

A Survey of Street Children in Northern Tanzania: How Abuse or Support Factors May Influence Migration to the Street

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Abstract In October 2006, a survey was undertaken of youth “on the streets” in the Arusha and Kilimanjaro regions of Tanzania ($n = 1,923$). The question of interest was if street children who live on streets full-time differ concerning reports of abuse and support, compared to reports of children who are only part-time on the streets, and to children who don’t self-identify as “street children” at all. Results show full-time street children reporting significantly more abuse than part-time counterparts, or children who were not street children (mean difference = -1.44 , $P < .001$). Concerning support scores, non-street children and part-time street children reported significantly more support from their family than full-time street children (mean difference = 1.70 , $P < .001$). This information identifies possible reasons why vulnerable children migrate to live on the streets in the urban areas, and contributes to the limited literature and data on this subject.

Keywords Street children · Tanzania · Abuse · Social support · Population survey · Resilience

Introduction

Although this paper is a study of street children in northern Tanzania, in the larger context this study also addresses the

impact of growing global urbanization, thus will be of interest to the international humanitarian aid community and to the individual practitioners working with vulnerable urban children who have “de-linked” from their families. The global proportion of urban population rose dramatically from 29% (732 million) in 1950 to 49% (3.2 billion) in 2005, with estimates that it could rise as high as 60% (4.9 billion) by 2030 (UN 2006, 2008). The impact of increasing urbanization of populations internationally is an issue of growing concern addressed in UN’s Millennium Development Goals, and an area where much research is being focused to address the many problems associated with population shifts (<http://www.un.org/millenniumgoals/index.html>). More and more people are moving from rural areas to larger towns and cities to seek better paying work, leaving behind family, destabilizing traditional community and cultural structures in the process. Of particular concern, urbanization is having profound effects on the on the physical and emotional health of children in industrialized and developing countries alike (Gracey 2002).

One of the more obvious symptoms of the phenomenon of urbanization is the increasing numbers of children and youth leaving their families prematurely, migrating to live and work homeless on the streets in urban areas around the world, and thus a growing significant international problem that needs addressing. Youth homelessness is a problem from a community mental health perspective, a human rights perspective and an economic development perspective. There are large discrepancies in estimates of how many street children actually reside on the streets of urban areas around the world (primarily due to the mobile character of this population and difficulties with defining it), but with the lower estimates of the total homeless children population being in the millions, we can safely say that this

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phenomenon is at an epidemic proportion. There has been a great deal of research done in the last 15–18 years to understand the causes, effects and characteristics of the homeless or “street” children in Asia, South America and Africa. Research has suggested that the causes of children migrating to live on the streets away from their families as being rooted in poverty, hunger, family and neighborhood violence, family dissolution, and in the breakdown of traditional supportive community structures (Gracey 2002; McCreery 2001; Panter-Brick 2002; Rudenberg et al. 2001; Van Acker et al. 1999). Most research on street children until now has approached this issue from a “risk” and “vulnerability” perspective, but there is a growing consensus among current researchers that there has been too much emphasis on an illness or weakness perspective (and too much of a psychopathology orientation), and not enough emphasis placed on the competencies, strengths and resilience processes of these children. And importantly, on what can be done to foster the healthy development of these children, so they can reintegrate into their respective societies. The “street” experience is highly individual and contextual, and not nearly enough research has been done to learn about the depth and diversity of the street experience directly from the perspectives of street children themselves, and what they think might help (Ayuku et al. 2003; McAdams-Crisp 2006; McAdams-Crisp et al. 2005; McAlpine 2007; Panter-Brick 2002).

This current study examines findings from an October 2006 survey undertaken in northern Tanzania, analyzing the data collected in hopes of answering these key questions: Whether street children who are living on streets “full-time” differ concerning reports of abuse and/or support in their family, compared to mean scores of reports by “part-time” street children and children who do not self-identify as “street children”. To clarify, “full-time” street children refers to those homeless children who live and work full-time on the street, and who have very little or no regular contact with their family, whereas “part-time” street children are those young people who still live with their families (even if sporadically), but carry out work and other activities on the street during much of each day and night (and are vulnerable of becoming “full-time”) (McAlpine 2007; UNICEF 1986).

Analysis of the collected data begins identifying what may be influencing a growing number of children in coming to the streets in rural and urban areas throughout Tanzania, and the situation they face once on the streets. We also hope to learn more about what protective factors may be playing a role in the street children’s lives, and to begin examining the resilience processes that may exist in response to the adverse events they experience (Duncan and Amtson 2004; Henley et al. 2007; Luthar et al. 2000; Masten 2001; Wolkow and Ferguson 2001).

The survey data collected definitely enabled the organization undertaking this research (Mkombozi) to make more focused and effective interventions with vulnerable children and youth in their region, including making more assertive prevention efforts in local communities and neighborhoods to help keep children from migrating to the streets in the first place. Consequently, the lessons learned from the findings of this study are important to share with the international community, especially with any organizations working to offer mental health, education and vocational training services to vulnerable and homeless children and youth.

Methods

Design and Sample

The original goal of this project was to complete the third survey since 2003 of street children in two urban areas in northern Tanzania, in order to measure the impact of outreach work being performed, as well as enhance programs and services to be provided by the NGO “Mkombozi”. Data was collected through on-the-street interviews with all children and young people visible on the streets in the towns of Arusha and Moshi in northern Tanzania over a 24-hour period on October 26 and 27th, 2006 (24 hours in each town). Purposive sampling was used, whereby interviewers approached all young people who appeared to be under the age of 25 years within a number of precincts in each town. The decision to interview youth and children 24 years old and younger was based on the UN definition of “youth”, as those persons between the ages of 15 and 24 years (with “children” being under the age of 18; UN 1985). Specifically, when interviewers inadvertently approached and interviewed young people who were age 25 and older, the data was retained, but it was not analysed for the purposes of this paper. Twenty-seven interview locations (14 locations in Arusha and 13 in Moshi) had been identified through Mkombozi’s ongoing street work activities, as areas where street children and youth tend to congregate.

Ethics Review

This survey was conducted with the written approval of the Moshi and Arusha Government Social Welfare Departments in Tanzania, then the study was given written ethics clearance through the Tanzania National Institute of Medical Research (NIMR), and lastly, this study has also been cleared by the University of Zurich Institutional Review Board. Additionally, there are no known conflicts of interest involving any of the authors of this paper.

Interviewers followed all ethical protocols and standards. They asked each child or youth approached for their informed consent, and if not received the child was not interviewed. Further, any child interviewed understood that they could not answer any question, or stop the interview at any time. All data was collected anonymously, with no details of names or other identifying information asked for or retained. Further, this data was then submitted to researchers at the University of Zurich as anonymous secondary data.

Interviewing Procedure

Collection of field research data with street children is complicated by the fact of their being restless and reluctant responders who are generally mistrustful of unfamiliar adults (Ayuku et al. 2003). To enhance participation in this survey, we therefore used former street youth over the age of 18 to deliver a questionnaire to persons they identified as under the age of 25 years who were visible on the streets, with the support and supervision of Mkombozi staff supervisors. The interviewers participated in trainings prior to the survey dates, as well as in post-survey debriefing sessions. Since literacy rates are low among the street children, the interviewers read questions, presented the response options and then recorded the children's responses.

Instrument

A questionnaire was developed in English, then translated into Swahili, then back-translated into English with further refinements among bi-lingual members of the Mkombozi staff. The questionnaire was then pilot-tested by giving it to former street children who were in care at a residential centre for street children, to assess face validity. The questions disaggregated children living on the streets full-time from those who had only partial contact with the streets in the following way: children and youth were asked: "Do you live and sleep on the streets all of the time, both day and night?" in response to a negative reply they were asked: "Do you come to the streets during the day and return home at night?" interviewees were also asked what activities they engaged in, and to rate the range of time spent on the street using a four point Likert-type scale.

Possible supportive factors and abusive factors in family homes were assessed, by inserting eight Likert-type questions adapted from the Adverse Childhood Experiences (ACE) Study (Felitti et al. 1998). These abuse and support questions were adapted from the Family Health History and Health Appraisal questionnaires, which were used to collect information on childhood maltreatment, household

dysfunction, and other socio-behavioral factors examined in the ACE Study (Felitti et al. 1998).

The ACE (Felitti et al. 1998) was also chosen because it was a template of what sort of questions could surface information about abuse factors. This information was important from a programming perspective, so they could learn the extent and difficulty of issues they may be working with. Assessing for reports of abuse, neglect and support was secondary the original purpose of the survey which was (1) to measure impact of preventative work, (2) to get an idea of numbers and trends in street child/youth populations, and (3) to look at the strategies for survival that they use (McAlpine 2007).

The questions (below) asked the respondent to rate each question with: or "refuse to answer", "never", "sometimes", "often", or "very often" (rated as 0–4). Abuse or neglect was rated as present if the child gave an affirmative answer to any of the following five questions (1, 2, 3, 4 and 8), and an overall score was calculated:

1. Did a parent or other adult in the household swear at you, insult you, or put you down and/or act in a way that made you think that you might be physically hurt?
2. Did an adult push, grab, slap, or throw something at you and/or ever hit so hard that you had marks or were injured?
3. Has an adult or caretaker ever hurt you emotionally, physically or sexually or have you ever witnessed this happening to someone else?
4. Have you ever experienced something in your life that caused you to feel very afraid or stressed for a long period of time, have nightmares or cause you to fear for your safety?
8. Does your parents' drinking interfere with you care?

Three other questions adapted from the ACE (Felitti et al. 1998) (numbers 5, 6 and 7 below) were more focused on the respondents' perceptions of familial support (and lack of neglect), which were defined for the purposes of this analysis as "supportive home environment".

5. Does your family make you feel special, loved?
6. Do you think that your family is a source of strength, support, and protection?
7. At home is/was there enough to eat?

Statistical Analysis

All analyses were conducted with the statistical package "SPSS 15.0 for Windows". For sample characterization in abuse and support factors, descriptive statistics were calculated. The "abuse" and "support" scores were assessed by adding up total item responses to the corresponding questions for sum scores. For group effects, analyses of

variance (ANOVA) were calculated, and therefore abuse and support score were used as independent variables and the grouping factors of interest as the independent variable. Saturated models were chosen for testing main effects of these grouping variables as well as their interactions on abuse and support scores. For testing single group differences in mean abuse and support scores Bonferroni post hoc-tests were used (Tabachnick and Fidell 2007).

Results

Sample Descriptions

The sample consists of 1,923 children from the northern region of Tanzania, whereof 49% came from the town of Arusha, and 50% came from the town of Moshi. Of this total sample, 938 were children and youth who were not self-identified as “street children”, whereas 776 reported their being “part-time street children”, and 209 reported their being “full-time street children”. Twenty percent of this sample were female respondents and 80% males. On

the survey, the age was assessed in categories (e.g., ages 5–9, 10–14, 15–20 and 20–25), as many street children do not know their exact age and could provide only approximate answers. Most children belonged to the categories 10–14 years (33%) and 15–20 years (38%), while about 11% reported younger ages (5–9 years), with 18% reporting to be in the upper age category of 20–24 years.

Abuse and Support by Children Characteristics

In the total sample, the *report of abuse* mean score was 8.98 (SD = 4.04, range 0–20) and the mean *report of support* score was 8.13 (SD = 3.13, range 0–12). These mean scores are descriptive results that reflect average scores of all the surveys given to the children. Table 1 provides the distribution (mean, SD, and range of scores) of these two variables by selected characteristics of the respondents. Accordingly, children from Moshi reported significantly higher support scores than children from Arusha (mean difference = 1.87, $P < .001$) whereas no significant differences were found for abuse. Males reported more abuse and less support than females, but these

Table 1 Distribution of abuse and support by sample characteristics

			<i>N</i>	Mean (SD) ^a	Range	<i>F</i> (<i>df</i>)	<i>P</i>
Abuse	Place	Arusha	949	9.40 (4.02)	0–20	.42 (1)	NS
		Moshi	974	8.56 (4.02)	0–20		
	Sex	Females	390	8.67 (3.77)	0–20	.19 (1)	NS
		Males	1,533	9.06 (4.11)	0–20		
	Age	5–9	209	8.30 (4.06)	0–20	1.77 (3)	NS
		10–14	633	8.58 (3.80)	0–20		
		15–19	730	8.93 (4.09)	0–20		
		20–24	351	10.20 (4.13)	0–20		
	Street status	Non-street	938	8.35 (3.84)	0–20	8.68 (2)	.001
		Part-time	776	9.27 (4.09)	0–20		
Full-time		209	10.69 (4.16)	0–20			
Total sample			1,923	8.98 (4.04)	0–20		
Support	Place	Arusha	949	7.19 (3.18)	0–12	10.86 (1)	.001
		Moshi	974	9.06 (2.80)	0–12		
	Sex	Females	390	8.46 (3.16)	0–20	.18 (1)	NS
		Males	1,533	8.05 (3.12)	0–20		
	Age	5–9	209	8.99 (2.96)	0–12	2.59 (3)	.051
		10–14	633	8.27 (3.14)	0–12		
		15–19	730	8.01 (3.18)	0–12		
		20–24	351	7.64 (3.02)	0–12		
	Street status	Non-street	938	8.68 (3.04)	0–12	4.48 (2)	.011
		Part-time	776	7.97 (3.06)	0–12		
Full-time		209	6.27 (3.05)	0–12			
Total sample			1,923	8.13 (3.13)	0–12		

^a Mean sum scores and standard deviations (SD) for abuse and support scores for the total sample and sub-samples

differences do not reach statistical significance. Concerning age, a decreasing tendency in support scores from the youngest to the oldest age category was observable, whereas close to the significance threshold ($F_3 = 2.59$, $P < .051$).

The general question of interest is, if street children who are living on streets full-time differ in their mean scores concerning reports of abuse and support, compared to mean reports of part-time street children and those who never lived on streets. As shown in Table 1, full-time street children reported significantly more abuse than their part-time (mean difference = 1.41, $P < .001$) and their non-street counterparts (mean difference = 2.34, $P < .001$). Concerning support scores, non-street children felt significantly more supported than part-time (mean difference = 1.70, $P < .001$) and even more than full-time street children (mean difference = 2.41, $P < .001$).

Except for these main effects, all factors were tested regarding their interaction effects on the dependent variables, abuse and support. In this regard no significant results were found except for age and street status interaction ($F_6 = 2.35$, $P = .029$ for abuse, $F_6 = 5.22$, $P < .001$ for support).

Discussion

In this retrospective analysis of survey data collected from 1,923 children and youth in two neighboring urban areas in Northern Tanzania, we first wanted to find if there is a significant difference between the experiences of the youth who live, work and sleep on the street “full-time”, compared to the experiences of those youth who live/work on the street “part-time” and return home to their family at night, and to those children who are not street children at all, respectively. This distinction between “full-time” street children and “part-time” street children is important here, because we wanted to learn if there was a significant difference between those youth who completely disconnected from their family, versus those who still maintained contact and residence with family. The data analyzed was based on the responses that all the youth gave to eight questions in the survey that asked them to describe their experiences with abuse and support in their family, plus demographic data. The “full-time” street children reported significantly more experiences of abuse than their “part-time” counterparts and the non-street children. Conversely, the non-street children and the “part-time” street children reported significantly more experiences of support from their family than “full-time” street children.

Further, the survey results showed that the youth who live on the streets in the larger city of Arusha reported significantly higher abuse and lower support scores in

relation to their families, compared to the scores of the children’s reports about their families from the smaller town of Moshi. These results suggest that smaller communities may provide a measure of support due to increased proximity and familiarity, versus the anonymity and lack of familiarity that can exist in bigger cities. And lastly, while there was no difference in reports of abuse scores between males and females, females did report significantly higher levels of support than the males did.

These results tend to confirm what has been believed anecdotally by those who have been offering services to street children in northern Tanzania for the last 10 years, which is that there is a significant relationship between poverty, violence/abuse in the home, and participation and engagement in school, as to whether a child will flee the comfort of the family for the vulnerability of living alone on the street. The results of this study suggest an answer to one part of this question, which is that if a child experiences too much abuse and not enough support from their family, they would rather risk living on their own on the street than stay in that environment. And while the street child is often treated like an outlaw by local authorities once on the street, this migration to the street may in fact suggest an act of personal resilience, where a child believes they have a better chance to further their own lives and livelihood in positive ways by leaving home prematurely. Also, these results begin to differentiate why some youth go to the street “full-time”, while other children only do so “part-time”, or not at all: *the experience of support*. For those youth who are only part-time on the streets, it may be an issue of wanting and needing to help support their family financially, so they spend their time on the street, earning money for this purpose, and feel engaged with and supported by their family to return home at night. However, it has also been observed that there is a progression, whereby children move from being “part-time” to “full-time”—so in a sense the questions are: (1) does the family support of “part-time” children diminish as they spend time on the streets, thereby encouraging them to move to the street “full-time”?, (2) are “part-time” and “full-time” street children quite distinct groups with different motivations to come to the streets (i.e., are “part-time” children primarily economic-related, and “full-time” fleeing abuse?), and (3) are both “types” nonetheless pragmatic responses to vulnerability in the home—the question then just being the scale of their response (and experience).

Importantly, these findings should influence how international youth service agencies engage with and support children before they come to the streets. Because while the findings suggest that it is increased levels of abuse at home that lead to a young person to disconnect from family and migrate to become homeless, but then once on the street they are also exposed to even more abuse and violence.

Therefore, it will be important to demonstrate through further research that children experience increasingly more abuse the longer they spend on the streets (as distinguished from the abuse experienced in their family beforehand). Then it becomes paramount that good practice (1) works to prevent children coming to the street in the first place, and (2) that agencies intervene to support children and youth as soon as they arrive on the streets, even if only begging for a few hours each day, as the longer they are on the streets the higher the likelihood of abuse occurring.

The results also give us some interesting new perspectives to consider. For example, while currently much international humanitarian aid is being directed towards offering more services to girls in need, the results of this study suggests that there is no difference in experienced abuse between males and females, and that females may actually receive more support than males (in this culture, at least). This is not to discount the value of offering more services sensitive to gender equity, but only to suggest that boys do still have a rather challenging time of it on the street (and often with less support than the girls). And lastly, it is of note that there is a significant difference in reports of abuse between those who live on the streets of the larger city, versus from those who live on the street in the smaller communities, which as we noted earlier, suggests that smaller communities may provide a measure of support due to increased proximity and familiarity.

The limitations of this study reflect the reality that this survey was originally undertaken by the Mkombozi NGO primarily as a method to gain information about of youth they offer services to, and to assess whether their outreach activities were successful in decreasing the number of children who were migrating to the street. That is to say, this survey was originally meant more as an assessment of program effectiveness rather than as an empirical research study. That this NGO had a large database from which a retrospective data analysis could be completed was an afterthought.

The inclusion of the eight questions adapted from the longer ACE (Felitti et al. 1998) does contribute important information about what might be driving children and youth out of their families and onto the street. The limitation to this is that the ACE is a retrospective survey created for adults, and was not validated as a freestanding psychological instrument for assessing abuse and support in youth in another culture.

The use of ex-street youth as research assistants was also important because it is doubtful that as much accurate data would have been gathered by researchers who were not familiar with or recognizable to those who live in the street culture. Using volunteer ex-street youth to gather the data has its weaknesses, however, due to overall lack of research training and knowledge. Further, there were also cultural

challenges in gathering this data, in that it was at times difficult for the ex-street youth to be asking personal questions of current street youth about abuse, when in Tanzania it is seen as mature to stoically bear emotional pain and taboo to talk about abuse or mental health problems.

Notwithstanding these above noted limitations, there is great value in the data collected by this street children survey. Primarily, it gives us a better idea of what might be some of the factors involved that drive children to leave their family and go live on the streets. Furthermore, the data has proven quite helpful to the Mkombozi NGO in assessing the effectiveness of their outreach efforts in limiting the number of children migrating to the street, focusing them on what could help families and communities identify vulnerable children before they migrate to the street, and thus doing more to prevent children from migrating to the street in the first place. In this respect, the knowledge gained has already proven to be extremely helpful in initiating services that better engage communities to support local families and the children that are vulnerable. These practices and knowledge can be a benefit if shared with other organizations working with street children (in Tanzania, East African and internationally), and an important reason for publishing the results of their work, despite the noted limitations.

Regarding the methodology of this study, more precise information could be gathered if, for example, well validated assessment tools for children were used in place of the ACE questions, like one that focuses on collecting abuse and/or trauma data, and another for collecting data on resilience factors. With these new assessment tools, along with adding some clarifying questions about experiences of abuse and support on the street (in addition to the existing questions about abuse and support in the family) we could gather stronger data that would help us more clearly identify trends of why children may migrate to the street, to identify the impact of street life on each child's mental health, and to also identify what existing healthy assets and resources can be supported and encouraged when offering community services to the street child and their families. We think this dual focus is important because we want to better learn what services we can offer to alleviate suffering at the source, and to learn where we can better support healthy behavior and sustainable livelihoods. Further, we are motivated to share the information gained from this research experience with other national and international agencies who provide community mental health and other services to youth, in order to identify those best practices that will better protect and strengthen them.

From the perspective of improving services through identifying best practices, the data in this study has already supported the advancement of prevention practices in northern Tanzania to keep children from migrating to the

streets in the first place: Through provision of improved outreach and education services to families and communities about the negative effects of violence and neglect, and to create social awareness about the power of support and the importance of daily structure (such as attending school, participating in extra-curricular activities and vocational training). Further, it is crucial to note that though Tanzania is a signatory to the UN Convention on the Rights of the Child, there is in fact no established child protection laws, nor regular adherence to children's rights practices. Mkombozi has used the survey to both find out what the children know about their rights, and to communicate with communities about the importance of establishing child protection and child's rights practices. We believe that all of this is will be of interest to any agencies offering services to vulnerable young people.

While this study does not conclusively offer proof of why more and more children are fleeing the security of the family for the vulnerability of life on the street, it does give us clearer indications that support our anecdotal beliefs about these causes: Children who do not feel safe and supported at home will not stay there. The data does support our thesis that street children are indeed not criminals nor deficient of character, but rather many are running from abuse, neglect and poverty—and in fact may be running towards what they hope are more healthy options. The increase in children living on the street around the world reflects societal breakdowns in family and community cohesion, and it thus falls on all international governments and civil society organizations to focus more on prevention, family and community cohesion at the source. We believe this study contributes towards better understanding what needs to be done to prevent children from migrating to the streets in any community, while acknowledging that more and stronger empirical methodologies need to be utilized. And finally, this study does provide evidence that supports Mkombozi's approach on (1) early intervention and prevention efforts, (2) on child protection and children's rights, and (3) on the implementation of practices and programs that support positive, resilient adaptation in the children and communities they serve.

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