



Exploring the Relationship between Psychosocial Health and Drug Use among Street Children in Starehe Sub-County, Nairobi, Kenya

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ABSTRACT

Surviving life on the streets is undeniably challenging and takes a toll on the psychosocial well-being of street children, often leading to substance use. This study aimed to investigate the correlation between psychosocial health and drug use among street children in Starehe Sub-County, Nairobi County, Kenya, utilizing the Problem Behavior Theory (PBT). Employing a correlational research design, data were collected from a sample of 100 street children, selected through cluster and simple random sampling from a target population of 30,000 in Starehe Sub-County. Additionally, information was gathered from four officials at the Starehe Children's Office, eight officials from NGOs/FBOs operating in the sub-county, one sub-county administrator, and four ward administrators. The qualitative data obtained through questionnaires were analyzed using descriptive statistics such as mean, percentage, and frequencies, along with inferential statistics like Pearson correlation and regression analysis. The presentation of findings utilized charts and tables, while qualitative interview data underwent thematic analysis and were presented in a narrative format. The study's outcomes revealed a noteworthy impact of psychosocial health on drug use among street children, with a significant correlation between the two ($r=0.503$). The findings suggested that interventions aimed at improving the mental health of street children had a meaningful effect on reducing drug use. Recommendations stemming from the study include the necessity for providing homes to street children to mitigate exposure to stressful conditions leading to mental health issues. Furthermore, the study proposed the implementation of regular free mental healthcare clinics for all street children and emphasized the importance of awareness campaigns to educate them on the detrimental consequences of drug use. Strengthening behavioral counseling, support groups, and creating sober social networks for street children were also highlighted. The study advocated for government and non-governmental organizations to develop programs supporting access to counseling services and training certain street children to provide peer counseling to their fellow youths.

Keywords: *Counselling Services, Drug Use, Psycho-Social Health, Social Support System, Street Children*

I. INTRODUCTION

1.1 Background of the Study

Globally, the issue of street children is reaching alarming proportions, with millions of children affected. According to the UNICEF (2018) Situation of the World Children report, the problem is on the rise, exacerbated by conflicts, family breakdowns, natural disasters, economic challenges, political upheavals, and the rampant spread of diseases. Ghodousi et al. (2017) note that these children grapple with a myriad of problems including cognitive deficiencies, sexual abuse, substance abuse, and family issues such as domestic violence, parental separation, and poverty, all of which contribute to the prevalence of depression. Magai, Malik, and Koot (2018) study reinforces the notion that emotional challenges stemming from adverse events in the lives of street children commence during childhood or adolescence, resulting in depressive conditions.

In the African context, an estimated 20 million children find themselves living on the streets due to factors like economic growth, war, erosion of traditional values, and experiences of physical and mental abuse. The United Nations Children's Fund (2015) highlights that these children often perceive the streets as a safer haven where they can fend for themselves. In a cross-sectional descriptive study conducted in Abuja, Nigeria, by John, Yushau, Philip, and Taru (2019), it was revealed that street life is a prevalent reality, particularly among male children, putting them at a heightened risk of developing mental illnesses due to the challenging experiences they endure, including various forms of abuse and parental deprivation.

African street children encounter daily and persistent physical and psychological abuse, significantly impacting their mental well-being and leading to conditions such as depression. Consequently, they develop coping mechanisms,



with drug abuse being a commonly adopted behavior (Reza & Henly, 2018). The harsh realities of street life contribute to a cycle of mental health challenges, substance abuse, and the ongoing struggle for survival among this vulnerable population.

The importance of the psychosocial health of any population cannot be gainsaid. Simply put, psychosocial health “describes an individual's sense of peace, purpose, connection to others, and beliefs about the meaning of life” (Worku, Urgessa, & Abeshu, 2019). Each year, governments spend myriads of dollars to enhance the psychosocial health of their citizens (UNICEF, 2019). Regrettably, disadvantaged populations such as street children are often excluded from accessing these services. As a result, some may take to drugs as a coping mechanism. This current study conceptualizes that psychosocial health, access, or lack thereof to counselling services as well as the quality of social support system may make street children susceptible to drug use.

Studies conducted globally highlight the correlation between psychosocial health and drug use among street children. In the United States, Tyler and Schmitz (2018) found that stressors among homeless youth correlated with drug abuse, with physical street victimization being a significant factor. This study aims to explore the relevance of these findings to street children in Kenya.

In India, Sharma and Joshi (2020) identified peer pressure in the streets as a major factor contributing to drug and substance use among street children. A systematic review revealed a high prevalence of street children, with 10% of them found in India. This study seeks to investigate the extent to which life on the streets contributes to an increased tendency toward substance use among Kenyan street children.

A study in Egypt by Aly, Omran, Gaulier, and Allorge (2020) emphasized the challenges of substance abuse among street children, highlighting their vulnerability to early initiation into drug use due to the availability of new psychoactive substances. This study aims to assess how life on the streets influences drug use among street children in Kenya.

In Ghana, Cudjoe and Alhassan (2016) explored the perceptions of female head porters regarding social support and its role in mitigating substance use. While not directly focused on street children, the findings underscore the importance of social support in controlling substance use. This study will consider the impact of social support on psychosocial health and drug use among street children in Kenya.

In the Kenyan context, the United Nations Children's Fund (2017) reported a growing number of street children, particularly in urban areas like Nairobi. The Consortium of Street Children estimated that between 250,000 to 300,000 children live on the streets of Kenya, with 60,000 in Nairobi alone. Chepngetich's study (2018) in Nakuru Town highlighted the role of social support systems in curbing challenges faced by street children and the relationship between group dynamics and substance use. This study aims to assess the applicability of these findings to street children in Starehe Sub-County, Nairobi County, Kenya.

Starehe Sub-County has a significant population of street children, many of whom engage in substance use, particularly glue-sniffing, as a coping mechanism for the harsh conditions they face. Sitienei and Pillay's study (2019) emphasized the prevalence of poor psychosocial health among these children, making substance use a common recourse. This study aims to investigate the relationship between psychosocial health and drug use among street children in Starehe Sub-County, Nairobi County, Kenya.

1.2 Statement of the Problem

The life of street children is incredibly challenging, with profound negative impacts on their psychosocial health (Sitienei & Pillay, 2019). Despite substantial governmental investments in improving the psychosocial health of citizens (Cudjoe & Alhassan, 2016), street children are often neglected, lacking tangible sources of support. Due to financial constraints, they may be unable to access counseling services, and lacking close family ties, meaningful social support is often absent (Friberg & Martinsson, 2017). Faced with the harsh realities of street life, some of these children resort to substance use as a coping mechanism (Chege & Ucembe, 2020). Unfortunately, understanding the intricate connection between psychosocial health and drug use among street children in the Starehe Sub-County of Nairobi County, Kenya, remains a significant challenge. Existing studies often fail to establish links between key factors investigated in this study, such as the duration spent on the streets, access to counseling services, and social support, in relation to substance use among street children. This knowledge gap impedes the development of empirically informed strategies to enhance the psychosocial health of these vulnerable children.

The gravity of this situation is particularly concerning in Starehe County, which houses Nairobi City, the capital of Kenya. The intertwining of drugs and crime is well-documented (Sitienei & Pillay, 2019). The absence of studies



focusing on the relationship between psychosocial health and drug use among street children, as presented in this current research, hampers efforts to address crime in the city. Moreover, making recommendations for improving the psychosocial health of street children becomes an elusive goal without a comprehensive understanding of these crucial dynamics. This underscores the significance of studies like the present one in addressing the complex challenges faced by street children in Starehe Sub-County.

1.3 Objectives of the Study

To explore the relationship between psychosocial health and drug use among street children in Starehe Sub-County, Nairobi County Kenya.

II. LITERATURE REVIEW

2.1 Theoretical Framework

This study is grounded in the Problem Behavior Theory (PBT), formulated by Jessor in 1977, with a primary focus on elucidating the reasons behind the adoption of unconventional behavior by young people. The PBT is particularly relevant in understanding why street children worldwide engage in drug and substance abuse (Ma & Shive, 2000).

The foundational premise of the PBT is the interaction of three systems shaping behavior: societal legal norms, an individual's value system, and environmental-influenced relationships. In the context of this study, the availability of social support and counseling can create an environment conducive to enhancing the psychosocial health of street children. When these children have access to counseling services and social support, which together form a supportive environment, they are more likely to be protected from engaging in drug use.

Religious institutions and civil society organizations play crucial roles in intervening at the street level to enhance the psychosocial health of street children. Additionally, government interventions, through policy legislation aimed at improving access to social support services, can significantly contribute to mitigating drug use among street children. The PBT provides a theoretical foundation for this study, allowing the researcher to explain potential causes of poor psychosocial health among street children and demonstrating how interventions within their context can alleviate substance use.

2.1 Empirical Review of Literature

Tyler and Schmitz (2018) conducted a study titled "Childhood Disadvantage, Social and Psychological Stress, and Substance Use among Homeless Youth: A Life Stress Framework." The research, based on a sample of 150 homeless youth in the Midwestern United States, utilized a life stress framework to explore primary and secondary stressors and their correlation with drug and substance abuse. Notably, the study identified physical street victimization as the sole factor associated with drug abuse. While the findings offer comprehensive insights into stressors experienced by homeless youth, the direct application to Starehe Sub-county or similar contexts might be limited.

Kim et al. (2017) conducted a study on trauma and posttraumatic stress disorder (PTSD) among homeless young adults, emphasizing childhood abuse and victimization during homelessness. Using a sample of 600 homeless young adults, the study employed multinomial logistic regression to assess factors contributing to PTSD, trauma, and subsequent drug abuse. The findings highlighted the correlation between childhood stressors, victimization during homelessness, and the development of trauma and PTSD. While the study offers insights into intervention and prevention approaches, its specific applicability to the Starehe Sub-county context might require further consideration.

Aly et al. (2020) focused on substance abuse among children, emphasizing the availability of new psychoactive substances and their impact on vulnerable populations. The study discussed the recruitment of street children as drug peddlers and their early initiation into substance use. While shedding light on the global issue of substance abuse among children, the study's applicability to the specific conditions in Starehe Sub-county may be limited.

Sharma and Joshi (2020) explored strategies for preventing substance abuse among street children in India. The study highlighted the prevalence of street children, particularly boys, and identified peer pressure and poverty as driving factors for substance abuse. While the review discussed India's efforts in implementing preventive measures, the direct relevance to Starehe Sub-county necessitates careful consideration due to contextual differences.

Worku, Urgessa, and Abeshu (2019) investigated the psychosocial conditions and resilience status of street children in Jimma Town, emphasizing the predictive role of anxiety in resilience. The findings underscored the



importance of building resilience through education and empowerment forums. While offering valuable insights into enhancing psychosocial well-being, the study's context-specific nature in Jimma Town may warrant caution in applying its findings directly to Starehe Sub- County.

Embleton et al. (2020) conducted a qualitative study characterizing social and health inequities among street-connected children and youths in Kenya. The findings highlighted structural and social determinants leading to disparities, including lack of basic needs, homelessness, substance use, and psychosocial stress. The study emphasized the need for addressing social determinants for street-connected children. However, its generalizability to Starehe Sub-County may require careful consideration of local factors.

Bah (2018) study on drug abuse among street children in the Gambia explored knowledge, perceptions, causative factors, and prevention strategies related to drug abuse. The findings indicated that street children possessed knowledge about drug abuse and its implications. However, the study's focus on another African country introduces an interesting perspective. Nevertheless, the study's limited assessment of all variables under investigation in the current study creates empirical gaps requiring targeted research.

These studies contribute valuable insights into the broader understanding of substance abuse among vulnerable populations, including street children. However, their direct applicability to the specific conditions in Starehe Sub-county necessitates careful consideration of contextual factors and potential variations in findings.

III. METHODOLOGY

This study employed a correlational research design to investigate the relationship between psychosocial health and drug use among street children in Starehe Sub-County, Nairobi County, Kenya. The research was conducted in the six wards of the Starehe Sub-County, chosen due to the significant concentration of street children, approximately 50% of Nairobi's total, within this area. The target population comprised an estimated 30,000 street children and various officials from the Starehe Children's Office, non-governmental organizations (NGOs) or faith-based organizations (FBOs), as well as sub-county and ward administrators. The study utilized a sample size of 100 street children and included officials through purposive sampling. Data collection methods involved questionnaires for street children and interview guides for officials. The instruments underwent pilot testing to ensure accuracy and clarity, and reliability and validity were assessed. The quantitative data were analyzed using descriptive and inferential statistics, while qualitative data were analyzed thematically. The findings were presented through charts, tables, and prose, providing insights into the nuanced relationship between psychosocial health and drug use among street children in the specified area.

IV. FINDINGS & DISCUSSIONS

4.1 Response Rate

In this study, out of the 100 street children sampled, 94 provided responses, resulting in a response rate of 94%. Additionally, all 4 children officers, 8 officials from NGOs/FBOs, 1 sub-county administrator, and 4 ward administrators participated, achieving a response rate of 100% among these categories. The inability to reach all street children was attributed to challenges related to changes in their bases during the study period. Despite these limitations, the response rates across the categories were deemed sufficient for analysis, as a response rate of 60% is considered adequate for paper-based questionnaires (Cooper & Schindler, 2013).

Table 1

Response Rate

Category	Sample	Responded	Percentage
Street children	100	94	94%
Starehe Children Officers	4	4	100%
Officials of NGO/FBO	8	8	100%
Ward Administrators	4	4	100%
Sub-County Administrators	1	1	100%
Total	117	111	95%

4.2 Social Demographic Characteristics of Respondents

The study sought to find out the gender, age, duration in streets, time spent in school, and last class attended by the



street children.

4.2.1 Gender of Respondents

The study sought to find the gender of the respondents. Figure 1 presents the findings obtained.

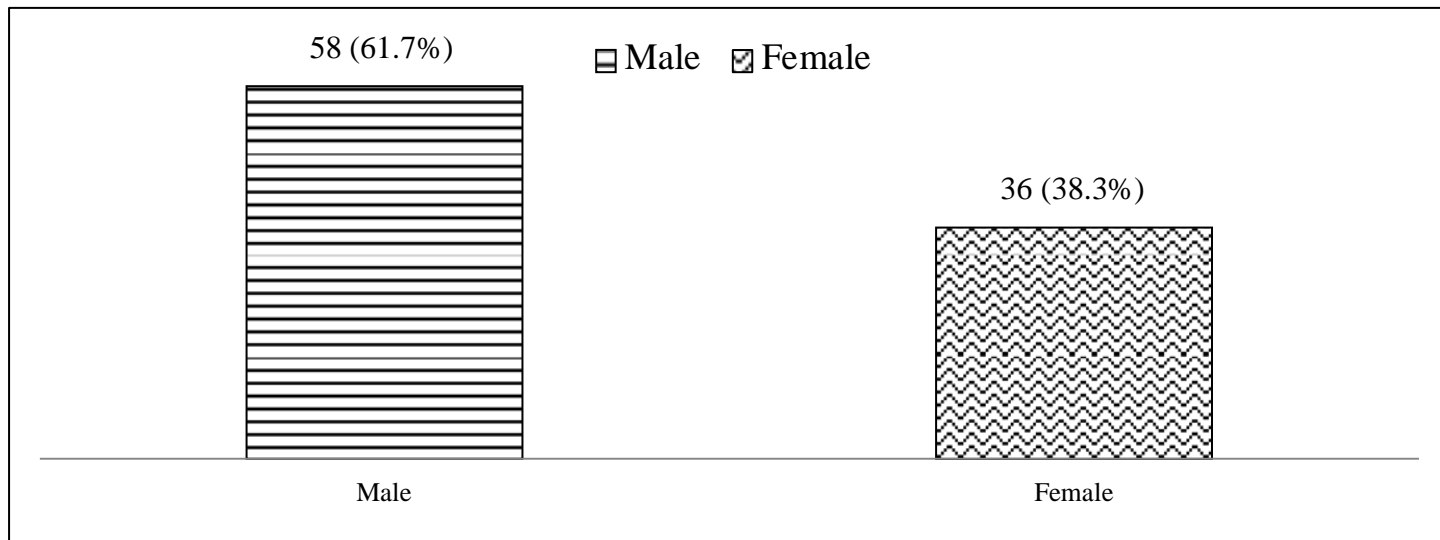


Figure 1
Genders of Respondents

Most of the respondents 58 (61.7%) were male while 36 (38.3%) were female. These findings show that both genders were well represented in the study.

4.2.2 Age of Street Children

As shown in Figure 2, the study sought to establish the ages of the respondents.

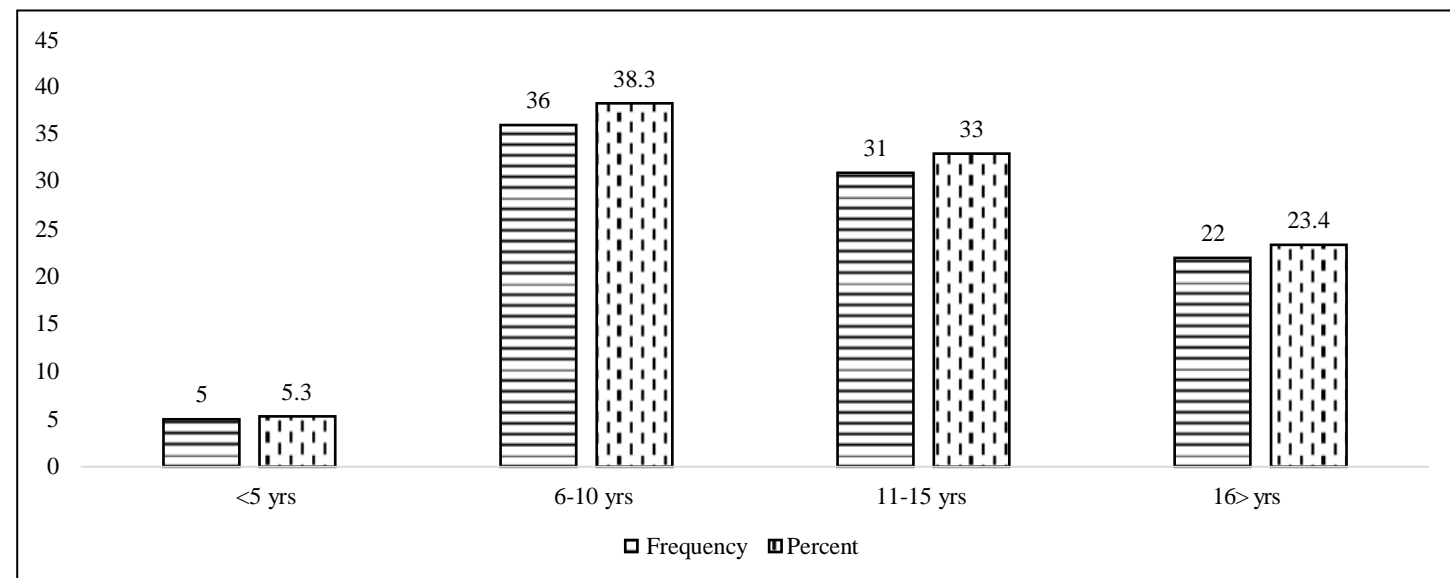


Figure 2
Age of Respondents

The majority of the respondents 36 (38.3%) were aged between 6 and 10 years. These were followed by those aged between 11 and 15 years at 31 (33%) and those aged more than 16 years at 22 (23.4%). The least was less than 5



years at 5 (5.3%). These findings show that the street children came from various age groups.

The street children were asked to indicate the time they had spent in the street. The findings are presented in Figure 3.

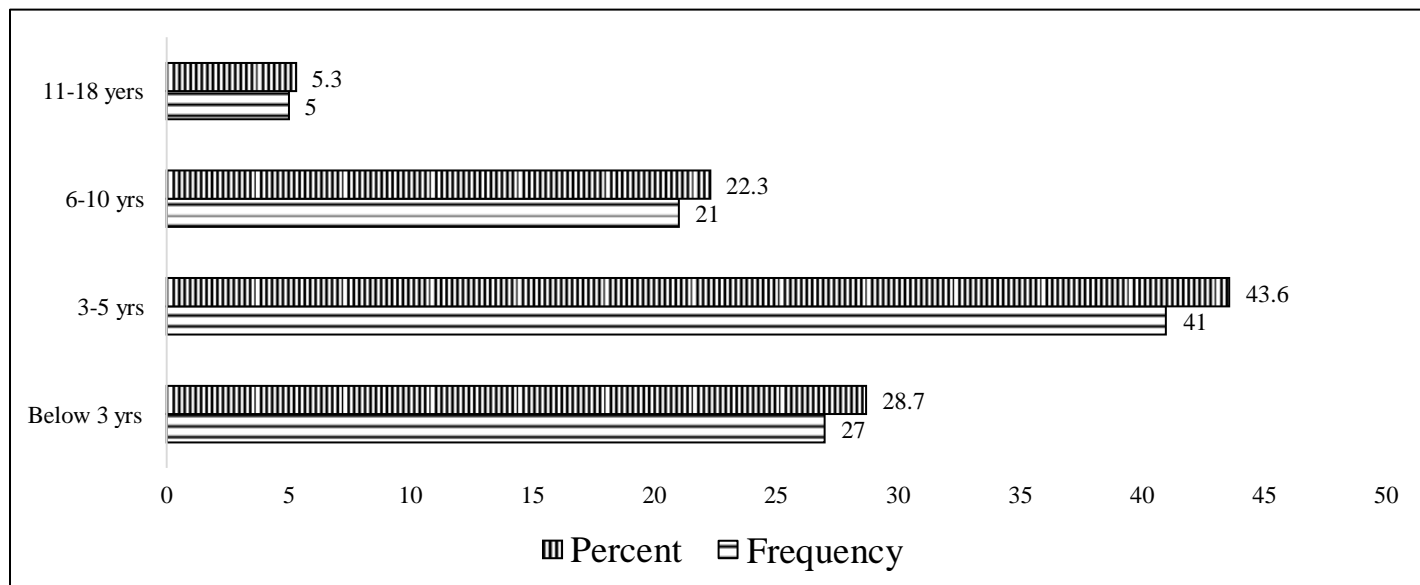


Figure 3
Duration in Streets

Most of the street children, 41 (43.6%) pointed out that they had spent between 3 and 5 years. These were followed by those who had spent less than 3 years in the streets at 27 (28.7%). Those who had spent 6 to 10 years comprised 21 (22.3%). The least were those who spent 11 to 18 years at 5 (5.3%). These findings show that most of the street children had spent less than 5 years in the streets. However, they had stayed in the streets long enough to have various psychosocial health challenges. It was thus possible to understand how the days spent in the streets influenced the psychosocial health of street children and the effect it had on drug use patterns.

The street children were asked to indicate their religion. The findings are presented in Figure 4.

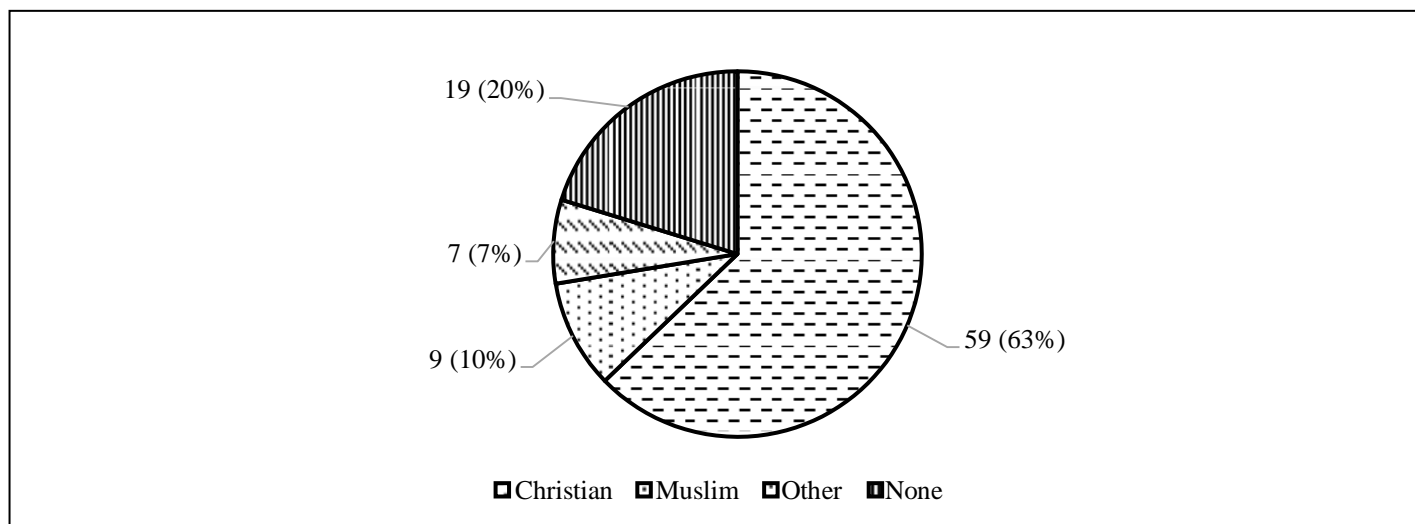


Figure 4
The religion of Street of Children

Most of the street children (59(63%) pointed out that they were Christians. These were followed by a fifth, 19(20%) who pointed out that they did not belong to any religion. Muslims made up 9(10%) of the street children while



those who were from other religions were the least at 7(7%). These findings show that the street children were from various religions. Most of them had some form of religious affiliation, which could influence their psychosocial health. This is in line with a report by VicHealth that shows that religion was an environment that may impact the individual positively or negatively (VicHealth, 2015).

The amount of time spent in schools by street children was also investigated. The findings are shown in Figure 5.

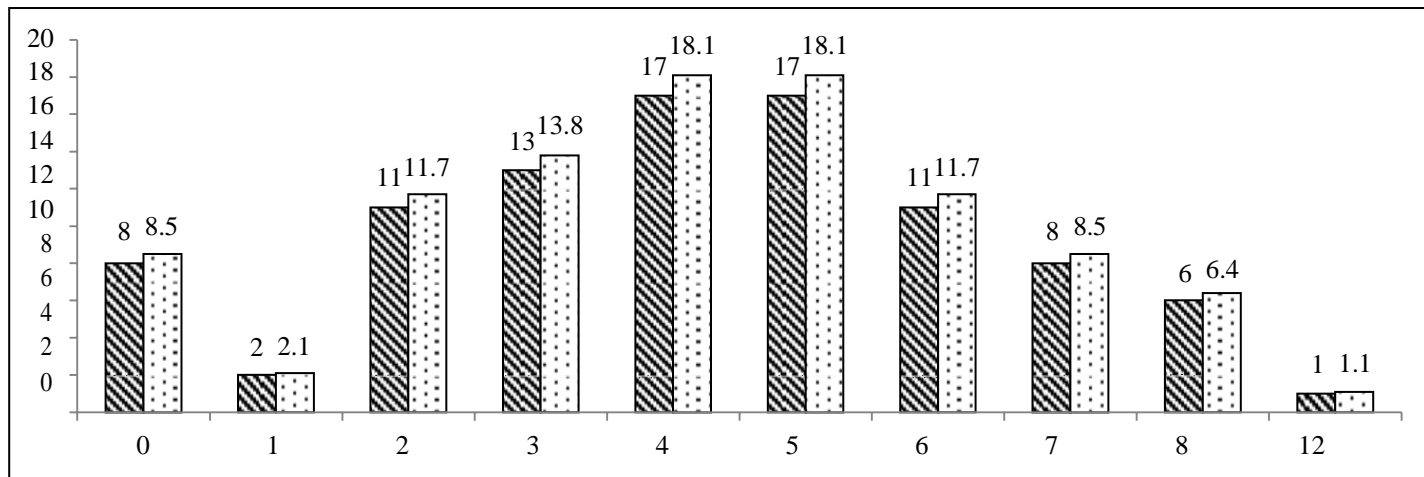


Figure 5
Number of Years Spent in School

The findings show that close to a fifth of the children had been in school for either 4 or 5 years each at 17 (18.1%). These were followed by those who had spent 3 years at 13 (13.8%). These findings show that most of the street children did not go beyond mid primary school. The research thus used simple language to reach them effectively.

Lastly, the researcher sought to find out the last class attended by the respondents. The findings obtained are shown in Figure 6.

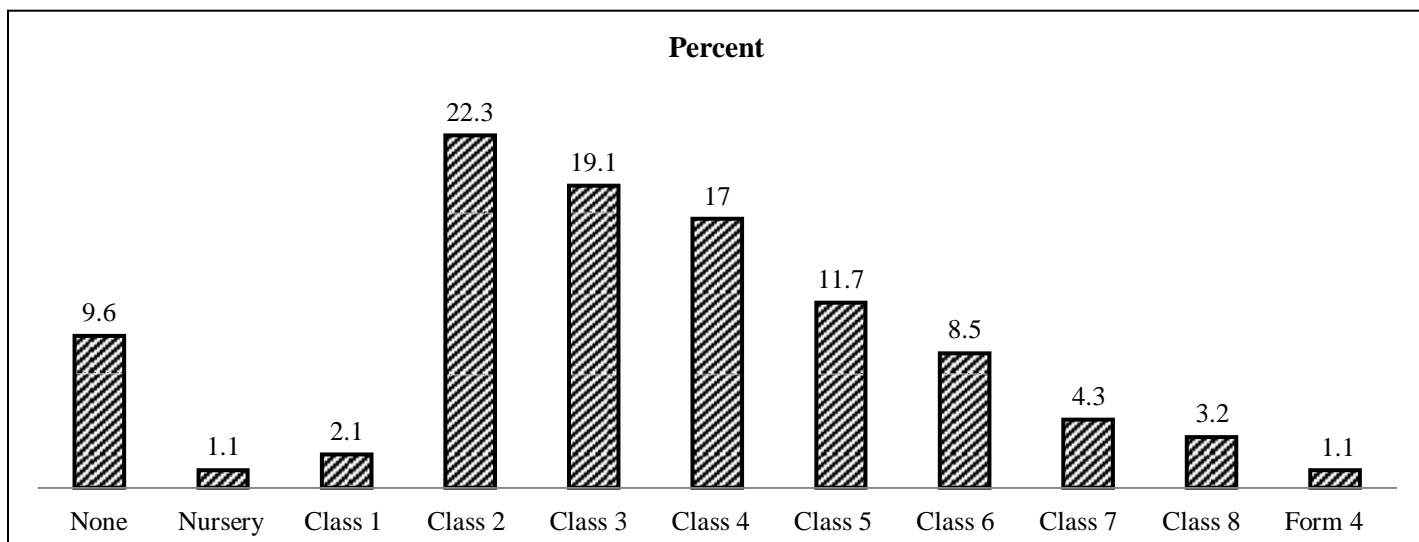


Figure 6
Last Class Attended

The findings show that the highest number of street children (22.3%) had studied up to class 2. These were followed by those who had gone up to class 3 and class 4 at 19.1% and 17% respectively. This shows that most of the



street children never went beyond lower primary school (Class 4).

4.3 Presentation of Research Analysis and Findings

This section presents the findings of the study in line with the study objectives.

4.3.1 Psychosocial Health and Drug Use among Street Children

The first objective of the study was to explore the relationship between psychosocial health and drug use among street children. This section explores the levels of substance use as well as the influence of psychosocial health on drug use among street children. It presents data from all the various categories of respondents.

4.3.1.1 Drug use

The study sought to find out the extent of the use of drugs among street children. According to the conceptual framework, some of the information indicated earlier was to be used to respond to this objective.

Use of Substances

The street children were asked whether they used any substances. The findings as presented in Figure 7 shows that most of them, 93 (99%) were using substances. This shows high levels of substance use among street children.

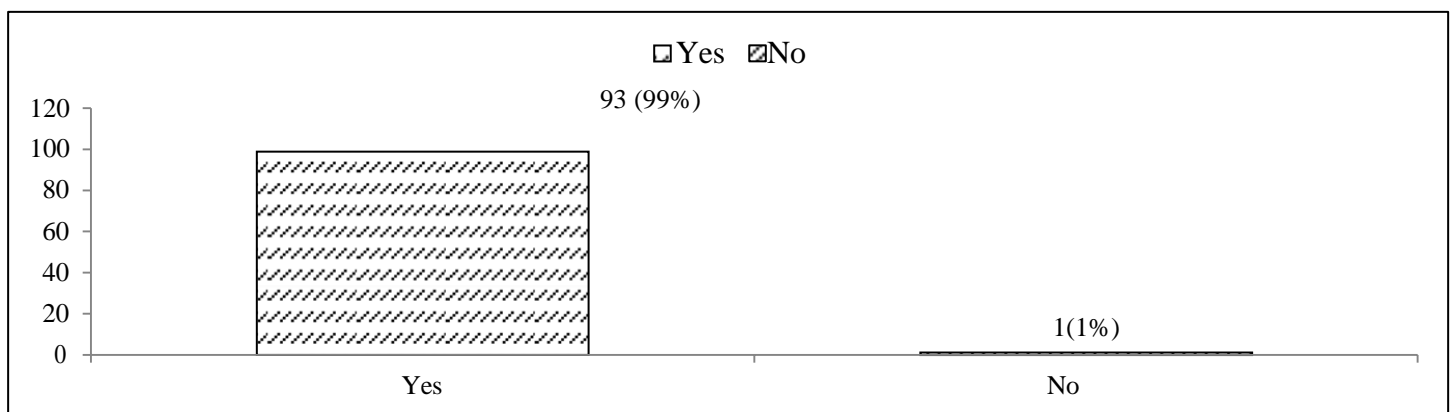


Figure 7

Use of Substances

Level of Use of Selected Substances

The respondents were also asked to rate their level of use of selected substances. The findings show that glue was the most used substance (daily, WM=4) by the street children. This agrees with a study also in Starehe Sub-County that identified glue as the most used substance in the sub-county (Sitienei & Pillay, 2019). The other mostly used substances were Tobacco products (cigarettes, chewing tobacco) and alcohol (wine, spirits, beer). These were used weekly (WM=4). Cannabis (weed, pot, grass), Khat (Miraa), sleeping pills, and pain medications were used monthly (WM=3). Other substances were used rarely (once or twice), WM=2). When asked to point out other substances used, the respondents said that they used white crest (a lower grade of heroin), Heroin (unga), Piperazine, Kuber, Cocaine, Opium, Diazepam, Hashish, Synthetic drugs – hallucinogens, Mandrax, Opioids, Fentanyl, Hydrocarbons, Antibiotics, Mephedrone, Clonazepam, Khat, Petrol, Ecstasy, and Methamphetamine. This shows that there was a high-level use of drug use among street children as identified by numerous studies (UNICEF, 2019; Sharma & Joshi, 2020).



Table 2
Level of Use of Selected Substances

	1	2	3	4	5		
Substances	Never	Once or Twice Monthly	Monthly	Weekly	Daily	Total	WM
a) Glue	2	2	2	8	80	94	5
b) Tobacco products (cigarettes, chewing tobacco)	7	10	18	36	23	94	4
c) Alcohol (wine, spirits, beer)	4	10	24	37	19	94	4
d) Cannabis (weed, pot, grass)	4	18	27	20	25	94	3
e) Khat (Miraa)	10	25	23	19	17	94	3
f) Sleeping pills	21	21	20	18	14	94	3
g) Pain medications	25	23	19	17	10	94	3
h) Other	57	14	8	10	5	94	2

n=94

4.3.1.2 Relationship between Psychosocial Health and Drug Use

The first objective of the study was to explore the relationship between psychosocial health and drug use among street children. The street children were asked to rate their level of agreement with the selected statements on the relationship between psychosocial health and drug use on a scale of 1-5 where 1-to a very low extent; 2-to a low extent; 3- to a moderate extent; 4-to a high extent and; 5-to a very high extent. The findings are presented in Table 3.

Table 3
Relationship between Psychosocial Health and Drug Use

Statements	1	2	3	4	5	Total	WM
a) A life of stress in the street leads to substance abuse	7	3	25	30	29	94	4
b) Sexual abuse during homelessness contributes to substance use among street children	3	5	11	46	29	94	4
c) Physical abuse during homelessness pushes some street children to substance use.	2	5	15	47	25	94	4
d) Lack of social connectedness in the streets contributes to substance use among street	5	7	26	29	27	94	4
e) Children Street children are initiated into drugs, which affects their dependence on substances and this increases their substance use behaviours	1	6	22	39	26	94	4
f) Lack of medical support among children contributes to increases in street children	3	10	16	32	33	94	4
g) Lack of access to activities such as sports contributes to substance use	6	8	7	24	49	94	4

n=94

The responses from the street children in the study indicate a high level of agreement (WM=4) with statements addressing the correlation between life stress in the streets and substance abuse, the contribution of sexual abuse during homelessness to substance use, the influence of physical abuse during homelessness on substance use, the impact of lack of social connectedness in the streets on substance use, and the initiation into drugs affecting dependence and substance use behaviors, consistent with previous studies (Tyler & Schmitz, 2018; Ghodousi et al., 2017; Aly et al., 2020). Street children also identified emotional distress, physical and sexual abuse, failure to meet basic needs, frustrations associated with street life, mental disorders, and emotional distress as factors making them prone to drug use, aligning with existing literature (Embleton et al., 2020; John et al., 2019; UNICEF, 2019). The interviews further revealed a clear link between psychosocial health and drug use among street children, highlighting an inverse relationship where drug use can lead to mental illness, aggressive behavior, societal conflicts, and even death (Rezaa & Henly, 2018; Bah, 2018).



4.3 Relationships between Dependent and Independent Variables

The study sought to examine if there were significant relationships between the independent and dependent variables. This was to find out if changes in the independent variables had significant influences on the dependent variables.

4.3.1 Pearson Correlation

Pearson correlation analysis was used to test the significance of the relationships between the independent and dependent study variables. Table 4 shows that there was a significant relationship between drug use and psychosocial health, $r=0.503$, $p<0.05$). In this regard, the entire null hypothesis was rejected since there were positive relationships between drug use and all four independent study variables.

Table 4
Pearson Correlation

Correlations			
		Drug Use	Psychosocial health
Drug Use	Pearson Correlation	1	
	Sig. (2-tailed)		
	N	94	
Psychosocial health	Pearson Correlation	.503**	1
	Sig. (2-tailed)	.000	
	N	94	94

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

4.4.1 Regression Analysis

Regression analysis was undertaken to find out the level to which the independent variables predicted substance use among street children. The model summary as presented in Table 5 shows that the independent variables (quality of social support system, access to counselling services, psychosocial health) explained 39.8% of the change in safe practices among the youth (r squared = 0.398).

Table 5
Model Summary

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.631 ^a	.398	.378	.87517
a. Predictors: (Constant) Psychosocial health				

Table 6, shows that all the independent variables (quality of social support system, access to counselling services, psychosocial health) statistically significantly predict drug use among street children as shown by a significant F test ($F= 19.817$, $p < 0.05$).

Table 6
Analysis of Variance

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
	Regression	.474	1	.474	1.112	.000
1	Residual	39.171	92	.426		
	Total	39.644	93			

a. Dependent Variable: Drug Use

b. Predictors: (Constant), Quality of social support system, Access to counselling services, Psychosocial health

Lastly, the findings show that only psychosocial health and access to counselling services statistically



significantly predicted drug use ($p < 0.05$). The quality of the social support system ($P > 0.05$) did not statistically significantly predict drug use. It was thus not fitted into the regression model. As such; the fitted regression model is as shown below:

$$\text{Psychosocial health} = 0.805 + 0.448.$$

Table 7
Regression Coefficients

Model		Coefficients				
		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	.805	.448		1.795	.006
	Psychosocial health	.305	.082	.339	3.731	.000
a. Dependent Variable: Drug Use						

V. CONCLUSIONS & RECOMMENDATIONS

5.1 Conclusion

The study found significant relationships between drug use among street children and the independent variables of psychosocial health, quality of social support system, and access to counseling services. The Pearson correlation coefficients revealed a positive relationship, indicating that better psychosocial health ($r = 0.503$, $p < 0.05$), improved quality of social support system ($r = 0.538$, $p < 0.05$), and increased access to counseling services ($r = 0.208$, $p < 0.05$) were associated with a decrease in drug use. This suggests that interventions focused on enhancing mental health, strengthening social support systems, and providing counseling services could contribute to reducing drug use among street children. Resilience to negative influences, improved living conditions, and rehabilitation efforts were identified as potential outcomes of these measures. It was noted, however, that some outliers still abused drugs despite receiving psychosocial support, highlighting the challenging conditions faced by street children.

5.5 Recommendations

Based on the study findings, recommendations can be made to address the psychosocial health and drug use among street children in Starehe Sub-County. It is crucial to prioritize and strengthen existing social support systems tailored to the unique needs of street children. Efforts should be made to provide homes and facilitate family reintegration, aiming to mitigate exposure to the stressful conditions contributing to mental health issues. Implementing regular free mental healthcare clinics specifically designed for street children, accompanied by counseling services, can play a vital role in addressing their psychosocial needs. These interventions should be comprehensive, considering the complex challenges faced by street children and providing them with the necessary support for healthier and more resilient lives.

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