THE PLIGHT OF STREET CHILDREN: THE CASE OF RWANDA

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How can issues faced by street children in Rwanda be addressed effectively?
A Study on Street Children in Eastern Province, Rwanda

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Some children "work in the street, dance in the street, beg in the street, sleep in the street, but <u>the street is the venue for their actions not the essence of their character</u>" (Hecht, 1998)

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ACKNOWLEDGEMENTS

ACRONYMS AND ABBREVIATIONS

AIDS (*Acquired Immune Deficiency Syndrome)*

APSP (*African Platform for Social Protection*)

CSC (*Consortium for Street Children*)

HIV (*human immunodeficiency virus)*

HRW (*Human Rights Watch*)

MDG (*Millennium Development Goals*)

MIGEPROF (*Ministry of Gender and Family Protection*)

MINECOFIN (*Ministry of Finance and Economic Planning*)

MINALOC (*Ministry of Local Affairs*)

NCC (*National Commission for Children*)

NISR (*National Institute of Statistics of Rwanda*)

NGO (*Non-Governmental Organization*)

ORYAR (*Organization for Rwanda Youth at Risk*)

OVC (*Orphans and Vulnerable Children*)

RCSP (*Rwanda Civil Society Platform*)

UNCRC (*United Nations Convention on the Rights of the Child*)

UNDESA (*United Nations Department of Economic and Social Affairs*)

UNICEF (*United Nations International Children's Emergency Fund*)

WHO (World Health Organization)

ABSTRACT

Thousands of children live and work on the streets as they are in desperate need of means of survival; their numbers are growing rapidly around the world as a result of intensifying urbanization and urban poverty, among other factors. This research was conducted as part of a Supervised Research Project (SRP) with the purpose of identifying the factors that drive children to the streets; assessing the living conditions of street children in Rwanda and identifying the gaps in policies with a view to creating awareness and making policy recommendations to address these issues and reduce the number and the vulnerability of street children.

This study draws on literature from research conducted in Rwanda and in other African countries. Documents produced by the Rwandan government were examined to better understand public efforts in supporting street children and to evaluate services to assist them. 37 case files of former street children living at a rehabilitation center in Rwanda's Eastern Province were analyzed and interviews with key informants who work closely with street children were conducted. The study builds on a study conducted by the National Commission for Children (NCC) in 2012 by focusing on the realities of the Eastern region. The results suggest that it is mainly a combination of poverty, neglect and abuse that drive children to the streets. While on the streets, children are directly exposed to exploitation, abuse and discrimination, but they are often resilient and resourceful in finding coping strategies. This study proposes that the Rwandan government needs to give greater recognition to the neglect of street children as a social problem that needs to be resolved. It explores how services for these children can be enhanced through appropriate interventions given resource constraints, such as strengthening child protection systems and ensuring that the decision-making process becomes participatory.

CHAPTER 1: Introduction

Although it is not known how many children worldwide depend on the streets for their survival or livelihood, many researchers agree that the numbers of street children are escalating at an alarming rate, especially in developing countries. In Rwanda, like in numerous countries, many children are seen roaming the streets days and nights in urban and rural areas. Although the reality is that some of them are involved in illegal activities, many of these children are law-abiding members of society who undertake legal activities for their everyday survival, such as selling items to passersby or drivers who are waiting in traffic. The strained smiles upon the faces of many street children attest to the despondency and to the difficulties they encounter; it is obvious that leading life on the streets is the only option they had left. As someone who truly cares for the welfare of children, I often try to imagine the myriad of hardships street children endure on a daily basis and avoid simply focusing on the streets as this provides a unidimensional account of their lives. I wonder what future awaits them as like all other children, they have hopes, dreams and aspirations. These children are vulnerable as their rights, established by the United Nations Convention on the Rights of the Child, are often not fully realized.

The numbers of children in Rwanda and worldwide who depend on the streets for their survival are uncertain mainly due to variations in how to define and identify them. This research project focuses on street children in Rwanda's Eastern Province and seeks to describe some of the factors that contribute to the emergence of street children, explore their unique circumstances, and to highlight a variety of conditions in which these children live and work. Although the Eastern Province recorded the least number of street children compared to the other four provinces in Rwanda (NCC, 2012), their numbers are likely to increase due to population growth and urbanization with emerging urban centers. Therefore, a thorough understanding of the issues is required in order to adopt preventive and appropriate measures. This study builds on a study conducted by the National Commission for Children in 2012 on street children in Rwanda by

focusing on the realities of the Eastern region; it examines the causes of *"streetism"*[1] and narrows down the issues affecting street children in this area based on the accounts of children who were taken into a rehabilitation center in the Eastern Province after living and working on the streets.

As street children have fallen through the policy gap and most governments are poorly resourced to update or improve policies (Mulinge, 2002), this project also serves to identify critical areas for action and to encourage the government in the development of appropriate interventions; street children should not be neglected and can be supported even in resource-constrained settings. It is important to develop tailored interventions that support this vulnerable population and take into consideration the heterogeneity of their actual experiences. This study argues that emphasizing relationship building across multiple levels of government and street children can lead to a collaborative process and see success in government commitment. It also argues that sustainable and healthy partnerships with non-governmental organizations can lead to effective mechanisms in helping street children address major challenges.

1.1 Context

Over half of the world's population, including more than a billion children, now lives in cities (Unicef, 2012). "Every year, the world's urban population increases by about 60 million. By 2050, 7 in 10 people will live in cities and towns. Most urban growth is taking place in Asia and Africa." (Unicef, 2012). Regrettably, most of the children in urban or rural areas, live under conditions that threaten their health and wellbeing as they are not always afforded the amenities and opportunities they need to realize their rights and potential, especially in Africa, which often causes them long-term social, emotional, and developmental consequences. In Rwanda, this can partly be attributed to years of political instability and specifically to the genocide in 1994, which triggered migration and economic shocks in the country.

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[1] *Streetism is a broad term used to encompass the despairing situation of children living on the streets*

It is often assumed that families will be primarily responsible for their children's welfare, but in conditions of urban or rural poverty, it is difficult for caregivers to respond adequately to their children's needs (Barlett et al, 1999). As they lack basic support and care, many children retreat to the streets in hope of improving their lives. Broad-based policies often focus on welfare and education for children at large, but the rights of street children are overlooked as they typically hold an inferior position in the social hierarchy in most African countries. Furthermore, the hardships endured by children in urban communities are often concealed and perpetuated by the statistical averages on which the decisions about resource allocation are based (Unicef, 2012).

Rwanda has made considerable and consistent progress over the past two decades, especially considering the enormous challenges it faced in the aftermath of the 1994 genocide, which completely destroyed the social and economic fabric of the country (MINECOFIN, 2013). Rwanda has now become a beacon of hope for Africa and a model for progress and economic development. Its capital city, Kigali, was named the cleanest and most orderly city in Africa recurrently over the past few years. However, the country is still struggling to support urban poor children and to help them find a place in society. Rwanda hosts approximately 7,000 street children, a number that is likely to increase as new urban centers develop.

Urban poor children in Rwanda, particularly street children, are forcibly rounded up and face the prospect of abuse from the police during these roundups and thrown in rehabilitation centers. In fact, the findings of a study conducted in 2012 by the NCC showed that the most common types of violence faced by street children are being beaten up and forced to go to transit centers. Regrettably, police abuse is amongst a myriad of issues faced by street children, including sexual abuse, substance abuse, lack of adequate nutrition, vulnerability to disease, etc. "Mayibobos" is a term with a negative connotation used to refer to street children in Rwanda. These children are also often depicted as delinquents, drug-taking criminals, lacking respect for the social order who often cause tensions within communities, causing community members to converge on street children to carry out mob violence (HRW, 2014).

Children on the streets are easily visible in most urban centers in Rwanda; their presence has become a matter of priority to some measure, for the Rwandan government. As a result, the numbers of street children in Kigali has reduced significantly over the past few years. Nonetheless, the problem of street children has not been effectively resolved. In Rwanda, the primary focus of concern remains the image street children portray; that they are signifiers of poverty and disorder. Greater focus should be placed on the actual experiences of street children and more work needs to be done on formulating strategies for the diverse experiences as it will reveal the much larger problem.

Non-governmental organizations are at the forefront of providing protection and services to street children; as a volunteer member of a small-scale charity organization for six years and having lived in Rwanda for close to ten years, I have a strong interest in gaining greater understanding of the issues faced by street children in Rwanda and the reasons that have contributed to their growing number in emerging town centers. Each street child has a unique story that drove him or her to the streets; poverty, rural-urban disparity, loss of parents and abuse, among others, may have figured in the combination of factors that resulted in a child living on the streets. In order to alleviate their misery, these children often resort to drug abuse, violence and crime, amplifying their problems. "Rehabilitating" and reintegrating street children, the common approach, without addressing the factors that send them to the streets is an unsustainable solution.

1.2 Purpose of Study

Street children are disadvantaged as they have little access to basic services and have limited support, if any, from their families. These deprivations have particularly far-reaching consequences for children as they are more vulnerable than adults to a range of environmental and social deprivations and more likely to be affected in ways that have long-term repercussions. Although the situation of street children in Rwanda has improved over the past few years in comparison to other countries, there is still room for improvement of services provided to street

children in Rwanda. Therefore, I aim to better understand the root causes and contributing factors that drive children to the streets and the many challenges they face using a case study approach on experiences of children living at a rehabilitation center in Eastern Province. I also explore the plight of these children whose basic rights are often compromised by providing a description of the main problems they face, including issues centered around physical abuse of these children, but also on other basics rights compromised such as right to food, to health and to education.

Depicting the prevalence and extent of problems faced by street is not sufficient; it is clear that these issues deserve attention and need to be recognized and understood. Despite tremendous efforts by the government of Rwanda to tackle the problem of street children, this phenomenon persists. My research suggests that cohesion and coordination are necessary to devising promising and sustainable strategies. This research also indicates that:

a) responding to issues faced by street children should be part of broader community development efforts, and

b) governments, planners, and civil society should ensure provision of conditions that support the wellbeing of street children and incorporate their needs into existing interventions.

Once a holistic understanding of the causes and challenges is reached, this study aims to develop an in-depth understanding of the services rendered to street children in Rwanda, describe the gaps in these services, and explore how these services can be enhanced through policies and recommendations for appropriate interventions.

1.3 Methodology

The first part of this project will review literature related to street children around the world and their situations in order to develop a clear understanding of the problem. This section will explore how street children are characterized and defined, the leading factors pushing children to the streets, the challenges they face, and the knowledge that has been established about services rendered to street children.

The second part of this project will be focused on the situation of street children in Rwanda. A case study approach is used, allowing for close examination of the situation within a specific context, a specific geographical area of Rwanda. The focus makes it possible to provide detailed descriptions of the particular causes of the problem and issues faced by street children through detailed contextual analysis. This study does not involve questioning street children directly through interviews or questionnaires nor direct observation of their behavior; instead, documentary analysis is carried out by based on case files of former street children now living at a rehabilitation center in Eastern Province. These files contain information the children provided to the center, such as the causes for leaving their homes, the types of activities they undertook while living on the streets, the challenges they faced while on the streets, and how they are coping at the center.

The second part of the report is also based on interviews conducted with key informants who are actively involved in helping street children; these interviews were semi-structured using a guide to the topics to be covered; these interviews allowed the participants to:
   a) provide information on the process of reintegration,
   b) the services provided to street children in Rwanda in general and specifically at rehabilitation center,
   c) some of the leading causes for children taking to the streets,
   d) and the main difficulties they encounter.

Finally, drawing upon the documentary analysis and the interviews, the final section of this study presents a summary of the findings, conclusions and recommendations to improve the situation of street children in Rwanda.

CHAPTER 2: Literature Review

This chapter reviews the international literature to outline what is generally known about street children. Seven key issues are covered: how street children are defined, how many there are, why they leave home, common characteristics, typical problems, how they cope with those problems, and various policy approaches to addressing street children. The specific case of Rwanda is covered in the subsequent chapter. In both these chapters, and throughout the review of the literature an important distinction is found: one strand of the literature focuses on the 'problem' of children 'being on the streets', with definitions and responses thus focusing on their removal from the public realm; a second strand focuses on the lived experiences and difficulties of the children, with analysis and programming focused on the quality of their lives.

2.1 Definition of Street Children

Although the definition of street children has been reworked several times by such agencies as the United Nations Children's Emergency Fund (UNICEF) and Save the Children, the most common definition of street children is "any girl or boy who has not reached adulthood, for whom the street (in the broadest sense of the word, including unoccupied dwellings, wasteland, etc.) has become her or his habitual abode and/or sources of livelihood, and who is inadequately protected, supervised or directed by responsible adults" (Inter-NGO, 1985).

Welfare agencies now talk of "urban children at risk" (Kapadia 1997), which considers street children as part of a larger group of urban poor children who require urgent attention. Current perspectives tend not to separate street children so radically from other urban poor children facing adversity in urban centers (See Figure 1). There is significant evidence that children move on and off the streets and that they have social networks and experiences that extend beyond the street lifestyle (Panter-Brick, 2002). A variety of appellations have been used over the years to refer to street children and to capture the varying experiences in their lives such as "children

on the streets", "children of the streets", "children in street situations", but there has been great controversy as to what is acceptable as these do not always coincide with the children's own views about their lives. The Consortium for Street Children has promulgated the term 'street-connected', which is now widely used to describe experiences children have on the streets: "some live on the street; some work on the street; some street children maintain relationships with their family whereas others break all contact; some are on the streets currently and some are off the streets but could be easily drawn back there - all of them have strong connections to the street" (CSC, 2017)

Danso & Ansell (2015) suggest that the issue of defining who is a street child is particularly problematic because unlike other groups they are defined by a relational process, which is being on the streets, and not by their status or the particular activities they undertake. De Benitez suggests that the term "street children" is a social construct. Their experiences may vary socially and temporally from child to child, influenced and shaped by the child's own realities (De Benitez,2011). Street children are not a clearly defined, homogenous population; the use of the street by any one child is fluid, depending on his or her age, gender and experience (Ray et al. 2011). Glauser finds that the lack of consensus regarding categories and definitions has some negative impacts on the provision of support and protection of these children. "Clearly from a methodological and scientific point of view this is of course unacceptable. But it is even less acceptable that international organisations, policy makers, social institutions and individuals who feel entitled to intervene in the lives of children with problems, do so on the basis of obviously unclear and arbitrary knowledge about the reality of these children's lives." (Glauser, 1990).
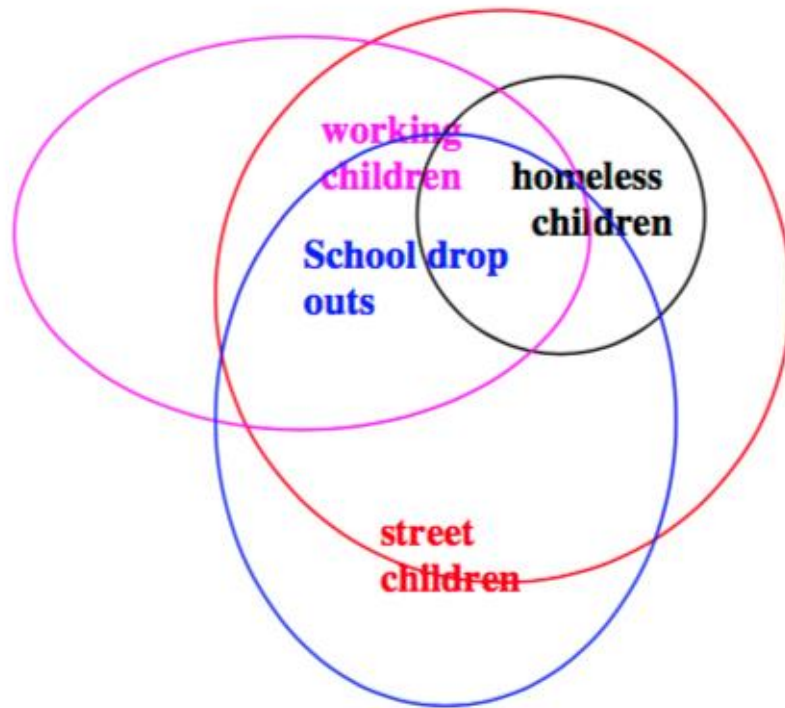
Figure 1. Street children in relation to other vulnerable groups. Source: World Bank Institute (2002)

In this study, the term "street children" is used to refer to children who work and/or live on the streets. Although some have criticized this appellation, claiming that it is a generic construct reflecting social and political agendas and introduced several alternate terminologies, this term will be adopted in this study for consistency purposes with an understanding that it is not used pejoratively and that these children are right holders and individuals; they are not a homogenous group as there are indeed enormous variations in their set of actual experiences.

2.2 Numbers of Street Children

According to the United Nations Children's Emergency Fund (UNICEF), every city has some street children, including the biggest and richest cities of the industrialized world. Urban areas offer great potential for children to secure rights. Of the more than one billion children living in urban centers around the world, an estimated 100 million are considered to be "street children" by

various agencies, a number that has remained relatively static over the years (UNICEF, 2012). However, some anthropologists, namely Panter-Brick and Ennew have expressed concerns regarding the validity of these estimates because of unclear counting methods, the constant mobility of street children and the tendency of some agencies to exaggerate the numbers in order to draw attention to the need for their work (Panter-Brick, 2002).

UNICEF states that though the exact number of street children is impossible to quantify, numbers are likely to keep increasing as the global population grows and as urbanization continues apace. Numerical discrepancies are common in estimating the number of street children because children are mobile and elusive and it is strongly advised to use caution when using given estimates for policy-making. Vanistendael (1995) cites some additional reasons for the difficulty in estimating their numbers: their numbers vary according to the definition given; marginalized people are often hard to find in official records and even harder to count; emotions run high in dealing with street children, which is not conducive to precise estimation; and beyond a certain level, numbers are hard to imagine concretely.
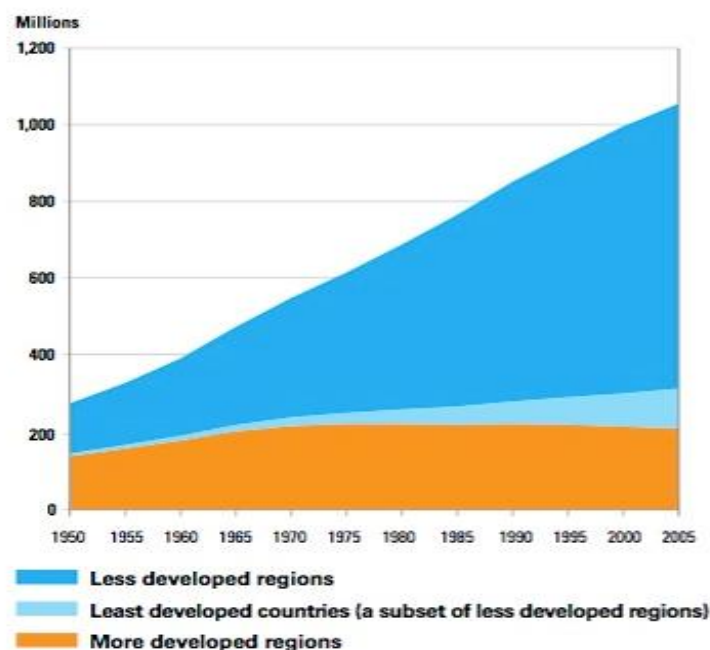
Figure 2. Increase in the number of children living in urban areas. Source: UNDESA, Population Division.

According to a research with 2000 adults conducted by the Consortium for Street Children (CSC) in 2012, 61% of survey respondents associate street children with Africa and Asia only. However, contrary to popular belief, street children are not present in developing countries only. Although the majority of them are in Asia, Africa and Latin America, the problem of street children is a worldwide problem (See Figure 2). While their circumstances and reasons for being on the streets can vary greatly between developing and developed countries, many street children are also found in industrialized countries and in big cities such as London and New York (Vanistendael, 1995).

2.3 Reasons behind Leaving Home

As previously highlighted, street children are not a homogenous population, but it is difficult to capture and describe the individual realities of all children's lives. General characteristics of these children can be used to gain a better understanding of their realities. There are common contributing factors that prompt children to leave their homes and seek refuge in the streets. According to the World Health Organization, some children are lured to the streets by the promise of excitement and freedom, but the majority are pushed onto the streets by desperation and a realization that they have nowhere else to go (WHO, 2002).

Studies across a number of countries have shown that street children often experienced intra-family violence, and come from fragile families located in income poor neighbourhoods (De Benitez, 2011). Economic poverty, as a result of unemployment or inadequate family income, is the most commonly cited reason for children living and working in the streets, but there is a myriad of complex factors that play a key role in street migration depending on the context. Other contributing factors include physical and sexual abuse within households and communities, family disintegration, parental deaths and lack of education and support from their parents (Densley & Joss, 2000). Prejudices and exclusion still form part of everyday life for many

children with special needs in developing countries, and it is particularly difficult for poor families to provide support for children with special needs.

Poverty influences children's decisions to leave their homes; in poor communities with inadequate shelter, poor water and sanitation services and insufficient food, children are compromised in health and development and turn to the streets. Street children are often identified as the most vulnerable and marginalized members of societies because of their inability to fulfil their most basic needs (Shrestha, 2009).

Maslow's hierarchy of needs can also be used to explain some of street children's motivations to leave their home based on human needs. This model is divided into deficiency needs, which include basic needs and psychological needs, and growth needs or self-fulfillment needs. Maslow suggested that our most basic need is for physical survival, and this will be the first thing that motivates our behaviour. According to Maslow's model, one must satisfy lower level needs before progressing on to meet growth needs. When a need has been satisfied, it will go away and our activities become habitually directed towards meeting the next set of needs that we have yet to satisfy (Nasir & Shoukat, 2014). Although Maslow's theory has been criticized over the years for being reductionist and overlooking the role of social connection, it illustrates to some extent some of the motivations behind children leaving their homes. While the family home is usually a place that provides emotional growth, support and guidance necessary for healthy development, many children fail to obtain food, clothes, shelter, health care and other basic needs in their homes. Therefore, when there is a lack of fulfillment of physiological as well as psychological needs, children depend on their own resourcefulness in order to meet these basic needs, which in turn, exposes them to life on the streets (Nasir & Shoukat, 2014).
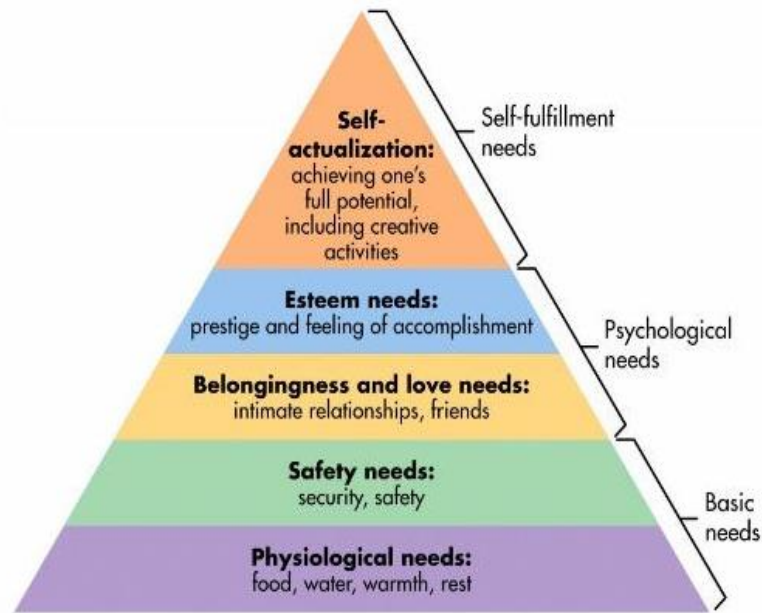
Figure 3: Maslow's Hierarchy of needs

2.4 Characteristics of Street Children

As with causes for "*streetism*" or estimates on the number of street children, caution should be applied when attributing specific characteristics to street children. Street children's characteristics and conditions depend on numerous factors such as location, time and context. However, without attributing stereotypical characterizations and simply describing them as delinquents and victims, there are common characteristics that have been identified among street children, especially in developing countries. In general, street children are predominantly male, with a significant imbalance in the number of boys and girls on the streets. This can partly be attributed to cultural sanctions and the fact that girls have a tendency to endure abusive or exploitative situations at home for longer (Unicef, 2006) and that they are more vulnerable to abuse on the streets in comparison to boys.

Moreover, females are less represented as they are more controlled by their families and when they escape from their families, some are caught and exploited by pimps. It is particularly because they are more subject to abuse on the streets that they prefer any other place than the streets (Lugalla and Mbwambo, 1999).

The average age at which most street children start living on the streets is between 9 and 12 years old (Rizzini et al., 1994). In terms of education, the majority of street children in developing countries do not have a formal education and usually dropout of school due to poverty. Some of these children maintain some contact with their families, but many of them live and work in the street without any contact or support from family members. They engage in various activities to earn some money, but many of them beg, work as street vendors or prostitutes (Beauchemin, 1999). Often times, street children are viewed as deviants who engage in substance abuse, early sexual activity, and crime, among others and are treated with harshness. Despite difficult circumstances, they do not all manifest antisocial behaviors or hopelessness (Orme & Seipel, 2007). Moreover, it should be noted that there are many street children whose characteristics and situations outside the afore-mentioned.

2.5 Problems Faced by Street Children

It goes without saying that street children face innumerable problems as they live without adult protection, without decent income-generating employment and in unsanitary living environments, among others. The challenges range from hunger to homelessness, and the abuse they attempt to escape within their households is likely to continue or become worse on the streets as these children are exploited by adults or other street children. According to UNICEF, in developing countries, often those who are entrusted to protect street children, such as the police, become the perpetrators of crime against them. Street children in countries such as Uganda, Democratic Republic of Congo, and Rwanda have reported being harassed or beaten by law enforcers and often find themselves in conflict with them. In these countries, it is common practice to round up street children and take them to remote places where they will not be seen in order to "clean up" the city (HRW,2014).

As for their health conditions, these children are exposed to numerous health hazards because of their lifestyles, malnutrition and substance abuse. As many walk around the streets barefoot and without protective clothing, they are susceptible to cuts and wounds as well as to skin infections. Street children are also susceptible to illnesses such as cholera, diarrhoea and vomiting as a result of being in unclean and unhygienic environments (Behura and Mohanty, 2005). HIV and other sexually transmitted diseases are commonplace as they often engage in unprotected sex; particularly girls, as they are more vulnerable than boys, trade sex for protection (Lugalla & Mbwambo, 1999). This is exacerbated by limited access to medical care due to insufficient funds or ignorance on where to access information or services (Kiragu, 2009). Moreover, street children are often denied access to medical services unless they are accompanied by a parent, social worker or an NGO representative (KidsRights Foundation, 2012). This causes street children to believe that they will not be treated with respect and that they will be prevented from receiving the treatment they need, thereby contributing to continued bad health for street children. (KidsRights Foundation, 2012)

Another challenge they face is dealing with the stigmatization and its pitfalls; stereotypical representations of street children by the public and media as delinquents promotes a negative perception, fear and exclusion of street children, which fosters and exposes them to high levels of violence. In many countries around the world, street children are viewed as delinquents whose sets of values often lead to criminal lifestyles (De Moura, 2002). In many African countries, violence and abuse has been identified as the main challenge faced by street children. Some researchers have recognized that the labeling of street children as deviant pushes them into antisocial behavior; in fact, they may even come to accept society's perceptions of them. The literature on perceptions of street children reveals that society has negative interpretations of their lifestyle and the negative labeling serves to further isolate them from society, intensifying their victimization (Leroux & Smith, 1998). Many street children also suffer from mental health due to ostracism, lack of love and emotional deprivation (Kiragu, 2009).

2.6 Coping Strategies

Despite the many challenges they face and the often hostile city environments, street children may find coping or survival mechanisms; the streets, in some cases, allow them to be creative, to be financially independent, to enhance their skills, as well as to find supportive peers, which is often not the case in their family homes. Migration and mobility has been identified as a coping strategy by some researchers; their movement between different places over time allows them hone their negotiation skills to meet survival needs and to develop personal and social identities (Van Blerk, 2005).

Although peer groups formed among street children are often perceived as gangs involved in organized criminal behaviour, researchers increasingly recognize that there is a diversity in the network of activities. Many street children are autonomous and able to cope with the difficult challenges they face daily because of the support, acceptance, understanding and companionship from other street children (LeRoux & Smith, 1998). Particularly children who are either orphaned or abandoned and have no ties with their families often form peer groups; these peer groups play the role of family and provide solidarity, care during an illness, economic and emotional support to each other as well as protection from violence by outsiders (LeRoux & Smith, 1998).

Many street children tend to focus on work in order to survive on the streets instead of begging for money or food (Orme & Seipel, 2007); in many cases, they combine illegal and legal income generating activities. Most street children are involved in jobs considered to be low in the social hierarchy such as car washing, selling postcards, and shoe shining (Steel, 2008). Street children are recognized to be particularly creative in adapting to their environment and inventive when it comes to earning money and food on the streets; they know who and how to approach people or organizations e.g. performing music (Lieten et al. 2014). Although they have a wide range of skills related to survival and income generation, some street children also rely on their spirituality and their belief in God to be able to survive the challenging times on the streets as well having a

positive attitude towards the future and not dwelling on the past (Orme & Seipel, 2007). In many cases, the harsh experiences street children undergo and the practical skills that they learn on the streets allows them to contribute positively economically and socially (Kiragu, 2009).

2.7 Rehabilitation Approaches and Programs for Street Children

Throughout the world, a number of organizations, governments, institutions and individuals are concerned with the welfare of street children and deploy tremendous efforts to improve their lives. International and national agencies have made concerted efforts to find suitable means to address the street children problem (Pandey, 1993). The United Nations Convention on the Rights of Children (UNCRC) recognizes children's abilities to enact change in their lives; it outlines the rights of children, including the rights to education, health care and housing and also specifies the need for improved protection of children in especially difficult circumstances, which includes street children, and several articles of the convention directly relate and refer to street children (Pinto, 1994).

Traditionally, literature on street children was heavily focused on describing street children's characteristics and lives on the streets rather than developing best practice interventions that would assist in improving the challenges they face. Since the twenty-first century, there has been a clear shift in research related to street children. In the past, research on street children regarded them as objects instead of active participants. They are now increasingly seen as key informants in designing appropriate programs for improving their lives (Panter-Brick, 2002). Silungwe and Bandawe suggest that the complex backgrounds and circumstances of street children require multifaceted interventions through programs that blend psychodynamic and risk factor approaches as well as strain and control theories (Silungwe and Bandawe, 2011)

In order to introduce effective policies, an understanding of the role of children is required, which is why researchers such as Panter-Brick and Van Beers emphasize the need for child-centered

approaches, where the primary focus of concern is on the children themselves rather than on the street. In addition to focusing on street children's experiences, researchers also recommend the integration of research as part of the structure of interventions to ensure their effects can be monitored, the design of flexible and long-term interventions that recognize and respond to diverse and complex experiences as well as the coordination of policies and programs to ensure their success.

Best practice approaches in this area include community development, micro-enterprise development, education on health and risk issues that street children face, improvement of socioeconomic conditions of families, provision of basic needs as well as residential/rehabilitative care (De Benitez, 2011). The programs designed to protect street children in Rwanda have not always been successful partly because of the lack of consultation with street children in the design of these programs or in the evaluation of their effectiveness. Failure to develop appropriate policies regarding street children can be attributed to the lack of formal representation of street children as they are placed outside the realm of policy development and to their independent status, which puts outside recognized channels of protection (Danso & Ansell, 2015). In addition to inadequate policies, budgets for street children across the world are grossly insufficient, relative to the support they and their families need (De Benitez, 2011).

CHAPTER 3: Situation of Street Children in Rwanda

3.1 An Overview

Although it is difficult to count children living and working in the streets and to estimate the number of those who elude counts, the NCC estimated the number of street children in Rwanda, both girls and boys, at 7,000 (NCC,2012). This figure gives an indication of the magnitude of the street children problem in this small country. Official statistics on the numbers of street children in Rwanda are not completely reliable as most street children do not have "indangamuntu", which are photo identity cards, and usually do not carry any identity documents. Approximately 87% of street children in Rwanda are boys and 13% are girls and most are aged between 14 and 18 years (NCC, 2012).

Moreover, the number of street children is projected to increase as Rwanda's population continues to increase rapidly; the current population of Rwanda, a small landlocked country of 26,338 square kilometers, is approximately 11 million. This number is projected to double by 2050 according to statistics from the Ministry of Finance and Economic Planning with an annual population growth rate at 2.6%. This could undermine economic growth and impact negatively the limited resources for the current population and their quality of life. It is one of the most densely populated countries in sub-saharan Africa and the most densely populated in East Africa, with a density of 415 inhabitants per square kilometer (NISR, 2012). The anticipated population growth, coupled with the strong trend toward urbanization, poses a huge challenge for Rwanda as it is likely to struggle with overburdened public services, environmental pollution and inadequate housing; which further threatens marginalized communities, including street children.

Close to 50% of Rwanda's street children are in the capital city, Kigali, having migrated from both urban and rural areas of the country's provinces. Urban areas are attractive to street children because they are considered to offer an easier life than rural areas and to host higher-paying

informal employment opportunities. In Rwanda, street children, also known as "Mayibobo", which is a pejorative term in Kinyarwanda meaning "delinquent" or "criminal vagrant", and they face stigma and discrimination. These children are often discriminated against and marginalized by society. They receive little government support and are left to care for themselves.

Generally, there is a dearth of information regarding street children in Rwanda as few studies have been conducted on this population group. The situation, incidence and the distribution of street children was relatively unknown until 2012, when a study was conducted by the Rwandan National Commission for Children to examine the main reasons behind children leaving their family homes and to evaluate the functioning and efficiency of existing street children centers. As part of the NCC research, 1,087 street children were interviewed and 22 street children centers in 11 districts were assessed. Among the street children interviewed, about 87% were boys and 13% were girls and were between the ages of 6 to 18. The study revealed that the most frequently mentioned activities street children in Rwanda are involved in include collecting and selling food items from garbage, begging and stealing. The districts with the highest number of street children in Rwanda are Nyarugenge, Huye, Rubavu and Kayonza (See Figure 4).

Figure 4. Rwanda Map

Historically the main causes of *"streetism"* in Rwanda included: population movements, especially between 1990 and 1993 due to the unstable political climate; the genocide in 1994, when the number of street children increased substantially as many children suddenly became orphans; and the spread of HIV/AIDs, which caused the death of one or both parents in a household (MIGEPROF, 2005). Rwanda faced a turbulent history and prolonged ethnic tensions between Hutus and Tutsis before 1994 and in just three months, between April and July 1994, thousands of Rwandans were massacred throughout the country. Observers note that "though the death of these innocent victims was in itself a disaster, the consequences of these deaths — the creation of a large population of orphans and widows, the destruction of family relationships, the trauma of Rwandan children by witnessing the brutal murder of parents, siblings and members of their extended families, the departure of survivors to refugee camps in bordering countries (notably Tanzania, Uganda and the Democratic Republic of Congo) and their

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subsequent return to Rwanda, as well as the spread of HIV infection by rape used as a tool of shame, humiliation and repression by those perpetrating the genocide — remain important conditions of life in Rwanda" (ORYAR, 2012). The 1994 genocide was largely responsible for the rise in the numbers of street children in the early 2000s as many of them became orphans or were separated from their parents during or in the aftermath of the genocide (Strategic Plan, 2005); it is estimated that between 200,000 and 250,000 children were orphaned during the genocide. Despondent, desperate, lonely and starved by the time the Rwandan Patriotic Front gained control of the country through a militia offensive, countless children who had lost their family members and had been unable to flee to neighbouring countries relied on the streets for means of survival.

More recently, the NCC study reveals that there is a myriad of factors that contribute to the emergence and development of the street children problem; the analysis of data collected as part of NCC's research shows that the main causes for children being on the streets is poverty, death of parents, mistreatment in household by parents or step-parents, family breakdown and neglect (NCC, 2012). Despite the immense progress made through the concerted efforts of the people of Rwanda and their Government in their struggle against poverty and the development of a stronger economy, between 47% and 52% of the population still live under the poverty line (MDG Progress Report, Rwanda 2010).

According to the NCC study, the main problems faced by street children in Rwanda include hunger, violence when they are taken to transit centers by force resulting in injuries, lack of proper shelter and lack of access to medical services. More precisely, being beaten up and injured as well as being taken to transit centers were cited as the most common forms of violence they faced on the streets, which has led to an evident distrust of authority. Moreover, the study revealed that most of street children studied also have no access to education; they indicated having dropped out of school at an early educational stage. The most common diseases found among street children are cholera, typhoid and malaria because most of the children consume untreated water and food from trash cans, lack hygiene and access to sanitary facilities.

Although most street children in Rwanda spend their meager earnings on food, clothing and entertainment, many of the street children commonly spend some of their income to buy drugs such as marijuana and glue in order to cope with hunger, abuse and other harsh realities of life on the streets. Stigmatization of destitute children has also been highlighted as a major challenge faced by street children; little consideration is given to the experience of the children nor to other facets of their identity and becomes a cause of discrimination of the children and triggers negative social reactions (Invernizzi, 2001). It also leads to a common feeling of insecurity on the streets among the middle and upper classes, who see themselves as potential victims and may also see the street children as "bad" examples to their own children (Aptekar, 1988). This social reaction leads to stereotypes related to gender and age; for example, that all street girls are prostitutes (Lucchini, 1994). In Rwanda, street children are often considered to be a nuisance because they hound passers-by to sell items or beg for money and adults involved in similar activities see them as competitors. The stigma of being on the streets makes it difficult for children to integrate into education and with their peers. Teachers have not had adequate training to deal with such sensitive issues as vulnerable children, inclusive education, and child protection. Due to the negative labelling of street children, there is poor awareness amongst communities of the need to support the reintegration and education of these children.

The number of street children involved in crime-related activities is relatively insignificant and most are involved in petty crimes such as stealing food or side mirrors from cars that are parked on the side of the road and reselling them. However, these are shown in the media, together with other more serious crime stories, portraying street children as serious crime offenders in order to justify the abuse inflicted on them. The stereotypes and representations of street children are problematic because children are not seen as rights holders and are more likely to be subjected to violence. Periodical round-ups, and brutality from the police, reinforce street children's criminalization, and prevent these children from gaining the support they need. Although some police officers have helped to reintegrate street children with their families, many of them use violent measures to take them off the streets.

3.2 Role of the Rwandan Government

As a response to unwelcome street occupancy by children, the Rwandan government has introduced a number of interventions and demonstrated its commitment and willingness to realizing the rights of children through policies, legislation and program initiatives aimed at protecting street children. Over the years, there have been a range of efforts deployed by the government in this area in terms of scale and scope. Rwanda is a signatory of the United Nations Convention on the Rights of the Child (UNCRC) and has also adopted and ratified the African Charter on the Rights and Welfare of the Child. In 2001, the MINALOC developed a National Programme for Street Children and in 2003, the Ministry of Local Government, Information and Social Affairs developed a National Policy for Orphans and other Vulnerable Children, including street children (NCC, 2012). The government's vision with regards to this policy is to "implement policies and programs to ensure that children in difficult circumstances are integrated in a socially, economically sustainable community" (MIGEPROF, 2005). The main objectives of the Strategic Plan for Street Children, which was introduced in 2005, was to protect street children against permanent dangers, reintegrate street children into their family or community using different strategies and approaches. This was a major step in acknowledging the existence of street children and recognizing that they have rights and are facing major challenges in their everyday lives. One of the main recommendations from this strategic plan proposed the establishment of a National Commission for Children, which is an independent agency under the Ministry of Gender and Family Promotion (MIGEPROF), established to coordinate activities and stakeholders working with street children..

In terms of approaches, the Rwandan government generally supports rounding children up in different town centers and taking them to various rehabilitations centers across the country as a way of dealing with the street children problem (HRW, 2014). Although these children are given access to services, mainly education and vocational training, many often try and some manage to escape as they were taken against their will to these centers. Forcibly taking street children

has proven to have numerous negative outcomes; children become wary of all adults and authorities, making them more vulnerable as street social workers have difficulty approaching them (MIGEPROF, 2005).

Despite the institutional advances, Rwanda's commitments to improve protection and support street children have been generally inadequate and not always successful at helping street children in the long-term. Poor evaluation of practices, weak implementation as well as limited resources have been cited as the main reasons for the lack of success in supporting and protecting street children (MIGEPROF, 2005). These earlier inefficiencies and failures also suggest that most of these interventions and policies were introduced based on scanty information on the situation of street children in Rwanda. It also indicates a lack of street children's participation in decisions affecting their lives. Information on street children was limited and few assessments were carried out on the extent of the problem until MIGEPROF conducted a study in 2012 on street children with regards to prevalence, causes and remedial measures. Moreover, there is still a gap in the legal framework and lack of harmonization of policies and programs on children, which has led to ineffective mechanisms and many of the commitments overlook street children particularly (ASPC, 2010).

According to a study by the African Platform for Social Protection (APSP), there are fewer programs in child protection than for women and for youth emancipation and empowerment and APSP calls for an improvement. The Rwandan government has made adjustments to its existing policies and has started to implement some new policies that are hoped to help reduce the number of children in the streets. For example the number of transit centers where street children are kept before being transferred to rehabilitation centers has reduced, particularly those known for the inappropriate conditions in which they kept the children (New Times Rwanda, 2008). Meanwhile, the Iwawa Rehabilitation and Vocational Skills Development Center, which strongly encourages vocational training and education to increase children's ability to earn legal income before reintegrating into the community, has yielded positive results due to changes in the education program and the recruitment of trained staff (NTR, 2008).

3.3 Role of NGOs

Non-governmental organizations (NGOs) have been at the forefront in providing care and protection to street children in Rwanda. The Diocesan Caritas, beginning in 1984, and Gatenga Salesians' centre, created in 1985, are reportedly the first to assist the country's street children. They provided education, vocational training, and facilitated participating children's reintegration into the wider community.

Still today, non-governmental organizations, particularly faith-based organizations, play an incontestably important role in ensuring street children are protected by strongly advocating for enhanced access to education and training, community participation as well as the incorporation of social work values. NGOs usually work in close collaboration with the community and attempt to fill in the gaps left by the government in addressing the issues faced by street children and strengthen government provision of services to street children.

According to the NCC's assessment of 22 rehabilitation centers from 11 districts in Rwanda, only two were financed solely by the government. The rest were financed by government institutions in conjunction with NGOs or by NGOs only, of which the majority were faith-based e.g. Byumba Catholic Diocese, Well wishers, and the Media espoir association. In addition to providing financial resources to rehabilitation centers, these NGOs also assist them in the provision of various services such as education and health care. They have used many strategies to promote awareness and support for the needs of street children and their activities; most of their actions are small in scale, local and adaptive.

Although they occupy a prominent place, NGOs have had little long-term impact in addressing the street children problem in Rwanda mainly due to difficulties in ensuring sustainability. Many of them are small scale organizations with limited resources, relying mostly on the support of volunteers, and do not have the capacity to take these solutions to scale.

CHAPTER 4: Case Study - Eastern Province

4.1 Study Setting

Located in Eastern-Central Africa, Rwanda is bordered by the Democratic Republic of the Congo, Uganda, Tanzania, and Burundi. Rwanda has five volcanoes, 23 lakes and numerous rivers, some forming the source of the River Nile. The country lies 120km south of the equator in the Tropic of Capricorn, 1400km west of the Indian Ocean and 2000km east of the Atlantic Ocean. The population of Rwanda is 11,689,696 (NISR, 2012) and the nation has a density of 474 people per square kilometer. Kigali, the capital city of Rwanda, has a population of approximately 745,261 (See Figure 5).
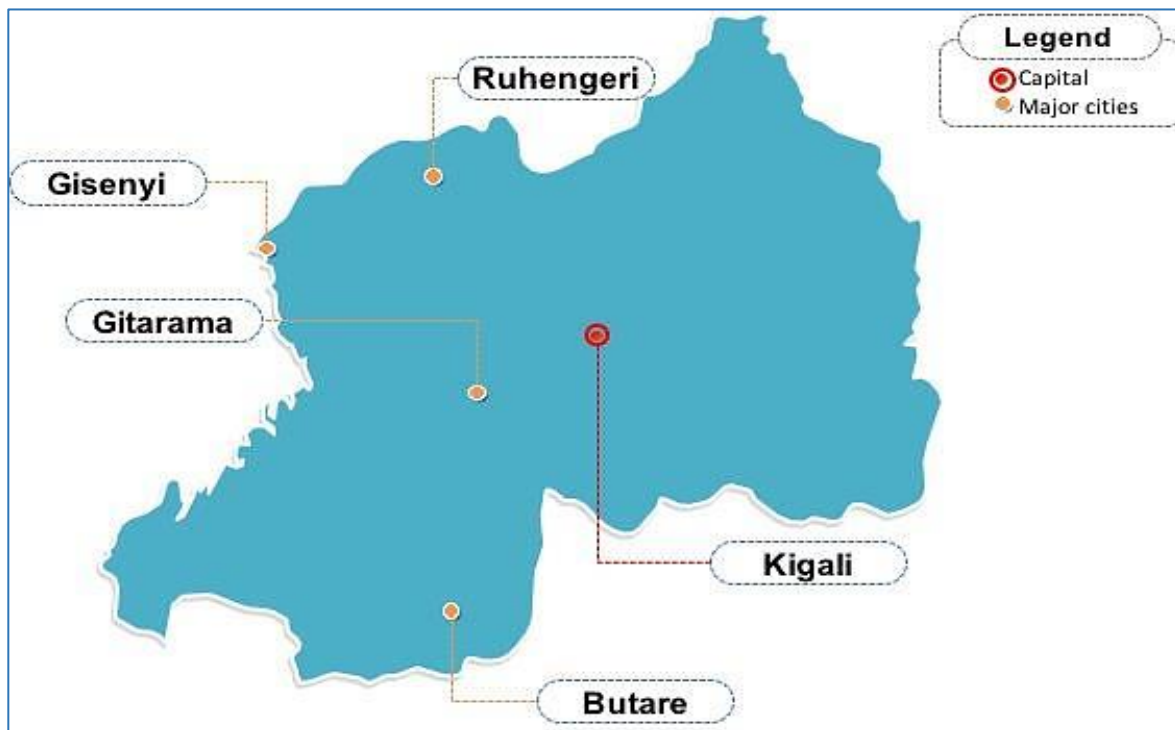

Figure 5. Major cities in Rwanda

Previously, Rwanda was composed of 12 provinces, however; the government decided to re-organize the provinces to address the issues that arose from the 1994 Genocide and to decentralize power. Currently, Rwanda is composed of five provinces, which are more multiethnic thereby weakening ethnic tensions. The 5 provinces are: Kigali, Southern, Western, Northern, and Eastern (See Figure 6).
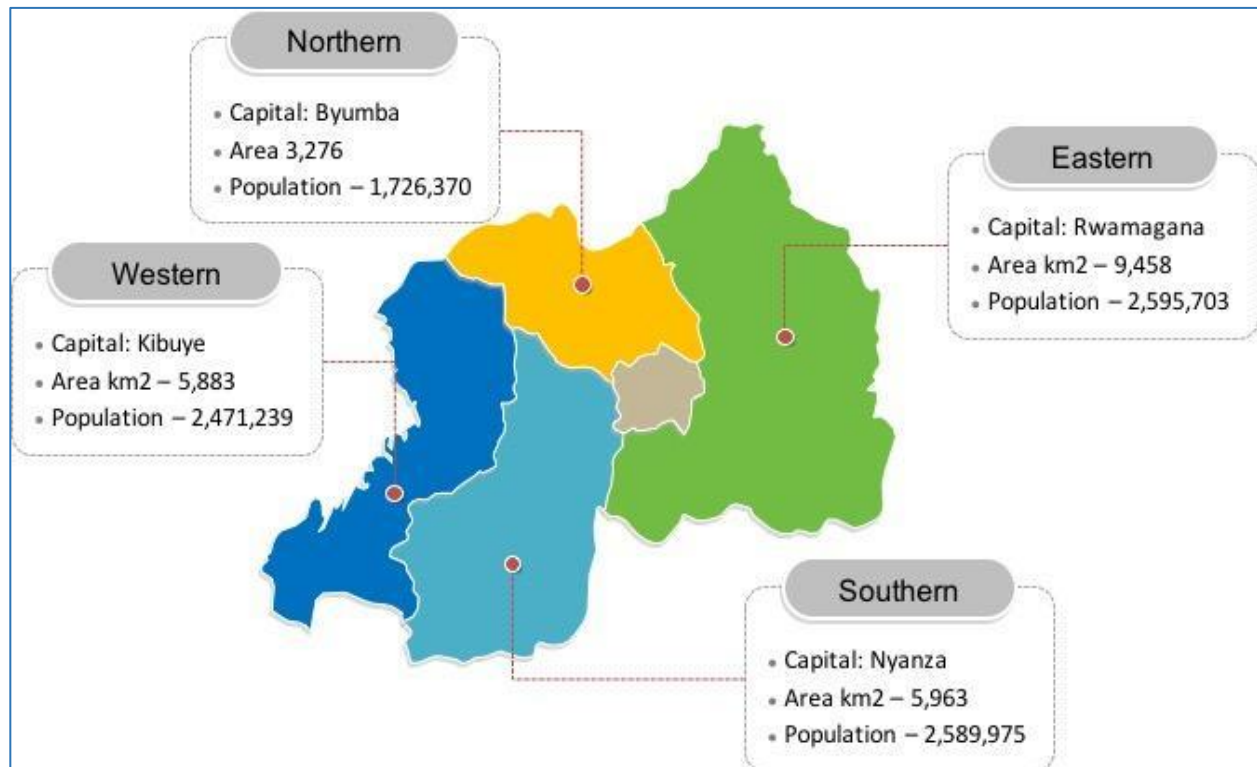
Figure 6. Provinces in Rwanda

The case study is based on a rehabilitation center located in Rwanda's Eastern Province. The Eastern Province is composed of seven districts: Bugesera, Gatsibo, Ngoma/Kibungo Kayonza, Kirehe, Nyagatare and Rwamagana, the capital city of the Eastern Province (See Figure 7). This province was created in early 2006 as part of the government decentralization program and comprises the former provinces of Kibungo and Umutara, most of Kigali Rural and part of Byumba. It is the largest, the most populous and the least densely populated of Rwanda's five provinces, with a population of 2,595,703 and a density of 275/km2 (See Figure 6) (NISR, 2012).

The Eastern province is considered a major transport hub that connects Kigali to the Ugandan border in the North, and to the Tanzania border in the South. Street children in the area come together to make money at taxi-minibus parks as these are usually departure and arrival hubs for many passengers going to or coming from various parts of the country or truck drivers making rest stops. Trade is especially practiced in district city centers; which have open-air markets and where street children can obtain food or money by performing jobs for traders such as loading. These children also visit the different selling points and small traditional markets scattered throughout the province.

Figure 7. Eastern Province, Rwanda

The rehabilitation center is one of the non-governmental organizations set up to protect, rehabilitate and respond to the needs of street children and operates as a local association deeply embedded in the communities within which it works. The center is manned by diverse trained and professional staff who empower children in different fields that include education, life skills, protection, individual support and counseling. It aims to tackle a wide range of social welfare problems that affect street children by developing innovative community-based solutions with the full participation of its beneficiaries and community members.

4.2 Study Methodology

This report is based on secondary analysis of data collected as part of interview sessions conducted by social workers in order to create professional profiles or case files of former street children living at the rehabilitation center. Once the children's basic needs of food and shelter have been addressed and they are well settled into the center, interviews are conducted with the children so as to obtain as much information as possible regarding their lives, which in turn, helps with the reintegration process. Although it is not always easy, the children become at ease and open up about their life stories and situations to the staff as they have spent a significant amount of time and have prior contact with them.

The profiles obtained are an edited version of the children's technical or professional assessment files, designed to protect their right to privacy and they contain a short history of the child describing the causes for being on the street as well as challenges, educational background, and a statement of the child's present status and desires. With the center's approval and in accordance with its regulations, I was able to obtain and use profiles of 37 street children living at the center. The information found in the children's case files is from interviews which took place between 2013 and 2015. Whether these children are still at the center is unknown; some may have been re-integrated successfully with their families while others may have become independent to stay on their own or may have gone back to life on the streets voluntarily.

Street children sometimes distort information upon arrival at rehabilitation centers to increase their likelihood of staying, but the information in the files is considered fairly accurate in reflecting children's experiences on the streets. It is obtained after several discussions with the children by staff who work closely and interact regularly with them so they are less inclined to assume or under-/over-estimate the children's emotional condition. From these profiles, I was able to draw out and determine the key themes in terms of causes and challenges street children face while on the streets.

I also conducted interviews with four key informants who work closely with street children; they shared information about factors leading to "*streetism*", issues faced by street children, social workers, rehabilitation centers as well as provided recommendations on how these issues can be addressed effectively. My interviews with key informants were conducted in 2017. The interviews were recorded, transcribed and analyzed to draw out key information and themes given by the participants.

When conducting research concerning children, especially those that are marginalized by society, ethical issues should be carefully considered at all stages of the research process. I explained the purpose and significance of the study to the key informants allowing them to decide for or against their participation. Representatives of the rehabilitation center were assured that the information provided would be protected and that neither their names or the center's name will be identified in the report.

4.3 Findings

Socio-demographic characteristics of Street Children at Rehabilitation Centre

According to key informant 1, more than 75% of the children at the rehabilitation center are between the ages of 11 and 18; however, there are children from all age groups at the center. In fact, some of the girls join the center either pregnant or with babies and their children usually remain with them at the center until they reintegrate with their families or when these mothers are old enough and can earn sufficient income to sustain a family. Key informant 1 also explained that the age of some of the children at the rehabilitation center is unknown because most of the children do not have identity documents or relatives who would be able to give more information about the children's identity.

In this context, a double orphan refers to a child who does not have a surviving parent, whereas a single orphan refers to a child who has one living parent. According to key informant 1, most of the children's parents are alive, but many children come from broken families, whereby their parents are either divorced or separated. However, the center also hosts several children that are either double orphans or single orphans. Although for many, their parents are both alive, they are not in contact with their parents and/or are not aware of their whereabouts. Moreover, for some of the children whose parents are still alive, their parents either have an illness or a physical disability or are imprisoned, making it difficult for them to care and provide for their families.

The average family size of the street children residing at the center is approximately 3. According to key informant 1, the number of siblings for children at the center ranges between 1 and 7. The majority of children indicate that they have 2 siblings, but some children come from families in which parents have had more than 6 children. Many of the children at the center are not able to indicate the number of siblings they have, but usually a larger family size is known to have implications for the availability of food, clothing and other basic needs within a household and a contributing factor pushing children to life on the streets.

Key informant 1 explained that the majority of the street children at the center are originally from various districts in the Eastern Province, which is also where the rehabilitation center is located. However the center also hosts street children from other provinces in Rwanda, including the capital province of Kigali. Moreover, over the years, the rehabilitation center has also accommodated and provided basic services to children who came from neighbouring countries such as the Democratic Republic of Congo, Burundi and Uganda.

Rwanda operates on a 6-3-3 education system structure, which means six years of primary school, three years of junior high school and three years of senior high school. The school language of instruction in public primary schools is Kinyarwanda. The majority of the children at the center are still in primary school and have not attended high school. Many of the children drop out of school mainly because they cannot afford to pay transportation fees and school supplies needed to attend school or due to poor performance levels. Generally, children in Rwanda finish primary school at around 12 years of age; however, the key informants stated that most of street children are significantly below the expected grade for their age.

4.3.1 Case Files Analysis

Table 1. Distribution of children by reasons for leaving their family homes

Reason	Frequency	Percentage %
Neglect	7	19
Abuse	13	35
Poverty (lack of basic needs)	14	38
Absence of parent(s)	22	59
To earn an income	7	19
Total	63	170

Table 1 shows the main reasons for taking to the streets, as identified by the 37 children. The frequency is more than the number of children and percentages are more than 100% because these children provided more than one reason for leaving their family homes. Indeed, for most of the children, leaving their homes cannot be attributed to a single factor; often it is a combination of factors that led them to the streets and (sub)themes were identified after reviewing the profiles (See Figure 8).

Figure 8: Interplay of some factors contributing to the street children problem.

Most of the children identified the absence of parents following imprisonment, death or separation of parents as being the main cause behind ending up on the streets as well as neglect due to illness of parents, large family size and parents' addiction to alcohol or drugs. Many of the children explained that they were forced to leave their homes following abuse and in most of the cases, the abuse was inflicted by step parents. The mistreatment took the form of corporal punishment, refusal to feed them or to provide them with other basic needs, among others. Some of the children, especially boys, ended up on the streets as they could no longer tolerate the situation at home and wanted to earn their own income.

Main Challenges Faced on the Streets

The analysis of case files and interviews, described later in the chapter, points to a series of challenges faced by children on the streets. Those challenges are summarized here.

1. **Malnutrition:**

Malnutrition is generally used to refer to both undernutrition and overnutrition. However, in this context, malnutrition refers to the outcome of insufficient food intake. Many of the former street children were afflicted with malnutrition as they could not maintain a balanced diet with the little food they could get or even have the guarantee of obtaining food. Many had stunted growth when they joined the center. Some of the children studied indicated that they would eat leftovers from restaurants or search through trash heaps for food due to limited earnings. Furthermore, malnutrition is often the cause of the many health problems faced by street children in Rwanda such as tuberculosis and cholera, largely due to lack of access to clean food and water, causing long-lasting detrimental impacts on the children.

2. **Lack of education:**

Primary education in Rwanda has been free of charge since 2003; the elimination of fees for primary education is part of the government efforts to improve school enrolment and the attendance of deprived children. However, the majority of street children do not attend school or have a formal education as they are out on the streets searching for means of survival or basic necessities to support themselves. Moreover, school supplies such as textbooks and school uniforms are not provided for by the government, which made it difficult for these children to follow the curriculum. These hidden charges in education makes it difficult for them to access education while on the streets.

3. **Abuse:**

Without protection and care, most of these children are exposed to various types of abuse. Some of the girls reported that they were sexually abused before they joined the rehabilitation center. Furthermore, while living on the streets, some of the children were victims of abuse including physical abuse from forces meant to maintain order and protection for all. Some of the street children live in constant fear of the police, especially during periodical roundups. Girls are particularly at risk of abuse from adults or from other street children, therefore are more vulnerable to contracting sexually transmitted diseases such as HIV, and of getting pregnant and giving rise to generations of children born into these difficult conditions. They are also at higher risk, compared to boys on the street, of being exploited as domestic workers.

4. **Lack of health care:**

These street children faced considerable health risks, both mental and physical, due to their living conditions and their activities while living on the streets. They lived in conditions with poor levels of hygiene and sanitation, dangerous traffic, decaying food and other environmental hazards, which strongly compromised their health status and resulted in numerous and frequent health problems. For example, some of the children who joined the center were infested with parasitic "jigger" fleas, which can be extremely painful to remove, while others had skin abscesses caused by an infection, and they could not access or afford to pay for health care services. The analysis of the documents obtained revealed that some children occasionally obtained food from smaller non-profit organizations. These organizations do not provide long-term services and only cover immediate basic necessities of street children such as shelter and clothing mainly due to shortage of available funds. Without increased funding for such centers, the future is bleak for these street children.

5. **Lack of shelter:**

The children's profiles revealed that several of them had no fixed or permanent place to stay and struggled to find a safe place to sleep while living on the streets. For some of the children, the standard place to live was in derelict and unfinished buildings and they would cover themselves with banana leaves to get some semblance of warmth, comfort or protection. It goes without saying that their health was undermined by the filthy environment and lack of proper shelter.

6. **Child Labour:**

Most of the children reported being involved in some income-generating activities after leaving their family homes in order to survive on the streets. Common activities, even for the really young ones, included begging, carrying heavy loads at local markets and car washing. The girls mainly took on babysitting jobs or worked as house helps, but they reported having been mistreated and underpaid. Other jobs reported by the street children studied are cassava and maize grinding, tending to cattle and sifting through garbage in order to collect scrap metal for sale.

4.3.2 Interviews Analysis

Four semi-structured interviews were conducted with key informants who help street children at the rehabilitation center. It was important to discuss with people who truly grasp the children's stories and the center's mission in order to obtain informative and insightful information. I was impressed by their remarkable understanding of issues faced by street children and their enduring commitment to empowering and helping the country's most vulnerable population.

The interviewees were asked about the main reasons behind children leaving their homes and taking to the streets as well as the main issues they face on the streets. Questions also focused on the health of street children such as the most common health problems and the main barriers to access to healthcare. The interviews also covered the long-term protection of street children

and promotion of social change to cope with the overwhelming challenges. For this I asked respondents to comment on the reintegration process and the effectiveness of vocational training programs. The interviews were recorded, transcribed and analyzed to draw out the key points and themes.

According to key informants interviewed, many of the children are brought to the center after being picked up by police officers from taxi parks or from local market places. Parents or guardians leave their children, especially the very young ones, at such locations as they are known to be visited frequently by law enforcement officers who take the children to rehabilitation centers. Children are also brought to the center by civil servants from the local area, religious workers, social workers or other community members. Some of the children are forced to join the center following police roundups, or voluntarily or are identified by staff at the rehabilitation center during street visits who encourage them to join the center.

As aforementioned, most children in the center are originally from the Eastern Province. However, the interviewees explained that they have helped reintegrate children from different provinces across the country. According to them, children travel across provinces based on their network or knowledge that they can improve their lives if they move to a certain province. Furthermore, some children decided to take refuge in another province following a crime they committed in their province of origin; while others move to another province in search of family members. Most of these children travel by foot across provinces and walk long distances.

The main reasons identified by the children for leaving their family homes correspond to those mentioned by the interviewees. None of the informants provided a single reason for children living and working on the streets; they all reported that there is a dynamic interplay of factors contributing to the street children problem. The main factors they identified include poverty and family disintegration due to separation of parents, death of one or both parents, imprisonment or serious illness of parent(s), abuse by parents or stepparents; in fact, many children have siblings who also lead lives on the streets. Moreover, children with serious illnesses such as epilepsy can be a burden for poor families struggling to make ends meet; this can be so troubling

for these families and they see no other alternative than to leave them to the streets. In addition to this, interviewees also reported that some children come to the streets as they want to be independent or because they are influenced by their peers who live on the streets. During the interview with Key informant 1, he also explained that there had been a recent surge in the numbers of street children in the area and a higher number of children were welcomed into the center largely due to prolonged periods of low rainfall, which resulted in reduced incomes for families.

The interviewees reported that the average at which children start living on the streets is 10. As in the case files, the key informants also explained that after discussing extensively with street children, one of the main challenges children face while on the streets is the struggle of finding a safe place to sleep at end of day. Many of them reveal sleeping under bridges or verandas and being frequently beaten up for trespassing while girls are often victims of sexual abuse. They also struggle desperately to find food and clean water.

Another major challenge faced by street children is health problems; the interviewees indicated that street children manifest health issues such as coughs, skin rashes and malaria as they are often poorly clothed, exposed to mosquito bites, among other things. Sexually transmitted diseases are also common among street children, particularly girls, as they are abused by men who have these diseases. Their health situation can be so troubling and without a family to take care of them and access to health services, these youths are left to care for themselves. Moreover, although not discussed in detail, mental health was mentioned as an issue among street children as they are faced with constant anxiety about meeting their basic needs to survive, namely food, shelter, clothing and they often struggle with low self-esteem, lack of self-confidence, and a sense of worthlessness due to abuse.

Key informant 2 explained that children often turn to substance abuse as temporary relief and explained that they often use cannabis, alcohol or sniff glue as a way of escaping the harsh realities of life on the street. Some of the health issues are caused by the poor nutritional status of the children as well as substance abuse. As seen in the case files, another challenge that was

raised in the interviews was the abuse from police officers, which makes the children wary and see them as inherently threatening.

The interviews revealed that since the center has been in operation, the number of boys in the center has been consistently higher than that of the girls; this is also generally the same situation on the streets. Given that girls are usually half of the population, I asked the key informants the reason for the gender imbalance among street children and they explained that one of the hypothesis is that girls are taught to cope with poverty and for cultural reasons are encouraged to stayed in the home until marriage. Interviewees also explained that the number of girls on the streets may not be significantly lower than the boys; according to them, the girls are not in the public eye as they mostly come out at night or stay in hidden places. The boys are more visible as they engage in manual work, which is usually done during daytime and in noticeable places. Key informant 1 also expressed concern over the rumors and the possibility of trafficking of girls.

As previously mentioned, education in Rwanda is free in primary school and the government aims to extend free education to cover the final three years of high school. Regrettably, in spite of these reforms, street children in Rwanda are routinely denied the opportunity to get an education due to a variety of barriers and the Rwandan school system fails to accommodate vulnerable groups of children. Interviewees reported that street children do not have the same opportunities in the future as other children as they do not have formal education and are hindered from finding employment and leaving the streets. In addition, those who manage to overcome these barriers and complete primary school are unable to get higher education as they cannot afford to pay secondary school tuition fees. The few street children who do go to school are regularly absent and achieve poor learning outcomes due to having lack of guidance and time to study, resulting in high school dropout rates and poor school performance.

Key informant 2 also explained that parents of many street children experience low levels of educational achievement, which combined with family instability puts the children in a cycle of economic distress. Key informant 4 also reported that many parents do not see the importance of sending their children to school; she described that they often tell their children that they were

able to survive and earn a living yet they never attended school so they should also find a way to live without necessarily getting an education.

Key informants explained that these children engaged in various activities while on the streets, such as selling scrap metal, sweeping verandas, collecting firewood and fetching water, but many of them were involved in domestic labour under unfavorable conditions. These children are subject to the strains and hazards of their labour. In addition, unfair employers take advantage of these children who are usually unaware of their rights. The income generating activities perpetuate the poverty trap as the children are denied the basic needs and education that could enable them to escape from it.

One of center's priorities is the reunification of as many children as possible with their families under suitable conditions. However, through analysis of the children's profiles and discussions with key informants, it is evident that reintegration can be extremely difficult. Obstacles include difficulties in tracing family members and poverty of the family. Interviewees reported that reintegration with family is also more difficult when parents are separated and remarried, as step-parents often show resistance to accepting stepchildren. Key informant 3 also said that some of the children come from families in which parents have a substance use disorder; therefore, parenting deficits are often present and parents are less likely to facilitate the reintegration process. Furthermore, some children are reluctant to return to their families as they feel well cared for, supported and nurtured at the center.

Another difficulty with reintegration raised during the interview sessions is that some children migrate from neighbouring countries and regrettably, the center does not have the capacity to reintegrate children with their families living abroad. International reintegration requires significant financial resources as the process involves multiple visits to the family home before reintegration. In such cases, the center seeks assistance from government officials to use diplomatic relations to address the issue or supports the children until they reach the age of majority. Moreover, key informant 2 explained that some children have expressed anger and resentment at having been rejected in the past, but through extensive work with social workers

the center has successfully reintegrated several children with their families since its opening.

According to key informant 1, there is pressure from the government for rehabilitation centers to ensure reintegration of street children with their families; however, the focus and priority should be placed on the level of happiness, independence and well-being of the children. Even though, there is a regular follow-up with children and parents after reintegration, reintegration with their families should not be the ultimate goal. The children's desire to remain in rehabilitation centers or away from their families should not be undermined and should also be considered a sensible option.

When asked about possible solutions to the street children phenomenon, interviewees stressed the importance of education for both children and families. They reported that it is important for children to attend school even after leaving the rehabilitation center; therefore, parents should be taught the value of education for their children and the government should provide financial assistance to allow children to attend school.

Interviewees stressed that parents, particularly stepparents, should be taught how to care for children as well as the important role parenting plays in the growth and development of children and how this is consistently linked to children's well-being. Key informant 4 recommended using media as well as discussion or focus groups to reach out to parents. In order to reduce the poverty trap that causes children to take to the streets, key informant 3 recommended that the government aid families in undertaking an economic activity based on the resources available in the area in which they live.

CHAPTER 5: Recommendations and Conclusion

5.1 Recommendations

The Rwandan government strongly supports family reintegration and uses it as the basis for measuring the success of rehabilitation centers and the effectiveness of its policies towards "the street children problem". Practical initiatives, programmes, assistance should be provided to rehabilitation centers to support children who choose not to reintegrate in order to ensure that they achieve emotional, social and financial independence once they are out of the centers. Some children made a conscious and voluntary decision to leave their family homes for their mental and physical well-being; therefore, staying in rehabilitation centers could be a reasonable option if the conditions at home are not beneficial as it allows them to escape the physical, emotional and sexual abuse in their homes and/or the crippling level of poverty in their families.

- Develop and introduce programs to support the education, health, independence and eventual societal integration of children who wish to remain at centres until the age of majority.

Research suggests that street children in Rwanda are often forcibly taken into rehabilitation centers. While these centers strive to protect street children and provide for their basic needs, involuntary institutionalization can be counterproductive. Children should be aware of where they are going and why and give their consent. In addition, some street children continue to resist joining rehabilitation centers and are able to cope with life on streets:

- Aim to put emphasis on educating street children about the benefits of rehabilitation centers
- Develop and support training in survival strategies for street children, in addition to supporting and advocating for rehabilitation centers.

At the community level, this study has revealed that street children are marginalized in Rwanda and this largely because of the widespread negative perceptions and stereotypes about street children. This could be done in collaboration with media professionals, community leaders or others that have the capacity of influencing the views of people. This is also likely to facilitate reintegration within cultural groups, schools and their communities as a whole.

- Implement an awareness raising strategy about the challenges faced by street children and the various factors that push them to the streets.

Meaningful participation and effective communication between street children and institutional actors is crucial to finding solutions to their problems as it will allow for mutual education of those involved through acquisition and exchange of "hidden" knowledge and key concerns. Fostering child participation and stimulating interaction with street children can also inspire or facilitate the cooperation and collaboration between children and authorities.

- Ensure the inclusion of street children and allow them to participate in decisions that affect their lives

Given the reported abuse by police, it is important to train them on children's rights and on developing effective communication with street children. There should be enhanced training on prevention and early intervention strategies.

- Implement training programmes to improve the ability of police officers, social welfare practitioners and other staff members to work well with street children.

As has been discussed in previous chapters, the abuse of street children has been a long-standing issue in Rwanda. The Rwandan police should thoroughly investigate instances of abuse, including sexual abuse, and take appropriate actions due to the long-term effects it can have on children..

- Put in place effective complaint and reporting mechanisms that allow street children to report incidents of abuse.
- Introduce strict regulations and increased child protection against abuse

Lack of access to healthcare services was identified as one of the main challenges faced by street children in Rwanda. Health workers should also work in collaboration with social workers and accompany them on street visits to treat children and babies born from young street girls. They are often malnourished due to inadequate feeding practices.

- Remove of barriers to healthcare and facilitation of admittance of street children to health centers
- Sensitize health workers about the importance of the issue and the need to provide health services without discrimination
- Identify the specific needs of street children and to educate them on issues such as the adverse effects of substance abuse and the risk of HIV.
- Provide support to girls who complete pregnancies

One of the issues raised in the discussions is the poor mental health of many street children due to the traumatic experiences as a result of marginalization and living conditions on the streets and at home. These mental disorders require support from specialists such as psychologists, of which there are few in Rwanda.

- Support specialists and initiatives that offer mental health support or counselling to street children.

Although primary school education is free in Rwanda, some families are unable to ensure that their children attend school due to other "hidden" fees. The Rwandan government should take into account the unaffordability of fees for textbooks, uniforms and other school supplies.

- consider further assistance for urban/rural poor families or provide alternative educational initiatives.

The findings of the study indicate that the fragility of the family environment is largely responsible for pushing children to the streets. As a result, it is strongly recommended for the Rwandan government to encourage an integrative and multidimensional approach for working with families, particularly families with behavior and substance abuse problems. This would help to

create a favourable environment and increase the capacity of families to support their children and prevent them from taking to the streets.

- Assess and allocate adequate resources in critical domains of a family's life such as education, awareness-raising and family planning

Although not conclusive whether trafficking of young girls is occurring in Rwanda, this was brought up during interviews and has been reported in bordering countries such as Uganda and the DRC. Therefore, it is worth exploring this possible serious issue in greater detail to ensure young girls are protected from sexual exploitation.

- Introduce a mandated system for reporting child exploitation or trafficking
- Target and identify girls' challenges and needs as they are often overlooked because they are less "visible" on the streets compared to boys

As discussed in the findings of this study and in the NCC report, the rehabilitation center, as well as other centers across the country, is struggling to remain sustainable due to insufficient funding from the government, which covers partial costs only. Additional funding could be spent on providing tailor-made services and increasing salaries for staff members among other things, in order to ensure smooth running of these centers and that the needs of children are addressed.

- Prioritize additional support and increased funding for rehabilitation centers

The Strategic Plan for street children was drafted in consultation with various institutions involved in the street children sector for the period between 2007 and 2011, but it has not been updated since then. It is important to continually collect and analyze information about a plan or program's activities, characteristics, and outcomes in order to improve services provided.

- Re-examine critically its policies related to the welfare of street children on a regular basis in order to improve their effectiveness and to inform decisions.

Within the government, it appears that there are various ministries involved in this area, but the roles and responsibilities of each are unclear; better coordination of interested groups such as churches and NGOs is required. This would allow them to advocate successfully for the improvement of services for street children.

- Improve coordination between entities, namely the government and NGOs, with shared interests in helping street children.

Research should be a structural part of government policy development and implementation. There has been insufficient research conducted on the street children problem in Rwanda. While the government commissioned a study on the situation of street children in 2012, which is valuable and provides important information about the problem, there remains a dire need for additional research on specific issues regarding street children such as on rehabilitation centers, health and education. The information presented in the 2012 study provides general and broad information about the problem across the country.

- Research the root causes, challenges and interventions specific to each region or province in order to design programmes that are appropriate and relevant to their particularities.

5.2 Conclusion

Through this study, I sought to identify the root causes of the street children phenomenon in Rwanda as well as the difficulties the children face in street situations. Many of the terminologies and definitions used to describe these street children have a subjective and inexact meaning and can lead to interpretations that are either too inclusive on the one hand, or too restrictive on the other. Portrayals of street children cannot be reduced to a one or two dimensional focus on the street environment. The study has shown that the immediate reasons children leave for the streets are complex and multifaceted, they include, but are not limited to: poverty, violence and dysfunctional families. Unfortunately, these very hard living conditions, have a negative impact not only on their physical and psychosocial development, but also on their cultural and economic development.

Living under the situations described and in the eyes of the public also has an impact on the experience of childhood for these children. The study indicated that the situation of street children in Rwanda is precarious, and in line with Maslow's theory, street children will never develop to their full potential and abilities or self-actualization if they continue to live in the streets since their most basic needs are not always met while on the streets. It goes without saying that children are vulnerable and we should strive to ensure that their physical, psychological and emotional needs are met.

Rwanda has an arduous task ahead in ensuring adequate support of street children. The study indicated that these children have poor chances of having a decent future unless action is taken and that their numbers will continue to rise due to ineffective interventions. Adequate budget allocations for rehabilitation centers concerned with promoting the rights and welfare of street children will be required in order to provide basic services to street children and facilitate reintegration with their families, when such reintegration is warranted. In addition, violence against children by law enforcement officers is an issue that needs to be addressed. The study has shown that there is a certain disconnect between the programs and policies in place; the

needs and rights of street children and effective collaboration between the public sector and non-government organizations as well as communities is required in order to ensure street children's basic needs are met and issues addressed.

Thorough understanding, through regular and comprehensive research, is required in order to make policies that are relevant and benefit street children. The Rwandan government should be aware of the importance of recognizing the capabilities of street children to cope and survive on the streets and the possibility to fulfil basic needs in diverse ways that break with traditional conceptions of shelter, family and other basic survival needs (Danso & Ansell, 2015).

Street children are resilient and resourceful and letting them take part in decisions that affect the course of their lives will ensure finding appropriate and sustainable solutions to the street children problem. Furthermore, it is vital to provide services that reflect their importance to children and to set standards that take into account the challenges faced by families in urban poverty.

As an urban planning student and an active volunteer at charity organization for street youth, conducting this study has been an enriching experience. It has allowed to further my knowledge about the street children phenomenon and learn how to counteract some inequalities faced by marginalized communities, which will help me in my career and in assisting street children in my charity work.

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