, why are they not accommodated?

22 How is their attitude towards education?
23. What is the general performance of the street children?

24. Do you prepare adequate teaching resources to cater for all your learners?
APPENDIX V

INTERVIEW GUIDE FOR THE DISTRICT ADVISOR TO SCHOOLS

Hello, you are kindly requested to fill this questionnaire, all your responses will be treated with highest confidentiality. Thank you in advance.

Socio demographic profile

1. Gender

   Male ☐
   Female ☐

2. How old are you?

   30-40 ☐
   41-50 ☐
   51-60 ☐

Knowledge, attitude and practise

3. State the education policy and implementation

4. What is the magnitude of the street childrens’ problem?

5. What efforts have been made to solve the street childrens’ problem? Successes and Failures
Comment on the dropout rate of children in your district.

Comment on reasons for dropping out.

What reform changes would you recommend for the government and other educational service providers?

What strategies does the government have in place to ensure street children get education?
APPENDIX VI
OBSERVATION CHECKLIST

10 Availability and display of schedules or timetables at various strategic areas (class and staffroom, administration office, noticeboard, dining).

<table>
<thead>
<tr>
<th>Services</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voluntary</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vocational</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Counselling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rehabilitation</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

2.0 The condition of physical facilities. (cleanliness, maintenance, space, furniture).

<table>
<thead>
<tr>
<th>Physical facilities</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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</thead>
<tbody>
<tr>
<td>Dormitories</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classrooms</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical clinic</td>
<td></td>
<td></td>
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<tr>
<td>Kitchen</td>
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<tr>
<td>Sanitation</td>
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</table>
### 3.0 Provision of quality services

<table>
<thead>
<tr>
<th>Services</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Games and sports</td>
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<tr>
<td>Division of labour</td>
<td></td>
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<tr>
<td>Availability of departments</td>
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<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Exploring talents</td>
<td></td>
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</tr>
<tr>
<td>Response to bells</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Rehabilitation</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Time allocation</td>
<td></td>
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<tr>
<td>Provision of personal items</td>
<td></td>
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<tr>
<td>Health care</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Accommodation</td>
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<td></td>
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</tr>
<tr>
<td>Condition of beds</td>
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<tr>
<td>Beddings</td>
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<tr>
<td>Recreation</td>
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<tr>
<td>Television</td>
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<tr>
<td>Radio</td>
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</tr>
<tr>
<td>Sports equipments</td>
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<td></td>
</tr>
<tr>
<td>Security</td>
<td></td>
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</tr>
<tr>
<td>Food quantity</td>
<td></td>
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</tr>
<tr>
<td>Quality</td>
<td></td>
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### 4.0 Staffing qualifications

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<tbody>
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</tr>
<tr>
<td>Educational level</td>
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</tr>
<tr>
<td>Experience</td>
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</table>
TO WHOM IT MAY CONCERN

RE: HILDAH SEWE OUNAH – C50/71530/2008

Through this letter, I wish to confirm that the above named is a bonafide postgraduate student at the Department of Sociology & Social Work, University of Nairobi.

Further, I wish to inform you that the student is collecting data for her research proposal on “The rehabilitation and education for street children in the case of Makadara District, Nairobi”

Through this letter, I am kindly requesting you to provide the student with any form of support that is required to collect data.

Dr. Robinson M. Ocharo
Chair, Dept. of Sociology & Social Work

c.c. Dr. O. Gakuru
Ref: HRM/ CN/ VOL. II/ 22/2011

DEPARTMENT OF HUMAN RESOURCES MANAGEMENT

Date;  8th SEPTEMBER 2011

HILDAH SEWE OUWAH

UNIVERSITY OF NAIROBI

P.O BOX 20197 - 00100
NAIROBI

RE: RESEARCH.

Reference is hereby made to your application letter dated 6th SEPT 2011 on the above subject;
The City Council of Nairobi has approved your request subject to the following;
1. The period of research will be TWO (2) months with effect from 19th SEPT 2011 to 18th NOV 2011.
2. You will be attached to SOCIAL SERVICES & HOUSING DEPARTMENT (BAHILI REHABILITATION CENTER)
3. You are expected to adhere to the rules and regulations pertaining to your research.
4. That during your study there will be no costs devolving on the Council.
5. That you undertake to indemnify the Council against any claim that may arise from your research.
6. You are expected to be decently dressed at all times.
7. You are required to submit a Copy of the final research document within ONE weeks/months after completion.

By a copy of this letter C.A.O (SOCIAL SERVICES & HOUSING DEPARTMENT) are requested to accord you the necessary assistance.

ALICE KAHUTHU
FOR: DIRECTOR HUMAN RESOURCE MANAGEMENT.