UNIVERSITY OF NAIROBI

DEPARTMENT OF SOCIOLOGY AND SOCIAL WORK

REHABILITATION OF STREET CHILDREN
A CASE STUDY OF RELEVANCE OF SOCIAL EDUCATION AND
ETHICS (SEE) IN THIKA REHABILITATION CENTRE

M.A PROJECT

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DECLARATION

In the undersigned, declare that this project is my original work and has never been presented to any University for academic credit.

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DEDICATIONS

To all children suffering on the streets due to social injustice, poverty and lack of parental guidance, and all teachers who aim at bringing out the best of a child's potential.

ACKNOWLEDGEMENTS

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CHAPTER ONE

1.1   BACKGROUND TO THE STUDY

Social Education and Ethics (SEE) was introduced in Kenya's secondary schools in 1985. According to Bennaars (1987:74), the subject was received with a certain amount of apprehension since the subject matter of content was complex, the methodology vague and teachers were unprepared. Furthermore it had not been given a serious consideration and therefore not much was expected from the subject. It is now more than ten years since its inception yet nothing much has been achieved. This is despite the fact that the objectives postulated for teaching SEE are of use to society.

In relation to the country, the subject of great importance since it not only helps the young to grow up better but it also helps them distinguish between "good and evil". This helps bring up mature individuals who are acceptable in society in all aspects, socially, morally, mentally and physically. SEE could be necessary in imparting good behaviour to street children. This is perhaps one of its limitations, because it aims only at secondary school students. Therefore it has failed to recognize the needs of children in primary schools. This study however, tries to find out whether SEE can be applied in the case of street children in order to create an enabling environment for their rehabilitation within the society.

Between the years 1980-1996, Nairobi province experienced a marked increase in the number of street children. According to UNESCO Report (1996:21), the number was 30,000 in Nairobi, with at least twelve per cent increase per annum. The situation worsened by the tribal clashes (1991-1992) where many people were killed and thousands left homeless. These people escaped to various towns in search of job opportunities and security.

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Apart from tribal clashes, child abandonment meant that more children were added to the streets. The necessity to put up more homes grew with the rise in population of street children. Several rehabilitation centres have been put up all geared at assisting street children. All these effects are aimed at providing the street children with some basic training for the future. In addition to provision of vocational training, they must be taught a certain degree of humanness in order to rationally choose right and avoid evil from their own sake and that of others.

The street children often come from the slums and squatter settlement where poverty and precarious family situations are common. They have to struggle for survival. According to UNICEF report (1997:33), these children shine shoes, wash and guard cars, carry luggage, hawk flowers and trinkets, collect materials for recycling and find a myriad of other ingenious ways to make money.

The majority of these children return home each night. Then there is the other percentage whose only home is the streets or prefers to be on the streets than with their families. UNICEF (1997:93) reported that, about 1 in 10 of such children, the street does become home inevitably. These children become more prone to engage in marginal and illegal work, such as begging and petty thieving. Many are led into illicit, thrilling and dangerous world of crime syndicates that run rings for pick-pocketing, burglary, drug trafficking and prostitution.

Scavenging is most common in the slum areas for example in Mukuru slums of Dandora, children spend their days picking used plastic bottles and metal pieces. This type of work is unhygienic, demeaning and dangerous. They develop several kinds of skin diseases and are susceptible to tetanus received from cuts within these environments. Food eaten from garbage bins can also be a cause of food poisoning and digestive disorders.

The street children have little mastery of themselves. This is especially due to the hard and dehumanizing conditions they face. They therefore have a tendency to become violent, hostile and aggressive towards members of the society.

It is important that juvenile delinquents are guided to act according to specified rules and standards. SEE is more likely to achieve this due to its humanistic approach. The general objectives of SEE are to help learners to;

- Base their decisions on sound ethical principles as an integral part of their personality development.

- Develop a natural attitude and outlook towards life.

- Rationally sort out conflict arising from the traditional extraneous and inner directed moral values.

- Understand and appreciate the social fulfillment and moral rewards occurring from cultivating and adapting virtues and values offered by moral or ethical education.

1.2   Statement of the Research Problem

The major aim of rehabilitation is to change the behaviour of an individual, from undesired behaviour to desired behaviour. On the subjects within the process of rehabilitation is the use of Social Education and Ethics. It is on the basis of its importance that it has been taught in schools. However, no study has been undertaken to ascertain its significance to society and especially among the street children rehabilitation. With this in mind this study is aimed at finding out the effects of SEE in rehabilitation. This research is led by the following research questions.

1.3 Research Questions

This study has the following questions

i. What is the relevance of SEE in the rehabilitation of street children in Thika street children rehabilitation centre?

ii. To what extent has the SEE been effective in street children rehabilitation among street children in Thika?

1.4 Objectives of the Study

1.4.1 Main Objective

To establish the relevance of SEE in street children rehabilitation in Thika rehabilitation centre.

1.4.2 Specific objectives of the study

1. To establish how SEE has been integrated into street children rehabilitation programmes.

2. To establish whether application of SEE has led to street children's acquisition of knowledge on the subject.

3. To establish whether application of SEE has led to behaviour change of the street children.

4. To find out the perceptions of educators and the street children towards SEE.

1.5 Justification of the Proposed Research

The findings of this research will open new and different perspectives of looking at the street children. The study is taken in the hope that prejudices held against the juveniles will be done

away with these and replaced with a sympathetic attitude rather than condemnation. Kenya will also gain from the study since the ministry of education can adapt the SEE syllabus to suit the needs and requirements of the street children. This is especially important given the rapid population growth of the street children. Policies can also be formulated to ensure that where education is missing the street children will be able to get some informal type of education.

The study will also propose ways of improving the lives of street children living in the slums. As integrated program can help street children to accept their type of environment and even improve on it.

1.6 Scope and Limitations of the Study

1.6.1   Scope of the Study

Rehabilitation of street children in Kenya has often taken varying approaches. However application of SEE turns out to be a unique method of rehabilitation since principles applied are easily replicable. In this study, the researcher will focus on how SEE has aided in behaviour change as a result of acquisition of knowledge among street children. Further the researcher will also seek to know SEE has been integrated in rehabilitation process and the perceptions of educators on the same. The study will cover both street children and educators as the key units of study.

1.6.2   Limitations of the Study

1.6.2.1 Time Factor

The amount to time allowed for the study is limited. This is due to the fact that the questionnaires are quite many and people will require more time to answer them.

Subjectivity. Most parents have not understood the relevance of SEE. Some have not heard of it. Therefore, the questions are answered on the basis of what parents know about the street children. Teachers on the other hand have difficult in airing their views since SEE has not been applied in the case of street children.

1.6.2.2 Lack of Data

No previous research has been carried out on the suitability of SEE to society. Thus an attempt to compile data where none is available is taxing only based on what is collected on the field.

1.6.2.3 Illiteracy and Dishonesty

Some of the parents who would have been of great use in the study are illiterate. Therefore, no data can be obtained from them. Others are cheating in the hope of gaining materially, which leads to loss and distortion of useful information. However, the case of illiteracy is solved through oral interviews.

1.6.2.4 Terms

Street children: Describes the children and young people who live or work on the street and in other urban places, which include empty buildings and wastelands. Such persons include children, who work in the street and live at home and those who work and live on the streets.

Institutionalized Street Children: Refers to the vulnerable group of children who live away from their families, may not have family ties, but fall within some social and/or educational institutions.

Rehabilitation: refers to transforming through education of street children to become productive members of the society.

Juvenile Delinquent: Mugambi (1989:92) defines a delinquent child as one out of parents or guardian control the child had defeated the parents or guardians and therefore has become a societal concern (see the law of Kenya, section 22 cap 141) on "children and young person Act," a delinquent child is one who is in need of protection and discipline. Parents may desert the child or guardians may be falling into bad associations or exposed to moral or physical danger might be kept in any promises, which are over crowded unsanitary and dangerous. KMWA (1989:28) delinquent child is one found begging or giving aims or inducing the giving of aims.

Street children: According to Undugu Society of Kenya a street child is any school going child who is out of school and lacks basic care such as shelter, food, clothing, health, security, love and protection offered by a parent or guardian. Street children fall in the category of neglected or children in especially difficult Circumstances (CEDC). A neglected child is defined in children's Act 2001 as one who is found begging, or (ii) is found without having any home or settled place of abode or any ostensible means of subsistence or found destitute whether he is an orphan or not, (iii) has a parent or guardian who is unfit to exercise proper care and control over the child.

Education: Bennaars (1987:44) says that it is the process of bringing up children. Helping the young grow up not just physically but also mentally, morally, social and emotionally.

Ethics: Macquarrie (1967:22) describes it as the art or science of imparting morality to help the individual distinguish right from wrong.

CHAPTER TWO

2.0 LITERATURE REVIEW

2.1   Introduction

In Kenya, there is a lot of work being done in the field of street children. However, most of the interventions are mainly curative rather than preventive. As such the problem has persisted for a long time but much more within the last two decades. Rehabilitation is one of the curative measures but there is a need to find out how well it is being implemented. In this chapter, the researcher is making an attempt to find out what value SEE has added in rehabilitation of street children.

2.2 The Situation of Street Children

Street children in Kenya and the world over are held with so much suspicion and prejudice by a society that does not care about their existence. Due to this, they have earned themselves names such as parking boys and girls, *chokora mapipa*, and even worse, juvenile delinquents. Delinquents according to Miller (1958:213) are of four types. "There are those influenced by and the one who has little strength of character". Hence, where social acceptable channels have been closed or are unattainable delinquent becomes the vehicle of self expression. He adds that delinquency may be a form of adjustive behavior". The problem of street children seems to arise from the fact that they have no stable homes Odeyo (1966:48) suggests that "some parents feel quite helpless and leave the children to themselves." As Odoyo (1966:48) observes one can find "children as three years on the street surviving by themselves." These children later indulge in excesses which include drug abuse, begging and petty theft.

Boyden (1991:124) points out that once on the streets, "children can be persecuted by the police

who are encouraged by a public which fear and despises the children. They are apprehended regularly and placed in remand homes or similar conventional institutions on charges of vagrancy, loitering, drug abuse and theft. "Rehabilitation is therefore necessary. However rehabilitation involving provision of food and housing ends up creating dependency among the street children. Mbogoni (1992:85) agrees on this point and insists that, attempting to rehabilitate the street children, even though a noble and necessary undertaking, was merely a superficial solution since it addressed the symptoms of the deeper rooted problem rather than the cause itself."

2.3   Causes of Street Children

No single cause of delinquency can be isolated. Many factors have been identified. They are:

a) The family

b) The individual

c) The society and community

2.3.1 The Family

This is the smallest and basic unit of society where all morality stems. The family as an institution has been caught up in changes occurring in society at large. Traditional functions assumed by the family have been reduced. Traditional patterns of authority are being revised. This according to ANPPCAN (1995:32) deprives the broken family of some social security. Children born in such families are bound to suffer especially where there is no love or security. Role-playing is also another determinant of social security. Miller (1998:29) states that:

Confusion of the feminine role is reflected first in the trend towards more women seeking

employment outside the home and secondly in the phenomenon of the middle class male known for spending a great amount of time away from the home leaving the mother to fulfill both masculine and feminine roles. A child may later rebel either against the substitute parent on the imposed femininity.

Such a reaction is likely to aggravate the situation where the parents are alcoholic or live in poverty. The child is then influenced to go out looking for a better place to live in most cases this end up on the streets.

Other cases of street children stem from right within the family. ANPPCAN (1995:32) gives a summary of the categories of delinquents found on the streets. It has been found out that majority of parents in fact are responsible for putting their children onto the streets to secure additional financial support for the family. Then there is the category of children whose parents are poor to keep them in school and of their own volition wonder through the streets all day abandoned and where their only homes are in the streets.

Poverty within the family is also a determinant factor of children found in the streets. Poverty is said to perpetuate other families within the street families (that is, they marry and get children in the street and thus have no other homes).

2.3.2 The Individual

The basic needs of all children must be met, if they have to have personal identity and acceptance. To achieve this, they need adequate and meaningful relationship, proper models, and realistic goals. A child without education has little options to choose from when it comes to identity and acceptance. Miller (1958:), Castle (1958) and Hartshorne (1950) say that when deprived of such things the tendency is towards adopting short range goals or joining a subgroup

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which meets their needs. Such a group may be a delinquent subculture whereby deviant behaviour is the norm.

2.3.3 The Society and Community

In the past, the question of child's rights never arose in the African traditional society, since child-rearing was a role played by the community as a whole rather than the parents. Standard (1989:11) supports the idea suggesting that: The traditional practice ensured that the child developed well versed in tribal customs and values. The well being of the child being a community affair, was given the importance it deserved. With modernization the traditional family values have been broken leading to contemporary families being less stable and less caring in some instances.

This has led to increased divorce rates, violence in the family, child abuse and neglect, juvenile delinquency and frequency of extra marital affairs leading to family disorganization. This often has dire consequences especially on children.

Society has not been spared either. The modern society is in a state of transition. Rapid technological change greater mobility and specialization have resulted in increased anonymity. According to Macquarie (1967:77) crime, violence and demeaning sexuality behaviours are often experienced and hence the society presents conflicting values. He goes on to say that, 'a premium is put on success, status and wealth whereby this stress has led to a state of normlessness or 'anomie'.

UNICEF, (1997:29) adds that Children working on the streets are the progeny of some of the most distributing social phenomena in the world today: Rapid urbanization, runaway population growth and increased disparities in wealth. Their rising numbers also indicates a constellation of

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other trends such as cut backs in government and social educational budgets and breakdown of traditional family and community structures which leaves children unprotected.

According to President Moi of the Republic of Kenya, in his book, Kenya African Nationalism (1986:32-49), he suggests "the absence of the communal social cohesion of the traditional societies has made large promotion of urbanized Africans lose their system of value and sense of direction". There is no one to guide them (the children) through the acceptable rules, standards and societal norms.

This creates a discrepancy in the capacity to achieve cultural and societal goals which is overcome by "deviant behaviour". This however does not bring about the desired solution and the behaviour increases in intensity to the point where society cannot stand it.

Other conditions found in the community which may influence delinquency are: overcrowding or dilapidated housing, lack of or limited recreational facilities, a deficient educational system and class or social segregation which accentuate hostility and antagonism.

2.4   Problems Faced by Street Children

Street children face untold hardships within the streets. The problems experienced outweigh their expectations of a good life out in the streets. Some of the problems faced by the street children include;

2.4.1   Street Violence

This is manifested in husbands and fathers who beat their wives and children senselessly. Onyango (1989:36-39) suggests that violence is devastating to family members. In cases where the children feel insecure and lack the support of a living family they may engage in antisocial

behaviours in order to survive. The street could become a better option away from their hostile environment.

Violence does not only come from without, it can have its origin from within the individual. May (1972:58) supports the ideas of violence as a way of asserting oneself in society. This is in no way recognized by society therefore violence is used to call for attention.

McNeil (1969:219) adds that conflict gangs develop in disorganized slums n which violence provides the only route to social status. Basigwa (1997:12) also states that those children on the streets are often under the threat of violence or even subjected to systematic terror beating and murder by street gangs, organized killing squads and sometimes the police under the guise of clearing the streets to be clean and safe.

Sunday Nation (1997: 6 May 7th) reported such a case of violence on street children where a policeman in Nairobi city shot a street boy in the leg after he allegedly caught him stealing a headlamp from a vehicle. Another one is reported in the same paper to have been killed by an irate mob after stealing a sweet from a street hawker.

Other cases of violence meted on street children include rape as reported on the Sunday Nation (1997: 6 May 7th) by policeman on patrol.

2.4.2   Drug Abuse

The most common form of drug abuse among street children is glue sniffing McNeil (1969:78) said that drugs provided the way to self experience and establish and underground means of withstanding from the hubbub of life.

Associated with the issue of drug abuse are the harsh conditions which these children live in. A

research conducted by UNICEF (1991:26), indicates that these children live in gangs under one or more gang leaders; they suffer continual police harassment; they survive on food found in dust bins or brought from meager earnings; when there is no food, they drug their bodies to conceal the pain of hunger; they view and any job as honourable and see no wrong with dishonourable activities when their survival hangs in the balance.

According to Shorter and Anyancha (1997:47-61), the harsh conditions lead street children to engage in drug taking to relieve their misery and to give them the nerve to go in for criminal activities. These drugs are sold by rich people. Those who cannot afford cannabis or hard drugs turn to glue sniffing to enabled them beat the pangs of hunger and the biting cold at night.

2.4.3 Lack of Basic Needs

Shorter and Anyancha (1997:52) states that street children are disadvantaged. Most of them are undernourished, lack shelter and live in deplorable conditions. This is the most common since most of their parents do not work. In cases where there are two parents either one or both are alcoholics thus tend to deprive their children of the basic needs. ANPPCAN (1995:13) indicated that when the family lacks or loses these fundamental elements of welfare, a breakdown of the union will result and the consequences are said to be the main cause of street children.

Most children working on the streets come from extremely poor families. Work done is purposely to supplement their parents earning or a way of maintaining its real income declining economy. Others come from poor conditions with hardly enough basic needs to sustain them. These children live in crowded shanties or their belongings have been bulldozed to create space for private developers or property burnt to ashes. They are thus in need of attention in terms of education, health, food, shelter and clothing Odoyo, (1996:39).

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Deteriorating physical environment could also lead the children to the streets. Enge (1979:26) observes that Children in Nairobi who do not belong to the upper or middle class families live with their parents who do not have regular or no employment at all many of these children grow up in social misery in the slum areas where the family is crowded together in a single room, where there is no water, no sewage, no enough money for proper food and where health care and attendance are considered luxuries.

Under such conditions the children leave home in search of better options in the streets. These can be termed as children in especially difficult circumstances (that is, those children deprived shelter, education, health facilities, security and parental care).

2.4.4 Scavenging

One poet, Wacieni (1994:6-11), has tried to express the plight of street children thus: "With deft hands and accustomed eyes they shifted through the rubbish the putrid smell of decaying matter proved no hindrance as they plunged deeper into the squalor they all had one thing in common that is the hard cold stare in their eyes".

This portrays the street children's agony as they go through dustbins and dumping sites in search of food. They survive on food found in dustbins or bought from meager earnings acquired from sale of "valuables" found in the rubbish heaps.

The Daily Nation (1998:9 March 23rd) and (UNICEF 1997:21) say that scavenging can be dangerous, demeaning and destructive of self-worth. Tramping through garbage heaps in every kind of weather exposes children to skin infections tetanus and other disease.

Basigwa (1997:19, 21-25) explains that the nature of scavenging as an example one of the extreme risk children face in street work. In cities across the developing world young children

spend their days picking up waste paper plastic bottles and metal pieces from the street garbage dumps and waste bins. They later sell them for recycling with very little pay. While collecting rusted iron pieces they usually receive cuts on their hands and become susceptible to tetanus. The broken glass in the garbage may injure their bare feet which may develop into fostering wounds.

2.5 Importance of SEE and Rehabilitation Process of Street Children.

2.5.1 Education and Moral Growth of a Child

There is universal agreement among educators that education should be moral. However, there exists a disagreement as to how education can create moral character. Benaars (1987:12) defines education as the process of bringing up children. It means helping the young grow up not just physically but also mentally, socially and emotionally. The whole purpose of this kind of education is to make young people "independent and mature" so that they can morally stand on their own as adults. Education is therefore the sole responsibility of parents (as first educators) towards their children.

According to Castle (1958:112) the family is the major determinant of morals, others hold to the possibility of the individual's slowly working out his moral code and other affirm that the church or general cultural influences determine morality. In a social context, a person absorbs the moral code of the people who raise him and to whom he belongs. Normally this process of transmitting morality is the function of the family and the adults close to the child. Glueek (1950:63-69) adds that community values are often incorporated by the child through his experiences in school and through the various media and mass communication to which he is exposed.

The social context morality has been intensely studied by scholars interested in juvenile delinquency. It has been found that no one such factor such as home intelligence income are

closely correlated with delinquency. Muthigani (1995:17) believes that a child gains his first standards of behavior from the teaching of the parents and those around him. Any negative or conflicting behavioir arising from what they teach or practice creates double standards which if carried through to adolescence causes juvenile delinquency.

At the centre of the delinquents is a feeling that he/she is not loved and that he/she is not being treated fairly. According to Glueek (1950:73) these feelings begin early in life and are related to the type of discipline exercised by the father, the quality of the affection between parents and between parents and children.

According (Huitt, 1997:33) SEE is designed to address three major issues in the education of young people today. The first is the development of a vision for one's life that includes the discovery and/or defining of one's life mission and desired lifestyle. The second is the development of one's character, dealing with concems of direction and quality of life. The third deals with the development of competence that deals with concems of how well one is able to do something.

Similarly, Huitt, (1997:9), and Walsh (1990:14) defines education as the process that prepares young people for their social inheritance and advocates three dimensions of education namely, development of knowledge, training of mental abilities, and development of character. There is very much inline with the need for rehabilitation for street children since they have at a certain point been denied by their past life in the streets. Character formation however plays a very significant role in the life of a person. Rehabilitation programs of street children are well complemented by SEE since the end product for rehabilitation aims at incorporating the

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rehabilitated children back to the society and hence begin to lead life on their own as responsible citizens.

2.5.2 SEE and Normative Formation of Character.

In general, character, good or bad, is considered to be observable in one's conduct (Walberg & Wynne, 1989:204). Thus, character is different from values in that values are orientations or dispositions whereas character involves action or activation of knowledge and values. From this perspective, values are seen as one of the foundations for character. In the context of the model of human behavior as advocated by Huitt, values include both cognitive and affective components, but not necessarily behavioral components while character includes all four components. (Huitt, 1996:89).

According to (Wynne & Walberg, 1984:204 and Pritchard, 1988:110) character takes two broad dimensions. These are, engaging in morally relevant conduct or words, or refraining from certain conduct or words and a complex set of relatively persistent qualities of the individual person, and generally has a positive connotation when used in discussions of moral education.

2.5.3 The Role of SEE in Impacting Moral and Character Development among Street Children under Rehabilitation.

Campbell and Bond (1982:169) state there are four major questions to be addressed when focusing on character development and rehabilitation. These include: what is good character, what causes or prevents it; how can it be measured so that efforts at improvement can have corrective feedback; and how can it best be developed?

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As previously discussed, good character is defined in terms of one's actions. Character development traditionally has focused on those traits or values appropriate for the industrial age such as obedience to authority, work ethic, working in group under supervision, etc. Huitt's (1997:116) critique, modern education must promote character based on values appropriate for the information age: truthfulness, honesty, integrity, individual responsibility, humility, wisdom, justice, steadfastness, dependability, etc.

In terms of what influences character development, Campbell and Bond (1982:97) propose the following as major factors in the moral development and behaviour of youth in contemporary world. These include among others, heredity, early childhood experience, modeling by important adults and older youth, peer influence, the general physical and social environment, the communications media, what is taught in the schools and other institutions specific situations and roles that elicit corresponding behavior.

These sources of influence are listed in approximate order of least tractable to most tractable in order to suggest why we often seek solutions to social problems through schools. It is important to realize that while schools do and should play a role in the development of character, families, communities, and society in general also have an important influence (Huitt, 1999:134).

There are a variety of alternatives to dealing with moral and character education in the rehabilitation schools. According to Watkins, (1976:28), one of the approach is to teach students a specific process to follow when making decisions and putting these into action. This is the approach of the analysis view used in values education (e.g., Ennis, 1969:14; Metcalf,

1971:21) and assumes moral and character decisions are made rationally. Another cognitively-oriented approach is to engage students in discussions of relevant moral issues with the expectation that students who hear their peers discuss the issue from a higher level will gravitate to that position.

This position is expounded in the moral development approach of Lawrence Kohlberg (e.g. Kohlberg, 1976, 1984) whose theory was based on the cognitive development theory of Jean Piaget (1932, 1962; see Hersh, Paolitto & Reimer, 1977). While the techniques used in both of these approaches have been shown to be effective in changing thinking, there is scant evidence to support the belief that changing thinking will automatically lead to a change in behavior. And it is impact on behavior that distinguishes values education from character education.

Another approach is to teach street children a given set of values and accompanying appropriate actions. This is the position taken by the inculcation approach to values clarification This approach assumes a set of absolute values agreed upon by society that are unchanging and that be applied equally appropriately in all situations. Huitt's (1995:105) analysis of the rapid change in society over the last 100 years, accelerating at an even more rapid pace today, suggests this approach alone will not lead to desired outcomes in character development.

A final approach is to use the inculcation, values education, analysis, and moral development approaches described above when and where appropriate and then to have children put their thoughts and feelings into action in a variety of social actions. (e.g., Cottom, 1996; Gauld, 1993; Solomon et al., 1992).

2.4 Theoretical frameworks

The classical liberal theory of equal opportunity and social Darwinism-asserts that each person is born with a given amount of capacity, which, to a large extent, is inherited and cannot be substantially changed. Thus, educational systems should be designed so as to remove barriers of any nature (economic, gender, geographic) that prevent bright students from lower economic backgrounds from taking advantage of inborn talents, which accelerate them to social promotion.

Liberal progressive like Horance Mann (1969:192) termed as "the great equalizer" main instruments, which would enhance life chances of those born into humble circumstances. The theory demands for further going through education at primary and secondary level to which access would be determined on the basis of individuals merit and not on social background.

Social Darwinism emphasize that every citizen should be given, through education, the social status to which he/she entitles him to inherited aptitudes (Organization for Economic Cooperation and Development, 1975:14-21). The social Darwinism theory observes that provision of formal equity of access to education, by putting everybody on the "scratch" guarantees that the ensuring run is a just one. It can document who deserves the coin (money) because his/her achievements are determined by inherited capabilities and his/her will to use them and not by arbitrary conditions like economic status.

The criteria of the scholastic promotion should be "ability and will" (Petrat, 1969:61). A system financial aid that is expected to set in motion an intensive social mobility by facilitating an open competition where they would be able to get access to careers that they deserve. Several educational policies have been guided by these theories. By making primary education free (by the NARC Government) and hopefully secondary education the NARC government attempted to

facilitate an open competition. It is hoped that the handicaps that are inherited in being poor have been removed. On the level of education policy the problem is mainly seen as of providing grants for the poor and able pupils, especially at secondary school level in Kenya (Njeru and Orodho, 2003:35).

Examined from a slightly different angle, the classical liberal theory states that social mobility will be promoted by equal opportunity of education. The roots of this theory can be traced to writers such as Rovssean (1712-1778) who claimed that the "natural" statesmen were born equal and personal qualities should not jeopardize social equity so long as society rewards people according to their status. This is the writer of the American declaration of independence claimed that all people are created equal i.e. born with the same moral and political rights. It follows from the beliefs that social institutions such as education should in some sense attempt to treat people equally.

American educator Horace (1796-1889) could call education the great equalizer. Evidence in favour of this is mainly in the form of case studies. These are innumerable examples of people from poor families who have taken advantage of education opportunities and proceeded to obtain better jobs and higher incomes than they would have otherwise done. If the state did not provide education without charge, these individuals would have been denied the opportunity for advancement. There is widespread belief, that by removing economic barriers and making more places available in upper primary and secondary education many of the children absorbed in the streets due to lack of school fees would otherwise get an opportunity to continue with school.

For example, the introduction of universal free education programme in public primary schools in

January 2003 by the NARC Government has raised the total primary school enrolment from 5.8 million to about 7.1 million children (ministry of education annual report 2004). This enabled the government to remove all the street children and rehabilitate them. They were able to receive free education through some went back to the streets. Technical schools have started operating. There was a project in 2004 to train the street children in Shaurimoyo YMCA (Nairobi City Council, Street Family Rehabilitation Programme, 2004).

In the past, a great deal of weight has been attached to education as a vehicle of equalization and it has generally been assumed that increased public spending on education which contributes to this end reduces dropout repetition and absenteeism of poor children (OECD, 1975:67). For example the introduction of universal free education programme in public primary schools in January 2003 by the NARC Government has raised the total primary school environment from 5.8 million to about 7.1 million children. Before fees, exorbitant user charges and other school related costs had locked over 3.2 million children of school-going age out of primary school.

In Kenya, the NARC government has made primary education free and highly subsidized secondary education in a bid to enhance access to education. However, with the introduction of cost-sharing in education against the background of high poverty levels in the country, many parents may not be able to enroll and sustain their children in primary and secondary schools given the rising hidden and actual costs of education. Therefore for the equity consideration, it practically becomes impossible to ignore the fact that unequal participation in education will in the long run worsen the status of the poor and the vulnerable groups like the street children (Njeru and Orodho, 2003:38-51).

This theory was found relevant for this proposed study because cost sharing discriminates poor families who cannot afford to keep their children in school hence withdrawing them prematurely. This impact negatively on education leads to children going to the street.

2.5   Conceptual framework

Figure 1. Represents the linkage between factors of study

```
                    ┌─────────────────────────────────┐
                    │ Policy and regulatory framework  │
                    │ of Social Education and Ethics   │
                    │ in Rehabilitation of             │
                    │ street children                  │
                    └─────────────────────────────────┘
                        ↙           ↓            ↘
┌──────────────────┐   ┌──────────────────┐   ┌──────────────────┐
│ Integration of   │   │ Street children's │   │ Perceptions of    │
│ SEE in street    │ → │ acquisition of    │ ← │ educators and     │
│ children         │   │ knowledge         │   │ street children   │
│ rehabilitation   │   │                   │   │ on SEE            │
│ programme        │   │                   │   │                   │
└──────────────────┘   └──────────────────┘   └──────────────────┘
            ↘              ↓               ↙
                    ┌──────────────────┐
                    │ Behaviour change │
                    └──────────────────┘
                             ↓
                    ┌──────────────────────────────┐
                    │ Rehabilitated Street children │
                    └──────────────────────────────┘
```
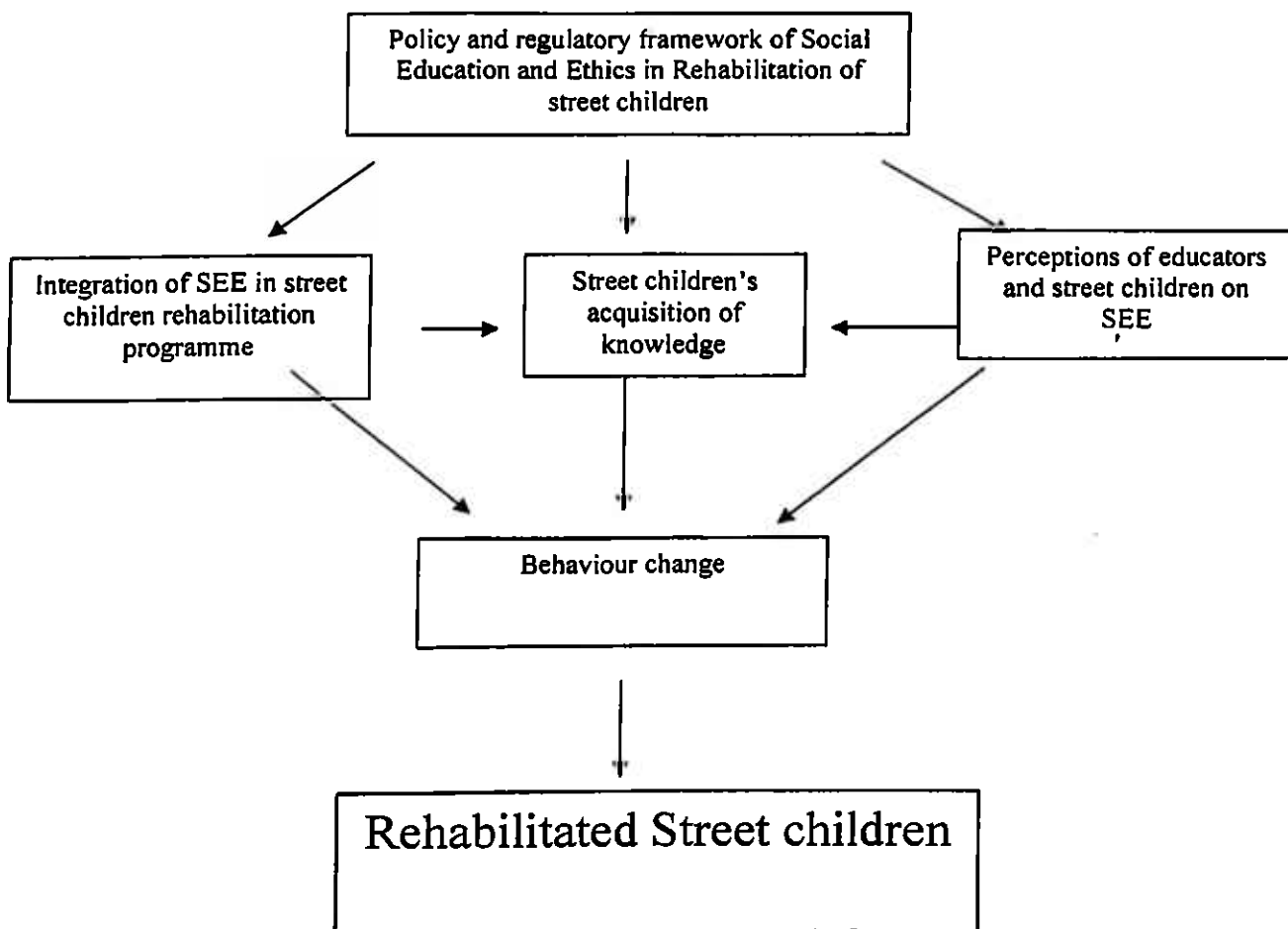
The conceptual framework above is a diagrammatic representation of how variables are linked. In

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this case, an attempt to establish the relationship between independent and dependent variables is being made. Thus independent variables, (integration of SEE in rehabilitation, application of SEE and SEE as a subject) are seen to be linked to dependent variables (character formation of street children, acquisition of knowledge, positive behaviour change and perceptions of educators and street children) respectively. In overall, these variables come in to mediate the main activity which is rehabilitation to the expected end-product which is positive behaviour change of street children hence leading to formation of productive members of the society.

2.6   Operationalization of variables

2.6.1 Variables

Integration of SEE in rehabilitation; This is the process of implementing SEE within rehabilitation programme as a form of improving rehabilitation in general. The indicators for this variable are two. These are; period of stay of stay of children in the centre and the period that the teachers have been in the stay. The former indicator shows the likelihood of children to have been introduced into SEE classes and hence assumed to have acquired some knowledge while the latter shows the likelihood of teachers to have applied SEE through teaching. Therefore, integration of SEE in rehabilitation serves as the independent variable while period of stay is the dependent variable.

Character formation of street children; This implies the process of imparting ascribed code of conduct that is deemed right and acceptable in the society. Character formation for street children entails behaviour change from what is learnt in the street to what is acceptable in the society. The indicators for this variable include the stoppage of drug abuse by children, ability of children to take responsibilities for themselves and others and ability to make good choices and desist from

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bad behaviours.

Application of SEE; This is the implementation of SEE in form of teaching in class as part of the curriculum. The indicator for this variable is the frequency at which SEE is taught as a lesson in the centre with the aim of rehabilitating children which leads to behaviour change.

Acquisition of knowledge on SEE; The process of learning and understanding SEE content.

SEE as a subject; The subject matter or content of a unit being taught in terms of concepts and values that it is intended to give to the learner. The indicator for this variable is the presence of materials/notes being used for teaching, lesson plan and attendance list of participants.

Perceptions of educators and street children on SEE; The general outlook or attitude of the educators and street children on the subject of SEE.

CHAPTER THREE

3.0 RESEARCH METHODOLOGY

3.1 Introduction

Methodology refers to the philosophy of the research processes (Bailly, 1978:43). This chapter deals specifically with the methodological aspects of the study. It will outline the area where the research was conducted, how data was collected, analyzed and presented.

3.1.1 Site Selection and Justification

The study was carried out in Thika street children rehabilitation centre. Thika town is about 40 kilometers from Nairobi the capital city. Thika town is a more or less cosmopolitan town with most of the inhabitants coming from the adjacent Larger Thika District, Murang'a, and also from Machakos District. It is known to be an industrial town with various manufacturing factories. Its population is about 7,000 to one million. Being an industrial town it has the upper class and also lower class people who live in shanties such as Kiandutu, Kiang'ombe and Kianjau among others. The main reason that justifies the selection of the area is the presence of high number of street children in the city who once caught by the police are taken to Thika rehabilitation centre, which apparently is the only rehabilitation centre in the town.

3.1.2 Sources of Data

The problem under investigation required collection of combination of both primary and secondary data in order to give a general view and intrinsic opinion on how the use of SEE has been effective in rehabilitation of street children.

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3.1.3 Secondary Data

Secondary data was obtained from existing information, documentation and records including review of SEE curriculum. Secondary sources of data was important because they yielded information of the aim of SEE hence it was used as a base of judging whether it achieves its objectives in the rehabilitation of street children.

3.1.4 Primary Data

Primary data was obtained directly from field research. The sources of primary data included, the children, the social workers and the institution officials. The study also applied direct observation of the behaviour of children within the institution. The researcher held discussions with the children in relation to use of SEE. This enabled the researcher to judge how SEE is used and how effective it is in the rehabilitation process.

3.1.5 Study Design

The study employed exploratory design and did attempt to gain familiarity with the phenomena under study through discovery of new ideas. The study emphasized on qualitative data collection techniques so as to capture practical experiences and insights about use of SEE. Since the study was descriptive, respondents were selected using simple random sampling.

3.1.6 Sampling Procedure and Sample Size

In any scientific study, there is always a need to come up with an acceptable sampling design. According to Singleton (1988:56-61) sampling design refers to the part of the research plan that indicates how cases are to be selected for observation of an interview.

3.1.6.1 Street Children

The centre consists of both boys and girls who also are in various classes in the primary school. The study covered 60 children who had a capacity to respond to questions and have been in the center for at least more than three months and above. This represents more than a third of the number of children at the centre hence deemed adequate.

To obtain a representative sample, the target population was first defined. This included all the children under the care of the institution. Thika rehabilitation centre consist of 120 children. The age gap of these children is between 7-17 years. Random sampling method was applied to arrive at the final sample. This was done by grouping children according to their period of stay within the institution as follows; Below 1 year, above 1 year and less than 2 years, Above 2 years and less than 3 years, 3 years and above.

The researcher used simple random sampling by giving a number to every subject in the four categories above, placing the numbers in a container and then picking any number at random. The researcher picked 15 children at random from each of the four categories to form a sample of 60, which is a half of the population under study among street children. Categorization was done due to the fact rehabilitation is done in phases and therefore the impact of SEE is experienced differently.

3.1.6.2 Staff

There is 20 staff in the centre that operates in various capacities. The research covered only the teaching staff that are directly involved in the rehabilitation of these children and have also participated in the implementation of SEE program in the centre. The study also targeted a sample of 15 teaching staff who are involved in implementation of SEE. All the 15 staff involved in implementation of SEE were targeted to form the sample. However, out of those, 12 of them

responded to the questionnaire. Due to the size of the population, the researcher decided to include the whole population of the teaching staff in the final sample.

3.1.7   Data Analysis

Statistical data was generated through SPSS, which is a program for social science research. Data analysis of variables of study was analyzed and the results presented descriptively with the use of tables of central measures of tendency and percentages. The study also used descriptive statistics to analyze and present qualitative data, which contained respondent's views and opinions, expectations and other open ended questions. Analysis was done by organizing and coding data into categories on the basis of themes, concepts and similar features. This is whereby the researcher focused on examining initial codes and the arising ones, thereby organizing ideas or themes and identification of key concepts. Conclusions were thereafter made as per the specific objectives.

CHAPTER FOUR

4.0 DATA PRESENTATION AND ANALYSIS

4.1 Introduction

The first part of this chapter provides information on the background of the respondents. The second part provides information on the relationship between social education and ethics (SEE) and rehabilitation programme implemented in the centre. This is done by examining the relationship between SEE and the following variables;

i)   Integration of SEE in rehabilitation programme

ii)   Acquisition of knowledge

iii)   Behaviour change and

iv)   Perceptions of educators and children towards SEE

4.2 The SEE Programme

SEE programme has previously been implemented in Kenyan school curriculum as part of an examinable subject. However, without much consideration of its academic importance that it was initially intended, SEE has its own unique features, unique approach and it's clearly distinct from other school subjects. The uniqueness of this subject lies in its emphasis on imparting social values, morals and socially acceptable norms (Bennars G.A 1990:3).

The implementation of SEE in Thika rehabilitation centre has its basis on the core role of the centre which is rehabilitation. The programme is divided into three different phases. The first phase entails an investigation of the children's level of knowledge on moral issues. This is done by seeking a child's point of view on some aspects of behaviour in terms of what is

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morally right or morally wrong. In the second phase, the programme attempts to clarify and comprehend principles, standards and ideals guiding human conduct. This phase is however often than not connected to the third phase which entails in getting the meaning of moral concepts and statements and applying them in real life situations. As such, the third phase involves helping children to make a close link between their conduct on daily basis to the learnt concepts. For instance, when a child uses an abusive language the educator takes the opportunity not to reprimand the child but rather point out to him that social morality disregards abusers. This phase inasmuch as it is theoretical is also practical and hence this often brings out the desired results of rehabilitation.

4.3 Integration of SEE in Rehabilitation Programme

The first objective of this study was to establish how SEE has been integrated into street children rehabilitation programmes. The indicators of integration were period of stay in the centre both the children and the staff respondents. These two indicators showed the level of awareness of SEE.

When the children's period of stay in the centre was examined, it was found out that only 43.1% of the children respondents had stayed in the centre for less than 1 year. This shows that majority of the respondents representing 56.9% were likely to have had sufficient knowledge of the SEE programme being implemented in the centre (Table 4 below). On the other hand, only 25% of the teacher respondents had stayed in the centre for less than 1 year (Table 5). This meant that 75% of them were likely to have had adequate knowledge on the SEE programmes in the centre.

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Table 4: Children's Period of stay in the centre

Category	Frequency	Percent
Below 1 year	25	43.1%
More than 1 year	13	22.4%
Below 2 years	8	13.8%
More than 2 years	12	20.7%
Total	58	100%

Table 5: Staff Period of stay in the centre

Category	Frequency	Percent
Below 1 year	3	25%
Below 2 years	5	41.7%
More than 2 years	4	33.3%
Total	12	100%

4.4 Awareness of SEE

When asked whether they were aware of SEE, the children responded as shown in table 6 and 7 below.

The researcher was interested in knowing whether children are aware of existence and implementation of SEE in the centre. An overwhelming majority of children respondents are aware of the progamme. When asked whether they knew of the existence of SEE, 94.8% of the children were aware of its existence and further 96.6% said that SEE had been introduced in their group. However, only 3.4 % (equivalent to 2 respondents) of the respondent street

children are not aware of the existence of SEE in their group. This shows that the level of knowledge on the children about the existence of SEE is high and hence the subject is well integrated in rehabilitation of street children in Thika rehabilitation centre.

Table 6: Awareness on existence of SEE?

Response	Frequency	Percent
Yes	55	94.8%
No	3	5.2%
Total	58	100%

Table 7: Introduction of SEE in the group?

Response	Frequency	Percent
Yes	56	96.8%
No	2	3.4%
Total	58	100%

The researcher was interested in knowing whether educators were trained in rehabilitation of street children and if SEE was part of training and the results were as in table 8 and 9 below. The researcher established that half of the respondents had received specific training in rehabilitation. However, it was established that among those teachers that were trained, half of them had received training in SEE. This means that those teachers trained in SEE are better positioned conducting rehabilitation progrmmes within Thika rehabilitation centre.

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Table 8: Whether educators are trained in rehabilitation of street children

Response	Frequency	Percent
Yes	55	94.8%
No	3	5.2%
Total	58	100%

Table 9: Whether SEE was part of the training

Response	Frequency	Percent
Yes	6	50%
No	6	50%
Total	12	100%

Though not all teachers have been trained in SEE, the subject has however been embraced positively even by those who had not received any training. Educators that were not trained were asked how they came to embrace and learnt SEE as a programme of rehabilitation and they gave the following results as shown in table 10.

Table 10: How educators Embraced SEE as a programme of Rehabilitation of street children.

Response	Frequency	Percent
I found its implementation and took interest to learn	2	16.7%
Its very comprehensive	2	16.7%
Good, practical, objective and non-judgmental	2	16.7%
Its unique not like other academic subjects	3	25%
Helpful for all types of learners	3	25%
Total	12	100%

Further, when asked to comment on the importance of integration of SEE in rehabilitation, teacher's responses showed that they support the inclusion of SEE in rehabilitation giving various benefits of SEE in rehabilitation. This is shown by the fact that majority of teachers actually took interest to learn SEE as a subject fore rehabilitation of street children. The findings below in table 11 established that integration of SEE is relevant in rehabilitation of street children with both categories of respondents giving clear indications that application of SEE in rehabilitation is well received in the centre.

Table 11: Importance of Integrating SEE in rehabilitation

Response	Frequency	Percent
Helps in filling the moral gaps of rehabilitation	2	16.7%
Focuses of behaviour change, reason moral responsibility	2	16.7%
Avoids some errors in some rehab programmes	2	16.7%
Forms a guideline and foundation for rehabilitation	3	25%
Harmonizes different forms and methods of rehabilitation	3	25%
Total	12	100%

4.5 Acquisition of Knowledge on SEE

Our second objective was to find out whether children have been able to acquire knowledge on SEE. The findings below indicate that SEE is taught frequently with 56.9% of the respondents confirming that the subject is taught daily. This means that there is continuity in implementation of the subject and hence children are better placed to acquire knowledge on the basis of frequency and number of lessons taught. This provides an opportunity for children to adequately acquire knowledge on the subject.

**Table 12: Frequency at which SEE subject was taught**

Response	Frequency	Percent
Daily	33	56.9%
Not sure	25	43.1%
Total	58	100%

In Table 13 and chart 1 below, majority of the respondents composed of 53.4% strongly agreed and 39.7% agreed that they have acquired some knowledge as a result of attending SEE lessons. These figures show that there is a strong relationship between application of SEE and acquisition of knowledge among children under rehabilitation. This phenomenon is also supported by the fact that 41.7% of the teacher respondents have rated the level of acquisition of knowledge on SEE among children as very high while 58.3% have rated them as High according to figure below. Comparing the findings of both categories of respondents, its clear that application of SEE has led to acquisition of knowledge by street children in the centre. The figure below further proves to the fact that the rates of acquisition of knowledge are very high among the children according to the response of teachers.

Table 13: Acquisition of some knowledge and skills as a result of attending SEE lessons

Response	Frequency	Percent
Strongly agree	31	53.4%
Agree	23	39.7%
Disagree	2	3.4%
Strongly disagree	2	3.4%
Total	58	100%

Chart 1: Level of acquisition of knowledge on SEE among children.

How do you rate the level of acquisition of know
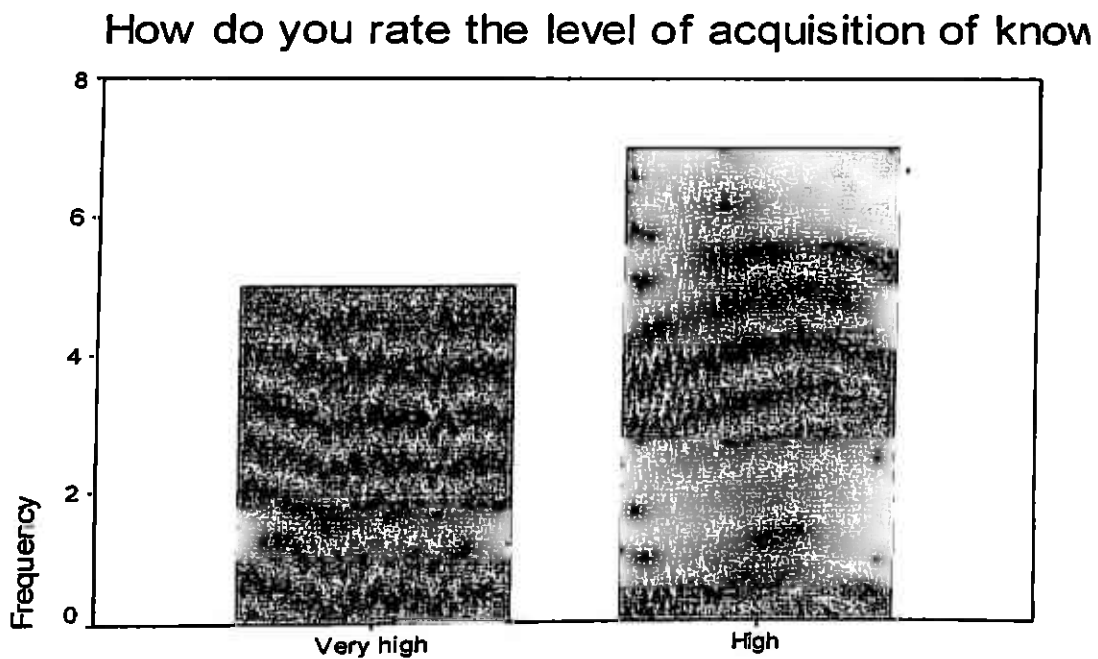
How do vou rate the level of acauisition of knowledge on SEE among children

When asked whether SEE in comparison to other academic subjects is able to meet rehabilitation needs, children respondents agreed with that view with a 60.3% of the

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respondents supporting the view and 32.8% strongly agreeing with the view (Table 14).

To verify whether children did acquire knowledge on the subject, educators were asked to enumerate some of the indicators that show acquisition on knowledge among children under rehabilitation. The results were as in table 15 below.

Table 14: Ability of SEE to meet rehabilitation needs

Response	Frequency	Percent
Strongly agree	19	32.8%
Agree	35	60.3%
Disagree	2	3.4%
Strongly disagree	2	3.4%
Total	58	100%

Table 15: Indicators on children's acquisition of knowledge on SEE

Response	Frequency	Percent
Formation of peer counselors	2	16.7%
Engagement of children in moral debates	2	16.7%
They are able to act lesson taught in class	2	16.7%
Positive transformation in behavior	3	25%
Pass internal exams and form peer counselors	3	25%
Total	12	100%

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4.6 Behaviour Change

The third objective of this study was how SEE has influenced behaviour change of street children. The researcher sought to know whether application of SEE has influenced behaviour change among street children. As shown in Table 16 below, a strong majority of 93.1% said that SEE has influenced positive behaviour change while only 6.9% said that SEE has not influenced behaviour change in them.

Table 16: Whether SEE has enabled children to behave better than before

Response	Frequency	Percent
Yes	54	93.1%
No	4	6.9%
Total	58	100%

Further, the researcher sought to know the type of behaviours that children had abandoned after attending SEE lessons by asking them to explain their answers. The findings are as indicated in Table 17 below. The figures showed that 13.8% (8 children) are able to make choices of what is good or bad. Another category of children composed of 86.2% (50 children) have been able to stop deviant behaviours such as truancy, sniffing glue, fighting and have acquired anger management skills. This is a clear proof that SEE has contributed in influencing positive behaviour among street children in the centre.

Table 17: Children's perceptions of change in their behaviour

Response	Frequency	Percent
I am able to make choices of good and bad	8	13.8%
I have stopped running away from class	11	19.0%
I have Stopped sniffing glue and fighting	14	24.1%
I have learned that when I behave well others are happy with me	13	22.4%
I have stopped fighting and can now manage my anger	12	20.7%
Total	58	100%

To counter check on the same aspect of behaviour change, children were asked to enumerate some of the most recurrent deviant behaviours that they have been able to stop after SEE lessons and the researcher came up with the following findings as in Table 18 below.

The results below shows that majority of children are able to make informed choices about their actions and are able to differentiate bad deeds to good deeds. This can be attributed to the fact that SEE emphasizes on teaching values to them and hence they are able to pick them up.

Table 18: Some of the negative behaviour that SEE has enabled children to overcome

Response	Frequency	Percent
Sex, mugging, drugs abuse and trafficking	8	13.8%
Truancy, stealing and fighting	11	19.0%
Trafficking drugs, using drugs, poor hygiene and fighting	14	24.1%
Sniffing glue, fighting sex and stealing	13	22.4%
Verbal abuse, fighting, sniffing glue and stealing	12	20.7%
Total	58	100%

The researcher was also interested in knowing what SEE seeks to offer to children as a way of causing behaviour change. The responses were as shown in Table 19 below where results indicated that children are able to learn moral teachings, good values, ethical behaviours and ability to make informed personal decisions.

Table 19: Teacher's views on what SEE offers to children

| Response	Frequency	Percent
Moral intellect	2	16.7%
Moral teaching and ethical behavior	7	58.3%
Helps children make personal life choices	3	25%
Total	12	100%

4.7 Perception of Educators and Street Children about SEE

The fourth objective of the study was to find out the perceptions of educators and the street children towards SEE. The researcher was interested in knowing the perceptions of both the educators and children on SEE and hence respondents were asked to rate their interests on the subject. The findings were as in chart 4.2 below among children respondents. A total of 46 respondents that is equivalent to 79.3% rated their interest as high while other 8 with a 13.8% rated their interest as very high.

This implied that a total of 93.1% of the respondents had high interest of the subject. It therefore implies that SEE has received a very positive perception among the children and the staff. Teacher respondents were asked to rate their interest and the findings were as in chart 2 below.

Chart 2: Children's rate of interest for SEE lessons

How do you rate your interest of SEE lessons?
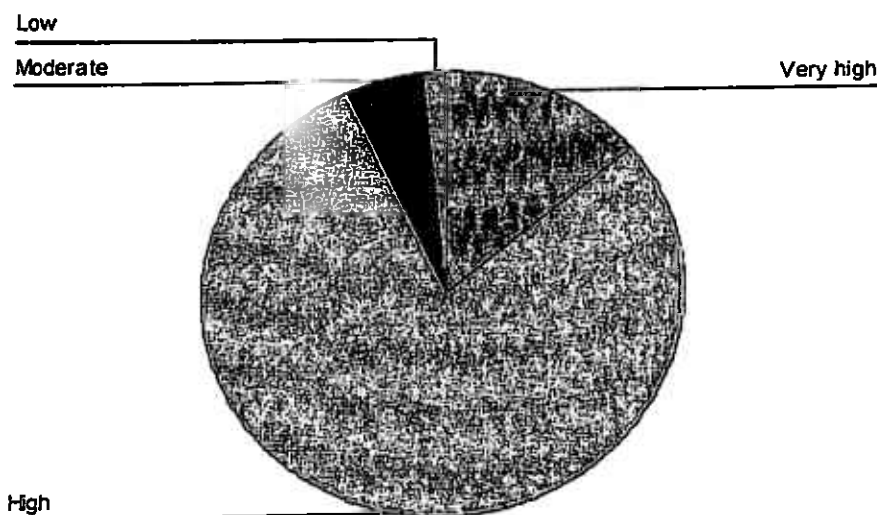
These findings were confirmed by teacher respondents who felt that children have highly appreciated implementation of SEE in the centre with 10 (83.3%) out 12 respondents strongly agreeing that children have highly appreciated implementation of SEE in the center. This implies that both categories of respondents have a similar perception of the subject. This is as shown in Table 20 below.

Table 20: Teacher's perception on how children have appreciated SEE

Response	Frequency	Percent
Strongly agree	10	83.3%
Agree	2	16.7%
Total	12	100%

The researcher also sought to seek the perceptions of educators on the subject and the findings as in Table 21 below were overwhelming where 100% of the teacher respondents rated their interest on SEE as very high.

Table 21: Teacher's interest on SEE

Response	Frequency	Percent
Very high	12	100%

Further, the researcher asked teacher respondents whether they would recommend application of SEE in other rehabilitations in Kenya and the results were 100% in favour of SEE application countrywide. Their views were supported by various reasons as shown in Table 23 below.

Table 22: Recommendation on application of SEE in all street children rehabilitation Centres in Kenya

Response	Frequency	Percent
Yes	12	100%

Table 23: Reasons for recommending application of SEE in other centres in Kenya

Response	Frequency	Percent
Many rehabilitation centres lack rehabilitation programme	2	16.7%
For a common approach to rehabilitation	2	16.7%
To harmonise rehabilitation	5	41.7%
Rehabilitation lacks universal common approach in Kenya	3	25%
Total	12	100%

4.8 Conclusion

There were two types of respondents. One category was made up of the teachers who are actually the one charged with the responsibility of implementing SEE while the other category was made up children under rehabilitation and hence are direct beneficiaries of SEE. In the first category, out of the fifteen (15) teachers targeted, twelve (12-equivalent to 100%) gave their feedback, which is now considered as the final population for analysis. In the second category, out of the sixty (60) initially targeted respondents, fifty-eight (58-equivalent to 100%) of them gave their feedback.

Between the two categories of the respondents, the four objectives had a high significance in

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relation to integration of SEE in rehabilitation, the acquisition of knowledge on SEE, the role of SEE in influencing positive behaviour change and the perception of SEE among children and teachers. These findings have shown that SEE has a greater significance and importance in moral and character formation much more than its academic significance.

CHAPTER FIVE

5.0 SUMMARY AND RECOMMENDATIONS

5.1 Summary

One of the findings in this research has shown that SEE is applicable in institutions that are meant to rehabilitate. SEE,s main objective is to provide moral education, imparting values that are socially acceptable and exposing the learner to a wide range of social knowledge in an organized manner. In this study, the researcher has shown that SEE is an integral component of rehabilitation at Thika rehabilitation centre. The subject is well integrated in the centre and both the teachers and children are aware of its existence and implementation. To a great extent, SEE though a subject like any other has received preferential appreciation due to its role in rehabilitation. In the light of classical liberal theory of equal opportunity and social Darwinism, SEE has within Thika rehabilitation centre appreciated the inherent capacity of each individual child in the centre. From the perspective of a liberal progressive, it's often children of the poor that end up in the streets since they often lack facilities and opportunities through which they can learn socially accepted values and norms. As such SEE like the liberal progressive has come to the street children in the rehabilitation centre as "the great equalizer" since poor children are able to access moral formation like other children of the rich.

In this respect as some educationists have argued, there is great need to find the link between education for academic and knowledge purposes to moral and character formation. As Benaars had earlier defined education as the process of upbringing up children, it therefore entails a wholistic approach of upbringing mentally, socially, emotionally and even morally. The researcher has established in this paper that SEE application in Thika rehabilitation centre has been able to serve not only as an academic or 'class work' subject but much more as a moral formation programme. As

such, SEE has come to complement other subjects mainly in the area of behaviour change and transformation in the centre.

This is to the extent that though not all the teachers had received training in SEE, the subject has been received well as a tool for rehabilitation purposes. Teachers who were not trained in SEE decided to learn the subject by themselves inorder to be able to impart the same on the children.

Both the teachers and children in rehabilitation centre have equally appreciated the importance of having incorporated SEE in the centre. Notably, children have acquired significant level of knowledge in the subject since they are able to articulate and appreciate notable behavioural milestones that they have made. The researcher has also found out that rehabilitated children are able to go back to school and attend to other subjects.

5.2 Recommendations

1. Government policy makers need to look into children corrective institutions with a view of providing guidelines on what should be incorporated in rehabilitation of street children. This is one area that has been left to individual institutions to come up with rehabilitation programmes of their own. The researcher also established that SEE is working well for rehabilitation purposes and hence the programme could be replicated elsewhere for the purposes of rehabilitation of street children.

2. A cohesive approach in rehabilitation of street children needs to be developed so as to harmonise the process within the existing street children rehabilitation centres. Since SEE has been approved to be working in one centre, policy makers need to roll it out in other centres both public and private.

3. There is need to have all the teachers involved in rehabilitation process of street children trained in SEE. This would enable them to be in a better position to implement the programme and ensure continuity.

4. Researches aimed at establishing the suitability of SEE in formal education centres where usage of drugs and other maladjustive behaviours should be conduct in order to determine the suitability of SEE in these institutions and possibly replicate its application. These to be done in all learning institutions even those that are not corrective in nature.

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Questionnaire for Educators

This questionnaire is designed to establish the relevance of Social Education and Ethics (SEE) in the rehabilitation of street children in Thika Rehabilitation Centre. You are kindly asked to participate in this study by answering this questionnaire. The responses given for the purpose of the study only. All your responses will hence be treated with highest confidentiality. Kindly tick (✓) where appropriate.

Part I: Demographic Data

1. Name_____

2. Year of birth_____

3. Period of stay in the centre

1. Below 1 year ( )	2. More than 1 year ( )
3. Below 2 years ( )	4. More than 2 years ( )

Part II: Relevance of social education and ethics in rehabilitation of street children

Integration of SEE in street children rehabilitation

4. Do you have a specific programme designed for rehabilitation of street children?

    1. Yes ( )   2. No ( )

5. Kindly explain your answer_____

6. Have you undergone any specific training in the area of rehabilitation of street children?

            1. Yes   ( )   2. No ( )

7. If Yes above, is Social Education and Ethics part of the training?

            1. Yes   ( )   2. No ( )

8. If NO in question 3 above, how did you come to embrace social education and ethics as a subject and programme for rehabilitation if street children

_____

_____

9. Comment on the importance of integration of social education and ethics in rehabilitation programme of street children in the country

_____

_____

Street children's acquisition of knowledge

10. How would you rate the level of acquisition of knowledge on SEE among children under rehabilitation

          1. Very High ( )   2. High   ( )

          3. Moderate   ( )   4. Low   ( )

11. What are some of the indicators that children have acquired knowledge on social education and ethics_____

_____

Positive Behaviour change

12. Kindly rate the importance of social education and ethics in relation to behaviour change among street children in your centre

1. Very important ( )   2. Important ( )

3. Not very important ( )   4. Not important at all ( )

13. What are some of the indicators that children social education and ethics has enable positive behaviour change among street children in your centre

1._____   2._____

3._____   4._____

14. What do you think social education and ethics is able to offer in children's behaviour's change that is not provided by other academic subjects?

_____

_____

Perceptions of children on SEE

15. I feel that children have highly appreciated the implementation of social education and ethics in our centre

        1. Strongly agree( )   2. Agree   ( )

        3. Disagree   ( )   4. Strongly disagree ( )

16. How do you rate the interests of Children in social education and ethics

        1. Very High   ( )   2. High   ( )

        3. Moderate   ( )   4. Low   ( )

17. The interests of other educators

        1. Very High   ( )   2. High   ( )

        3. Moderate   ( )   4. Low   ( )

18. Would you recommend application of social education and ethics in all street children rehabilitation centres in Kenya

        1. Yes ( )   2. No ( )

19. Give reasons for your answer_____

Questionnaire for Children

This questionnaire is designed to establish the relevance of Social Education and Ethics (SEE) in the rehabilitation of street children in Thika Rehabilitation Centre. You are kindly asked to participate in this study by answering this questionnaire. The responses given for the purpose of the study only. All your responses will hence be treated with highest confidentiality. Kindly tick ( ) where appropriate.

Part I: Demographic Data

1. Name_____

2. Year of birth_____

3. Period of stay in the centre

    1. Below 1 year   ( )

    2. More than 1 year ( )

    3. Below 2 years   ( )

    4. More than 2 years ( )

Part II: Relevance of social education and ethics in rehabilitation of street children

Integration of SEE in street children rehabilitation

4. Are you aware of the existence of Social Education and Ethics in the centre?

    1. Yes ( )   2. No ( )

5. If Yes above have you been introduced to Social Education and Ethics in your programme?

    1. Yes ( )   2. No ( )

6. If YES above, at what stage was Social Education and Ethics was introduced to you?

1. First Month ( ) 2. Second Month ( )

3. Third Month ( ) 4. Not Sure ( )

7. What is your view on the implementation of social education and ethics in your centre? Explain

briefly_____.

_____

Street children's acquisition of knowledge

8. How often is the subject taught in your group?

1. Daily ( )

2. Not Sure ( )

3. Three times a week ( )

4. Two times a week ( )

5. Others_____

9. I have been able to acquire some knowledge and skills as a result of attending Social Education and

Ethics lessons?

1. Strongly agree ( ) 2. Agree ( )

3. Disagree ( ) 4. Strongly disagree ( )

10. Social education is able to meet rehabilitation needs that other academic subjects are not able to meet

       1. Strongly agree( )   2. Agree   ( )

       3. Disagree   ( )   4. Strongly disagree ( )

Street children's acquisition of knowledge and positive behaviour change

11. If Yes in question 5 above kindly rate how social education and ethics have benefited you where 1 is very high, 2 is High, 3 is Moderate, 4 is low and 5 is very low

	1	2	3	4	5
1. I have become more aware of myself and my needs					
2. Self Respect is self worth					
3. Interpersonal relationship in of great values to me					
4. Good behaviours are rewarding to me					
5. Good behaviour can be learned and applied					
6. I benefit a lot when in a community of well behaved people					
7. Social rules and norms are not oppressive to me					
8. I can seek help from adults when am not able to solve problems					
9. Correction is not a sign of being misjudged and hated					
10. Use of drugs only complicates my problems					

Positive Behaviour change

12. Has Social education and ethics enabled you to be better behaved than before?

        1. Yes ( )   2. No ( )

13. Explain your answer above _____

_____

_____

14. I feel that social education and ethics lessons have been important in the process of my positive behaviour change.

        1. Strongly agree   ( )   2. Agree   ( )

        3. Disagree   ( )   4. Strongly disagree ( )

15. Mention some of the negative behaviours that social education and ethics has enabled you to overcome

1_____2_____3_____4_____

Perceptions of children on SEE

16. Is Social Education and Ethics an examinable subject?

        1. Yes ( )   2. No ( )

17. How do you rate the interest of other children in social education and ethics lessons

        1. Very High   ( )   2. High   ( )

        3. Moderate   ( )   4. Low   ( )