

THE SELF-IMAGE OF ADOLESCENT STREET CHILDREN IN HARARE

Samson Mhizha

**Thesis submitted in fulfilment of the requirements of the Degree of Master of Philosophy
in Social Studies (Psychology)**

**Department of Psychology
Faculty of Social Studies
University of Zimbabwe**

November 2010

Supervisor: Mr T. Muromo

Dedications

This dissertation is devoted to the three women in my life; my mother, whose determination and hardwork has driven my education strait; my wife Maritina, without whose forbearance, this thesis would not have been completed; and my daughter, Tinevimbo Charmaine, who ‘pre-natally’ made the completion of this thesis more imperative.

Abstract

The present study sought to explore the relationship between street childhood and adolescent self-image. In Zimbabwe, there has been a rise in street children population in the urban centres. The current study investigated whether adolescent street children live and work in an eco-developmentally risky context for the development of positive self-image. This rise in street children population has been in the context of a socio-politico-economic crisis which was marked by record inflation rates and the HIV and AIDS pandemic. The research objectives were to investigate the indicators of self-image for both street-working and street-living adolescent children, to investigate the nature of self-image for both street-working and street-living adolescent children, and to determine the effects of self-image on the behaviour of both street-working and street-living adolescent children. A psychoethnographic research design was employed in this study. This involved collection of data for a sustained period in the context within which the participants live. Fieldwork took 10 months. The participants were 13 street-living and 13 street-working adolescent children aged between 12 and 18 years and six key informants all in Harare in Zimbabwe. A total of 32 participants took part in this study. Snowballing was used to recruit key informant interviewees while purposive sampling was used to recruit participants for focus group discussions, in-depth interview, and participant and non-participant observations. Key informant interviews, focus group discussions, in-depth interviews, participant and non-participant observations were the data collection methods. Thematic content analysis was used for analysing the data. This thematic content analytic method helped to identify themes on self-image that emerged from the data. Data analysis revealed that the adolescent street children's self-image is hierarchical and multidimensional. Such self-image was found to be hendecagonal or eleven-sided. The eleven dimensions that emerged from the data are physical, vocational, social, familial, moral, social, sexual, ecological, spirito-religious, psychological and general self-image or self-esteem. Some adolescent street children appeared to have mainly negative self-image. Such negative self-image seemed to lead to a life of misery and hopelessness among the street children. The negative self-image among adolescent street children also seemed to lead to risky and self-destructive behaviours which included unsafe sexual activities, violence, criminality and substance abuse. However, other street children were found to have positive self-image and these children exhibited self-enhancing behaviours like schooling, church-going, job-seeking and family reunification. The streets, hence, appears to be a risky eco-developmental context, engendering the development of negative adolescent self-image. A multi-sectoral and multi-pronged programme for mitigating the challenges faced by street children is recommended. Such programme should encompass child-friendly services that provide education, food, shelter, family reunification, birth certificates, health services and legal assistance to be implemented by non-judgemental and well-trained personnel. It is imperative that such services to the street children should be designed to meet the individual street children's dreams, needs and experiences and should enhance their self-respect and self-esteem. Female and weaker male street children should be protected from abuse in the streets. Finally the government should legally allow street children to work and live in the streets should it be in these children's best interests.

Acknowledgement

I would like first and foremost to acknowledge all the support, advice and help that my supervisor Mr. T. Muromo proffered me. I also extend my indebtedness to Mr. Javangwe who saw me through when Mr. Muromo went on leave. I, as well, take this opportunity to thank the administration and staff at Streets Ahead for assisting me in accessing street children. Needless to say that Mr. C. Chirozva, Mr. R. Kokera and Mr. K.F. Sithole, and other fellow colleagues in the Psychology department were there when needed most.

To all the children and key informants who took part in this study - you are great people who should prosper in your endeavours. Thank you so much for trusting me and allowing me to enter into your private lives.

Special votes of thanks go to my brother Mr C Mhizha and his wife Mrs. R. S. Mhizha. The two of you are a cut from above. Their resolute support and guidance through the 'thick and thin' of things is inconceivable. "Did I deserve that?" The thesis and the entire academic channel would have been a pipe dream, if you had not been that helpful.

Finally, I appreciate the intimation I was given by The Archbishop of The African Apostolic Church, Ernest Paul Mamvura Mwazha, to enrol for a Masters programme soon after completing my first degree in 2002. "The God you have showed us is surely a Living One, for he has seen me through this thesis. Praise be unto Him, for he is full of grace." 'Ebenezer,' for your God has taken me this far.

Contents

Dedications	ii
Abstract	iii
Acknowledgement	iv
Contents	v
List of Figures	ix
List of Tables	x
List of Acronyms	xi
Chapter One	1
Introduction	1
1.1. Background	1
1.2. Statement of the Problem	3
1.3. Objectives	4
1.4. Justification of the Study	5
1.5. Conceptual Framework	6
1.6. Scope of the Study	7
1.7. Definition of Terms	8
1.8. Thesis Synopsis	10
1.9. Chapter Summary	11
Chapter Two	12
Literature Review	12
2.1. Introduction	12
2.2. Aetiology of Street Childhood	13
2.2.1. Bronfenbrenner's Ecology of Human Development	13
2.2.1.1. Microsystem Influences	14
2.2.1.1.1. Personal Relationships	15
2.2.1.2. Mesosystem Influences	15
2.2.1.2.1. Familial Problems	16
2.2.1.3. Exosystem Influences	17
2.2.1.3.1. The Extended Family	17
2.2.1.3.2. Poverty and Unemployment	18
2.2.1.3.3. Housing	20
2.2.1.4. Macrosystem Influences	22
2.2.1.4.1. The HIV and AIDS Epidemic	22
2.2.1.5. Chronosystem Influences	23
2.2.1.5.1. Socio-Historical Analysis of the Emergence of the Street Children Phenomenon	23
2.3. The Situation of Street Children	25
2.3.1. Food and Shelter among Street Children	26
2.3.2. Income Generation among Street Children	27
2.3.3. Contact with Family among Street Children	29
2.3.4. Public's Perception of Street Children	30
2.3.5. Street Children's Perceptions of their Street life	31
2.3.6. Substance Abuse among Street Children	32

2.3.7. Educational Attainment among Street Children	32
2.3.8. Violence and Physical Abuse among Street Children	33
2.3.9. Gender-Based Violence among Street Children	34
2.3.10. Sexual Behaviours among Street Children	37
2.3.11. Sexual Orientations among Street Children.....	41
2.3.12. Abortion among Street Children.....	42
2.3.13. Intimate and Marital Relationships among Street Children.....	43
2.3.14. Health, Hygiene and Illness among Street Children.....	45
2.3.15. Neurological Deficits and Psychological Functioning among Street Children	46
2.4. Adolescent Self-Image.....	50
2.4.1. Physiological and Physical Changes at Adolescence	51
2.4.2. Implications of Self-Image	52
2.5. Theoretical Model of Self-Image.....	54
2.5.1. Multi-Dimensional Models on Self-Image.....	54
2.6. Street Children and Adolescent Self-Image.....	56
2.7. Chapter Summary	58
Chapter Three.....	59
Methodology.....	59
3.1. Introduction.....	59
3.2. Design	59
3.3. Participants.....	61
3.4. Sampling Procedure	63
3.5. Instruments.....	64
3.5.1. Key Informant Interview Guide.....	64
3.5.2. In-Depth Interview Guide	65
3.5.3. Focus Group Guide	65
3.5.4. Observation Guide	66
3.6. Data Collection	66
3.6.1. Key Informant Interviews.....	66
3.6.2. Focus Group Discussions.....	67
3.6.3. In-Depth Interviews	68
3.6.4. Participant and Non-Participant Observations.....	69
3.7. Fieldwork.....	70
3.7.1. The Fieldwork Process.....	71
3.7.1.1 Ethnographic Mapping.....	71
3.7.1.2 Entry.....	72
3.7.1.3. Developing Trust	76
3.7.1.4. Key Informant Interviews.....	77
3.7.1.5. Participant and Non-participant Observations	78
3.7.1.6. Focus Group Discussions.....	79
3.7.1.7. In-Depth Interviews	79
3.7.1.8. Exit.....	80
3.7.2. Ethnographic Field Station	80
3.8. Data Analysis.....	81
3.8.1. Procedure for Thematic Content Analysis.....	82
3.8.1.1. Phase 1: Acquainting Oneself with the Data	82

3.8.1.2. Phase 2: Spawning Initial Codes.....	82
3.8.1.3. Phase 3: Exploring for Themes.....	83
3.8.1.4. Phase 4: Re-examining the Themes.....	83
3.8.1.5. Phase 5: Delineating and Designating Themes.....	85
3.8.1.6. Phase 6: Compiling the Report.....	85
3.9. Methodological Evaluation.....	86
3.10. Ethical Issues and Risks of Psychoethnography with Street Children.....	88
3.11. Reliability and Validity.....	95
3.11.1. Reliability.....	95
3.11.2. Validity.....	96
3.12. Chapter Summary.....	97
Chapter Four.....	99
Results.....	99
4.1. Introduction.....	99
4.2. Indicators/Dimensions of Adolescent Self-Image.....	100
4.3. Nature of Adolescent Street Children Self-Image.....	104
4.3.1. Physical Self-Image or Body Image.....	104
4.3.2. Vocational Self-Image.....	112
4.3.3. Social Self-Image.....	120
4.3.4. Ecological Self-Image.....	124
4.3.5. Familial Self-Image.....	129
4.3.6. Moral Self-Image.....	136
4.3.7. Sexual Self-Image.....	141
4.3.8. Academic Self-Image.....	150
4.3.9. Psychological Self-Image.....	154
4.3.10. Spiritual/Religious Self-Image.....	158
4.3.11. General Self-Image/Self-Esteem.....	166
4.4. Behavioural Effects.....	172
4.4.1. Sexual Behaviours.....	172
4.4.2. Marital Behaviour.....	179
4.4.3. Familial Behaviours.....	184
4.4.4. Moral Behaviours.....	186
4.4.5. Hygienic Behaviour.....	192
4.4.6. Academic Behaviours.....	194
4.4.7. Vocational Behaviours.....	196
4.4.8. Ecological Behaviours.....	198
4.4.9. Pathological Behaviours.....	201
4.4.10. Spirito-Religious Behaviours.....	203
4.4.11. Physical Health-Related Behaviours.....	205
4.4.12. Self-Destructive Behaviours.....	208
4.4.13. Self-Enhancing Behaviours.....	210
4.5. Chapter Summary.....	212
Chapter Five.....	213
Discussion, Conclusions and Recommendations.....	213
5.1. Introduction.....	213
5.2. Indicators of Adolescent Self-Image.....	213

5.3. Nature of Adolescent Self-Image.....	216
5.4. Effects of Adolescent Self-Image	217
5.4.1. Risky Behaviours.....	217
5.4.1.1. Sexual Behaviours	218
5.4.1.2. Substance Abuse	219
5.4.1.3. Antisocial and Criminal Behaviours.....	219
5.4.2. Familial and Ecological Behaviours.....	220
5.4.3. Academic and Vocational Behaviours.....	221
5.4.4. Religious and Spiritual Beliefs	222
5.4.5. Psychological Functioning.....	223
5.4.6 Self-Destructive and Self-Enhancing Behaviours	224
5.5. A Model on the Impact of Street Childhood on Adolescent Self-Image.....	225
5.6. Conclusions.....	229
5.7. Recommendations.....	231
5.7.1. Individual-Based Approach	231
5.7.2. Street-Based Approach	232
5.7.3. School-Based Approach.....	233
5.7.4. Health-Centred Approach.....	234
5.7.5. Family-Based Approach	234
5.7.6. Gender-Based Violence Mainstreaming Approach	235
5.7.7. Community-Based Approach.....	236
5.7.8. Government-Based Approach.....	237
5.7.9. Implications for Further Research	238
References.....	239
Appendices.....	252
Appendix A: Key Informant Interview Guide English Version.....	252
Appendix B: Key Informant Interview Guide Shona Version.....	253
Appendix C: In-depth Interview and Focus Group Discussion Guides English Versions	254
Appendix D: In-depth Interview and Focus Group Discussion Guides Shona Versions	255
Appendix E: Participant and Non-Participant Observation Guide	256
Appendix F: Introductory Letter.....	257

List of Figures

Figure 1. Bronfenbrenner’s Ecological Model	14
Figure 2 Hierarchical Self-Image Model on Adolescent Street-Living Children	214
Figure 3 Hierarchical Self-Image Model on Adolescent Street-Working Children	216
Figure 4 Adolescent Street Child Self-Image Model	228

List of Tables

Table 1. Housing List Backlog in Zimbabwe's 5 Major Cities	21
Table 2. Participants for Current Research	62
Table 3. The Fieldwork Process	72

List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CA	Casa Alianza
CBD	Central Business District
CCAD	Carnegie Council on Adolescent Development
CSO	Central Statistical Office
DVRG	Domestic Violence Research Group
ESAP	Economic Structural Adjustment Programmes
FGD	Focus Group Discussions
HIV	Human Immunodeficiency Virus
IDI	In-Depth Interviews
Inter-NGO	International Non-Governmental Organisation
KII	Key Informant Interviews
MoHCW	Ministry of Health and Child Welfare
MoYDEC	Ministry of Youth Development and Employment Creation
NAP	National Action Plan
NIDA	National Institute on Drug Abuse
NPO	Non-Participant Observation
OVC	Orphans and Vulnerable Children
PASS	Poverty Assessment Study Survey
PO	Participant Observation
RBZ	Reserve Bank of Zimbabwe
STD	Sexually Transmitted Diseases
STI	Sexually Transmitted Infections
UN	United Nations
UNICEF	United Nations Children’s Fund
WHO	World Health Organisation
ZNCWC	Zimbabwe National Council for the Welfare of Children
ZRP	Zimbabwe Republic Police

Chapter One

Introduction

1.1. Background

The phenomenon of street children is global, alarming and escalating (Casa Alianza [CA], 2000). Street children searching for their livelihoods have become an indelible mark in the cityscape of most developing countries; Zimbabwe included (Muchini, 2001). The population of street children punctuating the urban morphology worldwide is almost impossible to know; nevertheless, the United Nations estimates the numbers to be around 150 million, and swelling daily (CA, 2000).

In recent years, there has been mounting disquiet over the exponential explosion of the ‘uncouth’ street children population in Zimbabwe (see Chigonga, 2007; “Deliver Us From Street Kids,” 2007; Muchini, 2001; “Plot To Dump,” 2007; “Police Round Up Street Kids,” 2006). By 2000, street children in Zimbabwe numbered 12 000, 5 000 of whom were dwelling in Harare alone (United Nations Children’s Fund [UNICEF], 2003). It is plausibly assumable that the actual contemporary street children population in Zimbabwe may have transcended the 12 000 digit. With this in mind, it is arguable that the street children phenomenon has reached epidemic levels both globally and locally.

The upsurge in street children figures is backgrounded by a disquieting HIV and AIDS epidemic, plus, the socio-politico-economic crisis that bedevilled Zimbabwe in the recent past. Zimbabwe has been stalled in a staggering socio-politico-economic crisis (Murerwa, 2006; Reserve Bank of Zimbabwe [RBZ], 2005; Tibaijuka, 2005). This crisis in Zimbabwe was eloquently manifested in

the aggravating poverty, and the hyper-inflationary economic milieu manifested by the unprecedented record of inflation rate for September 2008 that was at 231 million percent (Central Statistical Office [CSO], 2008, as cited in Kadzere, 2008). Other critical problems that obtained in Zimbabwe included; incessant droughts, soaring unemployment rates, severe foreign currency shortages and scarcity in basic necessities like food and fuel. The government of Zimbabwe declared 2006-2007 and 2007-2008 drought years. There were even intermittent crippling cash shortages in the country. On the social front, the HIV and AIDS scourge-with the infection rate at 20.1% wrecked the social fabric, while triggering humanitarian crises, most evident of which are orphanhood and poverty (Ministry of Health and Child Welfare [MoHCW], 2005). Murerwa located the figures of orphans and vulnerable children in Zimbabwe at over 1, 5 million as at 2006. The majority of these street children are HIV and AIDS victims, whose demise has been exacerbated by the decapacitation of the traditional social safety nets, outstanding of which is the extended family (Rurevo & Bourdillon, 2003).

The problem of the orphans and vulnerable children, inclusive of street children, has led to formulation of many national and global obligations. Globally, the General Assembly of the United Nations adopted the Convention on the Rights of the Child in 1989 (Muchini, 2001). The Assembly of Heads of State and Government of the Organisation of African Unity, continentally, adopted the Charter on the Rights and Welfare of the Child in Addis Ababa in 1990 (Muchini, 2001). Locally, the Zimbabwe government launched the National Action Plan (NAP) for Orphans and other Vulnerable Children (OVC) in August 2005. That NAP for OVC's central aim is to develop a national institutional capacity to rehabilitate orphans and vulnerable children (inclusive of street children). In Zimbabwe, the interest on child issues has led to burgeoning of

governmental and non-governmental organisations to allay the plight of street children. The Zimbabwe government's responses to street children, nevertheless, have been markedly inconsistent, incongruent, punitive and largely abortive (Muchini, 2001).

1.2. Statement of the Problem

The problem under investigation in the current study is whether adolescent street children live and work in an eco-developmentally risky context for the development of positive self-image. This is in the context where very few studies have particularly explored the psychological functioning of the street children in Zimbabwe (Muchini, 1994). There are studies that imply that there is need for researching the street children institution. Researchers such as Dube (1999), Ennew (1994, 2003), Muchini (2001), Ruparanganda (2008), and Rurevo and Bourdillon (2003); argue, for instance, that the street ecology poses a risk to normal child development. Ennew (2003) argued that the contemporary world which claims to be child-friendly, should afford health development opportunities to the street children. For street children, health development means they should have opportunities for development of senses of independence, self-efficacy and self-esteem as they mature (Mechanic, 1991; Tudorić-Ghemo, 2005). Some studies have found self-image to be a chief determinant of child development, psychological functioning and behaviour (Branden, 1994; Harter, 1990; Oosterwegel & Oppenheimer, 1993a, 1993b, 2002).

More still, other researchers have surmised that street childhood is risky for positive self-image development (Narayan, Patel, Schafft, Rademacher & Kock-Shulte, 1999; Vostanis, Grattan & Cumella, 1998). Baumeister, Campbell, Krueger and Vohs (2003) argued that positive self-

image is not only desirable in its own right, but that it is also the fundamental psychological source from which other positive behaviours and outcomes are derived. Positive self-image has profound consequences for every aspect of human existence as all psychological problems ranging from anxiety and depression, to fear of intimacy or of success, to spouse battery or child molestation are traceable to the problem of low self-esteem (Branden, 1994). Albert Ellis, a prominent clinical psychologist, argued that negative self-image is possibly one of the greatest problems for human optimal functioning (Epstein, 2001). However, Baumeister et al. contended that researches on self-esteem have proliferated only in Western individualist cultures and that they need to be extended in other societies (Africa included). Researchers are agreed that self-image significantly develops at adolescence (Baumeister et al., 2003; Oosterwegel & Oppenheimer, 1993a, 1993b, 2002; Santrock, 2002, 2004; Steinberg, 2002). Muchini (2001) observed that most of the street children in Zimbabwe are adolescents while Le Roux (1995) had earlier on observed that most of street children in South Africa are adolescents with the mean age of 13 years. It is imperative, therefore, to explore the psychological implications of street childhood. The current study aimed to explore the indicators, nature and effects of adolescent street children's self-image, in an effort to suggest possible recommendations that assuage the plight of these children.

1.3. Objectives

The present study sought to:

- 1.. Investigate the indicators of self-image for both “on the street” and “of the street” adolescent children.
2. Investigate the nature of self-image for both “on the street” and “of the street”

adolescent children.

3. Determine and describe the effects of the self-image of both “of the street” and “on the street” adolescent children on their behaviour.

1.4. Justification of the Study

The increase in numbers of street children in the world in general and Zimbabwe in particular is a cause for concern. The street children phenomenon is increasingly becoming a permanent mark in the morphology of Zimbabwean cities (Muchini, 2001) and growth points (Ruparanganda, 2008). Ruparanganda (2008) predicts that street children are even likely to emerge in villages in Zimbabwean rural areas. The local media has been inundated with calls to ‘weed out’ these street children, as they are terrorists who should be sent to national parks to be consumed by lions since they behave like ‘animals’ (see Chigonga, 2007; “Deliver Us From Street Kids,” 2007; “Plot To Dump,” 2007; “Police Round Up Street Kids,” 2006). Researchers have also decried that these street children face numerous vulnerabilities ranging from lack of basic necessities, adolescent challenges, negative public perception, squalid environment, sexual exploitation, human rights abuses, marginalisation and stress (Muchini, 1994, 2001; Ruparanganda, 2008; UNICEF, 2003).

On the other hand, Dube (1999) and Ennew (2003) have echoed that dearth on street children research has impoverished the discourse on street children, subsequently, curtailing their effective programmatic rehabilitation. It is arguable that the phenomenon of street children in Zimbabwe has often been studied, but insufficiently described by researchers from a psychological perspective. Ruparanganda (2008, p. 1) observes that a review of available literature on street children reveals a striking “lack of an in-depth study of the lives of these

children in Zimbabwe.” Many researches have looked at the aetiology of street childhood and street children’s survival strategies but only a few have done in-depth analyses of their lives (see Bourdillon, 1991; Dube, 1999; Muchini, 1994; Ruparanganda, 2008; Rurevo & Bourdillon, 2003). More still, almost all of the in-depth researches on street children have largely been sociological. These in-depth sociological studies were conducted by Bourdillon (1991), Dube, Ruparanganda, and Rurevo and Bourdillon (2003). There has been minimal attention on the psychological functioning of the street children. There is only one in-depth study on psychological functioning of street children in Zimbabwe this researcher is aware of, which study was conducted by Muchini on street children’s moral functioning as far back as 1994. It appears, therefore, that there is dearth of literature on the psychological functioning of the street children in Zimbabwe. Beazley (2003) who conducted a study on the formation of identity among male street children aged 18 years and below, argues that there is a need to analyse the psychological effects of street childhood. Thus, it is necessary to conduct psychological research on these adolescent street children who have become an eyesore in Zimbabwe’s urban morphology. This study sought to explore the relationship between adolescent street childhood and self-image.

1.5. Conceptual Framework

The model that serves as the conceptual framework for the current study was proposed by Oosterwegel and Oppenheimer (1993a, 1993b, 2002). These two scholars advanced that self-image is a complex, dynamic, hierarchical and multidimensional system known as the self-system which develops at adolescence. According to Oosterwegel and Oppenheimer (1993a, 2002), the self-image or self-system comprises of dimensions or self-representations that are

context-related and are determined by the different environments in which the individual functions. The key environmental determinants of such self-concept include parental or familial relationships, peer or social relationships, academic achievements and psychological functioning (Oosterwegel & Oppenheimer, 2002).

Oosterwegel and Oppenheimer (2002) further reasoned that the dynamic aspect of the self-system is based on the assumption that self-understanding is primarily a social construction from birth onward till adolescence in interaction with significant others who include the parents and peers. According to Oosterwegel and Oppenheimer (1993a, 2002), self-image develops as a function of three sources of information. The sources of information are immediate knowledge about the self or self-appraisals, the information conveyed by significant others about the self, and the way one thinks significant others regard himself or herself. These two authors also observed that negative self-image is related to negative affects, depression, neuroticism, and psychosomatic complaints.

1.6. Scope of the Study

The area of focus for this study was;

1. The indicators and nature of adolescent street children's self-image, and the effects of such adolescent street children' self-image on behaviour and psychological functioning among street children in Harare.
2. In the current study, the participants (all from Harare) were members from street-living and street-working children and key informants (officials from Drop-in centres, the Department of social welfare, the Zimbabwe Republic Police and former street children).

1.7. Definition of Terms

The literature on street children equivocates over the definition of a street child (Aptekar, 1988; Panter-Brick, 2002). According to Williams (1993), the term “street children” was first used by Henry Mayhew in 1851, though got into use only after the United Nations Year of the Child in 1979. Before 1979, street children were referred to as homeless, abandoned or runaways (Williams, 1993). In 1983 the International Non-Governmental Organisation [Inter-NGO] (cited in Muchini, 1994, p. 14) euphemistically defined a street child as, “any boy or girl who has not reached adulthood, for whom the street (inclusive of unoccupied dwellings and wastelands) has become his or her habitual abode and source of his livelihood and who is inadequately protected, supervised or directed by responsible adults.” Muchini (2001) argues that placing many children under this all-encompassing label of street children seems to obliterate any differences that may exist between them and their grounds for being in the street. UNICEF (2003, p. 12) grouped these street children into “children on the street,” and “children of the street.” “Children on the street” or street-working children are children who work in the street, and sleep at home; while, “children of the street” or street-living children are children who work and sleep on the street.

The above definitions of street children have been functional and useful, but are fraught with many problems. It may be indicated, however, that there is no firm dichotomy between the two street children categories; therefore, making it difficult to pinpoint those children who are street-living and those who are street-working (Muchini, 1994, 2001). The categories are not broad enough to cover the intricacies of the street children phenomenon. For instance, some children considered of-the-street maintain links with their families; hence, they do not fit into the above

categories. Furthermore, there are many children living with their families on the streets, especially, children of parents with disabilities and begging parents (Muchini, 2001). Muchini (2001), worse still, observed that some on-the-street children sleep on the street at times. Child commercial sex workers, working on the streets at night and living at home during the day, do not fairly fit into this definition either. Nevertheless, this study adopts the Inter-NGO definition together with the two UNICEF categories of on-the-street and of-the-street children as it appears that there are no other clearer and better definitions categories.

There is no universally accepted definition of self-image; furthermore, self-image, self-worth, self-esteem, and self-concept are used interchangeably in literature (Konarska, 2003). Butler and Green (1998, p. 21) distinguished between self-image and self-esteem, proposing that self image is descriptive and defined it as “how an individual thinks about him or herself;” whereas, self-esteem is evaluative, and delineated it as “how an individual judges him or herself along dimensions considered important.” For the purpose of the current study, self-image is definable as the entire mental view or picture a person has of him/herself.

Adolescence has been described as a, “fascinating and complex transition in the life span; a time of accelerated growth and change second only to infancy” (Carnegie Council on Adolescent Development [CCAD], 1995, p. 12). Besides, adolescence has been defined as, “a psycho-social-biological stage of development beginning in biology and ending in society” (Santrock, 2002, p. 65). The most consensual definition of adolescence is that it is the developmental transition from childhood to adulthood, marked by rapid changes in physiology, psychosocial functioning, emotional and cognitive development (Cobb, 201; Rice, 1996; Santrock, 2002, 2004; Steinberg, 2002). In addition, there is an agreement that adolescence spans from 12 to 18 years (Cobb, 201;

Rice, 1996; Santrock, 2002, 2004; Steinberg, 2002). In the current study, adolescents are children between 12 and 18 years. This definition of adolescence is fraught with its own problems. The problems include questions like whether adolescence is a chronological construct referring to attainment of certain years, or is it the attainment of physiological and psychological capabilities believed to correlate with such years. The other problem is whether adolescence refers to the acquisition of certain psychological capacities thought to go with such years or whether failure to acquire such capacities means lack of attainment of adolescent development. In the present study, these problems are minimised (though not resolved) by taking only the children between 12 and 18 years to be adolescents.

1.8. Thesis Synopsis

Chapter One is an introduction to the thesis and helps to put the thesis in perspective. It offers the background, statement of the problem, research objectives, justification, definition of terms and scope of this study. Chapter Two situates this study in the context of previous research, presents a synthesis of empirical literature according to relevant themes, justifying how this study addresses a gap in the literature, and outlines the theoretical or conceptual framework of the study. Particularly, this chapter presents a review of available literature on street childhood and adolescent self-image. Chapter Two, also, presents the aetiology and the situation of the street children and the models of adolescent self-image.

Chapter Three provides the methodology used in the current study. This chapter situates the study in a particular methodological approach, providing a rationale for that approach. It also offers sections on participants, sampling procedure, instruments, data collection, fieldwork, data

analysis and ethical issues and risks associated with this study. Chapter Four presents the results. This chapter organizes and reports the study's main results or findings, including the presentation of relevant qualitative (narrative) data. The results include the indicators, nature and behavioural effects of the adolescent self-image basing on the research objectives for the current study. Finally, chapter Five interprets and discusses the results in light of the study's research objectives and literature review. This fifth chapter ends with a conclusion and the recommendations that emanate from the current study.

1.9 Chapter Summary

The preceding chapter introduces the current study. The purpose of this chapter has been mainly to give the rationale of carrying out this study. It has been highlighted herein that the recent years have witnessed a disquieting escalating in the population of street children in the morphology of urban areas in Zimbabwe. Ruparanganda (2008) has even predicted that street children are likely to emerge in rural villages in Zimbabwe. These street children face many challenges and it is interesting to research how the impact of such circumstances affects their self-image. It has been argued in this chapter that self-image is a very vital construct in human functioning (Branden, 1994). The thesis herein, as echoed by Dube (1999), Ennew (1994, 2003), Muchini (2001), Ruparanganda, Rurevo and Bourdillon (2003), is that the street is an eco-developmental risky context for child development. Particularly, some researchers have argued that street childhood is unsafe for positive self-image development (Narayan et al., 1999; Vostanis et al., 1998). The objectives are to determine the indicators and nature of adolescent street children's self-image and to determine the effects of such self-image on the street children's behaviour.

Chapter Two

Literature Review

2.1. Introduction

This chapter offers a review of literature on street children and self-image. This chapter focuses on literature on the aetiology of street childhood, the situation of street children, implications of self-image and the models on self-image. In this chapter, it will be argued that the street children phenomenon is not an isolated development, but that it develops in interaction between the individual functioning of the children and the ecology within which the children survive. This is based on the ecological model by Bronfenbrenner (1993) which argues that child development is largely predicated on the interaction between individual functioning and the social environment. Thus, the aetiology of street childhood is attributed to the interaction between the individual street children and their background environments. In this chapter, furthermore, there is a review of literature on the situation of street children. The researcher herein argues that street children are largely affected by the less conducive circumstances prevailing in the streets.

In this chapter, it will be argued also that self-image is very important in determining human psychological functioning and behaviour. It will again be argued that self-image has important influence on human functioning. Branden (1994) argues that self-image has profound consequences for all aspects of human existence. Indeed, Branden (1994, p. 12) advances that there is no “single psychological problem—from anxiety and depression, to fear of intimacy or of success, to spouse battery or child molestation—that is not traceable to the problem of low self-esteem.” This chapter closes with a discussion of the contemporary and multidimensional models of self-image.

2.2. Aetiology of Street Childhood

This section of literature review analyses the aetiology of the street children phenomenon. Local and international literature is reviewed to explain how some children end up living and working in the streets. It has been argued that factors that contribute in pushing street children to live in the streets, constantly affect their functioning in the streets (Le Roux, 1995; Muchini, 1994, 2001; Zimbabwe National Council for Welfare of Children [ZNCWC], 2004). In that regard, it is presumed herein that some of the causal factors have a bearing on the psychological functioning of these children who work or live in the streets. Therefore, the factors that drive a child to work and live in the streets may also impact on the child's adolescent self-image. The analysis of causal factors of street childhood is premised on Bronfenbrenner's ecological theory.

2.2.1. Bronfenbrenner's Ecology of Human Development

The aetiology of street childhood is hereby discussed using the Bronfenbrenner's ecological theory. This theory posits that there is a dynamic relationship between individual functioning and social locale in shaping child development (Bronfenbrenner, 1993). To that extent, becoming a street child occurs in interrelationship between the individual functioning of the street children and their social milieu. Street childhood is seen, therefore, not as a child problem, but as a systems problem (Maphatane, 1994). Bronfenbrenner's ecological model comprises of five co-dependent 'systems,' namely the micro-, meso-, exo-, macro- and chronosystems. Figure 1 on page 14 is a pictorial representation of the Bronfenbrenner's ecological model. This pictorial representation shows all the constituent five co-dependent systems of Bronfenbrenner's ecological, namely the micro-, meso-, exo-, macro- and chronosystems.

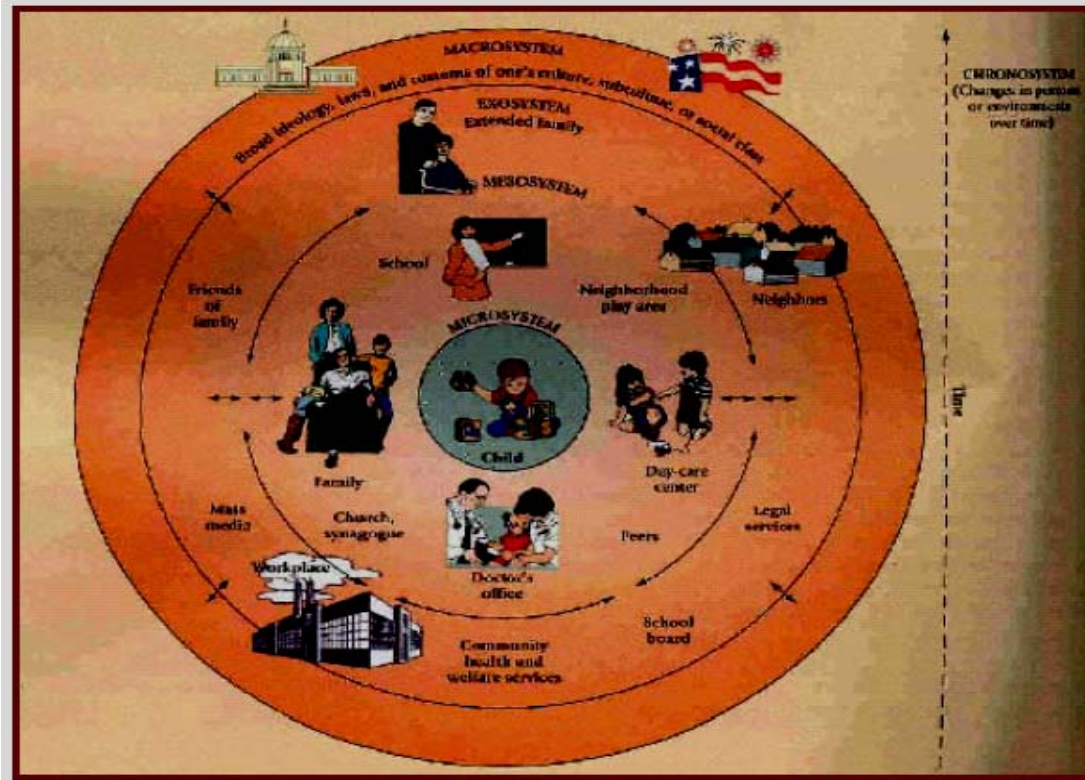


Figure 1. Bronfenbrenner's Ecological Model (Adapted from Tudorić-Ghemo, 2005, p. 51).

2.2.1.1. Microsystem Influences

The microsystem is the most prominent system which functions at the personal level, and is marked by the immediate daily experiences and relationships during the children's upbringing. These relationships and experiences include those at school and in the family, and involve the patterns of the roles, activities and personal relations that the individual has in the direct circumstances that comprise their particular social encounters (Bronfenbrenner, 1993; Maphatane, 1994). The microsystem is presented in the model in Figure 1 above. The following section discusses the personal relationships children have at home and school, and how these relationships push them into the streets.

2.2.1.1.1. Personal Relationships

The child functions primarily at and from the family level. The family has the task of support and protection of the children and provision of the child's most basic needs; whereas the incapability to endow the child with these can lead to the onset of street childhood (De Moura, 2002). In Zimbabwe, such factors inbuilt in the family spurring street childhood include poverty, hunger, abuse (both physical and sexual), violence, and neglect (Muchini, 1994). Some factors that can lead to street childhood located in the education system in South Africa (not uncommon in Zimbabwe) include; failure, ruthless disciplinary measures, feelings of meagreness associated with not having school books or uniforms, negative view towards schooling, negative peer influence and learning problems (Maphatane, 1994). Furthermore, in Zimbabwe, education has become more costly, and has lost its valence as a guarantor of future employment, pushing many drop-outs into the street (Rurevo & Bourdillon, 2003). Accordingly, the quality of the interactions that children have with their immediate families contributes largely to whether they move onto the streets or not.

2.2.1.2. Mesosystem Influences

The second level of analysis is the mesosystem, which considers the interactions between several microsystems in which individuals swing between various roles due to movement between microsystems (Bronfenbrenner, 1993). For instance, this would include the individual's roles in relation to school, the neighbourhood, peers, doctors, play centres, religious institutions and the family. This mesosystem is presented in the model in Figure 1 on page 14, showing the family, the synagogue, the day centre, the neighbourhood play centre and the school where the child

functions. The section below presents the familial problems as part of the mesosystem and such problems may push children into streets.

2.2.1.2.1. Familial Problems

Street children tend to be from multi-problem families that are often marked by matrimonial problems, substance abuse, child neglect and abuse, ill-health and, sometimes the death of a parent (Muchini, 2001). Studies indicate that these families are, on the whole, socially and emotionally isolated, often producing intransigent challenges, principally with regard to their children (Maphatane, 1994; Muchini, 2001; UNICEF, 2003; ZNCWC, 2004). In Zimbabwe, some of the street children are from mother-headed families, at times residing in a single room (UNICEF, 2003).

Researchers have suggested that some of the street children are abused/ill-treated by their step parents, some are orphans, illegitimate or born out of wedlock, while others are runaways either for fun or from strict discipline at home (UNICEF, 2003; ZNCWC, 2004). ZNCWC (2004) observed that some street children are rejected by stepparents on remarriage of their biological parents while others are deserted or rejected by their biological parents. Research has also established that some of the street children are children of street families, blind begging adults, squatters, displaced persons and the urban poor, while others are searching for adventure and some are Mozambican refugees (ZNCWC, 2004). Other prevailing family circumstances inclining children to the street childhood are temporary absence of parents, distressed financial position in family, and social isolation of families (ZNCWC, 2004). Lankenau, Clatts, Welle, Goldsamt and Gwadz (2005) commenting on American street children, reasons that many street

children had experienced ‘caretaker fluidity,’ which is the fluctuations in guardians while growing up. According to Lankenau et al., caretaker fluidity causes disciplinary problems and difficulties in developing adult role models and, additionally, places youth at the risk of street childhood at a young age.

2.2.1.3. Exosystem Influences

The exosystem is the subsequent level of explanation in Bronfenbrenner’s ecological theory. At this level, the environment in which the child is not directly involved in or in which the child has no control over is taken into account (Bronfenbrenner, 1993). Positioned at this level, are factors like; the larger community, the workplace, community health organisations and welfare services, the extended family, the economic climate and the general socio-political environment. This exosystem is presented in the model in Figure 1 on page 14 showing the mass media, the friends of the child’s family, community health and welfare services, the school board, the legal services and neighbours which all indirectly affect the child. The researcher hereby discusses the extended family, housing, poverty, and unemployment as part of the exosystem and how these exosystemic factors push children into the streets.

2.2.1.3.1. The Extended Family

Traditionally, the extended family offered security, together with material, and psychological support to its members (Ruparanganda, 2008; Rurevo & Bourdillon, 2003). For Ruparanganda (2008, p. 9), the extended family used to be the “traditional social-shock-absorber for bereaved children.” In Zimbabwe, unfortunately for many children, this extended family is collapsing as it

is bursting under severe pressure and in many instances has already been increasingly impoverished, and rendered unable to provide adequate care for children (Rurevo & Bourdillon, 2003). The extended family is also predicted to face even greater burdens as the numbers of orphans continue to spiral (Rurevo & Bourdillon, 2003). Rurevo and Bourdillon (2003) further argued that the extension of cash economies and labour migration has weakened extended families. This has left orphans and other vulnerable children without safety nets, and has catapulted them into the streets in times of adversity. Thus, the decapacitation of the extended family has thrown many children into the streets who would have been taken care of by responsible adults from among their relatives.

2.2.1.3.2. Poverty and Unemployment

Poverty and the need to earn an income are important reasons for street childhood (ZNCWC, 2004). Ruparanganda (2008) argued that poverty has become institutionalised in Zimbabwe and has affected many people hence explaining the aetiology of street childhood. The poverty explanation is especially relevant under the economic crisis that obtained in Zimbabwe in the recent past. The economic crisis was marked by acute shortage in foreign currency, hyperinflationary environment, incessant droughts and shortages in basic foodstuffs (Murerwa, 2006). The foreign currency shortages had constrained critical imports needed for industrial and agricultural production, fuel, energy and basic commodities, further exacerbating the decline of the formal economy and the Government's revenue base (Murerwa, 2006).

Other problems attendant to the Zimbabwean economic crisis included; underutilisation of allocated land, inadequate measures to deal with rising levels of corruption, deteriorating

provision of basic public services, poor maintenance of infrastructure and inconsistent policy pronouncements (Murerwa, 2006). Also, included in the problems were; lack of balance of payments support, lines of credit, foreign direct investment, sanctions and deliberate efforts to undermine economic turnaround initiatives, and declining clarity over the role, and accountability of the key institutions of Government (Murerwa, 2006). The crumple of the Zimbabwean economy manifested itself in the late 1990s resulting in large-scale unemployment and urban poverty. The period between 2000 and 2006 witnessed a drastic nosedive in Zimbabwe's economic performance. Specifically, the economy had declined by about; -2,5% in 2000, -2,7% in 2001, -4,4% in 2002, -10,4% in 2003, -2,3% in 2004, -3,8% in 2005 and estimated -2,5% in 2006 (Murerwa, 2006). With the consummation of the inclusive government and the adoption of multiple foreign currencies in 2009, the economic downturn appears to be subsiding.

The Ministry of Youth Development and Employment Creation [MoYDEC] (2007) set the unemployment rate at over 80%. This unemployment figure was swelled by the dramatic increase in secondary school leaver population of over 400 000 that joined the job market annually where less than 10% got placement in the formal sector (MoYDEC, 2007). The unemployment levels were worsened by the rural-to-urban migration, and urbanisation which have not been matched by industrialisation (Rurevo & Bourdillon, 2003). Inversely, the Poverty Assessment Study Survey [PASS] (2006) put the general unemployment rate for 2003 at 13%. This rate was arrived at after calculating the percentage of the unemployed over the economically active. The economically active consist of those people who are available for

production of goods and services for cash or kind or own consumption, and include; employers, farmers, unpaid family worker, paid employers, unemployed seasonally and casually employed.

The economic crisis was also marked by record inflation rates. The inflation for September 2008 reached a stratospheric record high at 231 million percent (CSO, 2008, as cited in Kadzere, 2008). Such inflation levels meant that many people were living under extreme poverty. The population living under the poverty line was estimated to be above 70% (PASS, 2006). Zimbabwe, in addition, has one of the highest divides in Africa both in terms of access to resources, and in consumption with about 80% of the population sharing less than 20% of national wealth (PASS, 2006). Thus, ZNCWC (2004) found poverty and the need to earn an income as the major reasons for street childhood. Therefore, it can be argued that some children have become street children due to poverty.

2.2.1.3.3. Housing

With rapid urbanisation and migration, there has been a tremendous influx of people from rural to urban areas especially in Harare (Ruparanganda, 2008; Rurevo & Bourdillon, 2003). Rurevo and Bourdillon (2003) argued that the rates of urbanisation and industrialisation in Zimbabwe were not matched by the rate in provision of housing. Ruparanganda (2008) argued that the influx of people in search of employment and the population growth has put tremendous pressure on the provision of housing by the government leading to overcrowding. This overcrowding problem seems to be related to the rise in housing costs. Murerwa (2006) observed that there has been an escalation in costs of housing with a small stand going above \$3,5million and a 3 bed-

roomed house around \$30million in high density area as at December, 2007. Many people in Zimbabwe have therefore been constrained from securing adequate housing.

Presumably, this housing crisis has been worsened by the Government-implemented Operation Murambatsvina which destroyed illegal structures or unapproved houses in 2005 (Tibaijuka, 2005). The Reserve Bank of Zimbabwe (RBZ) in 2005 gave the housing lists backlog for 5 major cities in Zimbabwe as illustrated in Table 1 on page 21. As indicated in Table 1 below, as many as 1 055 000 people were on the housing lists and were yet to receive stands from the cities as of 2005. Table 1 as captured from data from The Reserve bank of Zimbabwe excludes Chitungwiza which is the third city in Zimbabwe in terms of population has its own large housing backlog. Furthermore, not all home-seekers approach city councils for stands and are not captured on the housing backlog lists hence people without adequate housing are inevitably more than what is indicated in Table 1.

Table 1. Housing List Backlog in Zimbabwe’s 5 Major Cities

City	Housing List Backlog
Harare	900, 000
Bulawayo	72, 000
Mutare	35, 000
Gweru	40, 000
Kwekwe	8, 000
Total	1, 055, 000

(Adapted from RBZ, 2005, p. 11.)

2.2.1.4. Macrosystem Influences

The fourth level of analysis, the macrosystem, is the largest level of the environmental system. Bronfenbrenner depict this level as the overarching societal background for the ecology of human development (Bronfenbrenner, 1993). The macrosystem is presented in the model in Figure 1 on page 14 showing broad ideology, laws, and customs of one's culture and subculture or social norms. Under the macrosystem, the researcher will discuss the HIV and AIDS epidemic as a having an influential role in turning some children into street children.

2.2.1.4.1. The HIV and AIDS Epidemic

Zimbabwe has been at the epicentre of a HIV and AIDS scourge with a seroprevalence rate of 20.1% amongst the 15-49 years age-groups (MoHCW, 2005). These rates, amongst the highest in the world, have led to an estimated 3,200 AIDS-related deaths per week (MoHCW, 2005). There were 1.6 million people of all ages infected with HIV by 2005 (MoHCW, 2005), and about 1.5 million AIDS orphans by 2006 (Murerwa, 2006). In this context, orphanhood and poverty forcing many children into the streets is due to the HIV and AIDS epidemic. Chirwa and Wakatama (2000) observed that a third of the street children in Harare were orphans who would have lost one or both parents due to the HIV and AIDS scourge. Some of the orphans suffer as the little savings by their parents are used in seeking treatment for sick parents, that when the parents die, the children have no one to look after them that they find their way into the street (Rurevo & Bourdillon, 2003).

2.2.1.5. Chronosystem Influences

The chronosystem, the fifth level of analysis, reviews the socio-historical conditions, and changes in individuals and their environments over time as pictorially presented in Figure 1 on page 14. It reflects dynamic environmental transitions, encompassing entries, exits, milestones and turning points over time (Bronfenbrenner, 1993). This chronosystem therefore assumes that certain socio-historical events or policies explain the emergence of street children in certain places at certain times. Filho and Neder (2001) located the emergence of street children in Brazil in historical and cultural factors. According to these two scholars, such historical factors together with other etiologic factors like poverty and family dysfunction do then affect the street children's behaviour and functioning. For Bronfenbrenner (1993), these historical events shape and influence the emergence of the street children phenomenon. Thus, the discussion of the aetiology of street children phenomenon especially following Bronfenbrenner's ecological model would be incomplete without discussing the chronosystem.

2.2.1.5.1. Socio-Historical Analysis of the Emergence of the Street Children Phenomenon

This section discusses the major turning points that could have contributed in the emergence of the street children phenomenon in Zimbabwe. Bronfenbrenner (1993), Grier (1996), Ruparanganda (2008), and, as do Rurevo and Bourdillon (2003), attach importance to certain historical factors in the emergence of the street children phenomenon. In Brazil, Filho and Neder (2001) linked the emergence of street children institution to the legacies of slavery and political authoritarianism. Ruparanganda (2008, p. 3) argues that the background of street youths is "firmly rooted in the social, economic and political history of Zimbabwe from political times to

post-colonial socio-political relations.” In his analysis of the emergence of the street children phenomenon in Zimbabwe, Grier explored the emergence of street children in Zimbabwe from the 1920s to the present. Grier suggested that the earliest equivalents of street children were young native children attracted to urban and mining centres. These children found wage employment in urban areas as domestic servants and gardeners. According to Grier, recurrent drought periods, the independence euphoria and the Mozambican civil war have all influenced the emergence of the street children phenomenon in Zimbabwe. Independence saw the relaxation of the strict municipal by-laws leading to the emergence of street children in major urban centres as vendors, car-washers, beggars, or parking boys since the municipal by-laws restricting this were brutally enforced (Grier, 1996). The Mozambican war displaced many people, mainly children and women. Muchini and Nyandiya-Bundy (1991) found that a substantial number of street children in Zimbabwe were displaced Mozambicans.

There tends to be an agreement among scholars that the failure of Economic Structural Adjustment Programmes (ESAP) in the early 1990s was a major negative economic turning point in Zimbabwe’s post-independence economic history (Murerwa, 2006; Muzvidziwa, 1997; Ruparanganda, 2008; Rurevo & Bourdillon, 2003; Tibaijuka, 2005). The austerity measures imposed by ESAP led to the massive retrenchment of skilled and unskilled labour and of the civil service; the closure of many manufacturing industries; general price increases; and the deterioration of social services (Tibaijuka, 2005). These factors, combined with the liberalisation of the economy, led to the gradual but systematic decline of the formal economy and to the growth and emergence of the informal sector, especially in the rapidly growing town and cities of Zimbabwe. These ESAP programmes appear to have greatly contributed in increasing the

number of street children on Zimbabwe (Muzvidziwa, 1997; Ruparanganda, 2008; Rurevo & Bourdillon, 2003).

An economic crisis emerged in Zimbabwe in the late 1990s and furthermore contributed in the emergence of street children (Ruparanganda, 2008; Tibaijuka, 2005). This crisis was influenced by the unbudgeted handouts to former liberation war fighters, the military intervention in the conflict in the Democratic Republic of Congo in terms of budgetary allocations and deficits and the land distribution programme of 2000 (Tibaijuka, 2005). The land reform programme was met with the imposition of various sanctions from the European Union, the United States of America and several Commonwealth countries (Ruparanganda, 2008; Tibaijuka, 2005). These factors led to the worsening of the economic conditions in the country. The informal sector in which street children are also active participants grew after independence to 20% by 1986/87, 27% by 1991 and an estimated 40% by 2004 (Tibaijuka, 2005). Tibaijuka (2005) observed that in June 2005, 3 to 4 million Zimbabweans earned their living through informal sector employment, supporting another 5 million people, while the formal sector employed about 1.3 million people.

2.3. The Situation of Street Children

This section examines existing literature on the situation of street children. The argument in this section of literature review is that the street environment is not suitable for health development of children, hence, may affect their psychological development. It is reiterated here that researchers such as Dube (1999), Ennew (1994, 2003), Muchini (2001), Ruparanganda (2008), Rurevo and Bourdillon (2003) have argued that the street ecology poses a risk to normal child development. Research has shown that the environment, both animate and inanimate, influences

and affects children's development (Bourdillon, 1991; Dube, 1997a, 1997b; Ennew, 1994; Muchini, 1994, 2001). Accordingly, a psychologically impoverished environment may lead to physical and social problems. Street children live under squalid conditions, usually lack parental care, affection, education and opportunities for healthy growth and development (Bourdillon, 1991; Dube, 1997a). The assumption herein is that the situation these street children find themselves in has an influence on their self-image.

2.3.1. Food and Shelter among Street Children

Makope (2006) argued that the principal reason why street children are in the streets is to find food and shelter. These street children get food from dirty bins or from scavenging through dirty food that has been discarded (Makope, 2006). Rugaranganda (2008) observed that the street children also prepare their own food in the morning when they fail to get enough food from food outlets. According to Rugaranganda, in the spirit of communalism, these street youths put money together and buy mealie-meal and relish, cook and eat together. The relish was usually vegetables and meat. Rugaranganda further observed that street youths used paper or cardboard boxes as plates from which they ate their food. Street children in Harare seem to know all places where takeaways, supermarkets and restaurants leave their bins (Makope, 2006). Some street children obtain food from drop-in centres (Muchini, 2001). Makope observed that workers in takeaways or hotels throw dead rats or dirty washing soap inside bins so that the food won't taste.

For shelter and protection, street children sleep in groups under bridges, in alleys, water drains, dumping sites and parks (Makope, 2006). These sleeping places are referred to as 'bases'

(Makope, 2006; Muchini, 2001; Ruparanganda, 2008). Ruparanganda (2008) observed that the bases were generally dirty and were sometimes marked by greasy blankets. The bases were observed to be stinking yet these street children walked barefooted (Ruparanganda, 2008). Ruparanganda also observed that the street children frequented Mai Musodzi Hall in Mbare where they were shown films from 6pm to 6am. The hall had become a rendezvous for criminals while the street youths used it as bedroom during chilly nights (Ruparanganda, 2008).

2.3.2. Income Generation among Street Children

Street childhood has invariably been seen as a career for the children's survival (Beazley, 2003; Lankenau et al., 2005; ZNCWC, 2004). Ruparanganda (2008) suggested that the street is an important source of street children's livelihood. These street children engage in loading and off-loading goods from vehicles, cleaning the backyards of supermarkets, herding cattle for some company executives and cutting grass and hedge at the homes of many business executives (Muchini, 2001; Ruparanganda, 2008). The other economic activities undertaken by street children include begging, vending, guarding cars, escorting blind parents, car-washing and taxi-touting (Muchini, 2001). Some street children also get involved in petty crimes, selling drugs and commercial sex (Makope, 2006). UNICEF (2003) lamented that street children earn very little from these economic activities. The money is used for purchasing food and clothes, and for paying school fees for younger siblings (Muchini, 2001). Research has alluded to the detrimental effects of child work on the psychological and physical development of children (Ennew, 2003). Furthermore, the work some children do; for instance, loading, and unloading vehicles, exerts a great deal of demand on their paltry calorific reserves (Muchini, 1994). This, coupled with excessive substance use and poor nutrition, abates their immunity to diseases (Muchini, 1994).

It can be argued that some kinds of work performed by children may really improve their health and psychological status (Muchini, 1994, 2001). Families with children working in the streets earn more than the minimum wages, and are able to meet their basic needs by pooling together their labour (Bourdillon, 1991; Muchini & Nyandiya-Bundy, 1991). Furthermore, some forms of child work may increase their physical fitness thereby strengthening their resistance to certain diseases. The street children's work, however, may mar their academic and intellectual growth as work leaves them with little time and energy for school. Indeed, studies have shown that the majority of street children have little or no education at all (Bourdillon, 1991; Muchini, 2001).

Muchini (2001), however, argues that the work by street children may be essential for their socialisation process, as they gain the skills necessary for future employment. This may be true for children of vending parents who assume vending roles by the side of the roads at a young age, begun by accompanying their vendor parents as infants (Muchini, 2001). Schooling, it may be reasoned, limits children's choices for many forms of employment in the informal sector. Unprecedented high unemployment rates for the educated and high informal employment rates for the less educated provide support to this contention (Muchini, 2001). In addition, it was found that many street children reported that their relationships with their families get better once they had started working on the streets (Rizzini, Rizzimin, Munoz-Varga, & Galeano, 1994, cited in Bar-On, 1998).

Lankenau et al. (2005), in a study of American street children aged between 17 and 28 years, observed that street children develop street capital which is latent knowledge gained through observations and experiences within a family or household. This street capital is, however, tied

to drug use, sexual activity, criminal behaviour, and housing contingencies, that enable a youth to develop survival skills in the street economy (Lankenau et al., 2005). Lankenau et al. also report that street children develop street competencies which are practical actions and skills that emerge from the accumulation of street capital, and include buying and selling drugs, commodifying sexual activity and shop lifting. These authors argue that the street competencies enable young people to survive in the street economy, and develop through embeddedness in a social network in the streets. Through these street competencies, the street children develop street careers associated with street economy, such as sex worker career (Lankenau et al., 2005).

2.3.3. Contact with Family among Street Children

Street children generally desire to go home again, although, many feel that this would only be possible if the factors that caused them to leave home in the first place were to change (Le Roux, 1995; Muchini, 1994, 2001; ZNCWC, 2004). Le Roux (1995), on a study on street children from South Africa and Thailand who had a mean age of 13 years, found that street children returned home regularly, and had a positive and loyal relationship with their families, while other children had completely severed ties with their families. Some street children return home during the Christmas period and on weekends - although for limited periods - and they usually return to the street, mainly because of family conflict, rejection and the poverty situation (Le Roux, 1995). Ruparanganda (2008) found that among his sample, some of the street youths were married in the streets and had children. The street youths with children believed that they were blessed though they wondered whether their husbands would live long since they were very 'naughty' and acted like animals. Apparently, three such married male street youths were reported to have died while in remand prison in Harare within eight months only (Ruparanganda, 2008).

2.3.4. Public's Perception of Street Children

Street children are considered a blemish in the city, and a problem needing urgent solution (Rurevo & Bourdillon, 2003). Beazley (2003) argues that street children are seen to be committing a social violation, as their very presence contradicts state ideological discourse on family values and ideas about public order. Rurevo and Bourdillon (2003), also, observed that motorists hate these children who 'own' parking bays. Rurevo and Bourdillon observed that street children decry that they are treated violently, scorned and subjected to hostility by police and security guards. Research show that intervention programmes for street children can only be successful if the community is prepared to respect, protect and provide opportunities to the street children (Taçon, 1991, as cited in Bar-On, 1998).

Beazley (2003) who reasoned that street children appear to commit a social transgression by becoming street children, argued that such an offence justifies the 'cleaning up' of children from the streets, arrests, imprisonment and, in some extreme cases, torture and extermination. Tudorić-Ghemo, (2005) further argued that in Columbia street children are judged with contempt and are often viewed as nuisances who should be murdered, that 2 190 street youths were murdered in 1993 as social cleansing. The political and economic instability leading to the prevalence of uprisings, drug cartels, overpopulation and poverty is blamed on the street children (Le Roux & Smith, 1998a). Additionally, children are often thought to be deviants and criminals who should be locked away as they are a danger to society in general – “a lost generation, hooligans, 'good-for-nothings', thieves, violent youngsters, nuisances and parasites” (Barrette, 1995, p. 34). In Zimbabwe, these children have been portrayed, especially in the electronic and print media, as little urchins or criminals in the making who should be forcibly removed from the

streets (Chigonga, 2007; “Deliver Us From Street Kids,” 2007; Muchini, 1994, 2001; “Plot To Dump,” 2007; “Police Round Up Street Kids,” 2006; Ruparanganda, 2008).

2.3.5. Street Children’s Perceptions of their Street life

It is perhaps very significant to know how street children perceive their street lives. Empirical research has looked at how street children perceive their lives in the streets. Beazley (2003) found that many of the street children look for proof that street life is a better way of living. Many hardships are ignored, and treated with hilarity, and often the children contend that street life is ideal because they are free to do whatever they want - a way of making life tolerable (Beazley, 2003). Schurink (1993) discovered that some of the positive aspects of street life are that children may find empathy and security in their street families that is not available to them from their parents. Schurink also reasoned that the street children can in addition, earn money, escape maltreatment and abuse at home, and they are more self-sufficient, and have a greater sense of control over their lives. Le Roux (1995) observed that 56% of his street children participants in South Africa and Thailand found nothing positive on the street, 18.75% found positive leisure activities, 12.5% saw street life as an opportunity to earn money, and 56.25% saw it as an opportunity to procure education, food and clothing.

Muchini (2001) observed that many street children felt hopeless and helpless about their lives. These street children mentioned that they had no other option other living in the streets. They indicated that their lives on the streets were tough, some felt hopeless and mentioned that their lives were bleak and without a future. Some of these street children mentioned that their street lives were temporary though a small proportion mentioned that they enjoyed living on the

streets. The majority of the street children felt that their lives were tough and that they had no future (Muchini, 2001).

2.3.6. Substance Abuse among Street Children

Street children seem to have a propensity to abuse psychoactive drugs, with many using such drugs to counteract the effects of pain and hunger (UNICEF, 2003). Muchini (2001) observes that the drugs, as well, reduce feelings of shame that the street children can do any job without any worry when their survival hangs in balance. Muchini and Nyandiya-Bundy (1991) who conducted a situational analysis of street children aged below 18 years in Zimbabwe observed that street children were involved in drug abuse, substance abuse and sniffing glue every day. Davison and Neale (1982) iterated that sniffing glue can cause psychotic states, leading to excited disinhibited reactions accompanied by confusion. Makope (2006) suggested that drugs help these street children get away from stresses and unhappiness. When sober, street children always think and worry about how they can change their circumstances. Glue is the most popular substance abused by street children in Zimbabwe (Makope, 2006). South African street children sniff petrol, glue, benzene, paint thinners, nail varnish, gasoline and mandrax, smoke dagga, drink alcohol and take cocaine (Jansen, Richter, Griesel, & Joubert, 1990, as cited in Tudoric-Ghemo, 2005).

2.3.7. Educational Attainment among Street Children

The majority of the street children have not gone beyond primary education (Ikechebelu, Udigwe, Ezechukwu, Ndinechi, & Joe-Ikechebelu, 2008; Muchini, 1994, 2001; Rurevo & Bourdillon, 2003). There is an agreement among scholars that in Zimbabwe, schooling has lost

its valence as a guarantor of future employment (Muchini, 2001; Rurevo & Bourdillon, 2003). In Nigeria, Ikechebelu et al. observed that about half of their street children participants had either dropped out of school or had no formal education at all. Ikechebelu et al. (2008) also argued that education tend to increase the level of awareness to the problems of pregnancy and STIs. Rurevo and Bourdillon (2003) observed that some street children particularly the street-working attend school. These two researchers also reasoned that some street children drop out of school to maximise efforts in helping their siblings to completing their ordinary level education. Muchini (2001) in his sample of 260 Zimbabwean male and female street children with ages ranging from a few months to 18 years, observed that over 25,5% had never been to school while 21,8% had only reached lower primary education (Grade 1 to 3) and 38,2% had some higher primary school education (Grade 4 to 7). It can be concluded that street children appear to have little education.

2.3.8. Violence and Physical Abuse among Street Children

New and younger children in the streets are at the mercy of bullying by older boys and girls who demand anything inclusive of money, food, sex and clothes (Makope, 2006). Those children who can not stand fights live a sad life, especially when counting money or eating as crew leaders can snatch the money or food by force. Seniority is then acquired through tenure in streets and through fighting (Makope, 2006). According to Makope (2006), these seniors or crew leaders have lost interest in changing their lives that they hardly leave the streets. Age tends to influence the risks of violence to which street children are exposed and their responses to violence (Benitez, 2007). Thus, younger street children face more violence. It has been observed that street boys tend to replicate violence as aggressors (Raffaelli, 2000).

It has been argued that the street appears like a ‘battlefield’ and this is even buttressed by the use of the term ‘base’ for the places where the street children sleep which has military connotations (Ruparanganda, 2008, p. 150). Ruparanganda (2008) further concluded that street youths in his study declared that there would be deaths on the streets as they clash with the police. This violence is such that in Columbia, street children are invariably viewed as nuisances who should be murdered. This resulted in 2 190 street youths being murdered in 1993 (Tudorić-Ghemo, 2005).

2.3.9. Gender-Based Violence among Street Children

Gender also tends to influence the risks of violence to which street children are exposed and their responses to violence (Benitez, 2007). Gender-based violence is a major public health concern and infringement of human sexuality and reproductive rights for female street children (Fawole, Ajuwon & Osungbade, 2004; Osinowo, 1992). Girls working and living in the streets tend to internalise violence and may be more vulnerable to ongoing abuse and victimisation (Barker, Knaul, Cassaniga, & Schrader, 2000). Girls also tend to be vulnerable to additional forms of violence in crisis situations when compared to men and boys and are more likely (although by no means exclusively) to be subjected to sexual violence, often with limited access to preventative measures and other health services (Barker et al., 2000).

Fawole et al. (2004) conducted a study to determine the sexual vulnerabilities of 186 female street-working children with mean age of 13 years in Nigeria, and concluded that female street children are particularly vulnerable to all forms of violence including sexual exploitation by men. Another study showed that 30% of the gender-based violence experienced by girls on the street

is sexual in nature (Osinowo, 1992). Men prefer young girls as sexual partners because they assume these young girls are sexually inexperienced and as such are less likely to be infected with sexually transmitted disease (Fawole et al., 2004; Osinowo, 1992). Fawole et al. argued that in a society with poorly developed social network and intervention, many of the girls accept it as their lot and fear being stigmatised if they should report such abuses. The girls who report the abuses are exposed to numerous hazards ranging from physical violence to loss of wares, accidents, robbery, kidnapping and even murder for ritual purposes (Fawole et al., 2004). Female street children who are victims of sexual abuse are therefore less likely to report the abuse.

According to Fawole et al. (2004), the most troubling finding perhaps is that some of these female street children are sexually exploited and forced into prostitution with the risk of unintended pregnancies and contracting sexually transmitted infections including HIV. Most abused girls do not report the crimes because of the stigma attached to the issue (Fawole et al., 2004). Although society has sympathy for victims of sexual violence, it also visits them with some stigma (Fawole et al., 2004; Osinowo, 1992). The types of sexual abuse experienced by the vending street children in Nigeria include inappropriate touches, verbal abuses and rape (Fawole et al., 2004).

The gender-based violence female street children face is also economic. Female street children feared to pursue the same income-generating activities undertaken by the boys, such as washing cars and selling peanuts, candy, and cigarettes because they believed that the boys would harass them and generally “sabotage” their efforts (Plummer, 1994, p. 86). According to Flynn (2008), male street children acquire street credit in the eyes of members the public through beating up

three street girls who inadvertently crossed into the boys' food-begging turf while being urged on by adult street men. Flynn defines the street credit as the credibility or status one gains by performing bold, illegal and/or violent acts. Flynn based his conclusions on a study on Tanzanian male and female street children ranging from 5 months to 16 years to assess their development of street credit in order to survive under hardships they face in the streets.

Ruparanganda (2008) also concluded that female street children face in the streets face gender-based violence and cites them complaining that they were oppressed by the jealous street boys. Ruparanganda (2008, p. 3) rather argued that street girls are an "otherised or objectified category," meaning that they are marginalised and exploited group. These female street youths complained that they are barred from entering into the streets where they are supposed to obtain money. The female participants in the study by Ruparanganda complained that male street youths barred them from entering into the streets for very flimsy reasons. Such reasons included allegations that as female street children, they were not courageous or strong enough to resist or flee away from the rampaging police; yet, according to the female participants the real reason was that their male partners feared that they would be taken away by other men. What is interesting is that the male participants in the study by Ruparanganda argued that moving around with females would expose them to bad luck especially during their menstrual cycles. Ruparanganda further reports that female and weaker street children have nightmarish encounters when they come into the street. Most of the street children decried that they were initially intoxicated and then raped or sodomised by stronger male street children (Ruparanganda, 2008). Male street children defended their abuse of female street children saying that the street is for males only. Other street children blamed the abuse saying that the female

street children were very permissive sexually, yet they were being fended for by these male street youths they were cheating on. Female street children complained that they were treated like sub-humans by the male street children. However, according to Ruparanganda, the views male street youths had on females mirrored those views that men in mainstream society have on women.

2.3.10. Sexual Behaviours among Street Children

Street children are generally involved in sexual behaviour at a very young age, and are often exposed to the risky activities associated with premature sexual exposure (Arnaf & Antwi, 1995; Dube, 1997a, 1997b, 1999; Makope, 2006; Rurevo & Bourdillon, 2003). Makope (2006) believed that 98% of street girls lose virginity once they enter into the street as they lack advice from parents, and imitate experienced female street children. Ruparanganda (2008) reasoned that female street children are ruthlessly sexually abused and raped. Ruparanganda referred to them as “an underclass of the underclass” because boys want them to be financially and materially disempowered so that they can have sex with these girls without any resentment (Ruparanganda, 2008, p.169). Apparently, Ruparanganda observed that female street children watch haplessly as their male counterparts fight each other to have sex with them without their consent and referred to these boys as ‘beasts’. These female street children described their male counterparts as beasts judging from the way they sexually abused them (Ruparanganda, 2008). Arnaf and Antwi (1995) suggested that sex among street children is very frequent and mainly for survival. In their study, Arnaf and Antwi observed that the majority of the respondents (64.8%) said they had sex either daily or between one and three times a week (80% for females and 58.3% for males). For some of the girls sex must be a daily affair if they are to survive. Furthermore, Ruparanganda

concluded that these female street children describe themselves as having no power to refuse sex degrading that otherwise they can be killed if they refuse their male counterparts sex.

Data from research and organisations working with street children indicate that the street children are at higher risk for HIV infection (Bourdillon, 2001; Dube, 1997a, 1997b, 1999; Rurevo & Bourdillon, 2003). Dube (1997a, 1997b) reasoned that both street girls and boys have risky sexual activities that make them vulnerable to HIV infection. Rurevo and Bourdillon (2003) observed that a group of about 30 children were tested for the HIV virus, and only two were found seronegative with the rest being positive. Because of their exposure to HIV and AIDS, the street children had a grim picture of themselves as they said: “we are *zhing zhongs* and fakes” since they would die young and fail to reach 50 years (Ruparanganda, 2008, p. 252). *Zhing zhong* is a colloquial term for Chinese goods which are associated with counterfeits and belittled by many people for being of poor quality, less durable and cheap. However, Ruparanganda (2008) found that these street children feel that they are highly exposed to death whether it is from accidents, murder or illness. Dube (1997a, 1997b) discovered that street boys engaged in commercial sex with adult males (*mangochani*), sex for security, casual sex on mutual consent, and sex with female sex workers, and had their “wives” sell sex as an income-generating activity for the “couple.”

Research points out that same-gender sexual behaviour are prevalent among street children. Some male business owners believe that having sex with boys make their businesses prosper; hence, engage in sex with young street children for money (Makope, 2006). Makope (2006) observed that new arrivals in the street are normally sodomised by older boys. Ruparanganda

(2008) found that younger male street children report being intoxicated by the older street children who then sodomise them violently even if they do not resist. Makope, as well, observed that both street girls and boys meet some men and women asking for sexual intercourse. Sex is also both coercive and unprotected among street children (Makope, 2006). Makope stated that 50% of street children in Zimbabwe have unprotected sex because they have lost confidence in their destiny. Ruparanganda also found that street children claim not to engage in protected sex, do not use birth control while abortion is rife. Ruparanganda also observed that the genitals are not only assets for sexual gratifications but also for survival among female street youths. Female street youths engage in sexual activity to secure food that when they abstain from sexual activity, her peers persuade her to reconsider that decision because they would not want to feed her with the proceeds from their own sexual activities (Ruparanganda, 2008).

One issue that emerges from literature is that sex is not that safe in the streets (Arnaf & Antwi, 1995; Makope, 2006; Ruparanganda, 2008). According to Ruparanganda (2008), female street youths have no rights over their bodies and do not practise safe sex. Female participants in the study by Ruparanganda lamented that their male sexual partners could kill them just for asking for condom use. The male participants in the study by Ruparanganda commented that the jelly inside the condom could cause rash on their penis hence they did not use the condoms. These male street youths in asserted that using condoms during sex was just like masturbating and referred to that as “plastic sex” while they wanted “flesh to flesh” (Ruparanganda, 2008, p. 222). Dube (1997b) echoed that there is no useful information and services available to them to enable them to make informed choices in sexual matters as there is no system in place to make condoms available and accessible to the children on the streets, who may require such information for at

least some protection when they are in difficult situations. According to Dube, these street children are cut off from the common services of information such as the school and the family

One facet of sexual behaviours street children engage in involves sexual networking. Sexual networking by street children involves having relationships with fellow street children while at the same time maintaining such sexual relationships with non-street members of the society in their city of residence (Anarfi & Antwi, 1995). Anarfi and Antwi conducted a study on sexual networking among male and female Ghanaian street children with ages ranging from 6 to 24 years. The findings indicated that the female street children had sexual partners among street children from whom they made money enough to sustain them for each day. Anarfi and Antwi (1995, p. 43) referred to these fellow street sexual partners as ‘quasi-regulars.’ These female street children were obliged to satisfy sexual demands of such male street children while at the same time they had to solicit for sexual clients in town at night.

According to Anarfi and Antwi (1995), for the street boys, sex is for pleasure while for the street girls, it is for sustenance. Additionally, there are vulnerable girls who need money to survive but do not have the requisite qualifications to enable them to secure a respectable means of livelihood. Furthermore, these female street children need protection in a potentially violent environment and a place to rest in the daytime; these resting places are controlled by the boys (Anarfi & Antwi, 1995). The relationships are, therefore, not very stable and involve elements of recklessness. There was evidence of partner swapping among street children. For example during the focus group discussions, several boys pointed to a particular girl from whom they thought they had once contracted venereal disease (Anarfi & Antwi, 1995). These street children had

many sexual partners and engaged in various forms of sexual relationships including rape, commercial sex, and survival sex (Athey, 1991).

Street children often use and abuse substances such as glue and take alcohol which enhances sexual behaviour that in turn exacerbates risks of HIV and AIDS infection (Athey, 1991), as they engage in sex indiscriminately. Anarfi and Antwi (1995), and as was done by Ruparanganda (2008), observed that female street children have sex with three types of clients. The first type involved the street boys with whom they had sex for protection and to whom they lied that they were the only sexual partners. The second type involved the street-working youths for commercial reasons who were usually married and stayed at home. The final type of with whom these street girls had sex were both municipal police and members of the uniformed police for protection (Anarfi & Antwi, 1995; Ruparanganda, 2008).

2.3.11. Sexual Orientations among Street Children

There are different variations of sexual relationships among street children (Anarfi & Antwi, 1995; Flynn, 2008; Makope, 2006; Ramakrishna, Karott & Murthy, 2003; Ruparanganda, 2008). Ramakrishna and his colleagues conducted a study in 2003 on Indian street boys ranging from 9 years to 23 years to determine the nature and forms of sexual violence street children face in the streets. According to Ramakrishna et al. (2003), sex among male street children can be penetrative (penis in rectum) or "safe" sex (penis in thighs or mouth). Ruparanganda (2008) suggested that the female street youths engaged in oral sex with some white business owners for money and he commented that he apparently saw some street girls being driven off in cars by some rich men adult males. Ruparanganda also commented that male street children engaged in

anal penetration with both street youths and non-street adults. These adults with whom the street children had sex were both black and white.

The other sexual variations among street children include autosexuality or autoeroticism and ritual sex (Ruparanganda, 2008). Ruparanganda (2008) concluded that autoeroticism includes masturbation and fantasy. Masturbation is also common among both male and female street children (Ramakrishna et al., 2003; Ruparanganda, 2008). Aina (1991) echoed that ritual sex and sexual relations which involve gaining of mystical powers and witchcraft are common among street children. Ruparanganda also argued that street children engaged in sex for mystical purposes as some business persons induced the street children to engage in sex with commercial sex workers using condoms and later gave the semen in the condoms to the other business people. The semen could have been wanted by some business owners for rejuvenating their businesses or by criminals to make investigators lose leads on their criminal cases (Ruparanganda, 2008).

2.3.12. Abortion among Street Children

Abortion is observed to be common among street children (see Anarfi & Antwi, 1995; Flynn, 2008; Makope, 2006; Ruparanganda, 2008). According to Flynn (2008), female street children's dependency on sexual exchanges to acquire food also leave them vulnerable to the physical and emotional difficulties of unplanned pregnancies, botched abortions, miscarriages, premature deliveries and poorly spaced births. Flynn also commented that such unplanned pregnancies could also result from rape. Female street youths perceived boys as real murderers who did not want to use condoms yet they did not want to look after the children (Ruparanganda, 2008).

Ruparanganda (2008) observed that female participants in his study claimed that they used a concoction involving a mixture of Tanganda tea leaves and surf in water or some tree leaves which they used for inducing abortion. Such concoctions could however result in deaths.

Anarfi and Antwi (1995) reasoned that generally female street children are frightened by the possibility of their sexual activities resulting in pregnancy while they could not do anything to prevent the pregnancies. Anarfi and Antwi observed that abortion appeared to be very common among female street children and that they were more likely to have an abortion than to allow a pregnancy to continue. Ruparanganda (2008) observed that female street youths claimed that in the streets, abortion was as frequent as defecating. Another study on street children in Nigeria found that more than 15.4 % of female adolescent hawkers had procured abortion at least twice, had been pregnant without knowing who was responsible, had experienced rape and also contracted sexually transmitted infections including HIV and AIDS (Fawole et al., 2004).

2.3.13. Intimate and Marital Relationships among Street Children

Empirical literature has also looked at the intimate and marital relationships maintained by the street children. According to Ruparanganda (2008), courtship and dating among street children is different from that in mainstream society. The difference is that in the street, food is the love token, whereas in the mainstream society women are given tokens, like clothes and handkerchiefs. The female street youths also claimed that they were given pants by their boyfriends as the reminder that they should give sex only to that boyfriend (Ruparanganda, 2008). Some men claimed to have put magic on their female partner's pants so that when the female partner cheats on him, she would fail to disengage from the person with whom they

would be having sex (Ruparanganda, 2008). However, some of the female participants in Ruparanganda's study claimed that the magic was ineffective as they maintained sexual relationships with many partners without any disengagement problems.

According to Flynn (2008), street girls exchanged sex with street boys and adult males, some of whom lived on the streets. While these partnerships could be long-term, they also appeared to be based largely on material transactions especially as sex for money or food (Flynn, 2008). The other adult men with whom these girls had sexual encounters were often complete strangers who accosted and frightened the girls into having sex with them. Given the girls' lack of bargaining power and the limited financial resources of their partners, one sexual encounter usually generated only enough food to sustain the girls for the moment—if the girls were given anything at all (Flynn, 2008).

The female street children's sex-for-food relationships involved an intricate mixture of dependency, support, affection, threats and exploitation (Flynn, 2008). Many street children who had been sexually active had more than one lifetime sexual partner (Flynn, 2008). Both the male and female partners seemed to have other sexual partners. Many male partners of the female street children had not paid the *lobola* or bridal price (Rurevo & Bourdillon, 2003), while they are also not known by the relatives of these female street children (Ruparanganda, 2008). Sometimes the husbands do not return home (Ruparanganda, 2008). According to Ruparanganda (2008), the married female street children however washed their husband's clothes and looked after the children. Among the married street youths there were conflicts and fist fights especially over allegations of infidelity, although the assaulted victim could not report such violence to

police who only advised them to avoid such violence by going back home (Ruparanganda, 2008).

2.3.14. Health, Hygiene and Illness among Street Children

UNICEF (2003) observed that many street children look sick, and suffer from coughs, watering eyes and sores. UNICEF further observed that the street children also look filthy, and live in surroundings with poor sanitation which could result in spread of diseases like cholera and dysentery. Clinics are inaccessible to these street children due to screening procedures which precede the issue of exemption certificates (UNICEF, 2003). Since these exemption certificates are issued by the Department of Social Welfare, most street children do not attempt to obtain them for fear of being rounded up for being vagabonds. UNICEF, also, maintained that street children suffer from scabies, stomach ailments, bilharzia, drug-related problems, respiratory problems and sexually transmitted infections. Street children were found to be dirty and unkempt (Muchini, 2001). These street children reportedly defecated everywhere like dogs (Ruparanganda, 2008). The street children are exposed to the vagaries of weather (extremes of cold or heat), to insects and reptiles, and to hunger and deprivation (Fawole et al., 2004). The street children, furthermore, have severely cracked lips, sore eyes, sore throats, nasal problems and burns from the cold (Muchini, 1994). Headaches, nausea, excessive thirst and rapid weight loss are also common among street children (Schurink, 1993).

Street children also reportedly experienced dehydration, malaria, pneumonia, and other diseases associated with malnutrition and sexual behaviour (Campbell & Ntsabane, 1996). Similarly, Schurink (1993) found that many street children experience general skin problems, scabies,

facial blemishes, spots and sores around the mouth and nose. Makope (2006) observed that street children have problem with lice that live on the waistbands of trousers and in the turn-ups of their pants. These insects infest people who neither bath nor wash their clothes.

2.3.15. Neurological Deficits and Psychological Functioning among Street Children

This section reviews literature on the neurological deficits and psychological functioning of street children. Aptekar (1988) conducted an important study on male street children aged between 7 and 17 years in Columbia to determine the nature of their psychological functioning and emotional stability. From his data, Aptekar concluded that street children have less psychopathology than reported elsewhere, and found no case of overt psychotic behaviour among these street children. Richter (1988b), in a South African study found street children to have more adaptive and creative behaviours than other children. Muchini and Nyandiya-Bundy (1991) observed that street children are involved in drug and substance abuse, and that they sniffed glue every day. Davison and Neale (1982) advanced that sniffing glue causes psychotic states, leading to excited disinhibited reactions accompanied by confusion. King, Day, Oliver, Lush, and Watson (1981) argued that evidence for brain damage after use of glue is inconclusive though seizures and encephalopathy following solvent abuse have been observed. Jansen et al. (1990, as cited in Tudorić-Ghemo, 2005), in a sample of street children (whose ages were not presented) in Johannesburg, found visual-spatial difficulties, visual-scanning problems, language deficiencies, deficiencies in motor co-ordination and multiple neurological deficits as prolonged effects of glue sniffing. Adlaf and Zdanowicz (1999), who conducted a study on cluster analysis on 211 Canadian street youths aged between 13 and 24 years to determine the relationship

mental health and substance, observed that between 30% and 40% of the street children report depression, a high prevalence of paranoid ideation, conduct disorder and attempted suicide.

Vostanis et al. (1998) conducted a research on 103 street children aged between 2 and 16 years in England and observed that skills deficiency, personal and social impairments and learning difficulties are common among adolescent street children. Behavioural problems such as sleep problems, aggression, over-activity, shyness, withdrawal, and emotional problems such as depression, anxiety, sadness, low self-esteem and self-harm (scratching, head-banging, punching) were, as well, common among street children in the study by Vostanis and his colleagues. Also common among street children include co-morbid features including conduct disorders, attention deficit disorder, hyperactivity disorder and obsessive compulsive disorders (Vostanis et al., 1998). Klain (1999) suggested that street children are more likely to have personality disorders due to their need to create different identities in order to survive on the streets. Yates (1991), also, suggested that street children are more likely to be clinically depressed, and that they are more likely to be actively suicidal or to have attempted suicide previously. Yates further suggested that street children see suicide as the only solution to their distress and hardships.

Ennew (1994) observed that street children tend to be emotionally immature and to have a desperate need for attention as a function of the failure to form emotional bonds during infancy and early childhood. Furthermore, these street children are exposed to violence and criminality (Ennew, 2003). Muchini (1994) suggested that street children progress more slowly in terms of moral development than non-street children. The ages of the participants in Muchini's study

ranged from 7 to 18 years. Non-street children were found to have higher levels of moral judgement than street children of similar sex, ages and socio-economic class (Muchini, 1994). Street children were found to have the propensity to lie and steal, and to exonerate themselves of any blame if there was a pressing need (Muchini, 1994).

In a South African study on adolescent street children whose age ranged from 13 to 18 years, Tudorić-Ghemo (2005) found that street children have high tendencies for paranoia and feelings of insecurity, which predisposes them to poor self-image, anxiety and low self-confidence especially at adolescence. This has been confirmed in some studies that have found in their samples that feelings of inferiority, hopelessness, uncertainty about life in general, and unworthiness are common among street youths (Tudorić-Ghemo, 2005). Similarly, Vostanis et al. (1998) found that the street youths reported feelings of anxiety, frustration, suspicion and self-harm. However, Tudorić-Ghemo observed that the street children in his sample had lesser tendencies for depressions, conflicts and anxiety. In Zimbabwe, Ruparanganda (2008) reasoned that male street youths believe that they can develop mental illness from the misfortunes they contract from interacting with female street children who are on their monthly menstrual periods.

There is some debate about whether street children are more or less resilient than other children. It should be highlighted that some psychological research about street children has shifted emphasis from portrayals of vulnerability and dependency to discussions of children's coping strategies and resilience in the face of adversity (Panter-Brick, 2002). Evidence from Columbia suggests street children have low levels of mental illness (Aptekar, 2004) and are resilient to violent experiences (Panter-Brick, 2002). That children can learn to cope in dangerous street

conditions is not under dispute, and some street children show well-developed abilities to navigate street risks (Panter-Brick, 2002). According to Panter-Brick (2002), coping and resilience is not the same thing: resilience refers to the ability to respond and adapt positively in adverse situations, while coping strategies are behaviours which may be either healthy or harmful to the child's development. A child who copes with violence by running away may be more resilient (if the coping strategy is a healthy and proportionate response) or less resilient (if running away signals inability to cope) than the sibling who stays home (Panter-Brick, 2002).

Evidence from some non-governmental organisations and researchers suggest that street children can display creative coping strategies for growing up in difficult environments (Beazley, 2003; Veale, Hegarty & Finucane, 1997). However, substance abuse is also acknowledged to be a primary coping mechanism among street children (Raffaelli, 1999; World Bank, 2007). Resilience enables street children to master difficulties; resilience is also known to vary under changing conditions and to be modifiable by environmental factors and as such subject to be influenced by policy and social interventions (Luthar, 2006). There is broad consensus that promoting resilience early in development is more cost-effective than treatment to repair disorders once they have crystallised (Luthar, 2006).

Flynn (2008), as highlighted earlier, commented that street children develop street credit in the street, which is the credibility or status one gains by performing bold, illegal and/or violent acts. For example, male street children acquire street credit in the eyes of members of the public, as in the case where a group of street boys, encouraged by an assembly of adult male bystanders, beat-up three street girls who inadvertently crossed into the boys' food-begging turf (Flynn, 2008).

The street credit accorded to the street boys in Flynn's study by members of the general public also varied and was often short-lived. For instance, while some of the boys were able to find regular work from sympathetic patrons, the majority of the street boys' jobs changed from day to day (Flynn, 2008). More still, a few boys and girls were successful in acquiring more durable street credit and status in the community (Flynn, 2008). For example, some female street children had diverse employment opportunities, had lived in the streets for many years, and knew many community contacts. These children acquired food and money through their sexual relationships with several regular partners and ate at the food stands in return for carrying water and cleaning cooking pots (Flynn, 2008). Lankenau et al. (2005) however, as highlighted earlier, observed that street children develop street capital which is latent knowledge gained through observations and experiences within a family or household. This street capital is, however, tied to drug use, sexual activity, criminal behaviour, and housing contingencies, that enable a youth to develop survival skills in the street economy (Lankenau et al., 2005).

2.4. Adolescent Self-Image

Attention is hereby shifted to a discussion of the central concept in this study, adolescent self-image. The definition of adolescence is again defined as one of the most "fascinating and complex transitions in the life span; a time of accelerated development and change, second only to infancy" (CCAD, 1995, p. 12). Adolescence has been seen as the stage that marks the development of self-image (Cobb, 200; Erikson, 1968; Harter, 1990; Lerner, 1995; McGee & Williams, 2000; Offer, 1987; Oosterwegel & Oppenheimer, 1993; Rosenberg, 1965; Santrock, 2001, 2004; Scheier, Botvin, Griffin & Diaz, 2000). Hall (1904), the father of adolescent psychology, characterised adolescence as a period of storm and stress. Studies ensued to verify

whether adolescence is characterised by storm and stress, and whether self-image was altered dramatically during the transition to adolescence (Lerner, 1995; Offer, 1987). It came out that although adolescence presents many challenges; there was insufficient evidence neither for universal storm, nor for dramatic, discontinuous changes in self-image (Cobb, 2001; Lerner, 1995; Offer, 1987; Santrock, 2001, 2004). The researcher in the current study investigates the dimensions, nature and effects of self-image among street children. It is therefore reasonable to review the available literature on self-image and attendant adolescent changes.

2.4.1. Physiological and Physical Changes at Adolescence

This section looks at the physiological and physical changes that mark adolescence to give a background for the adolescent self-image. An adolescent is in the stage of puberty. The word puberty comes from the Latin word *pubescere*, which means to be covered with hair (Gabarino, 1985). Santrock (2001, 2004) suggested that puberty is the development of reproductive organs that enable an individual to be functionally capable for procreation. In terms of physical growth, adolescence commences with pre-pubertal growth spurt, and ends with the attainment of full physical maturity (Cobb, 2001; Hamachek, 1978; Santrock, 2001, 2002, 2004; Steinberg, 2002). Hormonal activity at adolescence stimulates somatic growth, and development of testes in boys and the ovaries in girls (Hamachek, 1978; Santrock, 2001, 2004; Steinberg, 2002). The physical changes include development of pubic hair, beard, and increase in size of testes, penis and scrotum. Furthermore, there is deepening of voice, spermache (onset of nocturnal emissions of semen during sleep), and growth in weight and height. Among girls there is menarche (onset of menstrual cycles), the budding of breast, the rounding of the hips, appearance of pubic hair, and increase in sizes of uterus, vagina, labia and clitoris (Santrock, 2001, 2004; Steinberg, 2002).

These physical and physical changes are at the foundation of psychological changes at adolescence which include self-image development (Santrock, 2001, 2004; Steinberg, 2002)

2.4.2. Implications of Self-Image

This section reviews literature on the implications of adolescent self-image. The section looks at available literature on how self-image influences behaviour for both street children and non-street children. Researchers are agreed that the adolescent stage is, also, marked by the development in self-image (Erikson, 1968; Harter, 1990; McGee & Williams, 2000; Oosterwegel & Oppenheimer, 1993; Rosenberg, 1965; Scheier, Botvin, Griffin & Diaz, 2000). Self-image is an important construct in the social sciences in general, and psychology in particular, as demonstrated by the regularity with which self-image enhancement is identified as a major focus of concern in diverse settings (Branden, 1994; Epstein, 2001).

The importance of positive self-image transcends traditional disciplinary barriers, and is an important factor for both the development and adjustment of children (Harter, 1990). According to Baumeister et al. (2003), self-esteem or global self-image refers to how much value people place on themselves and is the evaluative component of self-knowledge. According to these authors, positive self-image points to a highly favourable global evaluation of the self while negative self-image reflects an unfavourable definition of the self. Self-image may mean a precise, justified, balanced appreciation of one's worth as a person and one's successes and competencies, but conversely it can also refer to an exaggerated, egotistical, grandiose, unwarranted sense of conceited superiority over others (Baumeister et al., 2003). Similarly, negative self-image can be either an accurate, well-founded understanding of one's shortcomings

as a person or a distorted, even pathological sense of insecurity and inferiority. Baumeister et al. (2003) interestingly note that self-image is a perception rather than reality and consider self-image as referring: “to a person’s belief about whether he or she is intelligent and attractive, for example, and it does not necessarily say anything about whether the person actually is intelligent and attractive” (p. 2).

Baumeister et al. (2003) noted that positive self-image is not only desirable in its own right, but also the fundamental psychological source from which all positive behaviours and outcomes are derived. In the same vein, it has been echoed elsewhere categorically that self-image has “profound consequences for every aspect of our existence” (Branden, 1994, p. 5). Furthermore, it has been argued that there is no “single psychological problem—from anxiety and depression, to fear of intimacy or of success, to spouse battery or child molestation—that is not traceable to the problem of low self-esteem” (Branden, 1994, p. 12). More still, Mecca, for example, is cited as saying that “virtually every social problem can be traced to people’s lack of self-love” (Epstein, 2001, p. 10). Albert Ellis, an eminent clinical psychologist is even convinced that negative self-image or low self-esteem “is the greatest sickness known to man or woman because it’s conditional” (as cited in Epstein, 2001, p. 72). However, Baumeister et al., contends that these concerns about self-esteem are a peculiar feature of Western individualist cultures as the search for high self-esteem is not a universal human motive, but a cultural or ideological artefact.

2.5. Theoretical Model of Self-Image

Having looked at the importance of self-image as found in literature, this section presents models on self-image that are relevant for this study. These models have been developed to describe the structure and nature of adolescent self-image. The researcher herein provides two main multi-dimensional models, which assume that self-image has many dimensions or facets and have been empirically proven elsewhere. Byrne (1996) argues that the notion that self-image is multi-dimensional has empirical support.

2.5.1. Multi-Dimensional Models on Self-Image

The multidimensional model that has since received wide attention is that proposed by Shavelson, Hubner and Stanton (1976). Shavelson et al. analysed self-image in terms of the perceptions of an individual regarding self that are formed through one's experiences in the world. The self-image was organised into a multidimensional and hierarchical structure with global self-concept at the apex. Global self-image is subdivided into academic and non-academic self-image, with the non-academic aspect further broken down into social, physical, and emotional self-image. These aspects are subdivided again into more specific self-image at the lower sections of the hierarchy. Research has been undertaken to evaluate the model (Marsh, 1990; Marsh & Shavelson, 1985). The results from these studies confirmed the multifaceted and hierarchical structure model with an increasingly complex structure emerging among adults. Furthermore, the strength of the hierarchy has been found to diminish with age. Byrne (1996) reasoned that the model by Shavelson et al. enjoys the most extensive empirical validation than any other model of self-concept, and that many subsequent models are theoretically linked to it

in some way. Shavelson et al's model has also backgrounded the model that operates as the conceptual framework for the current study, which model was proposed by Oosterwegel and Oppenheimer (1993a, 1993b, 2002).

The model representing the conceptual framework for the present study was proposed by Oosterwegel and Oppenheimer (1993a, 1993b, 2002). These two scholars proposed that self-concept is a complex, dynamic and multidimensional system known as "the self-system" which develops at adolescence. According to Oosterwegel and Oppenheimer (1993a, 2002), the self-image or self-system comprises of dimensions or self-representations that are context-related and are determined by the different environments in which the individual function. The key environmental determinants for such self-concept include parental or familial relationships, peer or social relationships, academic achievements, current and psychological functioning (Oosterwegel & Oppenheimer, 2002). According to these two authors, the discrepancies among people's actual, ideal and feared selves also determine one's actual self-concept (Oosterwegel & Oppenheimer, 2002). The resulting self-image is one of multilayered understanding, which developmentally is thought to organise itself by a bottom-up process from a collection of separate, unrelated self-representations to a hierarchically integrated self-system (Oosterwegel & Oppenheimer, 2002). Hence, self-image is hierarchical. According to these two authors, the dynamic aspect of the self-system is based on the assumption that self-understanding is primarily a social construction from birth onward till adolescence in interaction with significant others who include the mother, parents, and peers.

According to Oosterwegel and Oppenheimer (1993a, 2002), self-image develops as a function of three sources of information. These are immediate knowledge about the self or self-appraisals, the information conveyed by significant others about the self, and the way one thinks that others who are important to him or her and whose opinion he or she trusts trust regards him or her. The two authors observed that negative self-image relate to negative affects, depression, neuroticism, and psychosomatic complaints. Oosterwegel and Oppenheimer (2002) refined their model on self-image from a research they conducted with a sample of 160 Dutch adolescent and preadolescent children. The findings further confirmed that self-image is multidimensional, affects one's behaviour and that it is affected by one's environment.

2.6. Street Children and Adolescent Self-Image

A few studies have focused on the relationship between childhood and self-image and that is the focus of the current study. In a group study of several groups of non-street adolescents versus street children aged between 12 and 18 years by Miner (1991a), unemployed non-street adolescents did not differ from the street group on depression, self-image or hopelessness. In the Miner's study, the only significant relationship to self-image for the street children was a poor relationship with their mother.

In Zimbabwe, it has been argued that street children tend to suffer from low-self esteem, indifference and fatalism (Dube, 1997b). The street children have also found to have attitudes that are likely to mitigate against behaviours that could reduce the exposure to HIV and AIDS infection (Dube, 1997a, 1997b; Richter, 1998b). Research also show that these street children perceive themselves as both physically and psychologically invulnerable (Richter, 1998b). Low

self-esteem, depression and self-hatred have also been found to be characteristics of street children in other settings (Jones, Herrera & Benítez, 2007; Kidd, 2007). In South Africa, Tudorić-Ghemo (2005) observed that the adolescent street children experience abuse and degradation which impact on their development of positive sense of self-worth and social identity. As a result, adolescent street children in Tudorić-Ghemo's sample were found to have failed to experience recognition and encouragement, meaning that their sense of self-determination, self-reliance and autonomy were compromised. Tudorić-Ghemo further argued that a deprived home environment does not allow much space for growth and initiative either because any self-determining behaviour and freedom becomes suppressed. This further reinforces a low self-esteem, feelings of despondency and a general disinterest in life (Tudorić-Ghemo, 2005).

Vostanis et al. (1998) concluded that, generally low self-esteem and self-harming behaviours (scratching, head banging, and punching) were common among street children. Le Roux and Smith (1998c) found it not surprising that low self-esteem has been identified in many studies on street youths. Miner (1991a), nonetheless, found no difference in self-image between street and non-street adolescents. Narayan et al. (1999) found that many street children have low self-esteem. However, Feeny (2005) and Veale et al. (1997) suggested that rather than being passive victims of abandonment, street children demonstrate strong feelings of self-efficacy in performing tasks required to control their life and environment in positive ways. No studies on street children and self-image in Zimbabwe have been found. The current study attempted to fill this gap in literature.

2.7. Chapter Summary

The foregoing chapter has analysed the available literature on street children and adolescent self-image. It has been highlighted that the phenomenon of street childhood develops in transactional relationship between individual functioning and the environment. This view explains street childhood in terms of environmental factors. In this chapter, it has also been shown that the street children's environment is impoverished and risky for child development. This has a likelihood of impacting negatively on development of self-image. In this chapter, it has also been argued that self-image is a strong factor for psychological functioning and behaviour. It has been highlighted that self-image is a multi-dimensional construct that develops in interaction with the environment. It is therefore argued that street children are prone to developing negative self-image and the attendant risky behaviours.

Chapter Three

Methodology

3.1. Introduction

This chapter presents a description of the research methodology employed in this study. Indeed, this chapter situates the study in a particular methodological approach and provides a rationale for that approach. It discusses the research design (inclusive of its evaluation and allied risks), data collection, sampling procedure, participants and data analysis. The previous chapter discussed how researchers elsewhere have described street children and self-image, hence, giving a backdrop to this study. This chapter shows how the current research was implemented to explore the relationship between adolescent self-image and street childhood. This study employed psychoethnography to collect data on street children. This design is important as it affords collection of valid, deep, rich and reliable data. The researcher will argue in this chapter that researching street children demands an appropriate methodology like psychoethnography.

3.2. Design

The present study, being qualitative and explorative, utilised the psychoethnographic approach. This is a research design involving entry into the participants' setting for a sustained period to collect psychological data in the contexts within which the participants live. Fieldwork in this study took 10 months. In psychoethnographic research, the researcher completes the study through observing, listening and asking questions. The approach was pioneered by Aptekar (1988) in a study on Columbian street children. Aptekar, a cross-cultural researcher with interests on street children in developing countries, measured emotional and intellectual functioning of street children using participant observations and psychological tests.

Psychoethnography combines methods rooted in both psychology and anthropology. Data collection methods for this study included key informant interviews, focus group discussions, in-depth interviews, participant and non-participant observations. Data collection and analysis were entwined to expose areas that may have been missed, and shape ensuing data collection.

Psychoethnographic research design is appropriate for the current research as it generated rich, comprehensive, deep, multi-faceted and holistic data (Meter, 1990; Sterk-Elifson, 1995). Additionally, it was ideal for hidden or hard-to-reach populations like street children. Hidden or hard-to-reach populations are the disadvantaged and disenfranchised populations often omitted from national studies as they have no fixed address, and are less likely to agree to an interview (Adler, 1990). This approach was appropriate for researching street children, a category of hidden populations, because it affords data collection by watching participants in their own settings, and interacting with them in their own language (Kirk & Miller, 1986). This approach dovetails with Ennew's (2003) call for filling the dearth on African street children literature with new, appropriate, sympathetic, and innovative methodological approaches that give detailed and nuanced understanding of street children functioning. Since it is based on ethnographic methods, psychoethnography is proper for this research as it possesses deep focus and provides thick description (Kirk & Miller, 1986).

Psychoethnographic research design is proper for topics about which little is known, chiefly, because ethnography is by its nature fundamental and exploratory, preparing the way for more rigorous studies that strive for precision and quantification (Adler, 1990). Thick description implies that all possible meanings of a concept are obtained, including meanings conferred by

members of the culture itself. In Zimbabwe, there is dearth in street children literature on their psychological functioning. Research suggests that street children tend to manipulate outsiders giving untrue data (Lucchini, 1996b). These challenges are offset by use of ethnographic methods since participants' responses to questions are augmented by observing natural behaviour (Dube, 1999).

3.3. Participants

Thirty two people participated in the current study as shown in Table 2 on page 62. This figure appears not typical in a statistical sense. However, such a sample size in a qualitative study provides useful illustrative accounts of the street children (Adler, 1990). In a psychoethnographic design, a smaller sample is ideal since what is needed is deep data especially from fewer participants and not statistical norms on a construct (Adler, 1990). Adolescent street children numbering 20 participated in Focus Group Discussions. The participants for Focus Group Discussions consisted of 10 "of the street" or street-living adolescent and 10 "on the street" or street-working adolescent children. There were five female street-living children and five male street-living participants for the focus group discussions. Similarly, there were five female street-working and five male street-working participants for the focus group discussions. Another six adolescent street children participated in In-Depth Interviews. Of these six in-depth interviewees, three were street-living while the other three were street-working children. There were two male street-working and a single female street-working participant in the in-depth interviews. Similarly, there was a single male street-living and two female street-living participants in the in-depth interviews. Thus, 26 adolescent street children participated in this study. The researcher chose both street-working and street-living children as participants because researchers have

argued that these two street children categories are co-existent and should be studied together to show the effect of lack of parental guidance among street-living children (Bourdillon, 2000; Muchini, 1994, 2001; Richter, 1988b; UNICEF, 2003). This researcher selected the street-working children to determine whether they had differences with street-living children in terms of their self-image. For this reason, Muchini (1994) sampled both street-living and street-working children during his study on morality among street children in Harare.

Six key informant interviewees were interviewed in this study. The key informants were officials at Streets Ahead the drop-in centre, the Department of Social Welfare, the ZRP and two former street children (one former street-living while the other was a former street-working child). Initially, there were 42 participants altogether, and of these, 13 dropped out of the study. The reasons for this dropping out ranged from death, migration to other towns like Bulawayo, being rounded up by the police, reunification with the family of origin and going to school. Of the 13 who dropped out, three were replaced and were in-depth interviewees. The other 10 were not replaced and were initially pencilled to participate in focus group discussions. The researcher felt that the remaining final number of 32 participants was sufficient. The street children participants were drawn from their hideouts, streets and the drop-in centre in Harare. All participants in the study were drawn from Harare. Table 2 below shows the distribution of research participants for the current research.

Table 2. Participants for Current Research

	Number of Participants			Total
Data Collection Method	Non-Street Children (Key Informant Interviewees)	Street-Living Children	Street-Working Children	

Focus Group Discussions	0	10	10	20
In-Depth Interviews	0	3	3	6
Key Informant Interviews	6	0	0	6
Total	6	13	13	32

3.4. Sampling Procedure

Purposive sampling was used to recruit participants for focus group discussions, key informant interviews, participant observation and non-participant observation. It is reiterated that adolescence has been consensually defined as the developmental transition from childhood to adulthood, marked by rapid changes in physiology, psychosocial functioning, emotional and cognitive development (Cobb, 2001; Rice, 1996; Santrock, 2002, 2004; Steinberg, 2002). Again, adolescence has been agreed to span from 12 to 18 years (Cobb, 2001; Rice, 1996; Steinberg, 2002). In the current study, adolescents were children aged between 12 and 18 years. Patton (1990) asserts that purposive sampling involves using one's common sense and judgment in choosing the right habitations, and meeting the right number of right people for the purpose of the study. In view of that, a purposive sample is one which is selected by the researcher subjectively. The researcher obtained a sample that appeared to him to be representative or typical of the study population. The strength of purposive sampling lied in selecting information-rich cases for analysis of the research questions. The sampling procedure involved stratified purposeful sampling as the researcher categorised the participants into on-the-street and of-the-street adolescent children.

Snowball sampling, a strategy related to purposive sampling was used for recruiting participants for in-depth interviews. This involved the researcher being helped by key informants and other street children in identifying relevant and informant-rich participants (Patton, 1990). In the current research, adolescents have been operationalised to be between 12 and 18 years. For all the adolescent street children participants, eligibility was restricted to children who were between 12 and 18 years of age working and living in the streets. Children were approached on the streets or drop-in centre, introduced to the study. The in-depth interviews took place in a setting that was part of the children's own natural street setting where they worked and lived.

3.5. Instruments

In the current study, the researcher designed and used the key informant guide, the focus group discussion guide, the in-depth interview guide and the observation guide as research instruments. The key informant guide, the focus group discussion guide and the in-depth interview guide were translated into Shona language for use among the participants who were more comfortable with Shona language. In translating the guides, the researcher used back translation as was suggested by Adler (1990). Back translation involved translating the guides that had already been translated into Shona language back to the original English language to ensure that the Shona versions were very close in meaning to the English versions. The research instruments in the present study are presented in the following sections.

3.5.1. Key Informant Interview Guide

The key informant interview guide was used to tap information on key informant interviews. The content and focus of this guide was designed using conclusions from ethnographic mapping,

research objectives, participant and non-participant observations. The guide had open-ended questions which solicited for data on the experiences and perceptions the key informant had on the self-image of adolescent street children. The key informant interviews also had questions on demographic data on the key informants. This guide is presented in Appendix A. The Shona version of the key informant interview guide used in the present study is presented in Appendix B.

3.5.2. In-Depth Interview Guide

The in-depth interview guide was used to tap information on in-depth interviews. The content and focus of this guide was designed using conclusions from key informant interviews, focus group discussions, research objectives, participant and non-participant observations. This guide comprised open-ended questions on adolescent street children's self-image, and questions on demographic data on the in-depth interview participants. This guide which was also used as the focus group guide is presented in Appendix C. The Shona version of the in-depth interview guide which was also used as the focus group guide in the present study is presented in Appendix D.

3.5.3. Focus Group Guide

The focus group guide was used to tap information on focus group discussions. The content and focus of this guide was designed using conclusions from key informant interviews, research objectives, participant and non-participant observations. This guide comprised open-ended questions on adolescent street children, and questions on demographic data on the focus group participants. This guide which was also used as the in-depth interview guide is presented in Appendix C. The Shona version of the focus group guide which was also used as the in-depth interview guide in the present study is presented in Appendix D.

3.5.4. Observation Guide

The Observation guide was used to tap information on participant and non-participant observation. The content and focus of this guide was designed using conclusions from ethnographic mapping, key informant interviews and the research objectives. The observation guide shown in appendix E comprised open-ended questions on behaviour, settings and events that determine indicators, nature and effects of self-image on adolescent street children.

3.6. Data Collection

The researcher used Key Informant Interviews (KIIs), Focus Group Discussions (FGDs), Participant Observations (POs), Non-Participant Observations (NPOs) and In-Depth Interviews (IDIs) as data collection methods. These methods are detailed in the following sections.

3.6.1. Key Informant Interviews

In this study, key informant interviews (KIIs) were employed in data collection. Key informants are experts or people with experience on the population or construct under study (Sterk-Elifson, 1995). Key informant interviews were used to generate key informants' perceptions on, and their experience with; nature, indicators and effects of adolescent street children self-image. The results from key informant interviews were used to authenticate the data from other data collection methods on all the three research objectives. Results from the key informant interviews were, as well, used to inform content of FGDs, IDIs, POs and NPOs. These key informants were, furthermore, used as neighbourhood guides who showed the researcher the street children hideouts, gaining access to the street population segments (such as, street

children's hierarchies), and explaining peculiarities of events and sub-cultures to the researcher (Sterk-Elifson, 1995). Using key informants added to credibility and legitimacy of the researcher on the streets. Key informants, more still, played a critical role in the recruitment of other research participants especially when a particular sort of person (Sterk-Elifson, 1995), like a married adolescent street child, was sought for by the researcher. The questions in the key informant interviews were taken from the key informant interview guide.

3.6.2. Focus Group Discussions

The researcher conducted focus group discussions (FGDs) with the street children. Focus group discussions are interactive events guided by a researcher who stimulates participation, guides discussion, and probes for further responses to meet research objectives on a focused research area (Sterk-Elifson, 1995). Focus groups discussions were used to explore indicators, nature and effects of adolescent street children self-image. The results from focus group discussions were used to triangulate and authenticate the data from other data collection methods on all the three research objectives. The discussions were, also, used to validate results from, and inform content, focus and vocabulary of in-depth interviews and participant observation.

The focus group discussions were, as well, used to solicit recommendations on rehabilitating street children programmatically. These focus group discussions provided insights into the meaning of the behaviours and events in the lives of street children (Sterk-Elifson, 1995). The sharing of personal experiences, feelings, and opinions by members of the group interacting together provides for a clearer understanding of the range of these experiences, feelings, and perceptions of these adolescent street children (Sterk-Elifson, 1995). The focus group

discussions were useful at all stages of data analysis to provide explanation, depth, and detail and to serve as another resource for cross-validation of data collected by the other data collection methods. Focus group data include information on the environment, perceptions, beliefs, opinions, linguistic preferences, and interpretations of behaviours or events central to the research questions (Sterk-Elifson, 1995).

Additionally, focus group discussions data helped to provide insights which would be missed if asked on individual basis (Sterk-Elifson, 1995). When in groups street children give relatively more accurate collective information (Sterk-Elifson, 1995). The questions used in focus group discussions were extracted from a focus group guide.

3.6.3. In-Depth Interviews

In-depth interviews (IDIs) were conducted with adolescent street children, all of whom dwelt or worked in the areas targeted in the ethnographic mapping effort. In-depth interviews were used to investigate indicators, nature and effects of adolescent street children self-image. The results from in-depth interviews were used to triangulate and authenticate the data from other data collection methods on all the three research objectives. The in-depth interviews informed individual life patterns and how individual life trajectories were part of larger social processes, adolescent psychological development and behavioural patterns (Sterk-Elifson, 1995). The IDIs were also meant to inform the research on the street children's self-image. As the researcher became more familiar with the street environment and with the street children population, he developed better rapport with the participants, and began to ask more in-depth questions. In-depth interviews were conducted in which, over a period of several sessions, children were

invited to tell the researcher their life stories in their own terms, in their own way, and with an emphasis on what they felt was important for the researcher to understand about them relative to their self-image (Sterk-Elifson, 1995).

An interview guide, based upon prior ethnographic research done among street children was prepared for use in these interviews. If a street child neglected to discuss a particular issue, the researcher prompted such a discussion. In-depth interviews helped to explain some of the apparent differences in the street children population that had been tentatively formulated on the basis of other data collection methods. Consequently, and as echoed by Sterk-Elifson (1995), in-depth interviews data allowed the researcher to put the information from other data collection methods in a temporal perspective, and to acquire an understanding of how children function psychologically.

3.6.4. Participant and Non-Participant Observations

Participant and Non-participant Observations (POs & NPOs), imperative methods in ethnographic research, were employed in data collection for the current study. Adler and Adler (1994, p. 99) suggested that in conducting participant observations, ethnographers attempt to gain a “quasi-membership role” that permits them “to participate in routine practices.” One of the initial tasks for the researcher was that of mapping the ecology of the adolescent street children, thus places where street children spend most of their time. Participant and Non-Participant Observations were carried out on observable behaviours to determine indicators, nature and effects of adolescent street children self-image. Pos and NPOs were used to

triangulate and authenticate data obtained from Focus Group Discussions, Key Informant Interviews and In-Depth Interviews on all the three research objectives.

The researcher began participant observations at the drop-in centre, and moved into other areas as he learned more about the movements and activities of the street children. The observation process was a dialectic process cycling back and forth between assuming the role of a participant, and the role of an observer. That the researcher had to engage in legal activities while he carried on participant observation should not be overemphasised (Muzvidziwa, 1997, 2004; Ruparanganda 2008). Magaisa who did his research on commercial sex workers in Harare in 1999 reported avoiding having sex with his participants as part of participant observations but drank beer and danced with them (Ruparanganda, 2008). Muzvidziwa (1997) vended together with his vending participants. In this study, the researcher participated in vending, craftwork, parking cars, playing soccer, sharing stories and spending time in the hide outs together with the participants. Data from observations and conversations were recorded in field notes for use during data analysis. The researcher developed rapport through creating and maintaining cordial relationships with research participants to be able to engage in participant observation (Adler & Adler, 1994). POs and NPOs were based on the observation guide.

3.7. Fieldwork

The fieldwork spanned from ethnographic mapping to exit in a well-planned, though, interesting and at times scary process. The steps are discussed in the following sections. These steps are illustrated in Table 3 on page 72. The whole study took 10 months. This section describes the fieldwork process and the ethnographic field station.

3.7.1. The Fieldwork Process

The fieldwork process involved ten interwoven and overlapping steps that lasted 10 months as the researcher collected data in the participants' natural setting. The steps are presented in the following sections.

3.7.1.1 Ethnographic Mapping

The fieldwork began with ethnographic mapping. The main goals of the ethnographic mapping were to identify geographical areas where street children assembled, worked and slept, to explore the dominant street children patterns, and to identify all street children categories in each selected geographic area (Sterk-Elifson, 1995). This ethnographic mapping took a month. Ethnographic mapping involved recording the physical as well as the social infrastructure by geographic area; mapping data were collected through participant observation and informal conversations (Sterk-Elifson, 1995). The ethnographic mapping process involved selecting geographical areas appropriate for the study.

Ethnographic mapping involved identifying the areas where street children worked and lived. The geographical areas were compiled based on indicators such as data from the social welfare and drop-in centres. The ethnographic mapping provided baseline data for the identification of a range of neighbourhoods from which categories of street children could be recruited, while at the same time permitting flexibility and openness to inclusion of new neighbourhoods (Sterk-Elifson, 1995). Non-participant observation was major component of ethnographic mapping. As indicated in Table 3 on page 72, this ethnographic mapping took 3 weeks and started on the 1st week. Table 3 shows the fieldwork process with its constituent eight stages. The stages

overlapped into each other while some took almost the whole fieldwork, for example the participant and non-participant observations.

Table 3. The Fieldwork Process

Stage	Starting Time	Duration
Ethnographic Mapping	1 st week	3 weeks
Entry	2 nd week	4 weeks
Building trust	2 nd week	4 months
Participant & Non-Participant Observation	2 nd week	8 months
Key Informant Interviews	3 rd week	7 months
Focus Group Discussions	4 th month	3 months
In-Depth Interviews	5 th month	3 months
Exit	8 th month	4 weeks

3.7.1.2 Entry

The researcher was particularly aware that entry as a process was very significant and needed to be strategically managed. Hammersley and Atkinson (1995), as does Punch (2002), argue that the formation of friendly and trusting relationships, the need to fully engage with a group under study, and the recognition of the particular difficulties involved in negotiating with 'gatekeepers,' are very crucial in negotiating access. Indeed, Hammersley and Atkinson comment that the problem of obtaining access to the participants' settings looms large in ethnography. One has to reckon the difficulties of negotiating access, with famous anthropologists such as Boas and Malinowski having failed to get access into their would-be participants' habitats during their

careers (Morrill, 1999). Punch suggests that the researcher should establish trust, rapport, and authentic communication patterns with participants particularly at the onset of the research.

Hammersley and Atkinson (1995) highlighted that gaining entry does not only depend on theoretical understanding but on interpersonal strategies to initiate and sustain relationships and the discovery of obstacles to access and also the effective means of overcoming these obstacles. These two scholars also commented extensively on practical implications of getting access to the field and gaining entry through ‘hanging about’, engaging with sponsors, dealing with gatekeepers and employing one’s own social ties. These authors caution that negotiating access has ups and downs which need to be managed well. Sponsors are the people in the research setting trusted by the research participants who can introduce the researcher to the research participants (Hammersley & Atkinson, 1995). In the current research, the researcher chose certain *Monyas* (muscular crew leaders) and other senior street children deemed popular, likeable and influential to the research participants as sponsors. Muzvidziwa (1997, 2004), and Rugaranganda (2008) highlighted that it is not very easy to gain entry into the settings of marginalised street-involved groups who are harassed by state officials and are suspicious of strangers.

Magaisa (1999, as cited in Rugaranganda, 2008) wanted to engage commercial sex workers as participants and found them disinterested when he appeared to be a researcher but got interested when he pretended to be a potential client. These participants were however reportedly disgusted when Magaisa started to ask the ‘silly’ questions (Rugaranganda, 2008). In the current research, the researcher also applied multiple entry, involving entry into the research setting through

various points at the same time (Hammersley & Atkinson, 1995). For instance, the researcher entered into the settings of both street-living and street-working children at the same time. This involved entering into the settings of street-working children simultaneously as the researcher entered into the settings of street-living children. In the settings of street-living children, the researcher also entered simultaneously through the streets and through Streets Ahead. Streets Ahead is a non-governmental welfare organisation that helps street children in providing medical, bathing, food, counselling and family reunification services through its drop-in centre in Harare.

With regards to Streets Ahead, Ruparanganda (2008) observed that some street children complained that Streets Ahead officials allegedly exploited them by taking videos with which they solicited for funds from donors and used the proceeds to buy posh cars while they wallowed in poverty. These street children were reported to be angry that they were prohibited from entry into Streets Ahead premises as they were over 18 years (Ruparanganda, 2008). In the current study, Streets Ahead was found to be strategic since the street children in the target population of 12 to 18 years were allowed at Streets Ahead whereas Ruparanganda's target population were above 18 years and not allowed at Streets Ahead possibly an explanation for their anger. Street youths above 18 years were barred from Streets Ahead because they were usually violent and uncontrollable as they abused younger and female street children even at the Drop-in centre. More still, the researcher was able to interact with street children at Streets Ahead as they engaged in informal lessons, sporting activities, basket-making and church activities. The Streets Ahead officials were handy in corroborating the information the researcher got from street

children on their family circumstances, criminal behaviours, sexual behaviours, ages, educational attainment and length of stay in the streets.

Streets Ahead also afforded the researcher the opportunity to participate in family reunification, medical treatment and feeding of the street children. The researcher on many occasions helped the street children in communicating with Cuban doctors who freely offered medical treatment to the street children. The male street children freely showed the researcher their swollen genitals and wounds as they sought treatment. The researcher is satisfied that using Streets Ahead as an entry point allowed him to obtain valid and reliable data, he could not have collected had he avoided using Streets Ahead. Muchini (1994) also used Streets Ahead as he did his research on street children's morality, which he argued, allowed him to get valid and reliable data. Beazley (2003) conducted a qualitative study on the development of identity by street children in the streets for 18 months in Indonesia and gained entry through a non-governmental organisation, where he worked as a volunteer to establish an entry point for rapport building with her participants.

In the current research, the researcher was also able to clarify his position as a University of Zimbabwe student on a research project that the street children were able to relate with him as a researcher and not as a Streets Ahead official. The street children were even free to bring their complaints with Streets Ahead officials to the researcher's attention, which the researcher amicably brought to the attention of concerned officials for rectification. The fact that the street children brought their complaints to the researcher showed that they were able to distinguish the

researcher from Streets Ahead officials. As indicated in Table 3 on page 72, entry took four weeks and started on the 2nd week.

3.7.1.3. Developing Trust

For optimal data collection, the researcher is impelled to negotiate ways of building trust with the research participants (Muzvidziwa, 1997, 2004; Rugaranganda, 2008; Sterk-Elifson, 1995). Muzvidziwa (2004), and as does Rugaranganda (2008), comments that failure to be morally upright and to be principled can ruin the whole research process. Building trust or obtaining rapport was done in two ways. The first method involved working at Streets Ahead as a volunteer where he helped in helping them access medication, conducting educational and sport lessons, outreach activities in which the researcher encouraged street children to come to Streets Ahead and supervising cooking and dining activities. This strategy was used by Muchini (1994) when he researched moral functioning of street children. The second way involved interacting with street children in their natural habitats like hide outs, vending stalls, begging areas and bases. These interactions made the street children realise that the researcher was a harmless friend with whom they could share their concerns and sometimes disputes.

It need be underscored that building trust with street children was slow, cyclical and difficult. In the absence of a formal structure separating members from outsiders, each individual must form his or her own judgment about whether new persons can be admitted into their confidence (Sterk-Elifson, 1995). The key informants and some senior or popular street children helped by providing introductions and helped as sponsors (Hammersley & Atkinson, 1995). The researcher met people at different times, and was constantly at different levels in his developing

relationships with them. The researcher was, as a result, trusted more by some street children than by others, in part because of their greater familiarity with him. However, knowing the researcher or even liking the researcher did not automatically guarantee that trust was extended to him (Hammersley & Atkinson, 1995).

At the end of it, gaining trust was not a simple feat in the street. It was not a one-time phenomenon, but an iterative developmental process. The researcher's experiences showed that it is not an unswerving process either, for it could dwindle, be withdrawn, reinstated to varying degrees, and questioned at any point (Hammersley & Atkinson, 1995; Sterk-Elifson, 1995). Waxing and waning of trust by street children was influenced by the psychological unpredictability induced by using psychopharmacological substances like glue. The researcher; as a result, lived through a series of ups and downs with people he was trying to cultivate trust as research informants. Despite the occasional hiccups, the researcher generally built sufficient trust to enable him to amass deep, detailed, useful and interesting data. As indicated in Table 3 on page 72, building trust took approximately four months and started on the 2nd week. Building trust was however endeavoured for the whole period of fieldwork though the researcher was confident by the 4th week that he had built enough trust from the participants to engage in data collection.

3.7.1.4. Key Informant Interviews

Key informant interviews were conducted on key informants to obtain their experience with, and perceptions on adolescent street children self-image. The researcher introduced himself and told the key informants that he wanted to obtain information on the lives of the street children. The

key informant interviews had to be done many times in the first place to get information on the whereabouts of the participants and general conduct needed for optimal interaction with the participants (Sterk-Elifson, 1995). Latter, the key informant interviews were used to collect the key informants' experiences and understanding of adolescent street children self-image. These key informant interviews were repeated on each interviewee till the researcher deemed the data had reached saturation. Conclusions from key informant interviews were used in determining content and focus of other data collection methods namely focus group discussions, in-depth interviews, participant and non-participant observations, and designing instruments used in these data collection methods. Though, key informant interviews were done in the first stages of the research, they were redone at the end of the study to clarify some sticking issues like crosschecking the street children's self-reports on their criminal, marital and familial history. As indicated in Table 3 on page 72, these key informant interviews took seven months and started on the 3rd week.

3.7.1.5. Participant and Non-participant Observations

Participant and non-participant observations were on-going processes on the settings, behaviours and events that determined the indicators, nature and effects of adolescent self-image. Results from participant and non-participant observations informed the content and focus of key informant interviews, focus group discussions and in-depth interviews. Participant and non-participant observations were done throughout the study. As indicated in Table 3 on page 72, these participant and non-participant observations took eight months and started on the 2nd week.

3.7.1.6. Focus Group Discussions

Focus group discussions were conducted with adolescent street children to determine indicators, nature and effects of their self-image. The participants were told that the researcher was a student at the University of Zimbabwe who wanted to learn about the lives of street children. Focus group discussions' focus and content were determined by the conclusions from key informant interviews, participant and non-participant observations. Consequently, conclusions from the focus group discussions were used to determine content and focus of subsequent in-depth interviews, participant and non-participant observations. The focus group discussions involving the same focus group discussants or participants were repeated till the researcher deemed the data was sufficient. As illustrated in Table 3 on page 72, these focus group discussions took three months and started on the 4th month.

3.7.1.7. In-Depth Interviews

In-depth interviews were done on adolescent street children to determine the indicators, nature and effects of adolescent street children. The researcher told the participants that he was a student at the University of Zimbabwe interested in learning about the lives of street children. The focus and content of in-depth interviews were determined by the conclusions from key informant interviews and focus group discussions, participant and non-participant observations. Conclusions from these in-depth interviews were used in determining focus and content of subsequent participant and non-participant observations. The in-depth interviews were repeated until the researcher was satisfied that all the information needed was gathered was sufficient when all the questions about a particular issue or a particular participant were answered. Table 3 on page 72, these in-depth interviews took three months and started on the 5th month.

3.7.1.8. Exit

Exit was the negotiated process of leaving the field after data saturation (Sterk-Elifson, 1995). The researcher did some debriefing to all participants in the current study. This allowed the researcher to embark on final data analysis. The exit took about a month. It must be stressed that the above stages were not followed strictly, as there were overlaps, and, as some data analyses were done in-between, and some stages like focus group discussions were repeated even after in-depth interviews to clarify some sticking points. As indicated in Table 3 on page 72, this exit took four weeks and started on the eighth month.

3.7.2. Ethnographic Field Station

Functionally, an ethnographic field station is a research outpost in a community of interests to the researcher (Goldstein, Spunny, Miller & Belluci, 1990). According to Goldstein et al. (1990), the ethnographic field station serves as a base of operations for the researcher, providing an environment in which research participants and the researcher may interact over an extended period. In this study, the ethnographic field station was the Streets Ahead drop-in centre. This drop-in-centre was the entry point into the research field. The researcher worked as a volunteer at the centre, and developed trust with research participants at the centre. At the drop-in centre, the researcher participated in sporting sessions, informal lessons, skills training, medical consultations, counselling and family reunification. The researcher then moved into the street to interact with street children who did not frequent the drop-in centre. The usual group which did not frequent the drop-in centre were the on-the-street children and these were seen in the street where they worked as vending and begging children.

3.8. Data Analysis

Thematic content analysis was used to analyse data from KIIS, FGDs, IDIs PO and NPO. It has to be reiterated that the data analysis was an ongoing process, done both during and after the data collection. The current study being psychoethnographic employed thematic content analysis in data analysis. Thematic content analysis is definable as a method for identifying, analysing and reporting patterns (themes) within the data (Braun & Clarke, 2006). More over, thematic content analysis interprets various aspects of the research topic (Boyatzis, 1998). In contrast to interpretive phenomenological analysis or grounded theory, thematic content analysis is not wedded to any pre-existing theoretical framework, and it can be used within different theoretical frameworks, and can be used to do different things within them (Braun & Clarke, 2006).

The thematic content analysis can be a method that works both to reflect reality and to unpack or unravel the surface of reality (Braun & Clarke, 2006). This data analysis method is particularly a useful method when investigating an under-researched area, or when working with participants whose views on the topic are not known (Braun & Clarke, 2006). Thematic content analysis is adequate in the current study because arguably there is dearth in literature on psychological functioning of street children in Zimbabwe. More so, thematic content analysis is a relatively easy and quick method to learn, and do. Additionally, results from thematic content analysis are generally simple to make sense of and can usefully summarise key features of a large body of data and offer a thick description of the data set (Braun & Clarke, 2006). Finally, it affords social and psychological interpretations of data (Braun & Clarke, 2006). The following are the steps

followed in thematic content analysis for the data generated from this research as recommended by Braun and Clarke (2006).

3.8.1. Procedure for Thematic Content Analysis

3.8.1.1. Phase 1: Acquainting Oneself with the Data

Initially the researcher obtained familiarity with the data by engrossing himself in the data till he was acquainted with the depth and breadth as recommended by Braun and Clarke (2006). The researcher familiarised himself with the data through continual reading of the data. The researcher actively read the data by searching for nuances and patterns. Notes were taken and recorded in a book from which ideas for coding were taken. In this stage, the researcher, also developed and defined codes from the data as was suggested by Braun and Clarke.

3.8.1.2. Phase 2: Spawning Initial Codes

The researcher as suggested by Braun and Clarke (2006), compiled a preliminary catalogue of codes after having read and familiarised himself with the data. According to these authors, and as was done in the current research, spawning initial codes is done using codes elicited in the first phase. The codes identified a feature of the data that appeared interesting to the researcher (Braun & Clarke, 2006). The codes referred to the most central piece, or element, of the raw data that can be assessed in a meaningful way regarding the phenomenon (Boyatzis, 1998). The coding process was accomplished manually. This involved working methodically through the whole data set, giving complete and equal attention to each data item, and identifying interesting facets in the data items that could structure the basis of recurring patterns (themes) across the data set (Braun & Clarke, 2006). The researcher coded the data by writing notes on the texts. The

researcher matched each code with data extracts that demonstrated that code. All the data extracts were coded, and then pooled together within each code as indicated by Braun and Clark. This involved copying extracts of data from individual transcripts.

3.8.1.3. Phase 3: Exploring for Themes

The third phase involved cataloguing the codes into themes (Braun & Clarke, 2006). This commenced when all data had been firstly coded and collated. This gave a long index of the different codes. This phase re-centred the analysis at the broader level of themes, rather than codes, and involved arranging the diverse codes into possible themes, and collating all the related coded data extracts within the given themes as suggested by Braun & Clarke. Indeed, the researcher explored the codes and considered how diverse codes could be coalesced to form principal themes and sub-themes (Braun & Clarke, 2006). Some of the preliminary codes were used to form central themes while others were used to form sub-themes. This phase was finished with a collation of core themes, and sub-themes, and all extracts of data that had been coded in relation to them. At this point, the researcher started to have a sense of the importance of individual themes.

3.8.1.4. Phase 4: Re-examining the Themes

The fourth phase began when the researcher had compiled a set of main themes, and involved the fine-tuning of those themes (Braun & Clarke, 2006). During this phase, it became clear that some of the themes were too minor hence were crystallised into one main theme. The researcher employed Patton's (1990) catalogue for dual criteria judging categories namely, internal

homogeneity and external heterogeneity. Data within themes was made to gel together tellingly, while there should be patent and specific dissimilarity between themes.

This phase involved two levels of reviewing and refining themes (Braun & Clarke, 2006; Patton, 1990). The first level involved reviewing at the level of the coded data extracts. This meant reading all the collated extracts for each theme, and deeming whether they formed a sound pattern. When the researcher ascertained that the themes appeared to form a coherent pattern, he moved to the second level of this phase. When themes did not fit, the researcher judged whether the theme itself was contentious, or whether some of the data extracts within it simply did not fit in the case. According to Braun and Clarke, and as suggested also by Patton, the researcher re-worked the theme, creating a new theme or found a home for those extracts that did not fit in an already-existing theme.

The second level involved an analogous procedure, but centred on the whole data set (Paton, 1990). At this stage, the researcher considered the validity of individual themes relative to the data set, and whether the aspirant thematic map fittingly reflected the meanings evident in the whole data set. However, in this phase the researcher re-read the complete data set for two purposes (Braun & Clarke, 2006; Patton, 1990). The first was to ascertain whether the themes gelled with the data set. The second was to code any extra data within themes that had been omitted in prior coding stages. The re-coding was imperative since coding is an ongoing process.

3.8.1.5. Phase 5: Delineating and Designating Themes

The fifth phase began when the researcher had a fitting thematic map of his data (Braun & Clarke, 2006). The researcher defined and further refined the themes. Defining and refining themes involved identifying the salience of what each theme was about and determining what aspect of the data each theme represented (Braun & Clarke, 2006). The researcher did this by reverting to collated data extracts for each theme, and organising them into a coherent and internally consistent description (Braun & Clarke, 2006). For each individual theme, the researcher presented a detailed analysis. The researcher also ensured that each theme dovetailed into the broader overall analysis of the data.

3.8.1.6. Phase 6: Compiling the Report

The sixth phase began when the researcher had a set of fully revised themes, and involved the final analysis and write-up of the thesis (Braun & Clarke, 2006). According to Braun and Clarke, the task of the write-up of a thematic content analysis was to tell the intricate story of the data in a way which proved the soundness and validity of the analysis. The researcher chose particularly vivid examples, or extracts which captured the essence of the point that were demonstrated without unnecessary complexity. The extracts were easily identifiable as examples of the issues and were embedded within an analytic narrative that compellingly illustrated the story in relation to the research objectives (Braun & Clarke, 2006).

3.9. Methodological Evaluation

Psychoethnographic research design, which is rooted in ethnography, is valid in this context since it offers rich, detailed, thick, multifaceted and holistic data (Meter, 1990; Sterk-Elifson, 1995). Additionally, its ethnographic basis makes it ideal for hidden or hard to reach populations like street children. Hidden or hard-to-reach populations are the disadvantaged and disenfranchised populations often omitted from national studies as they have no fixed address, and are less likely to agree to an interview (Adler, 1990).

The advantages of using this design are that it generates detailed, valid and unbiased data. By their nature, ethnographic paradigms accumulate knowledge about people by, watching participants in their own locale, and interacting with them in their own language (Kirk & Miller, 1986). This approach dovetails with Ennew's (2003) call for filling the dearth in street children literature with new, appropriate, sympathetic, and innovative methodological approaches that give detailed and nuanced understanding of street children functioning. Psychoethnography enjoys the benefits of ethnography, including having deep focus and; more still, providing thick description (Kirk & Miller, 1986). In the current research, this was made possible by because the data was collected in the natural contexts within which the participants lived.

Psychoethnographic researches are appropriate for topics about which little is known, primarily, because ethnography is by its nature fundamental and exploratory, preparing the way for more rigorous studies that strive for precision and quantification (Adler, 1990). The thick description refers to description that includes all possible meanings of an event, including meanings conferred by members of the culture itself. In Zimbabwe, there is dearth in street children

literature on their psychological functioning. In addition, street children have a tendency to manipulate outsiders; hence, they give untrue data (Lucchini, 1996b). These challenges are offset by use of ethnographic methods since participants' responses to questions are augmented by observing natural behaviour (Dube, 1999).

Notwithstanding the above strengths, psychoethnographic studies are also fraught with their own limitations. Ethnographic studies have a weakness of failing to determine causality (Davies, 1999). Psychoethnographic studies can not determine causality since the examination of effects caused by a specific variable can only be established by holding constant or eliminating the extraneous factors. Control of variables to precisely determine the effects of certain variables was impossible in the current study. The more the street children are studied in their natural habitat, the more difficult it will be to have the type of control a facet which empirical research aspires (Davies, 1999). Psychoethnography, on the other hand, emphasises the interplay among variables situated in a natural context and does not seek to control the variables. This study, in view of that, could not determine the causal relationships among the variables, though, interrelationships among them could be established.

As they ground this study, ethnographic studies have also been criticised for being subjective, biased and idiosyncratic (Davies, 1999). The results from the present study, as well, could not be generalised to other populations. In psychoethnographic studies, the conditions required for statistical generalisation are difficult to apply, rendering it impossible to extrapolate the results to other similar populations (Davies, 1999). Davies reasoned that such generalisation is warranted only where subjects have been sampled randomly from the entire population to which the

findings are applied, and they caution that this statistical condition obtains less in ethnographic studies. However, ethnographic researches do not aim at statistical generalisation but at empirical and theoretical generalisations (Davies, 1999). Empirical generalisation refers to extrapolation of findings of a study to other cases judged to be similar to those under study (Davies, 1999). The results of the current study can be generalised to other street children in contexts similar to those children in this study.

The other form of generalisation appropriate in psychoethnography is theoretical generalisation which refers to generalisation of psychoethnographic findings in the context of a particular theoretical debate even to circumstances unrelated to the research context (Davies, 1999). Arguably, that the research may not be open for statistical generalisation does not weaken the current study because ethnographic studies aim to gain valid, detailed and unbiased data which involves obtaining the total and subjective meanings and experiences participants have with regard to a particular concept (Kirk & Miller, 1986).

3.10. Ethical Issues and Risks of Psychoethnography with Street Children

The researcher appreciated that gaining informed consent was a very fundamental process. No participant was coerced to take part in the research. Subsequently, the researcher sought the informed consent of the participating children and from their gatekeepers. It has been argued that children legally have no competence for consent (Ensign, 2003; Homan, 1991; Masson, 2004). In Zimbabwe, a child is considered legally a minor until 18 years, whereas street children participating in the current study ranged from 12 to 18 years. According to Punch (2002), a

researcher has to seek consent of a gatekeeper in trying to reach street children as research participants. The researcher therefore needed to negotiate access to conduct research on street children through gatekeepers. These gatekeepers have no legal rights in respect of the person's decision to participate in research but generally control the places where people are accessed from and they may, in addition, have legal responsibility for an individual's well-being in that setting (Masson, 2004).

It has been echoed that gatekeepers can deny researchers opportunity for the researcher to access the participants or inversely the gatekeepers can directly or indirectly force participants to participate in the research (Heath, Charles, Crow, & Wiles, 2004; Miller & Bell, 2002). It has also been argued that the researcher needs also to approach parents or guardians even after approval by gatekeepers alongside individual consent (Heath et al., 2004). In the current study, the gatekeepers were the administrators of the drop-in centres from which the street children were obtained. Informed consent was also sought from parents, older siblings, marital partners and base leaders, for street-living children. For the street-working children who engaged in vending and begging in the streets while staying at home, informed consent was sought from their parents, older siblings, guardians and marital partners. Where the participating street children were married, the consent of such partners was sought. The researcher had an introductory letter he showed the gatekeepers and guardians who wanted to verify authenticity of the researcher as a student at the University of Zimbabwe. The introductory letter is presented in Appendix F.

Apart from the informed consent obtained from the gatekeepers, the researcher also sought informed consent from the individual street children and key informants who participated in the current study. Punch (2002) reasons that researchers must have the informed assent of the children they are researching. All the street children who participated in this study consented voluntarily despite the fact that such informed consent was also obtained from their guardians and the gatekeepers. Some scholars have argued that informed consent should be negotiated and sought continually and not as one-off event (Miller & Bell, 2002). Lawton (2001) has cautioned that participants may get fed up with being repeatedly asked if they want to continue to participate. The researcher made sure that the repeated seeking for consent was not overdone to avoid inducing boredom among them. The researcher also made sure that he continually sought consent from the street children participants especially from those children who apparently seemed losing interest in participating. This approach was found to be useful.

The researcher orally sought informed consent from the participants instead of asking them to fill informed consent forms. Some researchers have argued that is necessary to get signed informed consent from participants as a way to safeguard participants and researchers (Lawton, 2001). The researcher was aware that this research involved many socially unaccepted and deviant behaviours that participants would not have the guarantee that their anonymity and confidentiality were safeguarded (Ensign, 2003). For street children, Ensign (2003) contended that orally seeking informed consent can be adequate. Additionally, the researcher avoided having signed forms as these would have extremely formalised the research and have would posed many language and communication difficulties among illiterate participants (Domestic Violence Research Group [DVRG], 2004). It has been echoed that many street children in

Zimbabwe have hardly reached Grade 7 (Muchini, 2001); hence, some of the street children may be illiterate.

The researcher recognised that offering incentives to the participants is a thorny issue, more so, with respect to street children who can seek to manipulate people for personal hedonistic gains (Aptekar, 1994; Muchini, 2001; Muzvidziwa, 1997, 2004; Ruparanganda, 2008). It has been argued that giving participants incentives appears as a form of coercion impacting on the voluntary nature of research participation (Homan, 1991; Ruparanganda, 2008). There have been debates with many researchers arguing that participants should be paid while others hold that this might encourage potentially vulnerable people (especially street children) to participate for the wrong reasons (DVRG, 2004; Ensign, 2003). Ensign (2003) particularly cautioned that incentives may influence street children to participate for the wrong reasons. The Ministry of Social Welfare in Zimbabwe prohibits giving out of money to street children in Zimbabwe. Ruparanganda (2008) gave his street youth participants some money and bought them food but hideously to avoid being caught by municipal authorities. Ruparanganda further reports that Magaisa gave his participants who were commercial sex workers some beer in addition to dancing with them. One way of resolving that problem is giving non-monetary material gifts such as food at the end of the study (DVRG, 2004). In the current research, the researcher gave some participants gifts like clothes and food at the end of the study.

Anonymity, confidentiality and the right to withdraw from the study were spelt out at the onset of the study. The researcher determined that no harm came to the individual participants after participating in the research. The researcher ensured that the resulting research and publications

would be used in such a way that they might not bring harm to the participants as a group. On anonymity, as was done by Ruparanganda (2008), and as advised by Hammersley and Atkinson (1995), the researcher did not use actual names and nicknames of the participants in the final write-up and only used popular nicknames like Karuoko which was given to many street children for stealing behaviour and Chekai given to many street children for being sexually active. The researcher promised and maintained confidentiality; particularly, in cases of illegal and highly personal behaviours. This involved protecting highly sensitive data. In the case of participant observation situations in which the researcher interacted with people in more public settings, the researcher made the objectives clear, respected individuals' wish not to participate, and to leave the scene if necessary as was advised by Adler (1990) and Punch (2002).

The researcher was also aware that psychoethnographic research on street children is fraught with many risks (Adler, 1990). In the current study, the dangers cropped up from various sources. One danger was from the participants themselves. Adler (1990) underscored that homeless youths and street children can turn on the researcher when they believe some wrong is being committed. In that vein, some key informants urged the researcher against visiting some of their bases since they are risky areas like those along the Mukuvisi River. Ruparanganda (2008) reported being afraid of going to these bases along Mukuvisi River as the street children living there were appeared to be people who abused alcoholic substances and appeared ruthless and fearsome. This researcher, however, visited some of the bases with a crew leader to avert victimisation of the researcher. However, some tricky events arose during the research. For instance, on one occasion the researcher had to retreat from a certain base when some street children threatened to physically assault him. These uneasy events could even stem from a

simple misunderstanding. For instance, at one time some male street children threatened the researcher after he had attempted to counsel them for being violent towards each other. On many occasions, the street children were particularly volatile, capable of becoming malicious towards each other or the researcher with little forewarning. They vacillated between trusting friendliness and angered hostility. Anger from the street children towards the researcher was very scary.

Ruparanganda (2008) was also aware that being seen with female street children could pose problems for him with the male street children. This researcher avoided interacting with these female street children at secretive or secluded places. Ruparanganda stated that there was a Streets Ahead official who was dismissed from his job on allegations of sexual abusing a female street child. The researcher was told of many such cases by Streets Ahead officials that the street children can even lie that one has abused them especially when they hate that person. It was alleged that one of the officials falsely alleged of having abused the street children had angered the streets children by putting on 'showy' clothes and for disparaging the street children as being 'smelly' and 'untidy'. It was believed that the sexual abuse allegations were a fight-back strategy. This researcher was especially careful to avoid being caught in such a scenario.

Adler (1990) also warns researchers with street children against being caught by the police. This is not because a research may be illicit and scandalous but that the police might confiscate or subpoena the field notes (Adler, 1990). This would be unethical since the researcher had affirmed the participants that no one else who be given access to the scripts containing the data they had proffered. The fear of the police was rooted not only in the concern for protecting research participants, but in the real danger of arrest of the researcher himself. In Ruparanganda

(2008), Magaisa who did his research on commercial sex workers in Harare was arrested together with the commercial sex workers he was researching on and told the police that he was brother of those commercial sex workers. In reality, the researcher inevitably breaks the law in order to acquire valid participant observation data (Adler, 1990). This rule-breaking occurred in its most innocuous form from having culpable knowledge: information about offences that are perpetrated. The crimes committed in the knowledge of the researcher included stealing, vending, begging, smoking and taking of illegal drugs like marijuana and *kachasu*. The researcher was even aware that certain male students were abusing their female street children partners emotionally and physically. According to Adler, the researcher's awareness of criminal operations made him an accomplice to their commission, since he failed to notify the police. The researcher broke the same law through "guilty observations," by being present at the scene of a crime.

The researcher at one time risked being arrested after one street child stole the cellphone of one of the drop-in centre senior officials. This official had kept safe his cellphone in an office always under lock. That office was used only by the Streets Ahead Drop-in centre officials together with the researcher, and was beyond bounds of street children. The official whose cellphone was stolen suspected everybody including the researcher and mulled reporting the case to police. No one knows how it was stolen, so the staff members including the researcher were implicated until a certain street child revealed that a fellow street child had stolen the phone, and fled to Bulawayo.

Lastly, the street children environments were hygienically unsafe as they were littered with solid human waste. The human waste usually circumscribed the boundaries of the bases as a security measure. Passing through the faeces was a nightmare to the researcher which he overcame with much difficulty. More still, the street children themselves were infested with lice they referred to as '*mataliban*' (the talibans). The researcher sometimes contracted the lice from the street children.

3.11. Reliability and Validity

3.11.1. Reliability.

The current study can be evaluated in terms of reliability and validity. Reliability refers to the repeatability of research findings, and their accessibility to other researchers. This entails whether another researcher doing a similar study will obtain similar results (Adler, 1990; Meter, 1990). Reliable data are accurate, consistent and dependable. The researcher checked for the reliability by cross-checking data generated from in-depth interviews, focus group discussions, key informant interviews, participant and non-participant observations as was suggested by Adler (1990) and Davies (1999). Hence, data from the different methods were corroborated to assess if it generated consistent themes and patterns. During his research, Adler compared data from research participants with that from key informant interviews who particularly knew much about the research participants. The researcher in the current research, found many street children and key informants who knew certain research participants for a long time and corroborated their accounts on these street children. The researcher was able to verify the information he got from the research participants by asking these informants who had known the research participants for a long time.

The researcher also engaged in member checking by checking whether the final data gelled with the individual research participants' reflection of their self-image. Member checking was suggested as a way to check the reliability of the research by Adler (1990). In this study member checking involved allowing participants to critically analyse the findings that were derived from them and to comment on the data. The participants either affirmed that the summaries reflected their views, feelings, and experiences, or that they did not reflect these experiences. Thus, the current study had reliability because the participants affirmed the accuracy and completeness of the data that was collected from them. The researcher also combined data collection and data analysis to ensure that the findings were similar with the data as these were done concurrently (Meter, 1990). Thus, the researcher ensured that the data collection and data analysis were done simultaneously to ensure that the collected data was very similar to the output of data analysis.

3.11.2. Validity

Validity deals with whether the researcher is measuring what s/he thinks s/he is measuring (Adler, 1990). To ensure validity, the researcher continually checked the appropriateness and accuracy of data collection techniques, procedures, and instruments, and properties of central theoretical constructs (Adler, 1990; Davies, 1999; Ensign, 2003; Hammersley & Atkinson, 1995). The researcher, furthermore, triangulated the data by using many data collection methods (Adler, 1990; Aptekar, 1988, 1994; Davies, 1999) as well as collecting data in the natural settings of the participants (Adler, 1990; Ennew, 2003; Rugaranganda, 2008). The use of any methods allowed the researcher to ensure validity by corroborating data from these various methods. This study had high ecological validity to the extent that data was collected in the natural contexts in which the participants lived to provide opportunities for continual data

analysis and comparison to refine constructs and to ensure the match between scientific categories and participant reality (Adler, 1990; Hammersley & Atkinson, 1995).

Furthermore, participant and non-participant observations were conducted in natural settings that reflected the reality of the life experiences of participants more accurately than do contrived settings (Davies, 1999). According to Davies (1999), participant observation allows the researcher to have insights and understanding of how participants feel as they engage in their activities. For example, the researcher engaged in participant observations by vending and begging together with the street children in the streets and could understand how street children reacted to responses by the members of the public. More still, the researcher remained in the street children's contexts for ten months which is a sustained period that the researcher was able to obtain valid data. According to Davies, sustained periods in the participants' context allow for collection of valid data. Finally, the researcher incorporated a process of researcher self-monitoring, termed disciplined subjectivity that exposes all phases of the research activity to continual questioning and re-evaluation, to limit subjectivity (Davies 1999).

3.12. Chapter Summary

The foregoing chapter has detailed the methodology employed in this study. It has been argued in this chapter that street children research should adopt psychoethnography for collection of valid, reliable and in-depth data. Street children are part of the hidden populations that need ethnographic-based researches (Adler, 1990). Psychoethnography involved collecting data in the context within which the participants lived. The data collection methods were focus group discussions, in-depth interviews, key informant interviews, and participants and non-participant

observation. Thematic content data analysis was used for data analysis. Braun and Clarke (2006) argue that thematic content analysis is the most appropriate method for psychological interpretation of data from under-researched populations. This makes it suitable for this study. The research was laden with many risks but the researcher was able to negotiate his way around them as has been shown in the research. In the next chapter, the researcher describes the findings from data collected using this methodology.

Chapter Four

Results

4.1. Introduction

In this chapter, the researcher presents the results from the current study in consistence with the research objectives. The objectives of this study were to investigate the indicators, nature and the behavioural effects of self-image for both on-the-street and of-the-street adolescent children. The data is divided into three parts consistent with the research objectives. Firstly, the researcher presents the indicators or dimensions of both street-living and street-working adolescent children's self-image in consistence with the first research objective. The data revealed that self-image of the adolescent street children is hendecagonal or eleven-sided. The eleven dimensions of the adolescent self-image include physical, vocational, ecological, social, academic, familial, sexual, moral, spirito-religious, psychological and general self-image or self-esteem.

Secondly, the researcher presents the findings on the nature of adolescent self-image for both street-living and street-working children in consistence with the second research objective. The self-image of some of the street children was found to be largely negative while other street children had positive self-image. Lastly, after presenting the indicators and nature of self-image among street children, the researcher presents findings on the behavioural effects of self-image for both street-living and street-working children in consistence with the third research objective. Risky and self-destructive behaviours appeared to result from the largely negative self-image among the adolescent street children.

4.2. Indicators/Dimensions of Adolescent Self-Image

The data analysis revealed that street-living and street-working children's self-image is multidimensional and hierarchical. The street-children's self-image has eleven dimensions or indicators. The dimensions or indicators were the major areas or themes which marked how the street children viewed themselves. The dimensions or indicators of self-image were formed from the major themes that emerged from the data. These dimensions were generated by the thematic content analysis method. Thematic content analysis is definable as a method for identifying, analysing and reporting patterns (themes) within data (Braun & Clarke, 2006). The major themes delineated from the data were used in identifying the self-image dimensions. The hendecagonal (eleven-sided) adolescent self-image has the following indicators/dimensions for both on-the-street and of-the-street children;

a) Physical self-image or body image focused on the street-living and street-working children's subjective views on their body, physical appearance and physical health. This body image was deduced from self-descriptions like: "*ndiri Mutundashuga*," "*ndiri Chidanger*" (I am an ejaculator of sugar, I am a blonde), reference to their dirt appearance as "*sutu yebasa*" (work suit). This body image was also deduced from use of physical beauty-enhancing drugs like *Apetitos*, *Supa Apeti* and *Mega Apeti*.

b) Vocational self-image focused on the street-living and street-working children's mental picture of their career prospects and the evaluation of their current work. This vocational self-image was deduced from self-descriptions as "*kadumwa kanounza mari*" (money-spinning

goblin), “*kucompany kwangu ndekwekuzheta*” (I have a stealing vocation) and “*mukoma ini ndoda kuita Gono*” (brother I want to be Gono). Gono was the then Reserve Bank Governor.

c) Social self-image focused on the street-living and street-working children’s mental picture of their position and status in society. This social self-image was deduced from statements like: “*ndiri zambiringa munyemba pane vekumba*” (I am a social misfit in the company of non-street people) and behaviours like attending soccer matches and refusal to appear on national TV programmes.

d) Familial self-image focused on the street-living and street-working children’s mental picture of their self-worth within their families, and how they appraised their families, their parents and their parental status. This familial self-image was deduced from statements like: “*Mudhara wangu handimupiwi pamwe ndimi*” (I don’t know my father, it could be you), “*muveni mukuru zimukadzi rababa*” (my chief enemy is my stepmother) and “*mhuri yedu inondinyadzisa tina vana baba 4 asi vana tiri 6*” (my family is embarrassing, we are 6 children from 4 fathers). Beliefs that the family members had cast evil spirits on them and sending remittances to family members were some of the behaviours that informed this familial self-image.

e) Ecological self-image focused on the street-living and street-working children’s mental picture of or identification with the places where they worked or lived. This ecological self-image was deduced from self-descriptions like “*tiri magunduru isu*” (we are people who sleep anywhere), “*Ndini Makwavarara, ndini Mayor*” (I am Makwavarara, I am the Mayor) and “*tiri vana vaMai Musodzi*” (We are children of Mai Musodzi). This was informed also by behaviours like owning

bases and parking streets. Makwavarara was the then chairperson of the commission running the affairs of the city council while Mai Musodzi was a social community hall where some street children spent their nights.

f) Sexual self-image focused on the street-living and street-working children's subjective views on their sexual orientations, sexual potency and the importance of sexual behaviour on their lives. This was derived from self-descriptions like: *"tiri vanhu vanogona kutamba chikapa"* (we are people who can competitively engage in sex), *"ndiri mhondoro"* (I am a gay male), *"ndinoita hama maoko or kuveza"* (I engage in masturbation). Behaviours like competing in masturbation and heterosexual sexual behaviours also informed this sexual self-image dimension.

g) Moral self-image focused on the street-living and street-working children's mental picture on their inclinations, and behaviour relative to the laws and norms in society. This moral self-image was deduced from self-descriptions like: *"tiri matsotsi nemahure"* (we are thieves and commercial sex workers), and *"pane mupurisa ndipo pane mari"* (activities banned by police are the most lucrative). It was also deduced from behaviours like stealing, fighting and lying.

h) Academic self-image focused on the street-living and street-working children's subjective views on their academic attainment, and intelligence or lack of it. It also focused on their interest or lack of that interest in schooling. This academic self-image was deduced from self-description like: *"handidi chikoro ndicho chandakatiza kumba"* (I hate schooling that is the reason why I fled home) and *"Isu hatina kupasa chikoro asi tinokunda maticha akatidzidzisa kuita mari"* (We failed in school but our incomes surpass those of our former teachers). Behaviours like pestering

charitable organisations for sponsorship in education, refusal to attend informal lessons and dropping out of school also informed this academic self-image dimension.

i) Psychological self-image focused on the street-living and street-working children's subjective views on their mental health and emotional stability. This psychological self-image was deduced from self-descriptions like, "*magunduru hatimhanyi bani kana borrowdale*" (we people who sleep anywhere have no mental illnesses) and "*nhamo inopengesa saka magunduru tichimboita kunge tisina kukwana*" (poverty sometimes induces mental illness, a reason why we people who sleep anywhere sometimes appear like we have mental illnesses). Use of psychoactive substances like glue, *mbanje*, *kachasu* and *maragadu* also informed the psychological self-image dimension.

j) Spirito-religious self-image focused on the street-living and street-working children's mental picture on their spirituality and religiosity. This spirito-religious self-image was deduced from statements like: *matsotsi akaita sesu angaende kuchechi*' (Thieves like us can not go to church) and "*magunduru tine mweya yetsvina*" (we people who sleep anywhere are haunted by evil spirits). Behaviours like praying, consulting traditional healers and herbalists and apostolic prophets for exorcism and attending church services also informed this spirito-religious self-image indicator.

k) General self-image or self-esteem focused on how the street-living and street-working children evaluated their worth. This was deduced from statements like "*ndakamboda kuzviuraya*" (I once pondered committing suicide), "*makamboona street kid ichiitawo zvine*

musoro?” (Have you ever seen a street child succeeding in life?), and “*ndine munyama ndine jambwa chairo*” (I have bad luck, I have extreme bad luck). This general self-image or self-esteem was also deduced from self-destructive behaviours like fighting against a dangerously armed peer and suicidal ideations.

4.3. Nature of Adolescent Street Children Self-Image

The following section displays the nature of self-image among on-the-street and of-the-street adolescent children. The data is revealed in detail along each of the eleven dimensions or indicators of self-image. For each self-image dimension, the researcher firstly presents the nature of self-image of street-living children and then concludes by presenting data on the nature of self-image of street-working children.

4.3.1. Physical Self-Image or Body Image

a) In this section, the researcher presents the findings on the physical self-image or body image of the adolescent street-living children. There appeared to be some age and gender differences on the nature of the physical self-image among street-living children as will be shown. The physical self-image of male of-the-street children appeared to be largely based on a macho image which is a strong sense of masculine pride, and sense of power associated with muscular physical image. The macho self-image among the male street children seemed to prize risk taking, aggressive and dominating behaviours that were threatening to themselves, girls, and younger boys. This macho self-image image was enhanced by carrying out physical exercises (like press ups), and going for gym and karate training. These physical activities helped these male children to have a strong body for defence during fights, and for efficiency when mugging people. One 18-year-old male

street child aptly echoed this view, boasting that: “*Ndikabata munhu anonzwa kuti ndabatwa anondisiya ndichiita zvandinoda, handitsarwe, ndikati mupfana ndipe chakati anoona bango reruoko ondipa, kana mupurisa chaiye anotonditya*” (If I hold someone they really feel the grip, and let me do what I want. No one steals from me, if I say little boy give me that item, they oblige on seeing a log-like hand, and I can even scare a police officer). The stronger boys (those with the macho image) had better access to more beautiful girls, money, more comfortable sleeping places; prime business areas (e.g. profitable parking area), food and clothes from the weaker boys, and control of bases. These stronger street boys were referred to themselves as “*Mamonya*” or physically stronger guys. Such street children had *mhasuru* (muscles) and *mapango emaoko* (log-like hands).

Some younger and weaker male street-living children had negative physical self-image, and did not fare well against the stronger boys during fights. These children’s bodies were marked by bruises, wounds and scars, inclusive of the head, throat, face, stomach and even on the eyes. The street children sustained such scars and wounds from beatings by the stronger boys. Some of the male street children went for more than two weeks without bathing, and put on dirty and ragged clothes. That appearance gave these street children a dirty and ragged appearance they referred to as “*sutu yebasa*” (work suit). Dirty and ragged appearance elicited sympathy from their *mhene* (donors) as it revealed that they were really needy and genuine street children. Consequently, a street child labelled himself or herself as a *Chibhonda* in Chishona or *Isibonda* in *Isindebele* meaning a ragged vagrant. Thus, they used such appearance in begging. The street children were infested by what they referred to as “*mataliban*” (lice) which usually infest those who do not bath.

For female street-living children, a sexually attractive body was seemingly central to positive physical self-image. This attractive physical appearance was enhanced by wearing revealing clothes like tight-fitting trousers, too short skirts and navel-exposing blouses. These female street children, also, put on fancy hair make-ups, earrings, bandanas, bangles, nice shoes and peddle pushers. Furthermore, some of these female street children washed their clothes, bathed their bodies regularly and spray perfume on their bodies for better fragrance. These female street-living children wanted to have a sexually attractive body image to entice male sexual partners. These adolescent female street children also wore 'label' or 'designer' jeans and hip stars.

Some adolescent female street-living children took some tablets which enlarged one's hips, buttocks and breasts, sold at *Edgars Kotamai* (Mupedzanhamo Flea Market). The female street children with comparatively more round and bigger hips, and more tipped breasts had comparatively higher physical self-image. The drugs that enhanced such attractive body image included *Apetitos*, *Apectine*, *Supa Apeti* and *Mega Apeti*. Adolescent female street-living children referred to themselves as *Chimoko*, *Tamuna*, *Chimothers*, *Shakira*, *Chidanger* and *Chibhebbi* all stressing physical beauty while male adolescent children referred to themselves as *Mutundashuga* (He who ejaculates sugar). Male adolescent children on their own sometimes wore these 'label' jeans and shoes, put on neat and stylish haircuts, cleanly shaved beard, bandanas, ginger hair, wash their clothes and bath their bodies. Adolescent male street children could even perm or braid their hair, move with bumpy steps, and spray perfume on their body.

Female street-living children with larger than average breasts seemed to have lower body image and were prone to scorning by peers, and allegations of immorality by elders who alleged that

the breasts had enlarged due to fondling by boys and men. The breasts, pubic hair and acne were also used to mark physical maturity, hence, fertility. More so, those with smaller hips, ugly faces and breasts, and more facial acne were worried by their body image. Such female street children claimed that they were seen as less beautiful, hence, had negative self-image. Fellow female street children scorned these female street children with unattractive bodies while boys either shunned proposing love to them or disengaged prematurely from such intimate affairs. One 17-year-old girl who seemed to have negative physical image was spurned by a boyfriend who had impregnated her. This particular female street child claimed that her boyfriend confessed to her: *“Dai ndakaziva haitungamiri ndingadai ndisina kumbodanana newe ndingadai ndakadanana naRuth akanaka iwe, wakashata, mukomana uyu akatondiramba nenhumbu yake yandinayo”* (I lacked foresight, I regret having fallen in love with an ugly person like you, and I should have fallen in love with Ruth who is more beautiful, and he indeed divorced me together with his pregnancy that I have). Eventually the sexual partner of this street child deserted her for the more beautiful Ruth (pseudonym).

Adolescent female street-living children demeaned their body image when pregnant. These pregnancies were associated with the divorce by their spouse and limited commercial sexual activities. These street children sometimes attempted and sometimes succeeded to abort the pregnancies. One pregnant 17-year-old female street child reflected: *“Pekutanga unoti dumbu racho harikure wozongoona kuti rina manyanga hariputirwe. Vamwe vanobvisa nhumbu yacho ini ndakambozvifunga asi ndakazotya kuti ndingafa”* (initially you wish that the belly is not going to get larger but then realise that you can never conceal the pregnancy. Some abort it, I

pondered the idea, but realised that I would die). It was revealed that the abortion pills were sold at Mupedzanhamo market.

For the street-living children physical self-image was, also, a function of physical health. The street children were prone to diseases like scabies, bilharzia, gonorrhoea, drop, syphilis, asthma, fever and cholera. These children were, moreover, prone to pains in their teeth, ears and eyes. These diseases diminished their physical self-image. Some children had *mhezi* (rash) all over their bodies, and had failed to buy medication for treatment. It appeared that some street children with illnesses had given off hope for living, and were patiently waiting for death. Some key informants indicated that the *mhezi* were arguably symptomatology for HIV and AIDS.

Generally, street children with illnesses had negative physical self-image. One 16-year-old male street child decried his sickly condition. He miserably moaned:

Utano hwangu hunondidzikisira pasi, ndinorwara nebilharzia ndinoinda kutoilet every 2 minutes weti yacho inorwadza nekupisa, musoro wangu unotema ndikapiswa nezuva. Ndakazvarwa ndiri premature ndaisaziva kuti ndinosvika zera randiri iri I am lucky to be still alive (My health pulls me down, I suffer from bilharzia, I experience pain when urinating while the urine produces a hot sensation. I urinate every two minutes, my head aches whenever it's sunny. I was born prematurely, and am luck to be still alive now, I never thought I would be alive till now).

However, some adolescent street-living children claimed that they had strong bodies that were resistant to diseases. These street children claimed that their bodies were so strong to withstand

illnesses when they ate poisonous foods. Some key informants also echoed findings that street children had stronger bodies which withstood the illnesses associated with eating dirty and unclean food. These children ate dirty food from rubbish bins risking diarrhoeal diseases like dysentery and cholera. One 16-year-old male street child claimed:

Zvandinodya ini ari kumba akazvidya anoita cholera. Ini ndinobura food yangu mubin ndinobvisa vhudzi necotton zvevakadzi ndodya food yacho handitombogezi maoko futi asi handirwari. (I obtain food from the bin and any non-street person who eats such food would suffer from cholera. I really remove women's hair and sanitary ware, eat the food, and do not even wash my hands, but I do not contract any diseases).

Some female adolescent street-living children said that they had lower self-image when on their monthly periods. Apparently, some street children reported that they cried on their menarche, and that they were not prepared for the menstruation. The street children lacked sanitary ware and advice.

b) Just like their street-living counterparts, some street-working children wanted to have an attractive body image. The female street-working children aimed to put on trendy and revealing clothes. One 13-year-old female street-working child said that she was embarrassed of her physical appearance marred by the dirty plastic bottles she sold in Mbare. Another 17-year-old on-the-street child looked down at her body image, as her body was small and had no upright breasts and big hips as compared to most beautiful and attractive females and girls. She complained that the clothes she wore were not comparable to those worn by admirable ladies. A 17-year-old vendor who was impregnated when she was in Form 1 lamented at her unattractive

physical morphology resignedly saying: “*handisisina chimiro chemhandara saka varume havandipfimbe zvinondikanganisa*” (I have lost the physical vibrancy that goes with virginity that men shy away from proposing love to me). Some of these street-working children used figure-enhancing tablets like Apetitos, Apectine, Supa Apeti and Mega Apeti.

The street-working adolescent children, like their street-living counterparts, wanted to maintain a physically strong body. The street-working children wanted stamina for agility when fleeing from the police who banned their vending behaviours. These male street-working children did not however seem to prize a macho image as was done by their street-living counterparts. Female street-working children nevertheless, had stronger bodies which allowed them to carry their merchandise from Mbare Market as well as for fighting when need arose. Some on-the-street adolescent children, especially boys wanted to maintain a physically strong body predicated on a macho image. There was some intra-society violence within this group that disputes resolved by revoking physical prowess. Furthermore, street children were always running from the police as their vending activities were illegal; hence they needed a strong body. Nevertheless, the street-working children were usually happy with their physical appearance. These children were not as prone to illnesses as were their street-living counterparts.

The street-working female children who regarded their bodies as less attractive seemed to have a negative physical self-image. The female street children who regarded their breasts as larger than average seemed to have negative physical self-image as was the case among their street-living peers. These children were scorned by their peers who alleged that their breasts had enlarged due to fondling by boys. The breasts, pubic hair and acne were also used to mark physical maturity,

hence, fertility. One 17-year-old female street child held that her breasts signposted her maturity as her mother usually remarked: “*Uchiona mazamu ako kukura kudaro zvinoreva kuti watokura, saka chitawo semunhu mukuru*” (the fact that your breast have enlarged implies that you have grown up so behave likewise). Just like their street-living counterparts, female street-working children demeaned their body image when pregnant. This pregnancy was associated with less mobility at work hence less chances of making money. Some of these street-working children had gotten pregnant before getting married while others earned incomes through commercial sex. These street children sometimes attempted and succeeded to abort the pregnancy.

Some vending street-working children complained that members of the public shunned sitting close to them as if their bodies were smelly while in public transport. For example, a 16-year-old female street child bitterly lamented: “*Mukombi munhu akachena zvake anoti imi vemusika muri kunhuwa sedwerai uko, havadi kugara pedyo newe ko ndanhuwa ndaita sei? Havadi kugumwa netswanda chaiyo vakachena zvavo*” (A clean passenger in a commuter omnibus says you vending people are giving out a bad smell, they don’t want to sit close to you or even to get into contact with your baskets). These female street-working children showed that they were irritated when members of the public seemed to suggest or indicate that their bodies were stinking.

The street-working children who engaged in begging just like their street-living counterparts who engaged in begging presented a dirt appearance. These children did not bath regularly; neither did they put on clean, nor nice clothes. This appearance was referred to as *sutu yebasa* (work suit) as was the case among street-living children. This appearance was necessary for eliciting sympathy from the *mhene* (donors). This *sutu yebasa* appearance revealed that they were really

needy and genuine street children. Such a street child was then referred to as *Chibhonda* in Shona or *Isibonda* in *isiNdebele* meaning a vagrant especially ragged one. Dirty and ragged clothes elicited sympathy from their donors.

4.3.2. Vocational Self-Image

a) In this section, the researcher presents the findings on vocational self-image of the street-living children. As will be seen there were age and sex differences in vocational self-image among these street-living children. Younger adolescent street-living children generally engaged in begging, and usually earned more money than their older counterparts. The younger street children made more money because they elicited more sympathy. Adolescent street mothers carried their babies or forced younger children to carry babies on their backs while begging to elicit sympathy from motorists and pedestrians. A 16-year-old male street child referred to his 12-year-old younger sibling who begged for their sustenance as “*kadumwa kanounza mari*” (a money-spinning goblin). The vocational self-image of these younger street children was, resultantly, positive. However, one 12-year-old male street child echoed that this job of begging was *kabasa* (a small job) and not the desirable *zibasa* (a big job).

Some street-living children saw no bright vocational future ahead of them since they had no birth certificates. One 17-year-old street mother wearily lamented: “*Upenyu hwangu hwakatoparara nekuti handina birth certificate. Nehwemwana wangu ndozvahuchaita nekuti haanawo birth certificate*” (My life is destroyed since I don not have a birth certificate. My child’s life is going to be destroyed too since he does not also have the birth certificate). These street children had no

access to birth certificates as they had no parents or guardians to help them secure the birth certificates.

Some older adolescent street-living children had lesser income generating activities as compared to their younger counter-parts and seemed too have a negative vocational image. These children shunned begging, as it was socially stigmatising, and usually less paying as the *mhene* felt that they are old enough to work for themselves unlike the younger children. These older adolescent street children engaged in the following economic activities; *kubvuta* (snatching), *kutsara* (stealing), carrying pedestrians luggage, piece jobs, un/loading vehicles, playing *chaputa/makasa* (gambling), cleaning cars, guarding cars, vending, selling plastic containers, and demanding dues from the younger and weaker children. Some, in addition, picked food from bins. These street children stole money, groceries, handbags, cellphones and *mukute* (necklaces). Necklaces were termed *mukute* (gold) because they earned more money. These *mukute* were snatched from unassuming passers-by, and sold to either jewellery dealers at Ximex Mall or jewellery shops in the city centre. A single necklace fetched in excess of \$100 000.00 by the end of February in 2007. Some of the street children who engaged in stealing used *muti* (herbs) for proficiency in stealing. These herbs were bought from traditional healers and herbalists in areas like Epworth, Mufakose, Ruwa and Mukuvisi River Bases. These herbs ensured that they supernaturally; identified a person/place from whom/where they could steal money, were not caught by both their victims and the police, and, if caught would be given a lighter penalty. One 18-year old male street child who used such herbs boasted that he could only be apprehended by senior and armed police officials.

The older street-living adolescent boys (16-18years) were, however, worried that they could not break into the formal employment. Some of these children started considering going to school or looking for employment as *mahobho* (private security guards). The vocational self-image of these older adolescent street children then was negative, and had little hope of securing any respectable employment. The usual statements by these male street children were: “*Ndinoenda kubasa kupi? Chirungu chacho handichigoni murungu wacho ndinotaura naye sei?*” (Where will I be employed? I can’t speak in English so how will I interact with the employer?). Some street children chorused: “*Makamboona gunduru richizoshandawo basa rine musoro?*” (Have you ever seen a street child being having a respectable job?). A 17-year-old male street child despairingly enquired: “*Vana vangu vandichaita ndichavapei, ko mwana wevanhu, ndongomuka zuva rega-rega ndichinzi gezai tidye? Handina kudzidza ini saka ndichawanepi basa racho?*” (What will I give my future children, what of my future spouse; will I be given food everyday while I am idle? I am illiterate, and where will I will I be employed?). At adolescence, some street children started seeking official documents like birth certificates and national identity cards for use in seeking formal jobs. For example, one-17-year-old male street child requested reunification with his family in Masvingo. The officials agreed to reunify him, and went with to his rural home in Masvingo only for him to return the following day. This street child later claimed that he had ostensibly taken that as a plan to obtain free transport to travel to his rural home to collect his birth certificate so that he could process his ID card for employment purposes.

The female street-living adolescent children, also, viewed themselves as commercial sex workers. The sexual activities through which these children generated income were heterosexual sexual behaviour, same-gender sexual behaviour, pimping, running brothels and pornography.

Some male street children were involved in cross-generational heterosexual sexual behaviour with sugar mummies while girls engaged with sugar daddies. Some adolescent girls were, hence, sarcastically referred to be practising in *Huruwork* (commercial sex work), and were termed *Majoki* or *Mahure*, (commercial sex workers). *Huruwork* also referred to the male street children's behaviours of mugging and robbing people which involved strangling their *huro* (necks). These commercial sex workers had positive vocational image though they lied to their relatives that they were engaging in vending for sustenance. In any case, some supplemented their incomes from commercial sex through vending activities. A few adolescent girls, nonetheless, were only into vending for survival without being involved in commercial sex.

The younger adolescent street-living children cherished very prestigious jobs. The most noteworthy were of those wanting to become Gono (The current Reserve Bank Governor), pilots, or becoming the president of Zimbabwe. One 12-year-old male street child optimistically pronounced: "*Mukoma ini ndinoda kuita Gono, makambomuona here? Mutema here kana kuti mutsvuku, murefu here kana kuti mupfupi?*" (Brother I want to become *Gono*, have you ever seen him, is he dark or light in complexion, is he tall or short?). One 14-year-old girl confidently proclaimed: "*Ndinoda kuita president kuti ndigotonga vanhu ndichikwira ndege kuenda kunze kwenyika chero pandadira ndiri kutoda kuenda kuchikoro izvozvi kuti ndigoita president wacho*" (I want to become a president so that I will govern the country, and board the aeroplane going out of the country at will, and am intending to go to school to reach this goal). Some adolescent girls yearned to become full time housewives though such opportunities appeared slim for them.

b) The street-working adolescent children appeared to have negative vocational self-image. Nonetheless, the vocational self-image of the street-working children appeared to be more positive than that of their street-living counterparts. These street-working children seemed to have better vocational opportunities than their street-living counterparts. The begging street children had negative self-image as their work was socially stigmatised, and were usually spurned and scorned by the prospective *mhene*. These street-working children reported that they were scorned by their schoolmates for engaging in vending, begging and being for being street kids. Nevertheless, begging was not a high paying job as many would-be *mhene* did not afford to donate their cash under the harsh economic crisis that prevailed in Zimbabwe at the time the present research was conducted. Some of the adolescent street children who engaged in begging were forced by their parents to beg, and these children seemed to be irritated with their parents who made somewhat unrealistic demands on them. One 13-year-old male begging child disturbingly decried: “*Ukaenda ne\$5 000 bedzi unotswinywa nzeve uchinzi wauyirei nemari shoma iyi*” (If you manage to raise only \$5 000.00 you will have your ears pinched for bringing home little money). These begging street children disdained the ‘street kids’ label they were ascribed.

Some of the street-working children who engaged in begging accompanied their parents with disabilities while singing to attract the attention of possible *mhene*. This behaviour appeared to be similar to the tendency of some street-living children who accompanied their begging parents who usually had disabilities. Sometimes the parents of the street-working children would accompany their children who engaged in begging. These parents then directed their children to prospective *mhene*. For example the researcher witnessed one street child’s mother directing the

begging child to a seemingly well-to-do passer-by, yelling: “*Mhanya kumhene iyo unokumbira mari*” (run to that donor and ask for money). These parental instructions to beg appeared to be annoying to the street children as some of the would-be *mhene* spurned their pleas. The fact that these street children lived at home, interacted with non-begging people, and were parent-directed appeared to make the begging an awesome endeavour.

Some parents of these adolescent street-working children involved in begging denied this researcher the opportunity to interact with their children. One such parent of a 12-year-old female begging child angrily decreed: “*Mukataura nemwana wangu munondipa mari. Tiri kutsvaka mari isu, ko yetransport zvayo inobva kupi mukamuregeresa kukumbira*” (If you talk to my child you have to give me money. We are searching for money here, where will we get even transport fares if you stop her from begging). Apparently, many children who engaged in begging lived in Epworth, and boarded commuter trains from Mabvuku for \$700.00 an adult and \$200.00 for the child per trip. It emerged from the data was that at 12 and 13 years, the begging street children rebel against their parents and stop begging, but start living in the streets away from their seemingly nagging parents. There were, however, exceptions to this behaviour as some street children continued begging, and continued to look after their parents.

Some street-working children who engaged in begging, just like the street-living children, saw a bleak vocational future ahead of them. Some of these street-working children just like their street-living counterparts lamented that they had no birth certificates. These street-working children complained that the non-governmental organisations that were supposed to cater for them are not helpful, and that securing birth certificates was an insurmountable task. At one

instance, an adolescent street child of a begging parent iterated that their whole family had no birth certificates including her older siblings. Some parents of the begging street children had no birth certificates making it difficult for them to secure theirs. The inaccessibility of birth certificates, to the street children foiled their opportunities of finding jobs in the formal sector.

The other group of on-the-street children was that of vending street children. Vending street children were either self-employed or employed by informal traders (especially cross-border traders). The vending children who were employed by traders had negative vocational self-image since they worked either for a small wage or for shelter only. These vending children who were employed by others complained of *kubatirirwa* (exploitation) as they were given paltry or no wages. Similarly, some street-working children also complained of exploitation by the older adolescent street children who took most of the proceeds from the begging. The vending street-working adolescents sold plastics, cigarettes, vegetables, fruits, airtime and other items. One 18-year-old vending female street child, looking down on her work gloomily pronounced: “*pabasa rangu ndinowana mari shoma hariiti kuti ndichenewo sevamwewo, ndinotozvitarisira pasi ini*” (my work is less paying that the profit does not allow me to buy fashionable clothes as done by other women, I look down upon myself). Some vending street children complained that: “*kune varume vanotinetsa vanoti tinotengesa zvese nemiviri yedu*” (There are some men who trouble us; they want us to sell both our wares and our bodies).

Some female street-working children engaging in both vending and begging supplemented their income through sex work. One 12-year-old female begging street child sullenly decried: “*Mumba kana musisina upfu kana salt mai vanoti mwanangu tsvagawo murume angakude*

tirarambe. Ko zvino zvinganzwii. Tofa here?” (When the household runs out of mealie meal or salt my mother asks me to find a sugar daddy for us to survive. What else can be done? Should we die?). The female children who engaged in vending, also, decried that their vocation limited their opportunities of marriage as their work was associated with immorality by some prospective suitors. One 15-year-old male vending street child reported that he esteemed his vocation, since he manages to buy uniforms and socks for schooling with the proceeds from the vocation.

Some street-working children engaging in vending suggested that their jobs were less respectable compared with the formal jobs. In that vein, they had lower vocational self-image. Some street-working children who engaged in vending lamented: *“Tinotozvitariisa pasi isu vanotengesa hazvienzani nevanoshanda basa chairo”* (We look down on ourselves as our job is not as good as formal jobs). It also emerged that earnings from vending were usually insufficient to meet one’s basic needs. Many of these vending street children decried: *“Mari yaunowana yacho ishoma shoma kutambura uku”* (the money we earn is too meagre, we are really suffering).

Nonetheless, some of these vending on-the-street adolescent children had positive vocational self-image. These children saw their vocations as reputable. In contrast, their street-living counterparts tended to belittle their jobs. Some of these street-working children claimed that their earnings surpassed those made by the formally employed yet their vocations required little educational attainments. One 18-year-old female vending street child claimed:

Ini ndinoita mari kudarika wemuoffice nekuti mari yake ishoma pane yangu. Panopera mwedzi ndikaverenga zvatatenga nekuita nemari unotoona kuti ndakaita mari chaiyo.

Plus ini handimiriri kupera kwemwedzi kuti ndiwane mar. Ndinotoiwana everyday. Apa handina kupasa chikoro. (I earn more money than the formerly employed person. At the end of each month, I realise that I would have used substantial amounts of money. Furthermore, I do not wait for the month-end to earn as I generate it daily. Worse still, I failed my academic examinations).

Some vending street-working adolescent children had higher vocational image than those of street-living children. One 18-year-old vending male street child sold both newspapers and airtime recharge cards. He believed that his earnings surpassed that of teachers and police officers. He reported that on a single day he earned \$20 000.00 translating into \$400 000.00 a month and \$50 000.00 from selling newspapers meaning \$200 000, 00 per month. This meant that all in all he netted about \$600 000.00 per month from both sales of newspapers and airtime whereas according to him teachers were being paid \$30 000.00 or \$40 000.00 a month.

4.3.3. Social Self-Image

a) In this section, the researcher presents the findings on the social self-image of street-living children. The street-living children appeared to view themselves as social misfits and had lower social self-image. Many of these of-the-street adolescent children regarded themselves as: “*Mazambiringa munyemba kana tiri pane vekumba*” (Social misfits in the company of non-street people). More still, these adolescent street children abhorred the ‘street kid’ label; a label they feel is socially stigmatising and unfair. These street children did not want to appear on local Television as the society since that would further entrench that ‘street kids’ label. Worryingly, some of these street children did not regard themselves as comparable to their non-street age-

mates. One 18-year-old female street child despairingly moaned: “*Ndinozvitarisira pasi kana ndichitarisa vamwe vangu vezera rangu vamwe vatova nemotikari vamwe vakaroorwa zvakana vachigara havo kumba*” (I look down upon myself when comparing with my non-street age-mates some are driving cars, some are married happily while others are living in their homes).

It appeared that the negative social self-image resulted from the ill-treatment the street-living children faced during their interactions with people in mainstream society. One-17-year-old street child who had once learnt at a school in Chiredzi together with other street children complained that they were labelled as *Mabvungweni* (street kids in *ChiShangaani*) at that school. When this particular street child tried to join a school in Epworth, the school officials rejected his application because he was a ‘street kid.’ Furthermore, many street children complained that members of the public pass derogatory statements on them, further attacking their social self-image. One 16-year-old male street child dreadfully lamented: “*Vekumba vanotituka, vanotinyima mari vanotitora setisiri vanhu*” (non-street people ridicule us, deny us money and regard us as non-humans).

The female street-living children appeared to have even greater worries with regard to social self-image. Some of these female street children lamented that they faced many constraints in social reintegration as those knowing them derided them for having been sexually permissive. One 15-year-old female street child absconded from a foster home where she had enrolled after one of the administrators at the home scorned her for being sexually active. This street child reported that the administrator had said: “*Imi mava magaba mava kungoti uh-uh-uh-uh zvekuti*

inongopinda isingamiri” (You are now hollow that you make a uh-uh-uh-uh sound, and the penis penetrates without any hindrance). This aspersion enraged her that she dropped out of the institution and urged her fellow street children against enrolling at that foster home.

Nevertheless, some street-living children regarded themselves as equal members of the society who could participate in any civic issue as responsible citizens. One street child who bathed and dressed well just like a non-street child reported that some of his non-street friends were unaware that he was a street child. Furthermore, some street children regarded themselves as better than their non-street counterparts as they had more money, were stronger physically and had more freedom. One 17-year-old male street child quipped: “*ndakafanana nevekumba only that ndinobura food yangu mubin nekurara munyeda*” (we are similar to the non-street people only that I obtain my food from bins and live in a make-shift shelter).

b) The street-working adolescent children appeared to have a negative social self-image. This social self-image of the street-working children appeared to be a little more positive than that of their street-living counterparts. The negative social self-image was influenced by the street children’s embarrassing vocations of vending and begging and that they had dropped out of school. Some street-working adolescent children complained that it was embarrassing to be seen vending especially by their former and current school mates. The begging street children said that their school-going non-begging colleagues would ask them: “*Saka hauchauyi kuchikoro nekuda kwekubhega kwauri kuita uku?*” (Are you absconding school because of this begging you are currently engaging in). These children who engaged in begging complained that the general

members of society disapproved of their social status. Many people spurned their requests for money and ordered them to go to school and stay back home.

Some street-working children who engaged in vending averred that they were not different from other members of the society. However, they lamented that society denigrated them, thereby affecting their social self-image. The children were viewed pejoratively as “*vemusika*” (vendors), and that even in commuter omnibuses fellow passengers avoided sitting close to them. However, some vending street children believed selling was becoming the most popular economic activity under the prevailing economic activities at the time of research. Nevertheless, some vending street children believed that they were social outcasts as many of them were either unmarried, divorced or single mothers who socially seen as uncouth or uncivilized. These street children doubted their opportunities of marriage or remarriage. The vending street children, nonetheless, had strong in-group affinity that helped each other in times of adversity. These children believed that informal trade is even done in offices by those formally employed.

It also emerged that street-working children who engaged in vending participated with non-street people in social activities. These street-working children claimed that they attended political rallies, football matches and other activities with members of the public as equal members of society. To these street children, vending was just an activity they had embarked on to eke a living, which did not distinguish them from other non-street people nor made them street people. Some street-working children who engaged in begging and vending stated that they dissociated themselves from non-street people. These street-working children regarded themselves as similar

to street-living children. Such street children seemed to be at risk of later becoming street-living children.

The street-working adolescent children regarded themselves as different from their street-living counterparts and decried the fact that society saw them as similar to street-living children. One 14-year-old begging male street child echoed that: “*Mapurisa navaMugabe havasarudzi kuti uri street kid chaiyo here vanokutorai voenda nemi kuMelfort Farm pamwe chete nemagunduru chaiwo*” (The police and President Mugabe do not differentiate between us begging children and those children who sleep anywhere or real street kids as they round all of us and dumb us at Melfort Farm). This begging street child saw himself as not a real street child. Thus, these street-working children saw themselves as a part of non-street community who were not street children.

4.3.4. Ecological Self-Image

a) In this section, the researcher presents findings on the ecological self-image of street-living children. It will be shown that street children’s self-image appeared to be largely metropolitan. The street-living adolescent children seemed to identify with the places in which they live. These street children saw themselves as “*vana vemutown*” (children of the city) and “*magunduru*” (those street children who sleep anywhere). These children, as well, identified themselves with the physical environment in which they slept, worked, engaged in recreational activities and hid their personal belongings. These street children had ‘bases’ where they slept. Accordingly, adolescent ecological self-image was mediated by ownership of bases and working zones with the more fortunate ones appropriating bases and operating zones in prime business areas of the CBD. The leadership at these bases was acquired by those with stronger physical stamina,

fighting ability, respectability and tenure in the streets. These base leaders were known as *Mamonyas*, Bosses of Mafia, *Mafokofoko*, *MaYears*, Foxes or *Jivhas*. Some older adolescent street-living girls, also, acquired seniority status they used in looking after fellow younger girls. These children, also, exploited these younger by marketing them to sex clients and forcing them to beg for them. The senior female adolescent street children also worked together with the *Mamonyas* in instilling fear to these younger children.

The street-living children owning working zones in First Street were the most dominant and possessed higher ecological self-image than those in the periphery of the CBD, for instance, Five Avenue Shops. These bases had tight security to repel uninvited intrusion especially by fellow street children or law enforcement officers. For instance, the Mukuvisi River Base and The Wrong Turn (in the Kopje area) were usually circumscribed by a security fence of human stool. Mukuvisi River was, also, known as Nyoka Street or Greenwaters. The base leaders had the higher ecological self-image and accrued resources (financial, material and human/sexual) from the base residents as a protection fee. Those base leaders would beat the street children who denied them such dues. Interestingly, street children slept, and ate next to their stool. Some children lived in a house with a toilet, but defecated next to where they slept.

Some street-living adolescent children seemed to have psychological identification with and attachment to place with Epworth. Epworth is an urban settlement very close to Harare where some poor people working in Harare live. Some street children were born and/or bred in Epworth. Other male street children rented houses in Epworth for their wives while they virtually lived in the streets. Epworth was conducive a suburb since there are no water and electricity

charges while the rent was relatively inexpensive. Epworth, also, provided street children with cheap cemeteries where street children bury the bodies of their deceased street peers there. Despite its utility, many street children who rented houses in Epworth looked down upon themselves since the suburb had no tap water and electricity. By late 2006, a room could be rented for as low as \$800.00 per month.

However, some male street-living children interestingly claimed ownership or control of the city centre. One 17-year-old male adolescent street child claimed that: “*ndini Makwavarara wacho ndini Mayor*” (I am Makwavarara, I am the Mayor). Sekesai Makwavarara was the then mayor for Harare. The children claimed to ban any one from getting into the city, and claimed that they are *vana vemutown* (children of the city). For instance, one 18-year-old male street child whose reunification efforts were spurned by his relatives said: “*vachekera manje kutoramba zvavo kundigamuchira kumba kwavo mutown havachamupindi*” (they have shot themselves on the foot by rejecting me because they won’t set foot into the city). Such findings show that street children believed that they controlled the urban territory whose inhabitants they claimed to be able to guard to monitor.

The street-living children hated the ‘street kid’ label chiding that “*street haina kuzvara mwana*” (the street has not given birth to any child). The adolescent street children believed that they were better than those living in the rural areas and asserted: “*tiri vemutown hatigare kumusha isu*” (we are town-dwellers we do not live in rural areas). Therefore, street children had a metropolitan ecological image, as they detested working and living in the rural areas. *Kumusha*

or rural areas were infamous for herding domestic animals and tilling land, which these street children abhorred.

Some street-living children slept overnight at *Mai Musodzi Hall*, a municipal community hall in Mbare where they were shown films, and found shelter especially during the rain season. These street children frequented the hall that some ended up calling themselves “*vana vaMai Musodzi*” (Mai Musodzi’s children). This hall was popular for entertainment and vocational opportunities as the children met their sexual clients there.

b) The ecological self-image of the street-working children appeared to be different from that of their street-living peers. Some on-the-street adolescent children lived in Epworth, others in Mbare while others lived in Chitungwiza. These children had some sense of ecological self-image which; nevertheless, was divided amongst places where they sold their wares or begged, where they lived at that moment, and where they came from. Some of the on-the-street children identified with the rural areas where their parents were living. One 17-year-old vendor reported that she identified with Darwendale where her parents lived while she; also, had an attachment with the place where she sold her wares. However, street-working children who engaged in vending defended their vending territory especially from those who wanted to compete with them. Unlike the street-living children who saw themselves as controlling the city, the street-working children did not regard themselves as the owners of the city. Additionally, these street-working children did not regard themselves as *vana vemutown* (children of the city) as was done by the street-living children.

Vending street-working children appeared to have strong identification with their market places, and did not tolerate competitors at their selling places. One 17-year-old married female vendor claimed that her stall is referred to as Mai Phiri's (pseudonym) showing that she solely owned the vending stall. Asked how she would respond if someone was to invade her trading stall, a colleague standing by affirmed: "*tinotouya tomudzinga nokuti ndepavo vega, vanotengesera pamhiri apo havatombouyi pano*" (we will have to chase him/her away, this place is hers and hers alone). Another 17-year-old vending male street child selling newspapers and airtime recharge cards believed that the place where he sells his wares was his. He claimed: "*Pano ndopandinoshandira hapana anouya pano tisina kutenderana. Munhu akauya achida kutengesa manewspaper ndinomudzinga vekumaoffice vanoziwa ini bedzi. Anouya achida kutengesa manewspaper ndinomutorera manewspaper acho ndotengesa. Pano hapasvikwi*" (This is where I work; no one will come without my agreement. If anyone comes willing to sell newspapers, I will expel him/her because the authorities know only me. If anyone comes here to sell newspapers I will confiscate the newspapers and sell them myself. This is a no-go area).

The begging street children seemed to have a negative ecological self-image. These street children decried that the national and municipal police did not differentiate between them as children who engaged in begging and the street-living children as they were all rounded up and dumped at places like Melfort Farm. The street-working children did not want to be associated with street childhood and identified themselves with their homes. The ZRP public relations liaison officer reported that these street children came forward to the police, to dissociate themselves with street childhood claiming that they had homes. These street children showed that they were ashamed of the environment in which they worked.

What was interesting was that some street-working adolescent children developed identification with the places where they begged or vended and some ended up becoming street-living children. These street children joined bases where the street-living children. Some street-working children started sleeping at *Mai Musodzi* Hall, popularly frequented by street-living children at night. Such a tendency was noticed among both male and female street-working children. There was a 17-year-old male street child who stopped staying at home and started working and living in the streets. That behaviour was more frequent among the 12 to 13 year-old street children. Thus, these street children seemed to have developed more affinity with the streets as an environment for both working and living.

4.3.5. Familial Self-Image

a) In this section, the researcher presents findings on the nature of familial self-image of street-living children. The street-living adolescent children largely regarded themselves as totally alienated from their biological families, and having enjoined street families. These street children regarded themselves as *vana vemutown* (children of the city) and not as *vana vekumba* (home children). These street children appeared to have lost attachment to their biological families, though some cherished reintegration back into their families and communities. In the streets, these children formed new surrogate families by coming together with their peers who reside in the street. These surrogate street families helped their members especially in times of adversity. For example, when one got arrested, was ill or died. Street children contributed money, food and social support to help each other in times of adversity. For instance, an 18-year-old married male street child mobilised resources from his street peers for burial of his deceased *tsano* (brother in-law). These street children hired a truck to ferry the body of the deceased for burial in Epworth.

Interestingly, some street-living children sought reunification with their biological families when they were ill. Many street children usually wished they were home and faced much stress that they avert it by sniffing glue. Stepparenting was one of the leading impediments to family reunification and the development of positive familial self-image. For example, a 15-year-old female adolescent street child claimed: *“handidzokeri kumba chero bedzi muvengi mukuru, zimukadzi rababa ririko”* (I will not return home for as long as my greatest enemy; my father’s wife is there). However, another 16-year-old female street child said: *“Baba vangu vakagara three years vasina mukadzi pakafa mai vangu. Vanogona kugara vega futi vasina mukadzi iyeye. Ndichadzokera tonorwira baba ivava, mukadzi wavo iye achapabva pamba pedu apa.”* (My father stayed for 3 years without a spouse after the death of my mother, and she can repeat that now. I will return home, and fight for my father with my stepmother until she leaves our home).

The data showed that, sometimes biological parents of street-living children contributed in the worsening of relationships between these street children and their stepparents. This parental influence apparently affected the development of positive familial self-image among these street children. One 16-year-old male street child was instructed by her divorced biological mother to avoid staying at home with his step-mother. What complicated this male street child’s circumstances was that his biological mother was remarried to a spouse who rejected staying with him. Additionally, some of these street children hated their step-parents apparently on allegations that they abused them physically, sexually, psychologically and economically. For instance, a 17-year-old male street child refused to be reunited with his family back home as he would stay with the step-mother who had not only raped him, but had brought home *zvikomba* (extramarital sexual partners) when his father was jailed. Surprisingly, this particular street child

did not know his biological mother, and when he inquired the whereabouts of his biological mother, he claimed that he was threatened with beating by his stepmother. Again, a certain 17-year-old male street child asserted he could not forgive his stepmother who had not only abused him at a time he was aggrieved by the death of his mother, but; also, denied him the love of his erstwhile loving father. This male street child believed his biological father had been influenced by his stepmother to hate and physically abuse him.

Some street-living children did not know their biological fathers and their paternal relatives and seemed to have negative self-image. These children were then raised by their maternal relatives and adopted the surnames of their mothers. One 18-year-old male street child patently decried: “*Mudhara wangu handimupiwi, ndakakurira kumusha kwamai, mukoma pamwe ndimi mudhara wangu imi*” (I do not know my father, I was raised by maternal relatives, brother maybe you are my father). A certain 17-year-old male street child, who was not aware of his biological father, inadvertently discovered his father’s surname and adopted that surname seemingly without the knowledge of his mother.

Intrafamilial acrimony seemed evident in some biological families of street-living children. This disharmony appeared to be evidence that there was no development of positive familial self-image. For instance, a certain 12-year-old female street child was physically abused by her street-living mother. It appeared that this female street child was disgraced by her mother who engaged in multiple sexual relationships with many men in the street, abused alcohol, and even sold her child’s clothes. This particular street child’s mother was even running brothels in the street where she organised many sexual partners for many street children (including for her own

daughter) and pocketed the proceeds from such business. At one time, in the presence of the researcher, certain street children told this particular street child that her mother was looking for her. She immediately started crying loudly and profusely telling them that she would not heed their message.

Furthermore, some married adolescent street-living mothers detested their own biological children when seeking remarriage. This behaviour influenced these teenage mothers to attempt infanticide, sometimes successfully. It should be stated that female street children were recurrently married, divorced and remarried again in the streets. For instance, a certain 18-year-old adolescent street mother had wanted to kill her two year-old son on remarriage as the new spouse did not want to look after her child. This particular adolescent street mother attempted to kill the child by poisoning him with insecticide, throwing him into the road so that he could be run over by vehicles and by throwing him into a dam. She even attempted to kill the child by throwing him into a dam. All these attempts to kill the child were unsuccessful till he found a foster mother who could adopt and look after her son. However, some adolescent mothers were proud of their children and they claim reveal positive familial self-image. The researcher observed some fights among male street children fighting over paternity of a certain child.

Street-living adolescent children also appeared to have developed negative familial self-image as they sometimes reviled their biological families back home. These street children usually described themselves as: *vana vemavagrants* (children of vagrants). Some orphaned children in the streets wished if their parents were still alive that they would live happily at home. One 16-year-old male street child lamented: “*Ndinombozvidzikisira pasi vamwe vana vakachena kana*

vaine vabereki vavo ndoti dai ndina mai kana baba ndozvidzikisira” (I look down at myself when I see other non-street children with their parents or well-dressed then I wish if my parents were still alive then I look down at myself). Another 17-year-old male street child decried: *“Mhuri yedu inondinyadzisa nekuti tina mai vamwe chete asi vana baba i4 asi vana tiri 6. Handizivi kuti sei vana baba vedu vaifa uye kuti sei mai vairamba vachiita zvevamwe varume vese ivava”* (My family is embarrassing to me we have a single mother, but four fathers and six children. I don’t understand why our fathers died, and why my mother insisted on remarriage each time each of her husbands died).

Some street-living children were even openly rejected by their parents further affecting their familial self-image. One 15-year-old male street child was rejected by his father for delinquency. The delinquency of this child appeared to influence the father of this particular child to doubt his paternity of the child. The father of this child apparently visited Streets Ahead and told the officials that he could have been duped by his deceased spouse (mother of this street child) into wrongly accepting paternity of this child when he was not really his child. This street child acknowledged that he had been rejected and disowned by his father, and severed links with his father. Quoting him verbatim, this street child professed:

Mukoma ndakarambwa nababa vangu, vakatoti ndisashandise surname yavo. Ndakatochinja surname ndava kutoshandisa surname yamai vangu. Endai munovaudza kuti ini ndati handichisiri mwana wavo. Nyangwe ndikafa kana kurwara handiende kumba kwavo (Brother I was rejected by my father who prohibited me from using his surname. I have since stopped using his surname and am using my mother’s. Go and tell him that I am no longer his child. Even If I am sick or I die, I will never go to his home).

b) The on-the-street children seemed to have a negative familial self-image. However, the familial self-image of the street-working children appeared to be more positive than that of their street-living counterparts. These street-working children belittled their biological families for being either too poor, forcing them to perform the disgraceful vending and begging activities and for not according them sufficient learning opportunities. For instance, one 16-year-old female street child said:

Nhai mukoma munoti kuitawo here ikoko? Vamwe vana vanopinza chikoro nevabereki vavo asi ini ndinongonzi enda unotengesa. Ivo havana kudzidza neniwo handisi kuenda kuchikoro saka nhamo yacho inopera sei? (Brother, what sort of behaviour is that? Some children are properly provided with learning opportunities but my parents only afford to send me on these vending activities. They are hardly educated and they are still not educating me, how then is this poverty supposed to end?)

In addition, these street-working children reported familial disharmony in their families as was the case with the street-living children. The difference was that street-working children stayed with their families while the street-living children had fled from their families. For instance a certain 17-year-old female vending street child claimed that that she lived with an aunt who either was always shouting at her and angry with her for inexplicable reasons. She also decried that this aunt of hers openly showed favouritism to her biological children whom she bought nice clothes for while she worked as a slave just for shelter. This disharmony was worsened by the fact that she lived with her child who always was a nuisance to the aunt for one reason or another. Another vending female adolescent street child indicated that her family embarrassed her as all of them were involved in informal trade at Mbare Market, a trade she despises. One 17-

year-old male begging street child, a child of a certain business owner believed that his father had cast evil spirits on him leading to disability. One 14-year-old vending male street child lived with his sisters who were single mothers after having been divorced. This street child was embarrassed by his sisters who had promiscuous relationships, and did not respect him as a customary paternal household head. These sisters of this particular male street child allegedly brought their sexual partners home in his presence, a behaviour which annoyed him further.

Some street-working adolescents had their own children which had a dimension on their familial self-image. One 17-year-old female vending street child professed that she had a child, and was proud of that, but was worried that it destroyed her opportunities of being marriage, and that the prospective suitor, and his family may disapprove of her living with or supporting that child.

However, some street-living children had positive familial self-image. Some families of these street-working children supported their vending activities. A certain 18-year-old female vending street child professed: “my family supports me *vanoti ita zviru bho-o*” (My family supports me they urge me to continue vending because it is fine). One married adolescent street vendor was given the place to sell by her father-in law, while another’s spouse and uncle kept surveillance on her business. One 18-year-old female vending adolescent was given her selling place by her brother who had found formal employment, while another sells together with her family members. More still, a certain 17-year-old female vending child was helped by a friend in selling her wares. Some of these street-working children who engaged in vending used the proceeds to support their family back in the rural areas, others send school fees for their siblings others buy property like wheelbarrows.

At 12 or 13 years, some street-working children who engaged in begging tended to start rebelling against their parents that many started living in the streets and stopped going home. Thus, such street-working children drifted from street-working into street-living children. These children were disconcerted by their parents who punished them for bringing home meagre daily incomes, for example, less than \$5 000.00. The prospects of making money from begging appeared to decline with increasing age, as older children elicited less sympathy from donors than the younger ones. Therefore, when these children who engaged in begging earned little income they feared punishments at home and started sleeping in the streets. Some of these adolescent children who engaged in begging seemed to be angry with their families for forcing them to engage in embarrassing begging. However, in the streets, some street-working children used their earnings to fend for their families. One-17-year-old male begging child apparently used his earnings to look after his parents who were not working and were chronically ill. This child did, also, use his earnings to pay for his school fees. He did not even become a street-living child.

4.3.6. Moral Self-Image.

a) In this section, the researcher presents findings on the moral self-image of the street-living children. The street-living adolescent children described themselves as *matsotsi* (thieves) and *mahure* (commercial sex workers); though not out of will, but due to adversities in the street. Thus, they saw themselves as moral. The immoral behaviours they engaged in included lying, stealing, fighting, promiscuity and commercial sex. Some of these adolescent children practised *kubvuta* (snatching) and *kutsara* (stealing). The items they snatched and stole from both street and non-street people included; *mukute* (necklaces), rings, food, cellphones, money, clothes, money and food. Male adolescent street children also snatched girlfriends from their

counterparts. The street children who snatched the lucrative necklaces referred to themselves as Mafia (organised criminal groups). Street children usually fought over food, girls, money and clothes (or petty issues). The street children viewed fighting as their favourite sport. These street children even complained that they were labelled thieves, yet some non-street people survived on such stealing.

More so, some street-living children entrenched their stealing by even looking for stealing charms/herbs while others could supernaturally locate hidden money, a reason why one street child was rejected by family members. Lying was, also, rife among street children who explained it as inspired by evil spirits, and the need to manipulate people. Adolescent street children viewed themselves as immoral and untrustworthy. Some street-living children would ask: “*mungatuma gunduru kunotenga airtime haadzoke. Mungape street kid cellphone?*” (Are you serious to send a street child to buy airtime recharge cards? Are you serious to give a street child your cellphone?). Many of these street-living children seemed fearful of the police as they have pending cases and dockets. The street children were especially fearful of a certain police official who usually rounded them up and dropped them in certain distant places. Some street-living children claimed that they were rounded up in Harare and dropped in distant places like Mutoko in Mashonaland East Province and Mvuma in Midlands Province. These street children were so wary of the police that they could recognise the registration numbers of the vehicle, this particular police officer used to round them up. However, some street children had some pending criminal cases at the charge offices at the police stations and in courts. The police had opened dockets for many of these for various offences like stealing.

It is, also, worth mentioning that some street-living children left their homes after having committed some delinquent acts. What is interesting from the data is that these street children reproduced their immoral behaviours in the streets. One 12-year-old male street child fled home after having stolen and sold his grandparents' goats. In the streets he continued stealing and selling of people's items including cellphones and clothes. A certain 15-year-old female street child stole her sister's clothes and sold them that she fled in fear into the streets. In the streets, she notably stole clothes of her fellow street children and departed for Bulawayo streets. One 17-year-old male street child was rejected by his relatives after having stolen the whole pay of his maternal uncle. This stealing behaviour even foiled reunification attempts. He admitted that: *“kucompany kwangu ndekwekuzheta. Ndinotoita zvekurota nekufembera chaizvo. Ndakabira vekumba kakawanda pamwe ndakaba pay yose. Handidzoreri zvinhu zvacho zvakatorwa nestate”* (My career is stealing. I supernaturally dream or identify my would-be victims or hidden loot, and have stolen my uncle's full salary. I will not refund them for that has been forfeited by state).

Nonetheless, some street-living children had strong moral standards. Some street children reverently greeted elders, abstained from stealing and fighting behaviours. For instance, one 17-year-old female street child underscored that she did not steal, nor engage in commercial sex, and could not even lie as that would affect her self-esteem.

b) The on-the-street adolescent children appeared to express a positive but compromised moral self-image. Generally, the moral self-image of the street-working adolescent children appeared to be more positive than that of their street-living counterparts. The street-working children

reiterated that they did not engage in stealing, commercial sex work, and fighting. The street children however, highlighted that the nature of their vocations especially vending demanded a lot of lying to sway customers. These street children also indicated that vending itself was illegal hence immoral however they argued that vending was a lot more moral than stealing. One vending 17-year-old male street child professed: *“Hatisi vanhu vanotyora murau asi mapurisa haatenderi kuti titengese asi tinongotongesa kuti tirarame”* (We are not criminals; it is only that the police do not allow this vending but we engage in it to eke a living).

The street-working children who engaged in vending appeared no different from their street-living peers as they were always on the look out for the municipal and national police. These street children were occasionally arrested for vending though the fine was paltry, only \$250.00 as at December 2006. Some street-working children bribed the police to avoid arrest or to get early release. These street children claimed that the police had a preponderance of detaining these street-working the whole day that they bribed them for an early release. Though it was regarded as illegal, many street children regarded vending as moral. These street children claimed: *“Bhaibheri rinoti uchadya cheziya, cheziya chacho kutoshanda uchitiza mapurisa. Murau wekunamata unoti zvawo teererai hurumende asi iwe unoona kuti urarame zviri nani utengese”* (The Bible says you shall eat from your sweat and the running away from the police marks the sweat. Christianity demands us to obey the government, but you have to vend to avert starvation). One 17-year-old female vendor affirmed that: *“Pane mapurisa ndipo pane mari”* (The police always control and ban activities are really lucrative in monetary terms).

The vending street-working children saw themselves as immoral partly because some of them engaged in sexually seductive or promiscuous tendencies. One 17-year-old vending child believed that some female street-working children had immoral tendencies as they smiled seductively at male clients. Some street-working children who engaged in vending averred “*Zvinoenda neunhu hwemunhu huye nekuti unoenda kuchechi here vamwe havana unhu saka vazhinji vanotengesa inzenza*” (That is determined by one’s moral constitution and whether one is a Christian, but many vending people are immoral). Key informant interviewees and focus group discussion participants agreed that vending street children were widely believed to be immoral. Some female research participants who engaged in vending also asserted that they saw their opportunities of marriage as slim as society saw them as immoral. Furthermore, some vending male street children acknowledged that they would not marry fellow female children who engaged in vending since they were less moral.

Some street-working children, just like the street-living children underscored that they were less moral and exhibited immoral behaviours like commercial sex work and violence. One 16-year-old female vending street child declared: “*isu mavendors takafumuka*” (we vendors are immoral). These street children proclaimed that sometimes they supplemented their income through commercial sex work and stealing. The vending street children underscored that many female street-working children who engaged in vending seductively smiled at male customers. Thus, the street-working children believed that the street children who engaged in vending were generally less moral.

4.3.7. Sexual Self-Image

a) In this section, the researcher presents findings on the nature of sexual self-image of street-living children. It will be shown that there are age differences with respect to sexual self-image. The various sexual orientations will be looked at especially with respect to how these affect a street child's sexual self-image. Some street-living adolescent children viewed themselves as sexually proficient. These street children described themselves as: "*vanhu vanogona kutamba chikapa*" (people who can competitively engage in sex). For male street children, sexual intercourse appeared to be for status, procreation, recreation and control. Among female street children, sex appeared to be a survival strategy, an addiction, and as a way to cope with the stressful street life. On sexual orientations, many adolescent street children had same-gender orientations, heterosexual orientation, bisexual orientations and auto sexual tendencies. Those with same-gender orientations engage in sexual intercourse with members of their sex. Usually these male street children were initiated into this gay male sexual orientation through sodomy, and ended up enjoying this sexual orientation.

Some male street-living children were sodomised while others were initiated into this sexual orientation for monetary gains. Businesspeople, both whites and blacks, usually hired street children for same-gender sexual behaviours. One 17-year-old male street child professed that he had begged some transport operator for money, and was promised, but subject to "putting him on plan." The child agreed assuming that he would be employed. The business owner then told him that he wanted to use "him as his female sexual partner" in return for \$10 000.00 per round. The child claimed he agreed out of hunger and intimidation. One 17-year-old male street child claimed that a supposedly gay male peer told him: "*Uri kundidenha neshort yako yauri kupfeka,*

ndikakumbira unondipa here?” (You are turning me on with your pair of short trousers; will you accede if I ask you for sex?). Accordingly, some gay male street children seemed to crave for and appeared starved of sex.

Adolescent female street-living children also revealed lesbian orientations. These children engaged in same-gender sexual behaviour with both non-street and street females for money and entertainment. The lesbian street children, nevertheless, had negative self-image, and many did not want to come in the open. The male street children who engaged in same-gender sexual behaviour were referred to as *mhondoro*, while *kumhondora* is to penetrate, and *kumhondorwa* is to be penetrated on by someone.

Bisexuality among street-living children involved two forms. The first form involved having genital organs of both males and females. These street children with genital organs for both sexes had negative self-image, and usually tried to conceal their status. There was an example of a 17-year old male street child who had genitals for both sexes. This street child concealed ‘his’ status, and identified with boys to avoid both sexual abuse and stigmatisation by peers. However, his bisexual nature was discovered when ‘he’ was beaten by the police for stealing. The beating caused ‘his’ breasts to enlarge alarming ‘his’ peers who reported the case to Streets Ahead officials. This particular street child accepted that ‘he’ had genitals for both males and females. This particular street child claimed that ‘he’ had feigned that ‘he’ was a ‘boy’ fearing that male street children would ridicule and sexually abuse ‘him’ if they had realised that ‘he’ had the female sex organs. The second form involved engaging in both same-gender and heterosexual sexual encounters. Some of the adolescent children were bisexuals of this nature and hid the

same-gender sexual orientation from the public only revealing the heterosexual sexual orientation.

The other orientation among the street-living children was autosexuality or autoeroticism. This orientation involved self-stimulation and gratification of sexual pleasure. The most common autosexual behaviour in the streets was *hama maoko* or *kuveza* that is masturbation involving use of hand in sexual stimulation especially among boys. The street children who engaged in autosexual behaviour performed their sexual acts in privacy; for instance, while in toilets, or secretly inside their trousers after seeing what one 14-year old male street child referred to as: “*mukadzi ane magaro akaita mabhanzi-mabhanzi*” (a woman with upright and sexually stimulating hips). Some female adolescent street children admitted that they engaged in autosexual behaviour. These street children used bananas and vibrators in self-stimulation. Focus group discussants and in-depth interviewees frankly averred “*vasikana tinoita izvozvo tarohwa nenyere*” (we girls do that after having been starved of sex). Some male street children engaged in masturbation competitions to identify a champion who ejaculated faster and more frequently than his peers. Such a champion was given material awards like 10 plastic bottles by each losing competitor. The champion later sold the plastic bottles to earn money. The street children who engaged in autosexual behaviour regarded themselves as having negative self-image as this orientation was associated with low social skills to initiate intimate relationships with prospective female partners.

The other orientation that emerged among the street-living children was heterosexual sexual orientation. This orientation appeared to be the most common among the street-living children.

Many street children engaged in heterosexual sex. Sexual activity was high among street children. Female street children usually engaged in commercial sex though boys were considered staff members who obtained sex free of charge. One 13-year-old male street child professed: “*Bhaibheri rinoti anokumbira anopiwa, anotsvaka anowana anogogodza anozarurirwa saka ndikakumbira mbusha anondipawoka. Ka handiti ndiri staff?*” (The bible says he who requests shall be given, he who search shall find, and he who knock the door shall be opened for him so if I ask for sex she will have to accede. Am I not a staff member?). Amongst adolescent street children, sex was competitive. Some 10 adolescent male street children were reported to have engaged in competitive sexual intercourse with fellow female street children to identify a male champion who tired last. The male competitor who tired first was scorned.

Some female street-living children were reported to be more sexually competent as they outperformed the boys during sexual intercourse. The girls were believed to have been able to physically power the sexual behaviour while the boys were effortless. The male street children, furthermore, used aphrodisiacs like *vuka vuka* to heighten their libido. The girls with higher sexual self-image (sex champions) mock their less competitive peers for being unable *kutamba chikapa* (to engage in sex competitively). Some adolescent street children were considered champions in competitive sex. It appeared that some female adolescent street children engaged in multiple sexual relationships. Some of these female street children claimed that they were like *poto dzemarasta* (Rastafarian pots) which are shared frequently and generously.

Among some female adolescent street-living children, sex seemed to be for commercial reasons. The vocational sex workers patronised nightclubs and roadsides while soliciting for sex. Some

street children claimed that they were careful and faithful to their sexual partners, and avoided promiscuity and commercial sex being afraid of the HIV and AIDS. One 17-year-old male street child maintained: “*Ukaita zvechihure unorwara neAIDS wonotorwa nebhara kuchiteshi segrocery, zvinonzi auya endai nebhara munomutora*” (if you are promiscuous, you will go home seriously ill with AIDS that they will collect you using a wheelbarrow like grocery from the bus terminus). Some children; conversely, believed they were entitled to sex whenever and with whomever they liked. It seemed that many street children did not use contraceptives. To that effect, many street children saw themselves not surviving beyond 26 years. Street children commonly reiterated that *hapana kusiri kufa* (there is no other way to avoid death). On the issue of condoms, one 13-year-old male street child asked: “*makambodya sadza makapfeka magloves*” (Have you ever eaten sadza while wearing gloves). The children stressed that having sex while wearing condoms is not pleasurable.

Some female adolescent street-living children reported having difficulties in abstaining from active sex after getting used to it. These female street children cited an example of a 16-year-old female street child who had declared that she had withdrawn from sex only to see a couple holding each other, sexually stimulating her that she immediately went out to solicit for sex. Some male adolescent street children who disguised as non-street boys had non-street girlfriends, and consequently did not want to appear on local TV to avoid being identified by their girlfriends as street children. Some male adolescent street children fought over girlfriends. Some female adolescent street children were placed into foster homes, but absconded as they were overpowered by the desire for sex. Male adolescent street children had many street girlfriends

while street girls had many sugar daddies. Female adolescent street children also could bet sex when playing *makasa* (gambling) thus if defeated in the game she paid through sex.

Some street-living children agreed that they partook in *mubobobo* (secretive *muti*-induced sex). This is secretively and supernaturally undertaken with unsuspecting women in public spaces. The *muti* user plays with his foot, and reaches orgasm while the female victim; as well, reaches orgasm spoiling her pants sometimes even fainting. The street children who engaged in *mubobobo*, however, had negative self-image as this was stigmatised within their groups. These children maintained that they were prone to harsh beating *ne seven million kana kuti chaunga* (by the public) on being discovered. They agreed that *mubobobo* is a safe sexual method as there was no worry of contacting STIs. Male adolescent street children who engaged in *mubobobo* had socially inappropriate skills that they faced problems in initiating and sustaining love affairs and hence had negative sexual self-image.

b) The sexual self-image of street-working adolescent children varied with these children viewing themselves as sexually inactive. Thus, the street-working adolescent children appeared to be less sexually active than that of their street-living peers. These street-working children unlike their street-living peers did not seem to pride themselves for being skilled in *kutamba chikapa* (being competent sexual behaviours). One 17-year-old female street child reported that she only had sex twice in her life, with one incidence leading to pregnancy. This female street child maintained that she was better than her vending colleagues who had many sexual partners. Some street-working children appeared to be promiscuous. For example, one 18-year-old female adolescent street child was reported to having been engaging in sexual relations with her

mukuwasha (customary son-in-law). A key informant alleged that this vending street child was maintaining an intimate sexual relationship with this customary *mukuwasha* of hers and only reported the rape when her customary daughter suspected that she was having an affair with her husband. The researcher observed that there were some male non-street adults who apparently maintained intimate relationships with this 18-year-old female street child. These male adults visited this vending street child at her vending stall. The case was made interesting by the fact that this customary *mukuwasha* with whom this vending street child was reported having had sex with. The *mukuwasha* of this particular female street child had a spouse and children in the rural areas whom he could have been shunning for the customary daughter of this 18-year old vending child.

Some street-working children who participated in focus group discussions reported that society saw them as sexually permissive. Some of these children accepted that their behaviours also tallied with the perception people had on them. Other street-working children however asserted that despite that perception people had on them, they were faithful and morally upright. One 18-year-old female vending street child claimed: “*Vamwe vakadzi havagoni kuguma kusekerera customer inzenza*” (some women smile seductively at male customers revealing that they are sexually immoral). This married adolescent vendor believed: “*Vamwe varume havabvume kuti tine varume uye kuti hatingadanani navo vanenge vachida kutotinyenga*” (some men do not accept that we are married already, and that we can not be in love with them. They want to propose love to us).

It also emerged from the data that some vending street-working children engaged in multiple sexual relationships and particularly commercial sex to supplement their income. One male key informant stated that those street children were naturally lazy, and would want to cut corners by soliciting favours using the sexual favours. Some male vending street children married fellow vending females; others married non-vending children, while some vending children engaged in extra-marital affairs with other vending peers. Some vending street children divorced their non-vending wives in favour of their vending peers.

Some street-working children who engaged in vending maintained that they were sexually active. Some of these adolescents were divorced or single parents who averred they were starved of sex. They then engaged in extramarital affairs with married people. For instance, one 17-year-old female vending adolescent was beaten by fellow vending peers, and expelled from her vending premises for engaging in an extramarital affair with their *muramu* (brother-in-law). She patently claimed: “*imhosva yebabamudiki wavo ini akanga anditi handina mukadzi. Ndakanga ndazviwanirawo murume pane asingadi murume? Ndichawana umwe vanopera here varume?*” (It’s their brother-in-law’s fault as he had lied to me that he is not married. I had found my own partner, are there women who do not cherish having a male partner? I will find another man, is there a shortage of them?)

Among the street-working children, as was the case among street-living ones, various sexual orientations emerged. The orientations included heterosexuality, bisexuality, same-gender sexual orientations and autosexuality. The most prevailing orientation was heterosexuality as the begging and vending street children engaged in opposite gender sexual behaviour. This type of

sex was engaged in with both other adolescents and adults. Thus, some male street-working children had sexual relationships with sugar mummies while some female street-working children had such relationships with sugar daddies. The prevalence of such cross generational sex appeared to be less prevalent among street-working children as compared to its prevalence among street-living peers.

Some street-working children engaged in same-gender sexual relationships. Male street-working children engaged in gay male sexual behaviours with fellow street children especially the older male street children. Some female street-working adolescent children engaged in lesbian sexual behaviours with other women especially non-street clients who paid them for the sex. Some of these male and female street-working children had both same-gender and heterosexual partners hence they engaged in bisexual behaviours. Some of these male street-working children also engaged in *mubobobo* or supernatural sex with some women in public places. This *mubobobo* is done secretly with both the male street child and their female reaching orgasm though the culprit risks beating. This *mubobobo* sex was engaged in by males on unsuspecting women.

Lastly, both male and female street-working children claimed that they engaged in autosexual behaviour or masturbation. Male street-working adolescent children said they engaged in autosexual behaviour through *kubonyora* or masturbation. Some female street-working children also said they engaged in masturbation. One 17-year-old vendor claimed that she had does frequently engage in such sex saying:

Handina murume wandinorara naye, saka ndinozvifadza ndega ndichishandisa mabanana nemavibrator mutoilet pamba pandinogara. Ndinotozvibatsira nekuti handina

murume uye handizivi kuti murume wacho ndichamuwana here. Ndakamboedza kushandirwa asi handisati ndava naye murume wacho (I do not have a male sexual partner with whom to have sex so I relieve myself through masturbation using bananas and vibrators in the toilet at the home. That is helping me since I do not have a male sexual partner and I do not know whether I will have one anyway. I have consulted prophets for divine intervention in getting a sexual partner but I am yet to find him).

4.3.8. Academic Self-Image

a) In this section, the researcher presents findings on the nature of self-image of street-living children. Street-living adolescent children seemed to regard schooling negatively. Generally, these street children detested schooling flatly stating: *“handidi chikoro ndicho chandakatiza kumba”* (I hate schooling that is the reason why I fled home). Apparently, the data showed that many adolescent street children had not gone beyond primary school. Some street children seemed to realise the value of schooling when it had gotten too late. One male street child aged 17 years realised that schooling was necessary for his progress and enrolled in grade 7. Apparently, this street child was over aged for the grade. He revealed that he tolerated the shame associated with younger schoolmates for personal development. Some adolescent street children enrolled in schools but frequently absconded. These street children seemed to have latent intelligence, but did not utilise their talents. Many street children dissuade those interested in sending them to school by asking: *“Mungandiindise here ini gunduru kuchikoro icho chiri icho chandakatiza kumba?”* (Are you sure to send me a street child to school when I fled home because I didn't want to go to school?).

Some older adolescent street-living children seemed to regret having dropped out of school. The street children, however, saw no opportunities of getting back to school, as they would have grown older to get back to school. On 16-year-old male street child decried: *“ndinozvitarisira pasi nekurwadziwa kana ndikaona vezera rangu vaine uniform vachienda kuchikoro ini ndisingaendi kuchikoro. Ini handitombozivi kuti chikoro chacho chinovhurwa kana kuvharwa rini. Saka ndichashanda basa ripi ndisingagoni chirungu?”* (I look down upon myself on seeing age-mates in school uniform going to school. I have lost track of the school calendar. What employment will I get when I can not speak in English?)

Interestingly, some street-living children wanted very ambitious jobs like becoming doctors or pilots, but did not want to go to school. Only a few street children sought assistance from organisations to go to school. Attendance at informal and formal classes offered by these charitable organisations was low too. Many street children fled from school at the Presbyterian Church due to strict discipline, and due to the need to earn money in the streets. Some street-living children revealed high illiteracy that they could not even read medical prescriptions. One 15-year-old male street child believed he had learned enough on reaching Grade 6, and claimed: *“pandakagumira pava nani ndava kugona chirungu nemaskills ekuba mari”* (I have reached my desired level and am now fluent in English, and have acquired skills in stealing). One street child who was reported by key informants and fellow street children for sustaining multiple sexual partners agreed that she has low academic self-image because she reached only grade 3. Nevertheless, some street children revealed intelligence in their lives. For instance, they cunningly ordered take-away food in supermarkets, and dumped the food in shelves. The

supermarket authorities then discarded that food into bins suspecting poisoning, only for the street children to collect it the following day in rubbish bins.

b) The on-the-street adolescent children seemed to have a more positive academic self-image than their street-living counterparts. Generally, it appeared that many street-working children especially those children who engaged in vending had reached or passed Ordinary level though many had dropped out of school at the secondary level whereas street-living children seemed to have dropped out of school at primary level. Some of the street-working children were still attending school. Some street children were satisfied however that they were eking a living even without having obtained adequate education. Some street children even saw themselves as economically surpassing their teachers. To that effect, one 14-year-old male vending street child said: *“Isu hatina kupasa chikoro asi tinokunda maticha akatidzidzisa mari”* (We failed in school but our incomes surpass those of our former teachers).

Some street-working children, nevertheless, were school-going and seemed to esteem schooling. This is in contrast to the street-living children’s declarations that they abhorred schooling as that was the reason they had fled from their homes. Some street-working children engaged in vending to raise money for their school fees and school uniforms. One 14-year-old male vending child who was in Form 2 at a secondary school in Harare believed that he was going to reach the university level, and claimed that he was extraordinarily brilliant at school. Such street-working children cited cases of former street-working children who later became university graduates and they wanted to emulate them. These children alternated between vending or begging and attending school. Some of these street-working children were working to raise money for their

own and/or their siblings' school fees. One 15-year-old vending street-working child declared: *“Ndichashanda kusvika vana vamai vangu vapedza chikoro”* (I will work till my siblings have completed schooling).

However, some vending street children reiterated lack of academic intelligence affected one's business as some could not price their wares profitably. One 17-year-old female vending child claimed: *“Vamwe havana njere vanongotengesa pasina chavanowana, munhu anofanira kuwana mari”* (Some have no intelligence that they sell at loss, yet should generate income from vending). Some street-working children reiterated that possessing an ordinary level certificate was no longer a guarantee for employment. One 18-year-old female vending street child maintained: *“Ndakaita Form 4 asi Form 4 haichabatsiri mazuva ano”* (I attained Ordinary level education which, however, has become worthless these days).

Some of the street-working children who engaged in begging valued schooling. Some street-working children engaged in begging to raise money for school fees. Some of these street children got into the street just after completing schooling each day. Unfortunately, however, some street children were derided by fellow school children for begging in the streets, and were nicknamed 'streetkids' at school. These children were embarrassed to be seen by schoolmates while begging in town. Some of the children ended up dropping out of school. These street children seemed to lack enough time to concentrate on schooling. Some of the children were forced by their parents to occasionally abscond from school or while others were forced to drop out of school by their parents. Some stopped or absconded from schooling on own volition while others cited the fact that they did not have birth certificates which were required for examination

registration. Some street-working children who engaged in vending claimed that their academic performance was affected by working in the streets, though some persevered despite the hardships, and passed their O-level examinations.

4.3.9. Psychological Self-Image

a) In this section, the researcher presents the findings on the nature of psychological self-image of street-living children. The street-living adolescent children viewed themselves as: “*vanhu vasingamhanyi bani*” (sane people). These children’s behaviours indicated that they were normal though agonising under much stress in their daily lives. These street children, besides, appeared to exhibit much emotional control. Key informants, also, believed that adolescent street children were normal. However, stress caused by adversities in the street, explained some mental problems among street children. It should be indicated that getting into the street appears to be a coping mechanism from the stress at home. Conversely, to some key informants, becoming a street child was an indication of *kutetereka* (being astray), which they associated with psychopathological symptomatology.

To offset the stress in the street, the street-living children used intoxicating substances. The substances they usually used subsume; glue, tobacco, alcohol (especially *jatropha* or strong stuff), *mbanje*, *kachasu* and *maragadu/makabe* (intoxicating medical pills). The *maragadu* was used supposedly to ameliorate stress, pain feelings and make them insensible to the cold weather. The street children professed *maragadu* are administered to patients awaiting operation as they killed away feelings of pain. Nonetheless, the pills as they reported influenced them to commit crimes, hence appears criminogenic. One 17-year-old male street child believed that *mbanje*

means *mupanjere* (the provider of wisdom). Street children used glue to offset hunger, stress and the usually extreme cold weather. It, moreover, diminishes senses of shame to such that they can do any activity, otherwise, deemed shameful. One 16-year-old male street child claimed: “*magundururu hatimhanyi bani kana borrowdale*” (we people who sleep anywhere do not have mentally illnesses). Both boys and girls abuse alcohol, mbanje, glue, *kachasu*, intoxicating pills and tobacco. One 17-year-old female adolescent street child always moved around with a box of matches and a packet of Madison (a tobacco brand). Some street children reported pondering committing suicide due to the adversities they encountered in the streets.

The psychoactive substances the street-living children abused sometimes appeared to make them lose their self-control. One street child maintained that under the influence of glue, they lost self-control and awareness that they would find themselves in police custody. These street children also claimed that the psychoactive substances influenced them to engage in stealing and fighting. Street children, furthermore, believed that their lives were better since they had their freedom. One 17-year-old male street child claimed: “*Hatina anotitonga hapana anoita nezvematongerwo eupenyu hwedu*” (we have freedom since nobody controls our life).

The street-living children appeared to be psychologically functioning well; nevertheless, they reported that they were sometimes tormented by evil spirits. These children believed that they were sometimes under the influence of evil spirits. These evil spirits were reported to be causing *mamhepo* (hysteria), or *kuvhumuka* (nightmares). One 17-year-old female street child was widely believed by the staff members at Streets Ahead to be under the influence of evil spirits specifically *ngozi* (avenging angry spirits of a dead person) and as abnormal (*asina kukwana*).

The evils spirits were reported to drive immoral behaviours like stealing, and commercial sex work on this female street child. Some street children agreed that poverty explained some psychopathological tendencies amongst them. These street children claimed that: “*nhamo inopengesa saka tichimboita kunge tisina kukwana*” (poverty sometimes influences mental illness, a reason why we sometimes appear like people with mental illnesses).

b) The psychological self-image of the street-working adolescent children appeared to be more positive than that of their street-living peers. The on-the-street adolescent children regarded themselves as psychologically functioning well. The fact that these street children interfaced with the non-street community more than their street-living counterparts seemed to induce better adjustment in them than in their street-living counterparts. These vending participants regarded themselves as psychologically normal, and seemed to exhibit emotional control though they complained that they were much stressed by losing their wares to the police who invariably raided them. Nevertheless, some street-working children seemed to express behaviours suggesting that they had less positive psychological self-image. Some street children appeared to regard themselves as having mental illnesses. For example, a certain 14-year-old vending street child said: “*Isu vanhu mevendors pamwe tinomboita setisina kukwana*” (We vendors sometimes behave as if we have mental illnesses).

Some street-working children just like their street-living counterparts, consulted apostolic prophets and traditional leaders or herbalists to obtain charms to offset the negative effects of stress. Some vending street children drank beer to kill off stress while others had social support as they operated as a group, and gave each other advice, counselling and warning when the

police were coming. Some begging street children sniffed glue to alleviate stress. These children sniffed glue even at home or in the street in full view of their parents. The children who abused such psychoactive substances like glue regarded themselves as people who sometimes behave abnormally. These begging children said that their stressful and embarrassing lives, involving pestering people to give them money, needed that they be abnormal to an extent.

Some street-working children just like their street-working counterparts, believed that they were in the streets due to some mental illnesses. The usual blame for such mental illnesses was bewitching by relatives. Accordingly, the belief is that there is *kuchekeresa* (a way of casting bad spells on someone so that your business prospers). For instance, there was a certain 17-year-old begging street child who travelled from Chitungwiza daily. This child was believed to be a child of a certain business owner in the transport sector who was blamed for *kuchekeresa* (casting bad spells that one's business can prosper at the expense of that victim) that child. Apparently, that child is termed a *zengenene* (a person with mentally retardation). The key informants and street children advanced the idea that business owners have a propensity of casting bad spells on their children to maximise their commercial fortunes.

Sometimes the psychological problems seemed to worsen among these street-working children. There was a case of a 17-year-old male street child who stopped living at home and began working and living in the streets. This street child initially stayed with his brother who fended for him but later slept in the streets. The psychological problems of this particular street child seemed to have worsened when he was still a street-working child. This street child could be seen talking and dancing alone while in public places selling his wares. Fellow street children

claimed that his relatives and former friends visited him but he snubbed them as if he did not know them. Later this particular street child became street-living and started wearing weird clothes. Working in the streets was also seen by some key informants as indicative of *kutetereka* (being astray), which they associated with psychopathological symptomatology.

4.3.10. Spiritual/Religious Self-Image

a) In this section, the researcher presents the findings on the nature of spirito-religious self-image of street-living children. The street-living adolescent children viewed themselves as *vanhu vanemweya yetsvina* (people obsessed by evil spirits). These street children, moreover, viewed themselves as *matsotsi* and *mahure* who can not go to church though they identified with certain Christians churches. Some of these children occasionally went to churches to receive material, financial and food donations. Nevertheless, some street children claimed: “*Matsotsi akaita sesu angaende kuchechi?*” (Can thieves like us attend church services?). Some of these children believed that relatives; parents and grand-parents for bewitching them. It appeared that some children did not lie, steal, engage in sexual activities, nor take any drugs or alcohol, but were in the street strictly to generate income through less immoral activities begging and vending.

Some street-living children attended mainstream Christian church services especially Pentecostal churches. Many of these street children prayed to God when faced with insurmountable difficulties. Some adolescent street children prayed together in prayer-groups in the street at their bases. These street children were worried that some church members were constantly tracked their movements during the church services. These street children also complained that some fellow church members did not want to sit closer to them. Some street children, however,

complained that the church services take too long, as they would intolerably be waiting for the opportunities to receive material handouts like food and clothes. These street-living children claimed that they attended church services to receive donations from the church-going well-wishers. Some street children chorused: “*tinofarira zvinhu kunge mapaperback*” (we love groceries like paperbacks). One 16-year-old male street child recited many Bible verses, and claimed that he attended services at many Christian churches in Harare after having been a member of a certain Pentecostal church in Bulawayo. This particular street child indicated that many purported Christian churches are driven by satanic forces citing a case of a pastor who had a snake which churned out large sums of money. This 16-year-old male street child claimed that he had attempted to attend services at a certain church, and realised that some of their procedures were not only incomprehensible, but bordered on Satanism that he fled. This child decried that becoming a pastor is now a paper (academic) qualification rather than being a calling for the born-again person.

Some street-living children, nevertheless, believed that they were obsessed by some evil spirits. These evil spirits were, also, regarded to have influenced them into living in the streets. Their delinquency and failure to be reunified with their families were also explained in terms of these evil spirits. It was also found that the quarrels between their maternal and paternal relatives of these street children were common and that many fathers of these street children had not paid *lobola* to their mothers’ families. Research participants believed these quarrels and the failure by some fathers of these street children invoked evil spirits which haunted these street children. One father of a 15-year-old male street child believed his child was haunted by evil spirits to voluntarily came to Streets Ahead, and told the officials that he doubted the paternity of the

child. A grandmother of a 17-year-old female street child was believed to have bewitched her grandchildren in revenge for her failure to enjoy the money from her grandchildren's mother (the grandmother's daughter) in diaspora. An 18-year-old male cousin of this particular street child became possessed in the presence of an awe-stricken drop-in centre official. This drop-in centre official claimed that the possessed child (speaking in the voice of their dead grandfather's voice) blamed the grandmother of bewitching the child.

Data from the current study also indicated that street-living children believed that they were obsessed by evil spirits. These street children also believed that the evil spirits influenced them to reveal criminal and anti-social behaviours. One key informant claimed: "*kune mweya yechihure, yeumhondi neyekuba*" (there are evil spirits for commercial sex work, for murder and stealing). According to this key informant, these evil spirits drive the children into the streets saying "*vana vanongomberereka mustreet nekuda kwemweya yetsvina*" (children stray in the street under the influence of the evil spirits). One 17-year-old female street child maintained they were haunted by evil spirits which appeared to foil their reunification efforts. One 16-year-old male street child claimed: "*mustreet mune mweya wekuti even uchibatsirwa unongotumwa kuita zvinhu zvekuti unovarova kana kungovakanganisa kuti varege*" (in the street there are certain evil spirits which influences you to foil any rehabilitative and reunification efforts).

It also emerged that sometimes adolescent street-living children consulted prophets for divination. These street children were told by the prophets as part of the divination that they were being haunted by evil spirits. These prophets told these street children that they had become

street children as a function of the influence of evil spirits. For instance, one 13-year-old male street child affirmed:

Ndakaprofitwa kunzi ndichatetereka, ndichakura ndichitambudzika ndichinja-chinja pekugara musoro uchatema nemakumbo uye ndichazongofa. Musoro nemakumbo nekutambudzika zvakatotanga. Ndinorota baba vangu vakafa kare vachiti ndiri kuuya kuzokutora wogara neni. Mbuya vakati hope idzodzo dzinoreva kuti ndichafa (A prophet prophesied that I will suffer all my life changing residences now and again. Furthermore, I will, also, suffer from headache, pains in the legs and eventually die. Already the head aches and pains in the legs have started. I dream my deceased father saying he will come to collect me, a dream interpreted by my grandmother as meaning that I will die soon).

The beliefs these street children had on their spirituality were also influenced by the dreams they had. Interestingly, one 16-year-old male adolescent street child claimed:

Ndakarota baba vangu vachienda kumakuva nemushonga ndakaenda kumaprofita akati uri mwana mudiki hatingakuudzi asi hama dzako dzine mishonga iri kuita kuti nditetereke. Mbuya vangu vane chikwambo chinogara mumba isingapindwi. Kundiroya kwavanoita kunoita kuti kana ndaenda kumba ndipindwe nemweya wekudzoka mutown (I dreamt my father going to a grave with herbs, and consulted a prophet who believed that am still a young child to be told me that what is happening, but told me that my relatives are bewitching me that is causing me to stray into the streets. My grandmother has a goblin housed in a hut in which no one is allowed to enter. The fact that they bewitch me inspires me back into the street when I get home).

Generally, street-living children believed that their relatives were casting evil spirits on them. These street children attributed their becoming street children on the influence of these evil spirits. One 14-year-old male street child also believed that his grandfather had cast an evil spell on him causing him to loiter in the streets, suffer from numerous illnesses, and experience nightmares while sleeping. This particular street child believed that his grandfather had cast evil spirits on his 6 siblings killing all of them. One 16-year-old male street child maintained: “*Mweya yehama dzangu dziri kuKwekwe iri kuita kuti ndisabudirire mustreet vanoda kuti ndiendeko*” (The influence of the spirits of my relatives in Kwekwe who want me to go there is foiling all my endeavours in the street). One 16-year-old female street child professed: “*Muprofita akati hama dzako dziri kuda kuti utetereke*” (a prophet said that my relatives are casting evil spirits that are causing me to go astray). Some street children were reportedly helped by Nigerian pastors who gave them help in the form of money, food and clothes and cast away evil spirits from them.

These street-living children claimed that they consulted apostolic prophets to be exorcised of evil spirits and to receive faith healing and divinations. These prophets were usually members of the Johane Masowe sect. These street-living children were usually told by these prophets that some of their relatives were casting bad spells and evil spirits on them in a way to make money out of them. One 15-year-old female street child claimed: “*Muprofita akandishandira ndikataura nemamhepo pamasowe izwi rasekuru vangu muroyi richiti ndiri kuda kuti atetereke*” (a prophet prayed for me that I became hysteric speaking in the voice of my grandfather who claimed that he wanted me to stray). When these street children had any psychological and physical health complaints, they sought the service of these prophetic services. One child professed that some of

the apostolic prophets were liars while others prophesied accurately. The adolescent children believed that some business owners were making money through what they termed *kuchekeresa*.

b) Generally, street-working children seemed to have a more positive spirito-religious self-image as compared to their street-living counterparts. Some on-the-street adolescent children attended church services regularly. Street-working children's beliefs in being under the influence of evil spirits seemed to be less strong than those by their street-living counterparts. These street-working children appeared not to believe that their circumstances were explained by the evil spirits that haunted as was believed by the street-living children. Some street children who were failing in their business efforts suspected influence of evil spirits cast on them by their relatives. These street children claimed that they were at one point in time and in their business besieged by evil spirits, and had to use religious remedies to get them back in business. One 18-year-old male vending child averred: "*Kusatengerwa zvachose mweya yetsvina inenge ichisunga, zvinotoda Mwari*" (Failing to find customers is a function of evil spirits. You need God for prosperity). A 17-year-old female vending street child claimed: "*Vamwe tinonobvunza tega kuvaprofita vanotiudza kuti basa redu rinokanganiswa nemweya yakaipa vokuudza nzira yokuita*" (we consult prophets who tell you that evil spirits are affecting our businesses, and offer us turnaround strategies).

The street-working children seemed to regularly attend church services not to receive material benefits as was done by their street-living peers but for their own spiritual growth. Some street-working children were so religious that they even paid tithes in their churches. One 18-year-old female vending child professed: "*Mweya yetsvina haizivi kuti uri pamusika inongokutadzisa*

kubudirira. Tinopiwa muteuro wematombo nemvura yakanamatirwa tokusha stuff yedu kuti itengwe” (Evil spirits also affect vending businesses as they foil our activities. We are given holy water and stones which we use to cast at our wares to boost sales). One 17-year-old female vendor said:

Vanhu vanopoterana kuti imi muri kungotengerwa sei isu hatisi? Midzi iyoyo kana mvura yemuteuro. Ini ndinobvisa chegumi, changu nechemusika Mwari anotoona kuti munhu uyu abvisa chegumi chake nechemusika zvinhu zivotofamba. Chegumi chinobatsira kuti zvinhu zvitengwe. (It’s normal for vendors to accuse each other of casting bad spells on others businesses so that people buy from her only. They would allege that the accused would be using herbs or holy water. As for me, I pay tithes both for myself and my business. God notices that I have paid those tithes and makes my business prosper. Tithing helps to boost sales).

The vending street children also blamed the role of evil spirits and colleague’s magical charms when their vending was not earning them satisfactory income. One 18-year-old male street child claimed: *“Musi wausingatengerwi unoti nhasi kwaita mawinds, mhupo inenge yasimuka inosunga zvinhu, kwakadhakwa, mweya yetsvina inokonzera izvozvo*” (On days when people do not buy your merchandise, you blame evil spirits for frustrating your business). Some vending street children supposedly urinate on their merchandise to increase their marketability.

Some street-working children believed that they were haunted by evil spirits cast on them by their parents to bolster their businesses. The beliefs of being haunted by evil spirits were also reported among street-living children. A particular 17-year-old begging male street-working

child travelled from Chitungwiza on a daily basis. This begging street child was a child of a famous bus operator who had supposedly cast some evil spirits on him. The father of this particular adolescent begging child was blamed for *kuchekeresesa* (casting bad spells that one's business at the expense of that victim) that child. Some vending street children believed that evil spirits were foiling their marital, academic and formal employment prospects. Equally still, some vending street-working children said that they were leading members of the apostolic organisations, some as prophets.

Key informant interviewees and some street-working children claimed that some street-working children seemed to reveal evidence that they were being influenced by evil spirits. For example, there was an example of an 18-year-old male street child who started working as a vendor in the city centre. This particular male street child initially lived together with his married brother who funded for him but later slept in the streets. The particular street child appeared to have developed mental illness as he could be seen talking alone and wearing weird clothes. The clothes had cloth interwoven with grass and birds feathers. Later the street child became street-living and started wearing weird clothes. Acquaintances of this street child claimed his younger brother also developed such mental illness in the rural areas of Chikomba district where he came from. These key informants blamed the influence of *ngozi* (avenging spirits of some deceased people) on these children's behaviours.

The street-working children just like their street-living peers, blamed the role of evil spirits for those who engaged in multiple sexual relationships. Some of the female street children blamed the role of *zvikwambo* (goblins) while others attributed such behaviours to the works of their

deceased grandmothers or paternal aunts who died without getting married and influenced them to remain unmarried as they had done. For instance, in the case of the 18-year-old female adolescent street child who allegedly was raped by her *mukuwasha* (customary son-in-law) while others had claimed that apparently they were having an intimate relationship secretly. This vending street child reported the case to the police and her customary *mukuwasha* was arrested and detained. This vending street child together with her niece who was the spouse of this particular man went with holy water to the police cells to exorcise the *mukuwasha* of hers and secure his release. Immediately, the *mukuwasha* of this vending street child was released from custody while the case was withdrawn and was closed. It came out that this vending street child together with her niece blamed the role of evil spirits in leading to the rape incident and the subsequent arrest of her *mukuwasha*. It was reported that this vending child was chased away by her relatives from their home in the rural areas for being very sexually permissive after she had aborted many pregnancies.

4.3.11. General Self-Image/Self-Esteem

a) In this section, the researcher presents the findings on the nature of general self-image of street-living children. Generally, the of-the-street adolescent children had low-esteem. They were worried about their future (both economic and marital), and the adversities they faced in the street (especially hunger and cold weather). These street children, also, felt they were worthless as they are *manhongorera* (those who pick food from rubbish bins) who survived on otherwise inedible food. Some street children doubted their opportunities of surviving beyond 26 years.

One male street child believed that he was lucky to have reached 16 years, as he suffered from bilharzia, was a premature (some key informants believed he was also seropositive).

It was also found that street-living children regarded themselves as worthless, and as failures in life. Nevertheless, some street-living children saw themselves as succeeding in life. The data from this study indicated that some adolescent street children belittled themselves. For instance, a 16-year-old male street child asked: “*Makamboona street kid ichiitawo zvine musoro?*” (Have you ever seen a street child succeeding in life?). Furthermore, a 17-year-old female street child manifestly decried: “*ndine munyama ndine jambwa chairo, zvandinotaura zvinongofira mukutaura. Zvese zvandinotaura hapana chinobudirira. Ndinonzi ndaba chese chashaikwa*” (I have bad luck; I do have extreme bad luck everything I suggest is never taken seriously. I do not succeed in any endeavour I pursue. I am suspected for everything stolen).

Some street-living children reported having pondered committing suicide. One 17-year-old male street-living child professed: “*ndakamboda kuzviuraya ndarumwa nenzara, ndaneta ndava kurwadziwa neupenyu*” (I once pondered committing suicide after suffering from hunger, tiredness and hardships). These suicidal thoughts appear to have been linked to low self-regard. For example a 17-year-old male street child killed himself, while, a 17-year-old female street child attempted committing suicide many times after having been divorced by her former spouse. Many street-living children agreed that they sometimes believe that “*kufa kuri nani*” (dying is better than living). Thus, adolescent street children showed some self-destructive tendencies. These tendencies included suicide, fighting with a dangerously armed person, walking carelessly across busy roads and careless risky sexual behaviours. However, some street children’s self-

image was not extremely negative as the street children showed resiliency in the face of hardships in the street.

Sometimes, the self-esteem among the street-living children was determined by the child's vocation. For example, an 18-year-old male street child said: "*Manhongorera anozvitarisira pasi ini handisi dhigira ndinoyemura upenyu hwangu ini*" (Those who pick food from bins have lower self-worth, and I have higher self-worth since I do not pick food from bins). Equally still, a 17-year-old male street child affirmed: "*Ndinozvishora ndinovenga zvandinoita ndezvechimboko*" (I despise myself since my behaviour is stupid). To further buttress the finding that street children have low self-esteem, a 13-year-old male street child decried: "*ndakauya mutown ndichiti zvichaita nani asi zviru kutonyanya kushata. Shamwari dzangu dzinoti haungabhegi hauna kufitwa ndiri nani pana ivo. Asi ndinzviona ndiri worse*" (I came in the streets hoping things will improve, but they are worsening. My friends tell me that I am too good to beg and that I am better than them. However, I see myself as worse).

It emerged that some male street-living children viewed themselves as animals. One 17-year-old male street-living child claimed: "*magundururu tiri mhuka dzakapanduka. Hatina watinozeza*" (we people who sleep anywhere are domestic animals which have gone wild. We fear no one). Another 18-year-old male street child professed: "*kana ndagumburwa newekumba ndinomuudza pachena kuti ndiri street kid ini handina kufanana newe*" (when incensed by a non-street person I openly tell him/her that I am a street kid and that I am not similar to him/her). Furthermore, many adolescent street-living children maintained: "*tichavigwa nemabandits hatina kana hama ingativiga*" (we will be buried by prisoners since we have no relatives who can bury us). These

street children saw themselves as being under the influence of evil spirits. Amongst adolescent street-living children, *sutu yebasa* was there to elicit sympathy but it degraded their self-worth.

b) The street-working adolescent children seemed to have relatively low self-esteem. The self-esteem of the on-the-street adolescent children appeared to be higher than that of the of-the-street adolescent children. Some street children believed that their chances for progress were diminished, and were considering living full-time in the street. More still, these street children's work was marked by contempt from members of the public. The prospective donors ignored them and sometimes passed derogatory statements. For instance, a 13-year-old begging male child said: "*dai upenyu hwaisarudzwa ndaidawo kugarawo kumba ndichienda kuchikoro asi hapana yekutamba mukoma ndingagodii mukoma*" (If only we could choose the lives we wanted I could be staying home and going to school but I have no option my brother). This was similar among vending street children who continually faced verbal abuse from the prospective clients. Some street-working children showed embarrassment on meeting non-street people they personally knew. Nonetheless, others felt that they were very important, and could be better than those formally employed, and educated that some even thought of going to South Africa.

Some street-working female children belittled their body image to the extent that appeared to have low self-esteem. A certain 17-year-old on-the-street child decried her body image, which was small, with no upright breasts and big hips as compared to most of the beautiful and attractive girls. She decried that the clothes she wore were not comparable to those worn by admirable ladies. A 17-year-old vending street child who was impregnated when she was in Form 1 lamented her unattractive physical morphology resignedly saying: "*handisisina chimiro*

chemhandara saka varume havandipfimbe zvinondikanganisa” (I have lost the physical vibrancy that goes with virginity that men shy away from proposing love to me).

It emerged that some of the street-working children demeaned themselves as they complained that they were officially seen as street-living children yet they lived at home. One 14-year-old begging male street child said that: “*Mapurisa navaMugabe havasarudzi kuti uri street kid chaiyo here vanokutorai voenda nemi kuMelfort Farm pamwe chete nemagunduru chaiwo*” (the police and president Mugabe do not differentiate between us begging children and these children who sleep anywhere as they take all of us to Melfort Farm). The street-working children did not want to be associated with street childhood and identified themselves with their homes.

Some vending adolescent children, nevertheless, highly regarded themselves as they esteemed their vocations. It appeared that such street children had higher vocational self-image. These children saw their vocations as reputable. Some street children claimed that their earnings surpassed those made by the formally employed, yet their vocations required little educational attainments. One 18-year-old female vending street child saw herself as better than her formally employed counterparts. To quote her verbatim she calmly but confidently boasted:

Ini ndinoita mari kudarika wemuoffice nekuti mari yake ishoma pane yangu. Panopera mwedzi ndikaverenga zvatatenga nekuita nemari unotoona kuti ndakaita mari chaiyo. Plus ini handimiriri kupera kwemedzi kuti ndiwane mari, ndinotoiwanan everyday. Apa handina kupasa chikoro. (I earn more money than the formerly employed person. At the end of each month, I realise that I would have used substantial amounts of money.

Furthermore, I do not wait for the month-end to earn as I generate it daily. Worse still, I am uneducated).

Some street-working children as was the case among some street-living children, revealed that their lives were affected by extreme bad luck. Some of these street children derided their vocations of vending. Although some vending street children seemed to be doing well, others were finding it difficult and these had low self-esteem. These street-working children with low self-esteem included those who collected and sold plastic bottles. These children very dirt appearances and seemed unhappy with their lives. These children associated vending with low educational attainment, low morals and running battles with the police. Usually, vending street children would have wanted to join the formal, market and that failure would lure them into vending. The results showed that street-working children had less suicidal ideations compared to their street-living counterparts. Indeed, throughout the period of the research, there were no reports of suicide among street-working children.

The data showed that the begging street children had low self-esteem as they were socially ostracised, coming from poor families and derided by school mates. For these children, begging was not a choice, but a burden imposed on them by their parents or circumstances. These street-working adolescent children who engaged in begging appeared to reveal sadness and frustration with the seemingly nagging parents while begging. Sometimes, these adolescent children were forced to abscond from school and engage in begging when household groceries had run out. Some of these street-working children who engaged in vending ran away from their parents at adolescence.

4.4. Behavioural Effects

In this section, the researcher presents the effects of self-image on the behaviour on both street-living and street-working adolescent children. This is consistent with the third research objective which sought to investigate the effects of self-image among street-living and street-working children on their behaviour. The behavioural effects of self-image that emerged from the data in the current study are discussed along sexual behaviours, marital behaviours, morality, hygienic behaviours, academic behaviours, vocational behaviours, physical health, self-destructive behaviours and self-enhancing behaviours.

4.4.1. Sexual Behaviours

In this section, the researcher presents findings on the sexual behaviours among both street-living and street-working adolescent children. The sexual behaviours included in this section include coercive sexual behaviours, running brothels, unsafe sexual behaviours, survival sexual behaviours and various sexual orientations. Coercive sex was endemic among adolescent street-living children. Male adolescent street children under the influence of drugs and the macho image raped female street children and sodomise male street children. The rape and sodomy victims feared reporting these abuses to the police who may arrest them for stealing offences. More still, the police usually blamed these victims for the abuses for having invited them by staying in the streets. The police officers were reported to advise the street children to avoid the sexual abuses by returning home. Sometimes the male adolescent street children were reported to intoxicate their victims with drugs and alcohol before raping them.

It also emerged from this research that these street-living children raped both street and non-street females. Non-street women were raped in certain bases that certain areas had become no-go areas. These included vleis in Mabelreign and the Mukuvisi footbridges especially the one in Braeside. Adolescent street boys claimed that they *nyopora* (rape) girls/women who rejected their love proposals. Female street-working children seemed to have lower risks of being raped by their male counterparts as compared to the street-living female street children because they were protected or guided somehow by their parents or guardians. However, some female street-working children were raped at the time of this research. For instance, a certain 18-year-old vending female child was reportedly raped by her niece's husband. Thus, the perpetrator was her customary *mukuwasha* (son-in-law). This particular street child reported the case but later made for an out-of court settlement with the alleged rapist. Some key informants reported that this particular street child went to remand prison with *muteuro* (holy stones and water) to secure release of the alleged rapist.

The findings from the current research also indicated that some female street-living adolescent children ran brothels in the street. These street children had networks of male and female clients to whom they marketed the young female street children for sexual relationships for a fee. The clients of these street children included the rich and poor, blacks and whites, and street and non-street people. It was even found that some street mothers could find sexual partners for their adolescent children for a fee. One 14-year-old female street child complained that her biological mother who also stayed in the street was arranging commercial sex clients for her. Apparently, her biological mother would take most of the money this street child made from those activities. This particular street mother had many sexual clients mainly among cross-border truck drivers.

A certain 12-year-old female street-living child developed *mhezi dzisingapori* (interminable rash), and revealed that she had developed sexually transmitted infections from sexual activities arranged for her by an 18-year old female street child. It also emerged from the data that some older adolescent street children were looking after these younger street children, and then market them to clients. These older adolescent street children reportedly got the larger share from the earnings. For instance, a certain 18-year-old female street child earned \$50 000.00 for 5 female street children whom she would pay each \$5 000.00 and then pocket \$25 000.00 as her *mari yebasa* (commission). Among the street-working adolescent children, the practice of brothels was less common. Nevertheless, some female adolescent street-working children reported that their mothers even urged many of them to engage in commercial sex to sustain their families. One begging 13-year-old female child claimed: “*mai vanoti zvekushandisa mwanangu hatina. Vanotokutuma kuita zvevarume kuti tirarame. Ivo mai vacho pamwe ndizvo zvavanenge vachitoitawo*” (Your mother tells you that food has run out in the household. To avert starving she then urges you to engage in sex work. That would also be her business). It also came out that there were networks of people who also organised commercial sex for the female adolescent street-working children.

Data from the current research also appeared to indicate that street-living adolescent children engaged in unsafe sex. Female adolescent street children who engaged in commercial sex work decried that their partners insisted on unprotected sex. More still, male adolescent street children also revealed preference for *feya-feya* (direct sex) attitude. This was ostensibly to maximise pleasure during sex. These street children justified this practice saying: *hapana kusiri kufa* (there is no other sure way of avoiding death). Many of these male adolescent street children justified

this practice of unsafe sex by reciting a popular tale of a boy who wanted to avert death by using condoms during sex only to instantly die in a car accident. According to the tale, a certain boy had found for himself a sexual partner and went to buy condoms from the nearby shops. The boy, as the tale goes, gave his sexual partner his shoes as a surety that he was coming back. Unfortunately, the boy was involved in a fatal car accident on his way to the shops that he died. Thus, the street children concluded that the tale shows that *hapana kusiri kufa* (there is no other option to avoid death). These male street children said therefore that whether one tries to avoid death in one way he surely is going to die. Apparently, some male participants in a focus group discussion asked the researcher: “*mukoma makambodya sadza makapfeka magloves here?*” (Brother, have you ever eaten sadza while putting on gloves?). In that manner, putting on condoms during sex was like eating food whilst putting on gloves.

The practice of unsafe sex was also found to be rife among street-working adolescent children. The begging and vending street children who also engaged in commercial sex also reported that their clients were against the practice of sex safe. More still, married street children reported that their husbands were very much against the use of condoms. For example, one 17-year-old married vending adolescent decried: “*murume wangu akati anondiuraya ndikashandisa mapiritsi efamily planning*” (My spouse threatened to kill me if I use contraceptives to prevent pregnancy). Apparently, this particular married street child had gotten pregnant 3 months after having experienced a miscarriage. Their husbands were very envious and believed that once they used family planning pills, then they would cheat on them in the security that they would not get pregnant. The practice of unsafe sex was even buttressed by the frequency of pregnancies and abortion among both street-working and street-living children.

It also emerged from the current research that for many adolescent street children (especially girls) sex was for survival. This appeared to be particularly prevalent among street-living children. The female adolescent street children earned what they called 'fast' money from commercial sex. These street children argued that sex work was less laborious and policed like vending and begging. These street children claimed that they made \$3 000. 00 in Mbare and \$5 000.00 in the Avenues area per round as at November 2006. Male street children begrudged their female counterparts for making more money than them. Male street children also engaged in male-female commercial sex with sugar mummies and commercial sex with men but made less money than girls.

Male adolescent street children engaged in commercial sex with men for survival. For instance, one male street child said:

Ndakanzi nemumwe mukedha wemustreet ndivhuriro makumbo ndikupe \$10 000.00 ndakati tanga wandipa akati totanga tarara tese asi ndaida kuzotiza. Ndakazobvuma nekuti ndakanga ndava nenzara asi akatanga andipa mari yacho, ndakanga ndava nenzara (A certain coloured person requested for sex with me for \$10 000. I asked him to give me the money first before we could have the sex and planned to flee with the money without having had the sex. I then acceded to his request due to hunger but he gave me the money first. I agreed because I was very hungry).

Apparently, these younger male adolescent street children seemed to engage in same-gender sex sexual behaviours with older male street children for protection and food.

The issue of survival sex was not as marked among street-working children as it was among their street-living counterparts. Some begging and vending street children supplemented their incomes sometimes through commercial sex. Some street-working female children reported that sometimes their mothers asked them to save their families from starvation through commercial sex. It was even established that at times some vending female street children saved themselves from arrest and their merchandise from confiscation by the police through sex bribes.

It also emerged from the current research that both street-living and street-working adolescent children engaged in various sexual variations. The different sexual variations included same-gender orientations, bisexual sexual orientation, autosexual orientation and heterosexual sexual orientation. It appeared however, that same-gender, bisexual and autosexual orientations were more prevalent among street-living children as compared to their street-working counterparts. Male adolescents who engaged in same-gender behaviour were primed either through sodomy or paid sex. To perfect their stealing activities, some male adolescent street children were instructed by traditional healers and herbalists to engage in same-gender sexual behaviour. Adolescent street children also engaged in heterosexual relationships. This involved having sex with an opposite sex partner. Bisexuality involved having heterosexual sexual relationships in a marital or intimate relationship and engaging in same-gender sexual behaviour for commercial purposes.

Female adolescents engaged in same-gender sexual behaviour with non-street adult women while male street children engaged in same-gender sexual behaviour with non-street adult men. Another variation is autosexuality which involved self-sexual stimulation and gratification. Both male and female adolescent street children used their own hands or simulators for sexual

gratification. Masturbation was also referred to as *hama maoko or kuveza* (masturbation) by these street children. There are autosexual competitions. The champions were the street children who ejaculated fastest and most frequently than their counterparts.

Mubobobo appeared to be common among both street-living and street-working children. Those street children who engaged in *mubobobo* appeared to be the socially inadequate who could not initiate or sustain intimate relationships. The victims of *mubobobo* were usually non-street females. In *mubobobo*, the adolescent street child ejaculates inside his pants while moving up and down one of his feet. The data revealed that the female victim reaches orgasm, messes herself, sometimes falls down and loses consciousness. The *muti* for *mubobobo* was sold at Mupedzanhamo flea market and Harare Gardens. The street children who engaged in *mubobobo*, nonetheless, iterated that they were prone to *kurohwa nechaunga* (public beating) after being caught intimate using *mubobobo*.

Adolescent street children (both males and females) also engaged in oral-genital sex. This oral-genital sex was reported to be prevalent among both street-living and street-working adolescent children. This involved sexual partners making contact between the mouth and genital organs for sexual gratification. Put differently, this is sexual gratification through licking of the genitals. Adolescent street girls were paid money for licking their clients' penis. The street-working children were also reported to be engaging in oral-genital sex with non-street partners. A certain white business owner was reported to have taken five street-living adolescent girls, and had oral-genital sex with each child in her own room the whole night. Some male street children were incensed on discovering their female counterparts were having such sexual relations with a

certain white businessman. These angry male street children reportedly stoned the car of the involved white person. These boys believed that the white business owner used to *tonyora* (bribe) police with cars or cash to avoid arrest. The prevalence of oral-genital sex was reported to be more common among street-living children than street-working adolescent children.

4.4.2. Marital Behaviour

The results from the current research revealed various marital behaviours. The marital behaviours included fertility competitions, intimate relationships, gender-based violence and divorce. Among male street-living children, it was established that there were fertility competitions. Thus, fertility was tested through impregnating their female partners even when these female street children were not prepared for the pregnancy. Male adolescent street children also at times beat female partners for aborting their pregnancies. For instance, a certain 17-year-old claimed: “*Ndakarohwa nemukomana wangu ndichinzi ndipe nhumbu yangu pandakanga ndaibvisa*” (I was beaten by my boyfriend for having aborted his pregnancy). The researcher even witnessed fights between male street children over the paternity of children born to girls with whom both would have had sex. The fights over fertility were not as marked among street-working adolescent children. It was however realised that some male street-working children consulted traditional healers, herbalists, and prophets to enhance their fertility.

At adolescence, intimate relationships were also found to be very common among street-living adolescent children. It was realised that both male and female adolescent street children preferred non-street intimate partners than their fellow street peers. Female adolescent street children referred to their fellow male counterparts in the streets as *maboorangoma* (people who cause

trouble on others) while the male street children regarded these female street children as *mahure* (commercial sex workers). Opportunities of having intimate relationships with non-street partners appeared to be slim. However, some female adolescent street children it occurred were married by reputable non-street partners. For instance, one 18-year-old was married by a white partner while another 17-year-old was married to a soldier. It appeared that those female street children maintained intimate relationships with male street children for marriage while engaging in commercial sex with *vana Mudyiwa* (sugar daddies). Some male adolescent street children managed to have intimate relationships with non-street female children. In many cases, the female intimate partners were not aware that their lovers were street children. For this reason, some street children refused to participate in street children programmes on national Television as they would be exposed for being street children. Furthermore, some male street children claimed that love is proven or shown by having sex with one's partner. These male street children chorused: "*Haungadanani nemusikana wausingarari naye*" (you can not have a girlfriend with whom you do not have sex with).

Street-working adolescent children also maintained intimate relationships. Some street-working children like their fellow street-living counterparts maintained double relationships. Thus, they could sustain a relationship with a young male whom they hoped could marry them and then having commercial sex relationship with sugar daddies. Female vending street children also preferred relationships with non-street partners. Relationships among street-working children were also marked by having sex. In this study, the researcher has alluded to an 18-year old female street-working child who allegedly maintained multiple intimate relationships. She was reportedly raped by her *mukuwasha* who was married to her niece. Her acquaintances, however,

reported that this particular vending street child was maintaining a secretive intimate relationship with her *mukuwasha* and reportedly claimed she was raped when her niece discovered it.

Gender-based violence was also found to be rife among adolescent street-living children. Marriages among adolescent street children were neither customarily, nor religiously sanctioned. Thus, intimate partners would just cohabit without paying *lobola* to the family of the female partner. Unfortunately, married female street children faced much gender-based violence from their male partners. These married female street children were given many strict marital rules. For instance, their husbands would not allow them to venture into the city centre without their permission. To buttress this point a certain female adolescent street children aged 15-years was discovered to have broken the rule of not going into the city centre without her 18-year-old husband's permission. The spouse of this particular female street child stripped her naked and engaged in sexual intercourse with her in full view of other street children because *ainyanya kuda varume vaakanga anotsvaga mutown* (was a sex maniac, the reason why she had gone into the city centre). The onlookers were instructed to ululate and urge him on. A married 15-year-old street child complained that she was beaten by her spouse for: *kufamba uchikechesa* (trading sex whilst she travelled) on her way to the city centre from their Mukuvisi Bases.

The married street children claimed that their husbands beat them using *shamhu semwana wake* (cane/whip like his child), *mbama* (slap), *simbi* (iron bars) *kana chitinha senyoka* (or bricks like a snake). Some of the married male street children justified their violence on their wives saying that was normal as even the non-street couples beat each other. One participant in focus group discussion said: “*unorohwa wonyengererwa nekukumbirwa bonde, kutengerwa hembe kana*

kurojerwa kuEpworth zvichinzi ndakachinja maitiro angu” (you are beaten and consoled by sex, being given clothes, being rented a house in Epworth and pledges that he has reformed). At one occasion, a married male street child assaulted his 16-year-old spouse with a knife at Streets Ahead for coming into town without his permission, and for questioning his extramarital relationships. This particular female street child sustained wounds and scars on the face and stomach. These scars and wounds are also seen as ‘lover’s scratches’, and are justified as proof for one’s love. Nonetheless, some adolescent street children were happily married. A certain 18-year-old male street child reported that he was happily married to her wife who was a 16-year-old female street child. This male street child appeared to love her wife so passionately that he named their daughter using his wife’s name, saying that reminded him of her wife always.

Gender-based violence also appeared to be common amongst on-the-street children. The married teenage vending adolescents were usual victims of gender-based violence. These adolescents were prone to the following forms of gender-based violence; extreme jealousy, beating, verbal abuse and being denied the chance to vend. Gender-based violence was rife among vending married adolescents. For instance, some married vending adolescents were stopped from vending. Sometimes relatives of the married vendor united in stopping the adolescent spouse stop vending. The researcher observed a fight between married female adolescents who engaged in vending who were fighting over the extra-marital affair the spouse of one of the female street child was engaging in. The male partner was reportedly engaging in an extra-marital relationship with a non-vending 17-year-old girl. The male partner aged 18-years had to flee from his wife aged 17-years after having sustained some wounds from the fight.

There were high divorce rates among married street-living adolescent children. Some married street children admittedly decried: “*Magunduru tiri poto dzemarasta dzinochinjaniswachinjaniswa*” (we people who sleep anywhere are Rastafarians’ pots which are shared frequently). Male street children impregnate and divorce female street children frequently. Male street children appeared to be always looking out for younger and more beautiful intimate sexual partners whom they could marry. Some of the street children were children of divorced parents and it appeared that these divorces were being reproduced on them. The married children did not take lightly these divorces. For instance, one 16-year-old female street child attempted to commit suicide after being divorced. What made the divorces sometimes was that the husbands would divorce them sometimes once they got pregnant and would not want them to abort these pregnancies.

Among street-working children (especially vending adolescents), divorces were also rife. For instance, one vending married female adolescent child divorced her non-vending spouse for a vending partner. Apparently, the divorced spouse was almost beaten by the new spouse for being found wearing shoes this female vending street child given by the new spouse. It was also observed that some of the vending street children had been impregnated and subsequently been divorced by their husbands. The researcher established that a certain vending couple divorced but interestingly they are selling their merchandise close to each other though the male partner then got married to a non-vending partner.

4.4.3. Familial Behaviours

Adolescent street-living children appeared estranged from their families. Many street children stressed the importance of family life and thought about their family when sick, bullied and hungry. Many street children decided going back when ill and usually they wanted assisted reunification. However, those who were reunified invariably returned into the street due to failure to get rehabilitated back into their families. It came out from the data that street children formed gangs and groups in the street, forming surrogate families. Street children generally loved their home families, but were estranged by some abuse they had faced (economic, spiritual, psychological, verbal, physical and sexual) within the family environment.

Some adolescent street children showed health relationships with their families back home. Some street children sent remittances to their families of origin. These remittances included money, groceries, agricultural inputs, school fees, clothes, stationery and uniforms. These street children also sometimes wrote letters to their family members back home. Some street children even visited their families during the Christmas holidays. One 17-year-old female street child however said she always told her family that she worked in Harare as a vendor yet she engaged in commercial sex. Many street children even went to collect their younger siblings to join them into the street.

The street-working children appeared to have more healthy relationships with their families than their street-living counterparts. Some of the begging street children appeared to be in less cordial relations, as many children detested being forced to beg. There was, also, the aspect that parents may retain political power, yet all economic burdens were shouldered on the begging children.

This influenced the emergence of the seeds for familial disharmony, and the children resorted to drifting into the street, a behaviour seen as open rebellion by the parents. When the family animosity worsened, they thus drifted into of-the-street childhood. Some of the street-living children worked together as family members in both begging and vending. Many begging children were accompanied by their parents especially mothers, though some worked with their siblings. Some begging street children accompanied their blind parents who also engaged in begging in the streets. Among vending street-working children, working with family members was prevalent still. Many of these street-working children who engaged in vending worked with their mothers, siblings and even their own children.

It was found that some street-working children had positive familial self-image. A certain 18-year-old female vending street child professed: *“my family supports me vanoti ita zviru bho-o”* (My family supports me they urge me to continue vending because it is fine). One 18-year-old female vending child who was married was given the place to sell by her father-in law while her spouse and uncle kept surveillance on her business. One 17-year-old female vending child was given her selling place by her brother who had found a formal employment, while another 16-year-old female street child vended together with her family members. Some of these vending children used the proceeds to support their families back in the rural areas; others sent school fees for their siblings others bought property like wheelbarrows.

4.4.4. Moral Behaviours

The current section discusses moral behaviours which include substance abuse, lying, stealing, fighting and violence, child labour and gangsterism. The current research revealed that adolescent street-living children abused psychoactive substances. The substances included *kachasu*, *maragadu/makabe*, alcohol and tobacco. Some street children were expelled from Streets Ahead drop-in-centre after being caught sniffing glue. The researcher found some male adolescent street children sniffing glue in a toilet as they tried to hide from Streets Ahead officials. One 16-year-old male street child found by the researcher sniffing glue in the toilet shouted: “*ndiwe wega wazviona*” (You are the only one who saw it hence keep it to your self). Abuse of psychoactive drugs by street-working children was on a smaller scale. Some vending adolescents usually abused alcohol and tobacco. Begging street children also abused drugs like glue, tobacco, alcohol, *kachasu* and marijuana.

Adolescent street-living children were also found to have a tendency for lying. Street children generally lied about the reasons why they ended up in the street, after having committed a crime and their family circumstances. Street children generally lie to police officers and social workers. This lying is usually to elicit sympathy. One 16-year-old male street child lied to Streets Ahead officials that he came from Chipinge that they drove him to Chipinge to reunify him with his family only for to tell them on reaching Chipinge that he really came from Guruve. Chipinge and Guruve are more than 500km apart and are in opposite directions from Harare. This particular street child disappointed the reunifying officials and told them that he was influenced by evil spirits to lie to foil reunification efforts. Some adolescent street children feigned disability to

solicit sympathy from passers-by and receive donations. For instance, a certain 17-year-old male street child travelled from Harare to Bulawayo in public buses feigning deafness and dumbness with a letter stamped by the Harare Central Police Station saying he is deaf and dumb. This boy received donations from sympathising passengers.

Street-working adolescent children also showed some propensity for lying. Some vending street children lied about the authenticity and quality of their merchandise. Begging street children lied to elicit more sympathy from the would-be donors. The researcher saw a street child with a letter stamped by a deputy headmaster from a public school stating that he was an orphan staying with her grandmother who was unable to sponsor her education and requested for money for stationery, levy, fees and uniforms. Apparently, this particular street child admitted that he did not attend school and was feigning being a school child.

It also emerged that both street-living and street-working adolescent children engaged in stealing. Some street-living boys referred to themselves as *matsotsi*, (thieves). This augured well with their low immoral self-image, and a stealing vocational self-image. Some of these adolescent street children bought *muti* from traditional healers and herbalists for magical powers in stealing. One 17-year-old male street child was nicknamed *Karuoko* (A Small Fishing Hook) for thieving; apparently, he stole from a police official. Even female street children engaged in these stealing behaviours. For instance, a certain 15-year-old female street child fled from home after stealing from her sister. In the street, she again stole from her peers that she at one time stole from 5 female street peers then she fled to Bulawayo. Again, a 16-year-old male street child stole a cellphone from a Streets Ahead staff member risking arrest of this researcher and other

staff members. This particular street child was alleged by his street peers to have stolen the cellphone and allegedly boasted of using *muti* in stealing.

Though street-working children claimed that they were into vending to avoid stealing, some engaged in stealing behaviours. There was an example of an 18-year-old female vending street child who stole money and cassettes the owner of his merchandise for whom he was vending. When begging male street children started engaging in stealing behaviours it appeared that they also started living in the street as street-living children. One 17-year-old male street-living child who was nicknamed *Karuoko* for thieving it was reported started as a begging street child who stopped going home and started living in the streets when begging opportunities had become slim at the age of 13 years.

The adolescent street children appeared to bribe the police after having committed crimes (including stealing) to avert being arrested. One 17-year-old male street child reported: “*ndinoba ngonjo ronditi ndipe dhizi, ndomupa kuti ndisaenda kuboma. Ndakazviita kakawanda ndiyo ndima yachoka*” (I steal and a police officer asks for bribe that I don’t go to jail. I have paid the bribes on many times). On bribing the police, it appeared that street-working children especially the vending ones, had a propensity for paying bribes to the police. It emerged that the street-working children who engaged in vending paid bribes in forms of money and the merchandise they were selling. Thus, some vending street children bribed the police officials in the form of bananas they were selling. It appeared that some street-working children engaging in vending bribed the police in form of sex. It should be clarified that these street-working children were bribing the police for being found vending without licences or at prohibited areas.

Fighting was also found to be rife among adolescent street-living and street-working children. It appeared to be strategy to for securing status, power and entertainment. It was also a way to obtain girlfriends, sex, money, clothes, food and territory. Some street children were expelled from Streets Ahead for fighting. Some male street children bodies were found to be marked by bruises, wounds and scars sustained from fighting. The bruises could be on the belly, on eyes, all over the face and even in the head. Weapons used in such fighting include bottles, stones, canes, bricks and steel rods. Though, on a lighter magnitude fighting was even found to be rife among the street-working children. Sometimes vending street children teamed up to fight against non-vending persons. Some female vending street children fought against a woman who was in an extramarital relationship with a spouse of one of the vending female married adolescent children. The researcher also observed fights between a street-working couple who fought after quarrels over the extramarital relationships involving the male partner.

Adolescent street-living children were also found to get involved in child labour and child exploitation. It came out that younger children and babies elicit more sympathy from members of the public. Younger street children were used for sex work and begging. An 18-year-old female street-living child ran a brothel in which she would hire out about five 10-year-old girls for sex. This 18-year-old street female child would get \$50 000.00, and then give each child only \$5 000.00, and pocket the difference. More still, one 16-year-old male street child referred to his 12-year-old younger sibling who begged for their sustenance as “*kadumwa kanounza mari*” (a money-spinning goblin). As a result, female adolescent street children were found to be abusing these in a way to obtain money from members of the community. Adolescent street children on many occasions carried babies on their backs to obtain donations. More still, younger street

children were even forced to carry these babies by these adolescent mothers to obtain donations. For instance, one 13-year-old female street-living child decried the exploitative experiences they faced saying:

Mai Peter vari kutiberekesa mwana wavo anorema tichikumbira mari tikawana mari votora yakawanda votipa shoma. Kana tikawana \$30 000.00 ivo votipa \$1 600.00 yesadza paManhunzi ne\$400 yekwaMai Musodzi kumafilm kwatinorara vakatengera mwana wavo mafleece nemari iyoyo. Vakamboti taba mari yavo \$12 000.00 ini neshamwari yangu tikavapa vakatora mari iya. Takambotiza kutakudzwa mwana iyeye vakatitevera vachiti ndinokurovesai nevakomana tikadzoka (Peter's mother is forcing us to carry her heavy baby while begging when we get the money she takes the largest share. If we get \$30 000.00 she gives us \$1 000.00 each, \$400.00 for entry fees into *Mai Musodzi* where we sleep, and \$600.00 for sadza at Manhunzi open-air food restaurant. The remainder she uses for herself and buys fleece suits for the baby. She once accused me and my friend for stealing her \$12 000.00 and took back the money she had given us. We once ran away from her, but she followed us and threatened to have us beaten by the boys if we ever do that again).

The younger street children appeared therefore to face economic abuse and exploitation from the older adolescent street children and adults to whom they surrendered their earnings for fear or protection.

Among street-working adolescent children, child labour and exploitation was also found to be rife. It was found that many children were forced to drop from school to assume vending and begging duties. Invariably, these duties were also to fend for the family. Sometimes some of

these working street children doubled both schooling and working. The child labour also involved sex work as sometimes older people used the adolescent street children for commercial sex work while they pocketed the larger share from the proceeds. The vending children were hired by others had negative self-image since they worked either for a small wage or only for shelter. These hired vending children complained of *kubatirirwa* (exploitation) as they were given paltry wages.

In the same way, some street-working children complained of exploitation by the older adolescent street children who took most of the proceeds from the begging. Some of the begging adolescent street children were forced by their parents to beg, and were angry with their parents who made somewhat unrealistic demands on them. One 13-year-old male begging child distressingly decried: “*Ukaenda ne\$5 000 bedzi unotswinywa nzeve uchinzi wauyirei nemari shoma iyi*” (If you manage to raise only \$5 000.00 you will have your ears pinched for bringing home little money). These street children seemed to feel that they were being abused economically by their parents who made demands they could not meet by forcing them to bring large sums of money.

Gangsterism appeared also to characterise adolescent street-living children behaviour. The adolescent street children formed or joined street gangs. These gangsters teach, organise and execute gang rape, gang robberies, thefts, muggings and beating of both street and non-street children. The gangs are usually termed Mafia, and composed of street children belonging to the same base. The gang leaders are known as Monya, Boss of Mafia, *Mafokofoko*, among other titles. These street gangs were found to encourage their members to enrol for karate, gym and

taekwondo training. These street children gangs, also, mentored their members on the art of performing sex, stealing, beating and fighting methods. These gangs were, as well, used for revenge when one of their members is wronged. These street-living children vandalised Streets Ahead property after having been incensed by disciplinary expulsion of their rule-breaking members. The Net One, Mabelreign and Mukuvisi base members were reported to be some of the notorious gangsters. At one time street gangsters went on a rampage raping fellow street children in bases, and beating up company authorities for underpaying some of their members after unloading their property. Gangsterism was found to be less evident among the street-working children. Its approximations could have been the incidents when street-working adolescent children engaging in vending teamed up to beat a female vendor for snatching their fellow vendor's husband or to beat anyone who had wronged any of their colleagues.

4.4.5. Hygienic Behaviour

Adolescent street-living children were prone to non-hygienic behaviours; for example, hiding food in a toilet. Many adolescent street children were also found to detest bathing. Failing to bath, however, made them appear as genuine street children to members of the public as a way to elicit sympathy and donations. It was also established that female street children lacked proper sanitary advice and accessories. The street children also warmed their bodies with fire from plastics and tyres which produced soot that darkened their appearance and made them very dirt. Mukuvisi River where some street children bathed was unhygienic as many contracted bilharzias. The researcher observed that street children sometimes used dirt papers or the bare

ground as plates from which they ate their *sadza*. Sometimes the street children slept in mosquito-infested and stinking rubbish bins the whole night.

Interestingly, some street children believed that failure to bath made them contract bilharzias. One 17-year-old male street child reported: “*Ndakarara nemusikana ndikaita sick aisageza kunhu kwake.*” (I had sex with a girl who infected me with an STI since she did not bath her genital area). The adolescent street children also described themselves as strong as they are exposed to unhygienic circumstances. One 16-year-old male street child openly said: “*Zvandinodya ini ari kumba akazvidya anoita cholera. Ini ndinobura food yangu mubin ndinobvisa vhudzi necotton zvevakadzi ndodya food yacho handitombogezi maoko futi asi handirwari.*” (I obtain food from the bin and any non-street person who eats such food would suffer from cholera. I really remove women’s hair and sanitary ware, and enjoy the food, and do not even wash my hands, but I do not contract any diseases). The street children had their food and slept next to their stool.

The researcher found that unhygienic behaviours were noticeable among street-working children though a less marked scale as compared to their street-living peers. Some street-working children who engaged in vending openly reported that they sometimes urinated on their merchandise to increase their marketability. More still, some street-working children who engaged in begging ate food they picked from bins which was largely unhygienic. Like their begging street-living counterparts, street-working children who engaged in begging put on dirt appearances. These children did not bath; neither did they put on clean, nor nice clothes. This appearance was referred to as *sutu yebasa* (work suit). This *sutu yebasa* was necessary among street children for

eliciting sympathy from the *mhene* (donors). This *sutu yebasa* appearance revealed that they are really needy and genuine street children. Such a street child is then referred to as *Chibhonda* in Shona or *Isibonda* in *isiNdebele* meaning a vagrant. Dirty and ragged clothes elicited sympathy from their donors.

4.4.6. Academic Behaviours

The street-living adolescent children seemed to dislike going to school. A few street children attended the informal lessons at Streets Ahead. These children attended skills training lessons in basket making, knitting, sewing and making shoes from tyres. Some street children were sponsored by certain organisations and individuals in schooling, however, many then drop out from those schools. Sometimes these street children became violent to the helping people, fellow school children and to the teachers. At times, however, the school authorities showed failure to rehabilitate these street children back into non-street community. For instance, a 15-year-old female street child was disappointed when an administrator at a school where she had enrolled scorned her for being a former commercial sex worker. Some children however blamed the work of evil spirits in disrupting their academic career.

The street-living children also blamed the role of evil spirits in their anti-schooling tendencies. One 17-year-old street child blamed the work of evil spirits in his earlier behaviour of refusing to go school. He reported that at one time, he had two white donors interested in sending him to school, but he rejected the offers. In retrospect, the boy regretted that behaviour, and blamed the role of evil spirits. He has since returned to school, though, now older than his classmates (he is

17-year-old, yet in Form 1) and attained 13 units from grade 7 examinations for 2006. The adolescent street-living children appeared, however, to realise later that education is key to success. Some then started pestering charitable organisations for educational assistance. Some of the street children who enrolled in schools seemed to perform well academically, integrated well with peers and authorities. It appeared that only a few street-living children were interested in schooling. Two male street children wrote their grade 7 examinations and attained 13 Units at the age of 17 years. One 17-year-old male street child had to skip grades in primary education to catch up with agemates and still performed well.

The street-working children displayed variations on their educational behaviour. Some vended and begged to secure money for their own and siblings' educational fees. This showed that many appreciated the importance of schooling. Some street-working children sponsored their won education through begging and vending earnings. It was interesting to note that some of these children went on to pass their ordinary and advanced level examinations. From begging and vending these children secured money for buying stationery and uniforms, and for paying school fees. It was however interesting to note that though some initially worked in the streets to secure money for educational purposes, some dropped out of school as they ended up working full-time in the streets. Many were forced to drop out of school by their parents and hardships while others dropped out of school voluntarily. Some children however, started begging and dropped out of school while others had completed their schooling. These street-working adolescent children cited cases of former street-working children engaging in vending who reached the university level that some of them cherished reaching the university level.

4.4.7. Vocational Behaviours

It should be indicated that adolescent street-living children revealed various vocational behaviours in the streets. Some street children revealed seemingly excellent vocational plans and behaviours. An 18-year-old street child published a book titled, *A Zimbabwean street story*, while in the street. This child had not attained an Ordinary level certificate and attributed his success to God's benevolence. He sourced funding from donors for publication of the book on his own. Apparently, he reported this attracted the remonstrations from the service providers for by-passing them in sourcing sponsorship from the donors. This child negotiated for €2, 400 for the publication of the book. He even went to Botswana to market the book. Similarly, there was a case of an 18-year-old male street child who was a skilful artist who could draw a portrait of a person within a few minutes while the person waits.

The adolescent street-living children engaged in many vocations. Some street-living children attempted to emulate former street children who had excelled in various fields. These children cited many cases of enterprising people who were former street children. Some are well-known musicians others are street theatre artists while some have become degreed social workers. The adolescent street children sometimes attempted to emulate these and some engaged in street theatre. Some former street children have become footballers playing for the national soccer team, some for various premier teams while others for various South African premier teams. A certain adolescent street child was excelling in Zimbabwean first division league. The researcher conducted soccer and netball training sessions among the adolescent street-living children and realised that some of them were talented in sporting activities.

Some adolescent street-living children seemed to break into formal employment. Some of these street children started joining private security companies as security guards; others became cross-border traders while others become full-time thieves. Some street engaged in parking cars in the Central Business District. One 18-year-old male child who engaged in vending managed to go to South Africa after his Ordinary level examinations. A significant number of street children complained that their vocational plans and future had been scuttled by unavailability of birth certificates as prospective employers wanted those for them to give them jobs.

Street-working children appeared to equally reveal various vocational behaviours. Some vending street children performed well in school and saw themselves breaking into formal employment. Some street children engaging in vending appeared to become satisfied with vending careers that they claimed that they continue vending as adults. These vending children wanted to emulate some vending adults who had started vending as children while for some children, vending seemed to be a family vocation that they believed they would never break from such a career. Indeed, some street-working children who engaged in vending had started that vocation as young children when they accompanied their vending parents. It was also noticeable that some of their parents had started that vending as children. Those who collected and sold bottles also seemed to become full-time sales persons of bottle and plastic bottles. Some begging street children sought formal employment after completion of school, some ended up engaging in full-time vending.

Some street-working children had interesting ambitions and vocational behaviours. It was interesting to note that some of these children wanted some prominent vocations like become drivers of public transport vehicles, others still wanted to become successful businesspeople.

Some of the vending street children wanted to secure driver's licences that they would drive commuter omnibuses and long-distance heavy vehicle trucks. The researcher was aware of three vending street children who travelled to South Africa to work there. Other vending street children wanted to emulate some entrepreneurs who have succeeded in various business endeavours yet they started as vending children.

4.4.8. Ecological Behaviours

The street-living children appeared to have developed a sense of identification with the street environment within which they worked and lived. These adolescent street children had bases where they slept, prepared their food and hid their personal belongings. The bases acted as their homes. The bases were on the periphery of the CBD, at shopping centres, in dilapidated houses and along the Mukuvisi River. Entry into the bases by strangers was restricted. Key informants reported that even the police were at one time refused entry and repelled by the adolescent street children who threw stones at them. Some of the bases were circumvented by human stool apparently to repel intruders. Some of the adolescent street children planted maize crops next to their bases while many stole the ripe maize from nearby fields.

The adolescent street children did not only identify with their bases, but also with the places where they worked. The work they engaged in included parking cars, begging, commercial sex, stealing and sometimes vending. These adolescent street children sometimes worked close to their bases. Other street children were not allowed to 'trespass' into the working zones of others. The street children also developed a deeper understanding of the CBD and its roads. Many of the

street children crossed streets even when there were on-coming cars and appeared very adept in avoiding accidents. Some of the adolescent street children had tattoos of road signs for instance, ‘give way’, ‘stop’ and ‘pedestrian crossing’ signs on their hands and legs.

Closely related to the identification with the street environment, many adolescent street-living children appeared to detest rural settings. Many of these adolescent street children seemed to prefer lives in the city than in the rural areas. The rural areas were detestable for the tedious and laborious chores like livestock herding and tilling land. For instance, one 16-year-old male street child was reunified with his maternal grandmother in the rural areas, but fled as he claimed that he did not want to be forced to herd cattle. He flatly remarked: “*ndakadzoka mutown netsoka ndati handingafudziswi mombe*” (I returned to the city on foot after refusing to be forced to herd cattle). More still, a 15-year-old male street child unmistakably claimed: “*Handiende kumusha baba vangu vava nemumwe mukadzi handidi kufudza mombe kumusha ini ndinogara mutown neshamwari dzangu*” (I will not go to my rural areas my father is already married to another woman, and I don’t want to herd cattle there, but I would rather live in the streets with my peers).

Street-working children, especially, vending children, appeared also to have an affinity to their working places. These appeared not to tolerate competitors at their selling places. One 17-year-old married female vendor claimed that her stall is referred to as Mai Phiri’s (pseudonym), showing that it is owned solely by herself. Asked how she would respond if someone was to invade her trading stall, a colleague standing by affirmed: “*tinotouya tomudzinga nokuti ndepavo pavo vega, vanotengesera pamhiri apo havatombouyi pano*” (we will have to chase him/her

away this place is hers and hers alone. A 17-year-old vending male street child selling newspapers and airtime recharge cards claimed:

Pano ndopandinoshandira hapana anouya pano tisina kutenderana. Munhu akauya achida kutengesa manewspaper ndinomudzinga vekumaoffice vanoziwa ini bedzi. Anouya nemanewspapers ndinomutorera manewspaper acho ndotengesa. Pano hapasvikwi (This is where I work no one will come without my agreement. If anyone comes willing to sell newspapers, I will expel him/her because the authorities know only me. I will confiscate the newspapers and sell them. This is a no-go area).

These street children seemed to have developed a sense of identification with their selling places that they would repel any intruding competitors.

There is a tendency related to ecological behaviours that emerged from the data that is termed streetism. Some key informants indicated that both street-living and street-working children developed streetism which they defined as an addictive state among street children which is predicted by a high ecological self-image. It is the adjustment to a 'sweeter' street life without hard work, adult guidance, and timetable. This is as opposed to home life where they are under the 'strict' control of parents or guardians. Streetism appeared also to characterise the adolescent street-living children. It should be reiterated that many of the street children prone to streetism have broken some rule/s at home. For this reason, some on-the-street children decided against returning home and drifted into of-the-street childhood.

Comparably, among street-working adolescent children, streetism tendencies were evident. These were generally in two ways. It was either in appearing as having become used to working

in the streets or even becoming street-living. On getting used to working in the streets, some street children seemed to have assumed careers as street-working children. These children continued working in the streets throughout adolescence that some seemed to see themselves working in the streets as adults. Those children who were school-going even dropped out of school to get involved almost permanently as street-working children.

The second dimension of streetism was when some street-working children became street-living. Some would have started as begging children who return home at night. These street-working children would end up living in the streets for a number of reasons. Some of the reasons included fears of having earned paltry monies on such days, finding that they have more freedom and entertainment in the streets and sometimes due to the influence of psychoactive drugs, they would have used in the streets like glue. For instance, a certain 13-year-old male begging child echoed that her mother pinches her ears for raising only \$5 000.00. Such children had tendencies of becoming street-living. Though becoming street-living was common among begging children, the researcher witnessed a case of a vending street child who later street-living child.

4.4.9. Pathological Behaviours

This section discusses pathological behaviours among both street-living and street-working adolescent children. The pathological behaviours that emerged from the research are sociopathology and psychopathology. Sociopathology refers to habitual breaking of known social rules. Many adolescent street-living children tended to exhibit such antisocial behaviours. The antisocial behaviours which many adolescent street children engaged in included stealing,

rape, shouting at people, fighting, defecating at public places, snatching people's goods, beating people and bathing in public. It was common to hear the street children shouting obscenities at each other and even on non-street people. For instance, a 17-year-old male street-living child asked for money from a certain middle-aged man in full view of the researcher. This man fearfully but humbly told the street child that he had no money. In response, this particular street child shouted: "*beche ramai vako*" (your mother's vagina). Generally, street children appeared to be disrespectful to the elders. Some of these adolescent street children claimed that they were *mhuka dzakapanduka* (wild animals). This trend was found to be less marked among adolescent street-working children. The approximation to it was the group behaviours among some street-working children who engaged in vending which involved ganging against anyone who wronged anyone of them or the obscenities sometimes spoken by the vending street children.

Psychopathology refers to mental illness, and is related to sociopathology though the latter is social in nature. It appeared that many of the adolescent street-living children were psychologically normal. These adolescent street children claimed: *hatimhanyi bani* (they are normal). It was interesting to note that many of these street children showed tendencies of tenacious, hardy and resilient. The lives and circumstances the street children found themselves in were largely stressful and could predispose them to psychological illnesses.

Nevertheless, some adolescent street children appeared to exhibit psychopathological tendencies. Some adolescent street children seemed to have developed extreme psychopathological conditions. These included talking and moving alone, always moving with sacks, wearing weird

clothes, not bathing and extreme paranoia. There was an example of an 18-year-old male street-working child who developed an extreme psychopathological condition. This particular street child started as a vendor selling sweets and *maputi* but returning home at night where he stayed with an older brother who worked as a builder. Later the street child stopped returning home and started working and sleeping in the streets. Interestingly the street child visited his mother in the rural area regularly bringing her groceries. After some time, this street child started talking alone, wearing weird clothes and staying alone. This street child continued visiting her mother and buying her groceries though his psychopathological condition appeared to deteriorate further.

Research participants attributed the psychopathological tendencies to the influence of evil spirits, effect of psychoactive substances like *kachasu* and the adversity they faced in the streets. Accordingly, the belief is that there is *kuchekeresa* (a way of casting bad spells on someone that your business prospers). For instance, there was a certain 17-year-old begging street child who travelled from Chitungwiza daily. This child was believed to be a child of a certain business owner in the transport sector who was blamed for *kuchekeresa* (casting bad spells that one's business at the expense of that victim) that child. Apparently, that child is termed a *zengenene* (mentally challenged). The key informants and street children advanced the idea that business owners have a propensity of *kuchekeresa* their children to maximise their commercial fortunes.

4.4.10. Spirito-Religious Behaviours

Some adolescent street-living children attributed spiritual explanations to their behaviour. These street children further believed that they are haunted by evil spirits. Such street children believed that their relatives were casting evil spirits and goblins on them causing them to *tetereka* (go

astray). One 16-year-old male street child straightforwardly pronounced that he experienced “*kamweya*” (spiritual influence) to get back into the streets after having attempted to get home. Interestingly still, some street children were members of certain Christian churches, some had bibles they read in the streets while others even formed prayers groups in the streets. These street children turned to prayers when things had gone worse.

The adolescent street-living children seemed to use religious or spiritual strategies as coping mechanisms. Some street-living children consulted herbalists and traditional healers for spiritual remedies or divinations when they were in distressful situations. It appeared however, the popular spiritual solution among street-living children involved consulting prophets. These street-living children consulted prophets to exorcise themselves of the evil spirits. Some of the street-living children indicated that some prophets had told them that their relatives had bewitched them or had cast evil spirits which had inspired them to become street children. Reportedly, such bewitching or the evil spirits had led to the development of estranged relations with their family members. One 16-year-old male adolescent street child claimed:

Ndakarota baba vangu vachienda kumakuva nemushonga ndakaenda kumaprofita akati uri mwana mudiki hatingakuudzi asi hama dzako dzine mishonga iri kuita kuti nditetereke. Mbuya vangu vane chikwambo chinogara mumba isingapindwi. Kundiroya kwavanoita kunoita kuti kana ndaenda kumba ndipindwe nemweya wekudzoka mutown
(I dreamt my father going to a grave with herbs, and consulted a prophet who believed that am still a young child to be told me that what is happening, but told me that my relatives are bewitching me that is causing me to stray into the streets. My grandmother

has a goblin housed in a hut in which no one is allowed to enter. The fact that they bewitch me inspires me back into the street when I get home).

It appeared therefore that some street children believed that the influence of evil spirits was causing them to stray in the streets and avoid going back home.

Interestingly, among street-working children, some vending children claimed that they were prophets in the apostolic churches. Some of these children also regarded themselves as active and regular members of their churches. Some street-working children claimed that they sprayed holy water on their wares, and paid tithes in churches that their businesses prosper. One 18-year-old female vending child professed: “*Mweya yetsvina haizivi kuti uri pamusika inongokutadzisa kubudirira. Tinopiwa muteuro wematombo nemvura yakanamatirwa tokusha stuff yedu kuti itengwe*” (Evil spirits have no respect for vending businesses as they foil our activities. We are given holy water and stones which we spray at our wares to boost sales). Some vending street children claimed that they paid double tithes for themselves and for their businesses.

4.4.11. Physical Health-Related Behaviours

Adolescent street-living children exhibited various behaviours related to their physical health. These street children believed that they had physically strong bodies. Apparently, the male street children had a macho image. Male street children engaged in fights from which they sustained bruises and wounds. More still, the street children ate unsafe foods like food from bins without washing hands. Sometimes the food was mixed with rats and women’s sanitary waste. Even the drugs, especially *kachasu* and glue these children consumed, were hazardous to their physical health. The foods the street children ate predisposed them to diarrhoeal diseases like dysentery

and cholera. It appeared that many adolescent street children were resilient as they hardly faced physical health defects. Some street children however died ostensibly from cholera.

The adolescent street-living children also engaged in unsafe and risky sexual behaviours which predisposed them to sexually transmitted infections. These street children engaged in intimate relationships with multiple sexual partners. The sex seemed to be unprotected as many children claimed that they preferred unprotected sex as the most pleasurable. The researcher helped the street-living children access medication from Cuban doctors at Streets Ahead and visited a private surgery where they also sought medication. The street children complained of mainly sexual infections. The adolescent street children appeared to be prone to the following sexually transmitted diseases, gonorrhoea, syphilis, HIV and AIDS and genital warts. Stillbirths and miscarriages also appeared to be rife among street-living mothers probably due to teratogenic influences of sexually transmitted diseases like AIDS.

Related to the physical health, were the seemingly high mortality rates for street-living children. The unofficial mortality rates collected from research participants showed there were high death rates among street-living children and that seemed to be related to the risky physical-health related behaviours these children engaged in. Though not backed by official statistics, the mortality rates among street children appeared to be high as street children died frequently. Many street children doubted their survival beyond 26 years. For instance, about 8 adolescent street-living children in the streets of Harare were reported to have died between January and mid-February 2007. These children died due to over-consumption of *kachasu*, illnesses and accidents. The other street children blamed “*zvirewere zvemuZimbabwe zvinosanganisa AIDS*

neflue” (Zimbabwean diseases which include AIDS and flue). Some street children seemed to reveal AIDS-related symptoms like STIs, extreme and unending rash. One 16-year-old male street child claimed: “*Munhu ane sick anochema ende anonhuwa ndinosizviita*” (A person suffering from sick cries and stink, I have experienced that). On four occasions, the researcher helped street children receive medication from doctors; he found that about 20 children were infected with STIs. A street child who indulged in oral-genital sex developed *mapundu* (rash) on their lips.

Among street-working children, rates of mortality and illnesses appeared to be less common as they were among their street-living counterparts. The research findings showed that miscarriages and stillbirths occurred among pregnant female street-working children. The street-working children acknowledged also that some adolescent street-working children had died from HIV and AIDS-related illnesses. The researcher was however told by some street-working participants that some street-working children were ill with HIV and AIDS-related diseases. The street-working children seemed to engage in health-seeking behaviours like consulting clinics and hospitals when they ill. These street-working children had easier access to clinics because they had families who helped them and had the identity documents unlike their street-living peers.

Some older street-working adolescent children had poor physical health seemingly because of risky sexual behaviours they engaged in. The poor physical health was marked illnesses like sexually transmitted diseases though at a lesser scale as compared to their street-living peers. For the married street-working female adolescents, unsafe sexual practices exposed them to poor physical health conditions. For example, one 17-year-old married vending adolescent decried:

“murume wangu akati anondiuraya ndikashandisa mapiritsi efamily planning” (My spouse threatened to kill me if I ever use family planning pills). This particular married street child had gotten pregnant 3 months after having experienced a miscarriage.

Some street-working children engaged in risky sexual practices like oral-genital sex and multiple sexual relationships which exposed them to Sexually Transmitted Infections. The female street-working children engaged in such cross generational sexual relationships with sugar daddies especially wealthy male adults. Data from the current study revealed that some street-working children contracted sexually transmitted infections like syphilis and genital warts. Some of these street-working children revealed to the researcher that they contracted these sexually transmitted diseases from their multiple and risky sexual relationships and sought treatment from herbalists and traditional healers especially at Mbare Musika and from clinics. Among married vending adolescents, it was also revealed that the male partners usually brought the sexually transmitted infections from some multiple relationships they had and passed on these infections to their wives. What was distressing from the findings was that these male partners sought treatment on their own without communicating with their female partners or sometimes blamed their female partners for such infections. The street-working children seemed to have lesser incidences and magnitude of sexually transmitted diseases as compared to their street-living counterparts.

4.4.12. Self-Destructive Behaviours

Adolescent street-living and street-working children appeared to exhibit self-destructive behaviours. These self-destructive behaviours had a likelihood of worsening the street children's plight or even result in their imprisonment, injury or death. The self-destructive behaviours

included abusing hazardous psychoactive substances, having risky and unsafe sexual behaviours with multiple partners, fighting with a dangerously armed person and stealing even from a police officer. On dangerous substances, street children abused substances like *kachasu* and glue. *Kachasu* is dangerous as it discolours the skin, is highly inflammatory to body organs, can lead to sudden death, causes early aging and slows down reflexes. It is illegal and believed to be powerful enough to power a vehicle engine. It was established that a certain 17-year-old street-living child died in his 15-hour long sleep after having consumed *kachasu*. Some street-working children who engaged in begging also sniffed glue even at home. A sleeping street child 'high' on glue or *kachasu* could be tattooed by fellow street children without waking up. Some street children only woke up to find themselves in police custody after having committed offences while 'high' on these substances. More still, the adolescent street children sometimes slept in a rubbish bins with menacing mosquitoes, strong awful stench and risked contracted diseases like malaria and cholera.

The adolescent street children appeared also to engage in self-destructive behaviours like having unsafe sex with multiple partners. The street children disliked use of condoms during sex and questioned: "*Makambodya sadza makapfeka magloves?*" (Have you ever eaten food while putting on gloves?). When asked whether that was not dangerous to their health, they asked: "*kusiri kufa ndekupi?*" (What option is there to avert death?). Similarly, street-working adolescent children seemed to engage in unprotected sex. One 17-year-old male street child-working bluntly proclaimed: "*ndatova mubus chasara kuburuka paguva rangu, ndinotopafira chete*" (I am already in the bus to my grave; I will definitely die for sex).

Sometimes these adolescent street children spurned the advice they received to desist from risky intimate affairs. For instance, an 18-year-old male street-living child was advised by his 16-year-old brother to disengage from an intimate relationship with a promiscuous 16-year-old female street child. The older brother replied: “*Upenyu hwangu hahwusi hwako, siyana neni*” (This is not your life but mine, leave me alone). Similarly, some street-working adolescent children seemed to engage in self-destructive behaviours as many seemed to engage in unprotected sexual relationships with multiple partners, while others divorced their intimate partners frequently risking contracting sexually transmitted infections. Generally, the self-destructive behaviours appeared to be more common among street-living than street-working children.

4.4.13. Self-Enhancing Behaviours

Some street-living and street-working children tended to reveal self-enhancing behaviours. The self-enhancing behaviours were behaviours to enhance their self-esteem, personal survival and progress. These behaviours included consulting apostolic prophets and traditional leaders or herbalists to get divine intervention and charms. Such divine consultations were to boost their career prospects, health, intimate relationships, marriages and vending businesses. For instance, some vending children paid double tithes both for their businesses and for themselves to boost their businesses. The divine consultations were done in the belief that their lives were being affected by evil spirits. One 18-year-old female vending child professed: “*Mweya yetsvina haizivi kuti uri pamusika inongokutadzisa kubudirira. Tinopiwa muteuro wematombo nemvura yakanamatirwa tokusha stuff yedu kuti itengwe*” (Evil spirits have no respect for vending businesses as they foil our activities. We are given holy water and stones which we sprinkle at our wares to boost sales). Thus, these street children appeared to enhance their lives and their

self-esteem through use of spiritual remedies which also seemed to counteract the influence of evil spirits.

Education was one way through which both the street-living and street-working children appeared to enhance themselves. Some street children went to school even though they appeared over-aged for their grades. Two male street-living children wrote their grade 7 examinations and attained 13 Units at the age of 17 years. One 16-year old street-living child had to skip grades in primary education to catch up with agemates and still performed well. Some street-working children performed well in school. Some of these children paid school fees for themselves and for their siblings with incomes from their vending activities.

The self-enhancing behaviours were also revealed through vocational behaviours among street-living and street-working children. Some street children exhibited remarkable tendencies in career and vocational planning. Interestingly, an 18-year-old street-living child published a book about street life while in the street. This child had not attained an Ordinary level certificate and attributed his success to God's benevolence. A 17-year-old street-working who engaged in selling bananas and ended up selling paraffin that he earned a lot of money. By the end of the study, this vending child had established himself as a successful paraffin vendor that he teamed up with some older and successful vendors that they could buy paraffin direct from Botswana. Some street-living and street-working children progressed in their careers that some ended up working in South Africa, while others played soccer for football clubs in the Premier League.

4.5. Chapter Summary

In this chapter, the researcher presented the results that were obtained from the data from the present study. The results were analysed in tandem with the research objectives. It emerged that the self-image of the street children is multi-dimensional and precisely hendecagonal. The self-image of the street children in this study appeared to be largely negative. Behaviours that seemed to result from such nature of self-image were mainly self-destructive and risky. Nevertheless, for some street children, self-image was found to be positive while some street children showed progress in their lives. In the next chapter, the researcher discusses the findings and provides the conclusions and recommendations from the current study.

Chapter Five

Discussion, Conclusions and Recommendations

5.1. Introduction

In the previous chapter, the researcher presented the results of the current study. The thesis in this study was that the street is a risky eco-developmental context for development of positive self-image. Results seemed to confirm that the street is not conducive for positive self-image development. In this chapter, the researcher presents the discussion of the findings. In discussing the findings of this study, the researcher integrates the research findings with available literature. The data from the current research appeared to gel with available literature. The current study nevertheless, being qualitative lacks the scientific precision and rigour to make any strict links between variables that only tentative connections have been made. This chapter fittingly ends with the conclusions and the recommendations emergent from this study.

5.2. Indicators of Adolescent Self-Image

The first objective for the current study sought to determine the indicators or dimensions of self-image among street-living and street-working children. Data from this study appeared to indicate that self-image is a multidimensional and hierarchical construct. This finding seemed to dovetail with the model by Oosterwegel and Oppenheimer (1993a, 1993b, 2002) that self-image is a multidimensional and hierarchical construct which develops in transactional interaction with the environment. In these two scholars' model, global self-image was represented at the apex of the hierarchy, and was divided across multiple contexts. In this study, adolescent self-image was found to be composed of 11 dimensions. These included physical, vocational, social, familial, moral, academic, sexual, ecological, spirito-religious and psychological self-image with self-

esteem at the apex. Self-esteem can, as well, be termed general self-image, and is determined by the interaction amongst the other 10 dimensions. From these results, the researcher constructed a model on adolescent street children self-image. The model in Figure 2 on page 214 evinces the hierarchical multidimensional model of self-image on adolescent street-living children. This model has eleven self-image dimensions. At the base are vocational, ecological, physical and social self-image. These base dimensions were dimensions that appeared the more salient and crucial for the adolescent street children. At the next level are the second order dimensions comprising of familial, academic, sexual and moral self-image. The third order dimensions are two, comprising mainly of psychological and spirito-religious self-image. The two levels, second and third order dimensions are almost similar though the latter are predominantly mental constructs. The apex level has a single self-image dimension which is an evaluative or emotional dimension of one's worth, the general self-image or self-esteem.

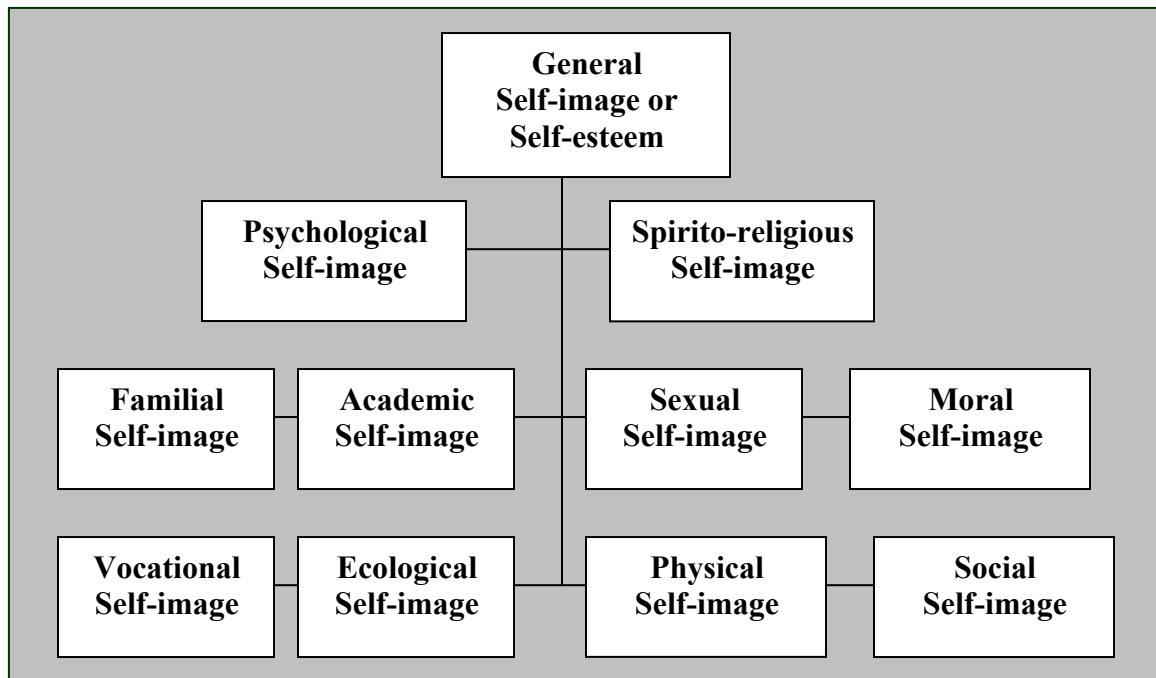


Figure 2 Hierarchical Self-Image Model on Adolescent Street-Living Children

Figure 3 on page 216 highlights the hierarchical multidimensional model of self-image on adolescent street-working children. This model is hendecagonal or 11-sided. At the base are academic, familial, physical and vocational self-image dimensions. At the next level are the second order dimensions comprising of social, ecological, sexual and moral self-image. The third order dimensions are two comprising of psychological and spirito-religious self-image. At the apex of the hierarchy is self-esteem or general self-image. The two models (for street-working and street-living children) were similar only that there were differences with regards to the base and second order dimensions. For the street-working children's model, the base dimensions comprise academic, familial, physical and vocational self-image whereas the model for the street-living children has vocational, physical, social and ecological self-image.

In constructing the model, the researcher looked at the importance that was attached to each dimension. It appeared that the familial and academic self-image dimensions were more important for street-working children while social and ecological self-image dimensions were more important for street-living children. Thus, street-living children appeared to attach more importance to their social worth and their identification with their living and working places more strongly than their street-working counterparts. Furthermore, it also appeared that the street-working children attached more importance to their schooling and familial relations than their street-living counterparts. For second order dimensions, street-working street children have social and academic self-image; whereas, street-living children have familial and academic self-image; though, all have sexual and moral self-image on this level. The third order and apex dimensions for the two groups are similar.

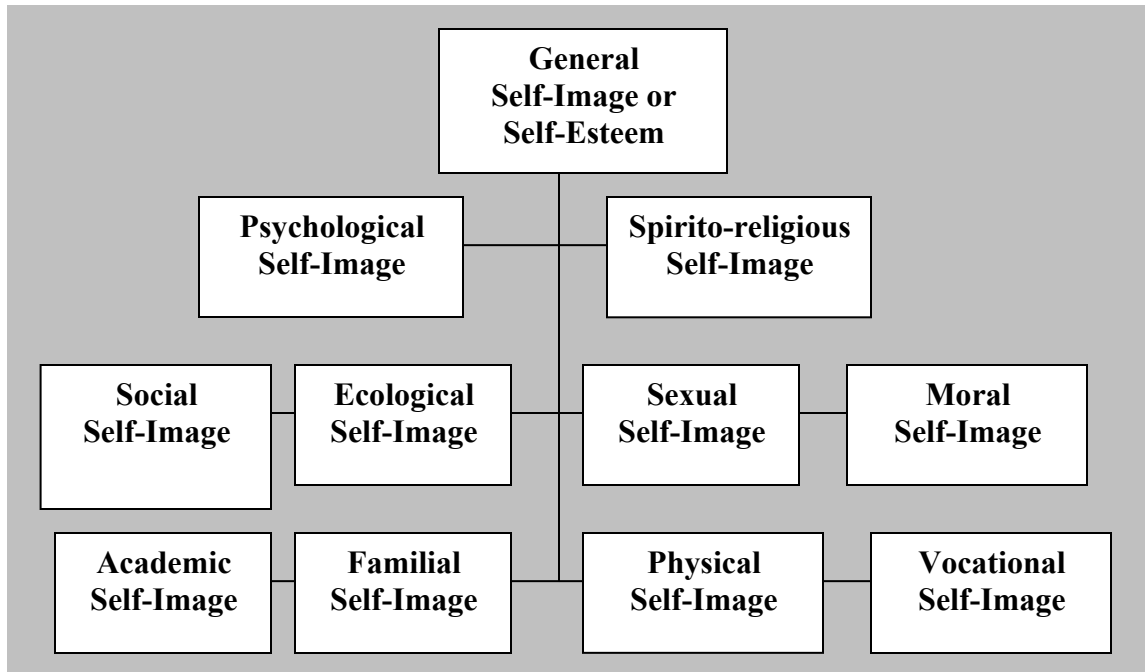


Figure 3 Hierarchical Self-Image Model on Adolescent Street-Working Children

5.3. Nature of Adolescent Self-Image

The second objective in the current study sought to determine the nature of self-image for both street-living and street-working children. The study results revealed that self-image of adolescent street children is generally negative. This negativity was found especially along vocational, ecological, spirito-religious, social, moral, familial and psychological dimensions. The social self-image appeared to be bruised and inflatedly positive. Thus, some of these street children regarded themselves highly as if to compensate for the low social self-worth seemingly because of ostracisation by the non-street community. Similarly, Beazley (2003) found that adolescent street children had fractured identities.

However, the adolescent street-living children had positive physical and sexual self-image. The street-working children seemed to have positive self-image along the following dimensions:

familial, physical, spirito-religious, psychological, moral and sexual self-image. These street-working children seemed to have negative self-image along ecological, social, academic and vocational self-image dimensions. These results seemed to dovetail with the findings by Narayan et al. (1999) that that street children have low self-esteem. The present research results also appeared to tally with the thesis by Veale et al. (1997) that street children are not passive victims of abandonment as they demonstrate strong feelings of self-efficacy in performing tasks required to control their life and environment in positive ways. It appeared that some adolescent street children had talents; nevertheless, which are untapped as their ambitions seemed to be largely limited by environmental challenges and lack of opportunities.

5.4. Effects of Adolescent Self-Image

The self-image of adolescent street children appeared to affect their behaviour. The street children's self-image appeared to lead to risky sexual, criminal, antisocial and pathological behaviours. The street children appeared to demean themselves gelling with Ruparanganda's thesis that the street youths are an otherised or objectified category. Nonetheless, some street children seemed to possess adaptive vocational, social and academic behaviours. The apparent effects of the self-image are discussed in the ensuing sections.

5.4.1. Risky Behaviours

This section discusses risky behaviours which emerged from the data as exhibited by street children. Risky behaviours denote such behaviour that predisposes the street children to hazards such as diseases like HIV and AIDS and other harmful effects like deaths. The risky behaviours which will be discussed in this section include sexual behaviours, substance abuse and antisocial

and criminal behaviours. The street children believed that there were no less dangerous behavioural options for them hence they asked: “*kusiri kufa ndekupi?*” (What other death-avoiding option is available?).

5.4.1.1. Sexual Behaviours

Adolescent street children (both street-living and street-working) appeared to reveal highly risky sexual tendencies predicated on a positive sexual image. This finding seemed to echo the theses by Flynn (2008) and Rugaranganda (2008) that street children are prone to very risky sexual behaviours. It seemed that street children generally engaged in unprotected sex, had multiple partners, and were sexually active, engaged in sex at a very early stage, and sometimes engaged in coercive sex. The macho image among male adolescent street children led to marginalisation and victimisation of, and violence on female street children. For this fact, street children were very prone to unwanted pregnancies, abortion and sexually transmitted infections (STIs). The STIs included genital warts, HIV and AIDS, gonorrhoea and syphilis.

The conclusion that street children engaged in risky sexual behaviour appeared to dovetail with Flynn’s (2008) findings that female street children’s dependency on sexual exchanges to acquire food also leave them vulnerable to the physical and emotional difficulties of unplanned pregnancies, botched abortions, miscarriages, premature deliveries and poorly spaced births. Street children, as well, engaged in various sexual acts like male-female, homosexual, autosexual and bisexual behaviour. The street girl child appeared to be vulnerable to serious gender-based violence with no programmatic options for rehabilitation, nor traditional safety nets. Female participants in this study described themselves as *poto dzemarasta* meaning Rastafarian pots

which are shared frequently among acquaintances. These findings dovetailed with Rugaranganda's (2008) thesis the female street children are an otherised category who are abused by their male counterparts. Indeed, Rugaranganda concluded that the street children saw themselves as *zhing zhongs* or counterfeits.

5.4.1.2. Substance Abuse

The results suggested that street children took criminogenic and psychoactive substances which affect their behaviour and generally their lives. The substances included alcohol, tobacco, *kachasu*, *maragadu* and *mbanje*. These drugs were taken to assuage the impact of adversities in the streets (notable are hunger, stress, cold weather and hopelessness). Many male street-living children were always on 'high' after having used these psychoactive substances. Similarly, street-working adolescent children have been found to abuse psychoactive substances though at a lower scale relative to their street-living peers. These substances are criminogenic as the street children 'wake up' to find themselves in police custody after committing offences under the influences of the drugs. The substance abuse is usually linked to the negative psychological self-image. Nonetheless, more substance has been recorded among street-living than street-working adolescent children. Muchini (1994; 2001), Muchini and Nyandiy-Bundy (1991) and UNICEF (2003) have also found that street children abuse psychoactive substances.

5.4.1.3. Antisocial and Criminal Behaviours

Both street-living and street-working adolescent children appeared to have a propensity for criminal and antisocial behaviours. These criminal and antisocial behaviours appeared to tally

with the street children's negative social and moral self-image. The criminal and antisocial activities they engaged in included stealing, robbery, fighting, rape, sodomy, gender-based violence, shouting obscenities and beating innocent victims. Street-working children appeared to engage in less immoral behaviours as compared to their street-living counterparts. Some street children purchased *muti* from traditional healers and herbalists to advance criminality. It is apparent that street children's sociomoral reasoning was affected by living away from parents and responsible guardians. Furthermore, street-working children indicated better sociomoral reasoning than their street-living counterparts. These results appeared to tally with Muchini's (1994) and Lanckenau et al's (2005) findings that street children have a propensity for committing criminal behaviours like stealing.

5.4.2. Familial and Ecological Behaviours

Street children generally exhibited estrangement from their families and guardians. This is appeared to be more pronounced among street-living children. Interestingly some street-working adolescent children develop negative self-image and drifted into street-living children. Apparently, many street children fled home after having committed some crimes or after failing to endure the searing poverty. These children later assumed ownership of, and dependency on the street environment. These children saw themselves as *vana vemutown* who owned the metropolitan bases and workplaces. The last thing such children would ever want is to go back home especially when that home is in the rural areas. This finding seemed to tally with the finding by Beazley (2003) that these street children cope with street challenges by appropriating urban niches within the city, in which they are able to earn money, feel safe and find enjoyment. Beazley suggests that these street children use such spaces which have become territories in

which identities are constructed, and where alternative communities are formed, and where the street children create collective solutions for the dilemmas they confront in their everyday lives.

More so, many children feared or avoided family reunification. Nevertheless, some street children earned money to sustain their families back home. The research revealed that some street-working adolescent children can sustain their families. Some requested for reunification when ill. Some street children were, nevertheless, genuine orphans or fugitives from the abusive stepparents at home. This seemed to resonate with Feeney's (2005) thesis that family reunification may not be the best alternative for street children. These street children form their own surrogate families replacing the original abusive families. Some children, conversely, went back to their homes when they were very sick.

5.4.3. Academic and Vocational Behaviours

The adolescent street-living and street-working children appeared to have low academic self-image, and while many would have dropped out of school. At adolescence, they rethink their future seriously. Some realised that education is a proxy to transcend poverty, and beg helping organisations and individuals for school enrolment. Some again dropped out of school for failing to adjust to discipline associated with schooling while a few determined ones persevere despite ostracisation for being over-aged, way-ward street kids and sexually-permissive. Some adolescent street children appeared to have many unrecognised talents and were 'unsung stars'. Some street children, nevertheless, toiled through hardships to become soccer stars, musicians, authors, university graduates, artists, soldiers and dramatists. Some children, on the other hand, saw success as unachievable that they resigned to fate.

However, street-working children had more positive academic self-image, as they toiled in begging and vending to raise money for school fees. Some children saw themselves reaching the university level. Some street-working children regarded themselves as joining the thieving, car parking and private security careers. As a street child advanced in age in the street, lucrative opportunities for earning money seemed to shrink that some ended up exploiting the younger children in sex and begging. Generally, the adolescent street children appeared to have acquired competencies to survive in the harsh street environment. These children survived through begging, vending, selling sex and stealing. These children lightened their plight through consulting prophets and traditional healers or herbalists, taking psychoactive substances like glue. This seemed to resonate with the thesis by Lankenau et al. (2005) that street children acquire street capital, tied to drug use, sexual activity, criminal behaviour, and housing contingencies, that enable a youth to develop survival skills in the street economy. Similarly, Flynn (2008) suggested that street children develop street credit in the street, which is the credibility or status one gains by performing bold, illegal and/or violent acts. Thus, street children devise their own activities to generate income or secure food in the street, such activities which include begging, stealing and vending.

5.4.4. Religious and Spiritual Beliefs

It emerged from the data that both street-living and street-working children believed in the powers of God and evil spirits over their lives. Some street children appeared to believe that some evil spirits haunt them that seem to foil any progress in their lives. These street children

consulted prophets and traditional healers in an attempt to be exorcised of the influences of such evil spirits. Some street children believed that some of their relatives cast bad luck on them and referred to that as *kuchekeresa*. Church-going street children sought holy water and holy stones from apostolic churches while others paid tithes to boost their fortunes and their vending businesses. Stealing street children sought charms to enhance their stealing acuity while other vending street children also sought charms to enhance to boost their businesses. The conclusion that street children believed that God and evil spirits could influence one's fate seemed to dovetail with Aina's (1991) findings that Ghanaian street children attributed the role of God, witchcraft and other supernatural powers in their lives.

5.4.5. Psychological Functioning

Generally, both street-living and street-working adolescent children were found to have negative self-image or low self-esteem. The low self-esteem seemed to lead to psychological problems in some street children who appeared to have developed psychological illnesses. The participants explained the development of apparently extreme mental problems in some street children as a function of spiritual factors especially evil spirits. More still, some street children especially the street-living ones frequently reported experiencing stressful challenges leading them to abuse psychoactive substances like glue, while others pondered committing suicide. These findings seemed to gel with findings by Yates (1991) that street children see suicide as the only solution to their distress and hardships.

Although some street children, both street-living and street-working, seemed to have developed mental illnesses, generally street children in the current study appeared to function well psychologically. The findings revealed that some street children appeared to have positive psychological image and believed that they were normal in terms of psychological functioning. These findings appeared to gel with the findings by Panter-Brick (2002) that street children are resilient to their life challenges. However, the current research being qualitative was not methodologically precise to prove the link between street childhood and psychological functioning.

5.4.6 Self-Destructive and Self-Enhancing Behaviours

The present study revealed that street children, especially street-living children had negative self-image which seemed to lead to self-destructive behaviours. These self-destructive behaviours were behaviours that had a likelihood of worsening the street children's plight or even result in their imprisonment, injury or death. These behaviours included abusing psychoactive substances like *kachasu*, engaging in multiple and unsafe sexual behaviours, stealing from police officials, eating apparently poisonous foods and violence. The street children defended these self-destructive behaviours by saying "*kusiri kufa ndekupi?*" (What other death-avoiding option is available?). Indeed, some street children pondered committing suicide. It appeared that some these self-destructive behaviours were engaged in as a way to deal with challenges at hand though these behaviours destroyed their future. These findings seemed to tally with the conclusions by Vostanis et al. (1998) that street children tend to engage in self-destructive behaviours like abuse of psychoactive substances, interpersonal violence, scratching, head-banging and punching.

The findings from the current study also revealed that some street children, especially street-working children engaged in self-enhancing behaviours. Self-enhancing behaviours were behaviours to enhance the street children's self-esteem, personal survival and progress. These self-enhancing behaviours included striving for own education, seeking personal mentors, forming prayer groups and seeking formal employment. This finding seemed to gel with the conclusions by Panter-Bricks (2002) that street children can learn to cope in dangerous street conditions and that some street children show well-developed abilities to navigate street risks. Similarly, Richter (1988b) had found that street children tend to have more adaptive and creative behaviours than other children.

5.5. A Model on the Impact of Street Childhood on Adolescent Self-Image

Basing on the results from the current study, the researcher constructed a model on the street-living and street-working children's self-image. The model, in Figure 4 on page 228 evinces the general impact of street childhood on self-image and subsequent behaviours. The current research being qualitative lacks the precision to make any exact scientific links between psychological functioning and street childhood. Nonetheless, tentative suggestions on the relationships between variables may be made. It is assumed that individual functioning among the street children, adolescent challenges among these street children, aetiological factors for street childhood and the street environment interact to influence adolescent self-image and predict the adolescent street children's behaviour. Individual functioning pertains to personal functioning and dispositional factors that predisposed certain individuals to behave in certain ways that differed from how others behaved. This explained why certain street children for instance, appeared to end up performing less moral behaviours like stealing while others did not.

Adolescent challenges as illustrated in Figure 4 on page 228 pertained to challenges that became so salient at adolescence like sexual behaviours. Aetiological factors pertained to factors that had pushed the children into the streets and continued to influence their behaviour and functioning. For instance, some street children were pushed into the streets by stressful factors at home and these factors influenced them to develop negative self-image of their families. The street environment influenced the development of self-image among the street children mostly because this environment was stressful.

As depicted in Figure 4 on page 228, the three consequents that appear to emerge from the street children's self-image are fortigenic, survival and pathogenic behaviours. Fortigenic behaviours refer to self-enhancing tendencies among some street children, which are conceptualised as efforts spent towards creating a better future for oneself, and assuming adaptive hopes and strategies. Some street-living children appeared to exhibit this when they successfully strived to pursue education and vocations. For instance, one 18-year-old male street-living child published a book on street childhood, and others became high profile footballers. Some adolescent street children had street or non-street mentors. Other street-working children showed this tendency by working hard in school to end up graduating with university degrees, while others obtained passports and emigrated legally in search of employment in countries like South Africa. These children had positive social image, self-confidence, and understood the stress that school violence cause in and around them. These children were future-directed and less risky to sexual behaviours as they indulged less. These, moreover, revealed internal locus of control and resilience. As if to buttress this fortigenic tendency, some studies have found that street children

show well-developed abilities to navigate street risks (Panter-Brick, 2002) and that they seem to show better adaptive and creative qualities (Richter, 1988b)..

Survival as illustrated in Figure 4 on page 228 refers to the adolescent street children's efforts to subsist and endure through another day, hence, these transient efforts. Survival efforts included the common street children's activities like begging and vending without necessarily attempting to surpass their environmental limitations. Thus, these street children's behaviours and thinking appeared to centre around living each day as it comes. These may be seen as not necessarily innovative in meeting the challenges they face in the streets but make enough efforts to survive under the hardships in the streets. While the fortigenic tendency appeared to be the ideal, many adolescent street children merely worked to survive. Street-living children who appeared to have this tendency engaged in activities like vending and begging to secure money for food. Street-working children appearing to have this tendency also engaged in behaviours like vending and begging to obtain food or for income for their families. Such a tendency seemed to tally with the finding by Muchini (2001) that some street children felt hopeless and helpless about street life.

Pathogenic behaviours as shown in Figure 4 on page 228 refer to self-destructive tendencies among some street children. Such street children had average self-image implying intermediate between negative and positive self-image. This tendency appeared evident among some street children who seemed to have degenerated into schizophrenics. Some of these street children seldom bathed, moved and lived alone. Fellow street children attributed such cases to the influence of evil spirits, *kuchekeresa* (having evil spells cast on you for magical purposes) and the abuse of psychoactive substances like *kachasu*. Adolescent street children revealing

pathogenic tendencies wore very dirt and torn clothes. Their clothes were very dark and dirt with the soot from smoke of cardboard boxes and tyre fires. Such street children tended to self-talk. These children appeared to have degenerated from normality to abnormality while in the street.

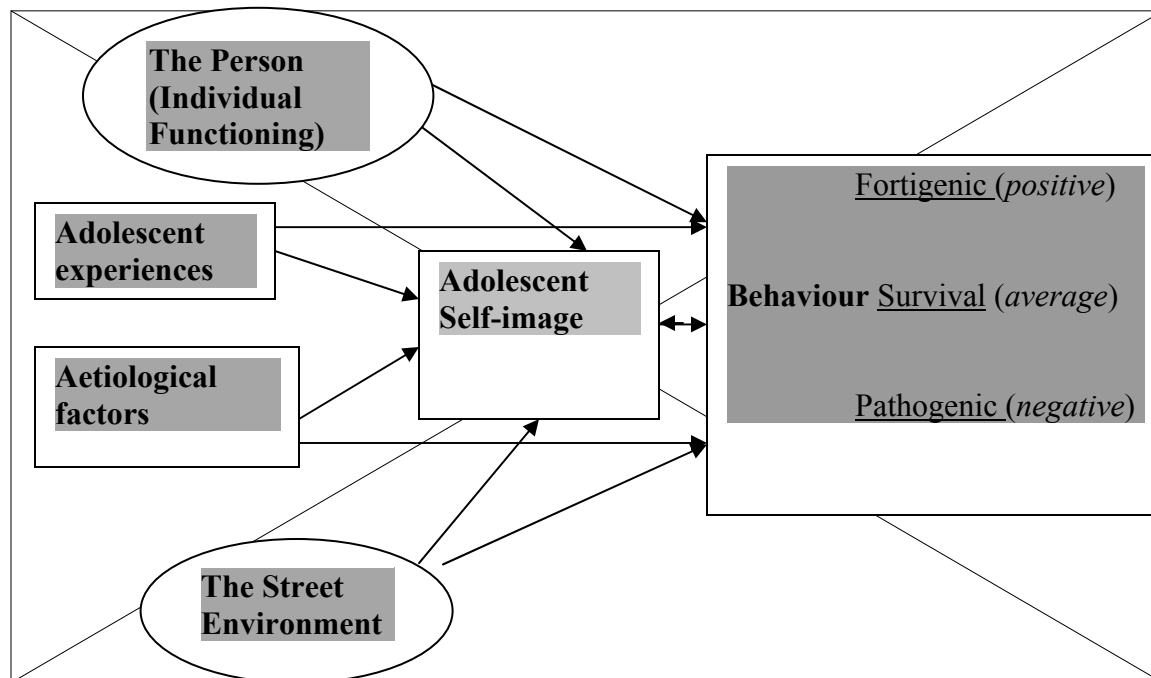


Figure 4 Adolescent Street Child Self-Image Model

This pathogenic tendency among the street children somehow appeared to resonate with the findings from the study by Adlaf and Zdanowicz (1999) that some street children report mental problems and attempted suicide. Some street children from the present study who appeared to have such pathogenic tendencies tended to exhibit self-destructive behaviours like extreme substance abuse. For instance a certain street child died in his sleep after having over-consumed *kachasu*, while other street children committed suicide. Apparently, Vostanis et al. (1998) observed that some street children engaged in self-harm.

5.6. Conclusions

The current section gives an overview of the current research. Indeed, the recent years have witnessed a rising concern with the exponential explosion of the street children population in Zimbabwe (Chigonga, 2007; Muchini, 2001). This institution of the street children is possibly explained by the scourge of HIV and AIDS epidemic, the socio-politico-economic crisis that bedevilled Zimbabwe in the recent past, the crumbling of the extended family network, urbanisation and overcrowding (Murerwa, 2006; RBZ, 2005; Ruparanganda, 2008; Rurevo & Bourdillon, 2003; Tibaijuka, 2005). Researchers such as Dube (1999), Ennew (1994, 2003), Muchini (2001), Ruparanganda (2008), Rurevo and Bourdillon (2003); contend that the street environment poses a threat to normal child development. Some researchers have argued that the street environment is risky for positive self-image development (Narayan et al., 1999; Vostanis et al., 1998). Baumeister et al. (2003) has contended that self-image is fundamental for psychological health and for other positive behaviours.

The current study was influenced by the problem that the environment within which street children live and work can influence their psychological development. The present study investigated whether street childhood does not impact on adolescent self-image of street children. Specifically, the current study had three objectives. These were to determine the indicators and nature of both street-living and street-working adolescent children. The research also sought to determine the effects of such adolescent self-image on the behaviours among both street-living and street-working adolescent children living and working in Harare.

The study adopted a psychoethnographic design to study the street children's behaviour in their contexts. The study involved a sustained collection of data in the context in which the street children lived to obtain valid and reliable data. There were 32 participants in the current study. Data was collected using key informant interviews, focus group discussions, in-depth interviews, participant and non-participant observation. Thematic data analysis on the results generated a multi-dimensional or precisely a hendecagonal adolescent self-image for the adolescent street-living and street-working children.

The results from the present research revealed an eleven-sided model of self-image among both street-living and street-working children. The eleven dimensions or indicators of self-image which emerged from the current research are, physical, vocational, ecological, social, academic, moral, sexual, familial, psychological, spirito-religious and general self-image. Furthermore, results from the current study have highlighted that adolescent street children are eco-developmentally at risk. Particularly, it has been shown that street childhood appears to engender the development of negative adolescent self-image. The self-image of these adolescent street children has been found to be metropolitan, spirit-inspired, heterogeneous and hendecagonal.

The self-image of adolescent street children has been found to be largely negative, though somewhat positive among street-working adolescent children. Some adolescent street children appeared to have negative self-image and to demean themselves. These street children seemed to have lost faith in their lives and generally demeaned themselves. They declared resignedly that: "*hapana kusiri kufa*" (There is no other option to avoid death). The street-working adolescent children appeared to have more positive self-image comparable to their street-living

counterparts. The more positive self-image among street-working children could be attributed to the home environments they lived in. The negative self-image has been found to influence the street children's behaviour as it appeared to lead to risky and self-destructive sexual, psychopharmacological, criminal, pathological and antisocial behaviours. Exceptions appeared to be common in the street as some street children apparently with positive self-image appeared to reveal fortigenic, adaptive, creative and self-enhancing behaviours. The study being qualitative lacked the scientific precision and rigour to make any accurate connections between any variables. To mitigate the plight of street children, it is recommended herein that the responsible authorities take a proactive multi-systemic and multi-pronged strategy encompassing medical, familial, vocational, educational, spiritual, legal and institutional interventions.

5.7. Recommendations

The researcher proposed the following concerted multi-systemic, multi-sectoral, concerted and child-friendly recommendations. Accordingly, government (both central and local), non-governmental organisations, private business, churches, schools and traditional institutions have to work collaboratively to help assuage the plight of street-living and street-working children. The strategy has to be multi-pronged involving implementation of legal, medical, social, spiritual, educational, psychotherapeutic, financial and institutional solutions. These programs should respect and not impinge on self-worth of the street children.

5.7.1. Individual-Based Approach

It is herein recommended that programmatic services to street children should be personalised. The programmatic help should be given to each street child after analysing his or her individual

needs, preferences and experiences. All the services and treatment to the street children should be tailor-made to respect and enhance their self-esteem. For instance, some street children may require education at formal schools, while others may need flexible informal learning in the streets while others may need vocational training depending on personal needs, dreams and experiences. Such services to street children should nurture resilience and children's well-being, addressing harmful coping strategies such as drug use and promoting healthy coping strategies, which enhance children's current and future health. These street children should be allowed to participate in planning and evaluation of services that target themselves. The street children's individual perceptions, experiences and achievements should form a key part of service assessment. Services to the children should inculcate in them respect for their bodies and their lives.

5.7.2. Street-Based Approach

There should be concerted efforts to make the streets safer environments for habitation for those street children to the streets as the last resort. Police should stop terrorising or arresting street children for living and working in the streets. There should be child-friendly street-based services like offering them food, educational services and lessons, vocational and life skills training, legal advice, career planning, spiritual, health, voluntary counselling and testing, psychotherapeutic and ablutionary services. Peer educators, psychologists, officials of organisations that help street children and social workers should be specially trained to adequately provide such services to street children. Both informal and formal education must be provided to the street children. This education should proffer information on sexuality, reproductive health, criminality, gender-based violence, child exploitation, STDs and

psychopharmacology. Technical and academic education to these street children from elementary levels should allow them to choose areas of interest. These services should foster independence and healthy self-sustenance among street children.

5.7.3. School-Based Approach

There should be reform in the schooling system in Zimbabwe. The schools should offer relevant education that guarantees future employment opportunities. Harsh enforcement of rules which scare children away from schooling should be reversed forthwith while poor children must be made to learn free of charge. School authorities should be conscientised, and trained to detect, rehabilitate and counsel children risky of dropping out of school or drifting into the streets. The school children should also be imparted with knowledge on decision making, responsible behaviour, creative and critical thinking, interpersonal relations, self awareness and coping with stress.

Vocational skills should also be the focus of school curricula. Skills to be taught in schools should include but not limited to manual printing, agriculture, candle-making, brickwork, sewing, carpentry, craftwork, knitting, computers literacy and programming, welding, sporting activities and car mechanics to enhance children's economic self-sustenance. These skills should equip the children with strategies necessary for their sustenance. All schools should be open for enrolling any children including current and former street children. The school authorities and fellow school children should be taught to desist from discriminating against street children who seek to learn at their schools. Education and vocational skills training should be made compulsory for the street children and should be provided by child-friendly teachers.

5.7.4. Health-Centred Approach

There must be health centres to attend to ill street children, disseminate information on spread, treatment and prevention of diseases (especially venereal), and offer voluntary counselling and testing and antiretroviral drugs among the street children. These centres should be child-friendly street clinics which can be mobile or housed in drop-in centres to reach out to the street children. Safe sex information and technologies like condoms should be afforded to the street children. These centres should offer treatment to the street children regardless of whether they have personal documents or not. The treatment should be free of charge and be confidential. These health centres should, also, help children process birth certificates and national identity cards. The health workers should be trained to understand, empathise and work with street children. The health workers should have training in mental health of the children. Furthermore, there should be health workers to provide detection and therapeutic counselling to the street children with mental problems. Street girls should be offered with free and confidential sanitary accessories and related services and advice.

5.7.5. Family-Based Approach

There must be programmatic efforts to strengthen families in their care for the children, and help them respect rights and concerns of children. Needy and vulnerable families including child-headed households, families with stepchildren, families with children who have disciplinary problems, families with children born out of wedlock and orphans should be equipped with the necessary skills and resources to take care of their children to avert onset of street childhood. Communication should also be bottom-up in the family institution. Thus, children should be afforded free communication channels and a say in matters that affect them. Families of origin of

street children should be given financial and material resources as well as psychosocial support to help them accept and rehabilitate street children who need family reunification. The strengthening of family helps parents or guardians realise their roles of protecting their children's rights, especially in the cases where their children work or live in the streets. Street-living children needing family reunification should be integrated back into their families but it should be in their best interests. Once reunified with their families, such children should be provided with medical, educational, material and financial resources together with psychosocial counselling. These members of these families should be trained in psychosocial counselling skills to help their children. Ongoing monitoring and evaluation of reunified former street children should ensure that they are sufficiently integrated into their families and communities.

5.7.6. Gender-Based Violence Mainstreaming Approach

The programmatic services to street children should streamline gender-based violence. The current study has unearthed tragic gender-based violence and girl-child vulnerability which need to be curbed forthwith. The *poto dzemarasta* self-image of adolescent female among street children has to be targeted and reversed while female street children should be empowered educationally, legally, economically and psychologically. Female street children need to have the power and skills to negotiate for safe and consented-sex. One way is to provide life skills training to the female and weaker male street children that they can assert and defend for their rights. The women's rights organisations which provide women with information and resources to strengthen their rights should also target female street children. Self-help projects should also be provided to the female street children, so that they can be independent of males to abet sexual exploitation. Furthermore, the abuse and exploitation of younger street children has to be curbed

forthwith. The male street children who abuse other street children should receive counselling and life skills training and knowledge on the dangers of such abuse both on themselves and on their victims. These male street children should be taught less abusive skills of conflict resolution and economic activities to able to work for their own sustenance.

5.7.7. Community-Based Approach

There must be child protection committees at all levels from local to national levels (village, ward, district, provincial and national levels) to identify, help and rehabilitate vulnerable children. The vulnerable children are children at risk of working and living in the streets. These child protection committees should target children in child-headed households, children under stepparents, children with disciplinary problems, children born out of wedlock and orphans to ensure that these do not drift into the streets. These committees should, as well, help in harnessing resources to help children in need. It is aimed at uniting all segments in the community in dealing with street children. There must be increased private sector and local government participation on the care of street children. There must be street children media like community radios as a communication tool to be able to reach to the street children. Problem of street children has to be addressed in an integrated way or be incorporated into the poverty eradication programme. As a result, the focus of the programme is not only on the poor families, but; also, other pockets of poverty.

There must be partnerships among government, local communities and NGOs leading to “critical collaboration” relationship in the development and implementation of the programmes to prevent and mitigate street childhood. There must be community campaign programmes to curb

ostracisation and stigmatisation of street children. Furthermore, there should be youth centres to provide street children with fora to interact with others peers (both street and non-street peers), recreational opportunities, access to health or reproductive services, and mentoring. Counsellors working in youth centres should not be judgmental, and should offer confidential counselling.

5.7.8. Government-Based Approach

The government must formulate clear, holistic and child-friendly policy framework on street children. The government should, forthwith, repeal the policy of punitively rounding up street children. The Children's Protection and Adoption Act should be repealed and be replaced by a child-friendly law which does not criminalise street-living and street-working. Indeed street childhood should be allowed should it be in the best interest of the children, thus when they work and live in the street for their families' and for their own sustenance and survival. Thus, where the family situation is abusive, the street can be a better option for the children or when there are no other income-generating options, street-working can be a better option still. It should be the government's responsibility to protect street children from the dangers in the street such as exploitation, abuse, ostracisation, neglect and discriminative treatment. The government should permit those street children who want to beg and vend for their sustenance should that be in their best interests. Thus, children should be allowed to beg and vend in the streets if they have no other better ways of sustaining themselves.

Lastly, the government should take active, urgent and earnest efforts to consolidate the stabilisation programmes to arrest the socio-politico-economic crisis. The street children phenomenon, positioned at the butt of the social stratum is currently increasing in numbers and

enduring the most of the now subsiding socio-politico-economic crisis. When the crisis has been fully curbed, can the problems being faced by the street children be minimised. Government should ensure that the street children can easily access and obtain personal documents like birth certificates, national identity cards and passports. Those street children in conflict with law should be freely provided with legal representation and be tried in a child-friendly judicial system. The convicted children should not be incarcerated rather should be rehabilitated in child-friendly environments. Cases of child abuse on street children should be investigated thoroughly while the culprits should be reported, prosecuted and penalised.

5.7.9. Implications for Further Research

To increase the scientific validity of results, future research should also employ quantitative methods on the determination of the indicators, nature and effects of adolescent street children's self-image in Zimbabwe. More so, researches should also determine the psychological and neurological functioning of street children in Zimbabwean urban centres quantitatively for scientific precision. Further research should specifically determine the nature and prevalence of gender-based violence, child-abuse, psychological malfunctioning among both pre-adolescents and post-adolescent street children. It is suggested herein that such research should adopt both qualitative and quantitative designs to get valid results. Thus, future research should improve on scientific precision and rigour to allow the making of correlational or causal links between variables. Research should also determine the nature and prevalence of use of psychopharmacological drugs among the street children. Researchers should disaggregate studies by age and gender to determine the effects of gender and age on street childhood.

References

- Adlaf, E.M., & Zdanowicz, Y.M. (1999). A Cluster-analytic study of substance problems and mental health among street youths. *American Journal of Drug and Alcohol Abuse*, 25 (4), 639-660.
- Adler, P. (1990). Ethnographic research on hidden populations: Penetrating the drug world. In Y. E. Lambert (Ed.), *The collection and interpretation of data from hidden populations*. National Institute on Drug Abuse Research Monograph 80. (DHHS Publication No. 90-1678, pp. 96-112). Washington, DC: U.S. Government Printing Office.
- Adler, P.A., & Adler, P. (1994). Observational techniques. In N. Denzin., & Y. Lincoln (Eds.), *Handbook of Qualitative Research* (pp. 377-392). Thousand Oaks, CA: Sage Publications.
- Aina, T.A. (1991). Patterns of bisexuality in Sub-Saharan Africa. In R. Tielman, M. Carballo, & A. Hendriks (Eds.), *Bisexuality and HIV & AIDS* (pp.81-90). Buffalo: Prometheus Books.
- Anarfi, J. K., & Antwi, P. (1995). Street youth in Accra city: Sexual networking in a high-risk environment and its implications for the spread of HIV and AIDS. *Health Transition Review, Supplement to Volume 5*, 131-151.
- Aptekar, L. (1988). Street children: Their mental health and how they can be served. *International Journal of Mental Health*, 17 (3), 81-104.
- Aptekar, L. (1994). Street children in the developing world: A review of their condition. *Cross Cultural Research*, 28 (3), 195-226.
- Aptekar, L. (2004). The changing developmental dynamics of children in particularly difficult circumstances: Examples of street and war-traumatized children. In U. Gielen, & J. Roopnarine (Eds.), *Childhood and adolescence: Cross-cultural perspectives and*

- applications* (pp. 377-410). Westport, Connecticut: Praeger Publishers/Greenwood Publishing Group.
- Athey, J. (1991). HIV infection and homeless adolescents. *Child Welfare, 70* (5), 517-528.
- Barker, G., Knaul, F., Cassaniga, N., & Schrader, A. (2000). *Urban girls' empowerment in especially difficult circumstances*. London: Intermediate Technology Publications.
- Bar-On, A. (1998). So what's so wrong with being a street child? *Child and Youth Care Forum, 27* (3), 202-205.
- Barrette, M.J. (1995). *Street children need our care*. Pretoria, South Africa: Kagiso.
- Baumeister, R.F., Campbell, J.D., Krueger, J.I., & Vohs, K.D. (2003). Does high self-esteem cause better performance, interpersonal success, happiness, or healthier lifestyles? *Psychological Science in the Public Interest, 4* (1), 1-44.
- Beazley, H. (2003). The construction and protection of individual and collective identities by street children and youth in Indonesia. *Children, Youth and Environments, 13* (1), 899-902.
- Benitez, S.T. (2007). *State of the word's street children: Violence*. London: Consortium for Street Children.
- Bourdillon, M.F.C. (1991). *Poor, harassed, but very much alive: An account of street people and their organisation*. Gweru, Zimbabwe: Mambo Press.
- Bourdillon, M.F.C. (2000). *Earning a life: Working children in Zimbabwe*. Harare: Weaver Press.
- Boyatzis, R.E. (1998). *Transforming qualitative information: Thematic analysis and code development*. London: Sage.
- Branden, N. (1994). *The six pillars of self-esteem*. New York, NY: Bantam Books.

- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
- Bronfenbrenner, U. (1993). The ecology of human development: Research models and fugitive findings. In R. H. Wozniak., & K.W. Fischer (Eds.), *Nature, nurture and psychology*. Washington, DC: American Psychological Association.
- Butler, R.J. & Green, D. (1998). *The child within: The exploration of personal construct theory with young people*. Oxford, UK: Butterworth Heinemann.
- Byrne, B. M. (1996). *Measuring self-concept across the life span: Issues and instrumentation*. Washington, DC: American Psychological Association.
- Campbell, E.K., & Ntsabane, T. (1996). Health risk practices among street children in Gaborone, Botswana. *CHASA Journal of Comprehensive Health*, 7 (1), 23-33.
- Carnegie Council on Adolescent Development (1995). *Great transitions: Preparing adolescents for a new century*. New York, NY: Carnegie Corporation.
- Casa Alianza. (2000). Exploitation of children – A worldwide outrage. Retrieved November 15, 2007, from <http://www.hiltonfoundation.org/press/16-pdf3.pdf>.
- Chigonga, B. (2007, April 21). A night with streetkids. *The Herald*. Retrieved April 23, 2007, from <http://www.herald.co.zw/>
- Chirwa, Y, & Wakatama, M. (2000). Working street children in Harare. In M. Bourdillon (Ed.), *Earning a life: Working children in Zimbabwe* (pp. 45-58). Harare: Weaver Press.
- Cobb, J.C. (2001). *Adolescence: Continuity, change, and diversity*. Calif: Mayfield.
- Davies, C.A. (1999). *Reflexive ethnography: A guide to researching selves and others*. London, UK: Routledge.

- Davison, G.V., & Neale, J.M. (1982). *Abnormal psychology: An experimental clinical approach* (3rd ed). New York, NY: John Wiley and Sons Inc.
- Deliver us from street kids. (2007, February 11). *The Sunday Mail*. Retrieved February 12, 2007, from <http://www.sundaymail.co.zw/>
- De Moura, S.L. (2002). The social construction of street children: Configuration and implications. *British Journal of Social Work*, 32 (3), 353-367.
- Domestic Violence Research Group. (2004). Domestic violence and research ethics. In M. Smyth., & E. Williamson (Eds.), *Researchers and their subjects: Ethics, power, knowledge and consent*. Bristol, UK: Policy Press.
- Dube, L. (1997a, March) *Sexual patterns and the sexual exploitation of street children and street youth in Harare*. A paper presented at report-back workshop of the Congress against the Commercial Sexual Exploitation of Children, Stockholm.
- Dube, L. (1997b). AIDS risk patterns and knowledge of the disease amongst street children in Harare, in *Journal of Social Development in Africa*, 12 (2), 61-73.
- Dube, L. (1999). Street Children: A part of organised society? Unpublished doctoral thesis, University of Zimbabwe, Harare, Zimbabwe.
- Ennew, J. (1994). *Street and working children: A guide to planning*. London: Save the Children.
- Ennew, J. (2003). Difficult circumstances: Some reflections on 'street children' in Africa. *Children, Youth and Environments*, 13 (1), 128-146.
- Ensign, J. (2003). Ethical issues in qualitative health research with homeless youths. *Journal of Advanced Nursing*, 43 (1), 43-50.
- Epstein, R. (2001). The prince of reason. *Psychology Today*, 34, 66-76.
- Erikson E. (1968). *Identity, youth, and crisis*. New York, NY: Norton.

- Fawole, O.I., Ajuwon, A.J., & Osungbade, K.O. (2004). Violence and HIV and AIDS prevention among female out of school youths in South Western Nigeria: Lessons learned from interventions targeted at hawkers and apprentices. *African Journal of Medical Sciences*, 33 (4), 347–353.
- Feeny, T. (2005). *In best or vested interests? An exploration of the concept and practice of family reunification for street children*. London, UK: The Consortium for Street Children.
- Filho, G. C., & Neder, G. (2001). Social and historical approaches regarding street children in Rio de Janeiro (Brazil) in the context of the transition to democracy. *Childhood*, 8 (1), 11–29.
- Flynn, K.C. (2008). Street credit: The cultural politics of African street children's hunger. In C. Counihan & P. V. Esterik (Eds.), *Food and culture: A reader* (pp.554-571). New York, NY: Routledge.
- Gabarino, J. (1985). *Adolescent development: an ecological perspective*. Columbus, Ohio: Charles Merrill Publishing Company.
- Goldstein, P.J., Spunny, B.J., Miller, T., & Belluci, P. (1990). Ethnographic field station. In Y.E.Lambert (Ed.), *The Collection and interpretation of data from hidden populations*. National Institute on Drug Abuse Research Monograph 80. (DHHS Publication No. 90-1678, pp. 80-95). Washington, DC: U.S. Government Printing Office.
- Grier, B. (1996, November). *Street kids in Zimbabwe: The historical origins of a contemporary problem*. A paper presented at the Annual Meeting of the African Studies Association, San Francisco, California.
- Hall, G.S. (1904). *Adolescence*. New York, NY: Appleton.

- Hamachek, D. E. (1978). *Encounters with the self* (2nd ed.). New York, NY: Holt Rinehart and Winston.
- Hammersley, M., & Atkinson, P. (1995) *Ethnography: Principles in practice* (2nd ed.). New York, NY: Routledge.
- Harter, S. (1990). *From childhood to adolescence*. Newbury Park, CA: Sage.
- Heath, S., Charles, V., Crow, G., & Wiles, R. (2004, August). *Informed consent, gatekeepers and go-betweens*. Paper presented at the International Association Sixth International Conference on Social Science Methodology, Amsterdam. Retrieved October, 16, 2007 from http://www.sociologyandsocialpolicy.soton.ac.uk/Proj/Informed_Consent/Resources.htm
- Homan, R. (1991). *The Ethics of social research* London: Longman.
- Ikechebelu, J.I., Udigwe, G.O., Ezechukwu, C.C., Ndinechi, A.G., & Joe-Ikechebelu, N.N. (2008). Sexual abuse among juvenile female street hawkers in Anambra State, Nigeria. *African Journal of Reproductive Health*, 12 (2), 111-119.
- Jones, G., Herrera, E., & Benítez, S.T. (2007) Tears, trauma and suicide: Everyday violence among street youth in Puebla, Mexico. *Bulletin of Latin American Research*, 26 (4), 462–479.
- Kadzere, M. (2008, October 10). Zimbabwe inflation soars to 231 million percent. *The Herald*. Retrieved October 12, 2008, from <http://www.herald.co.zw/>
- Kidd, S. (2007). Youth street childhood and social stigma. *Journal of Youth and Adolescence*, 36, 291–299.
- King, M., Day, R., Oliver, J., Lush, M., & Watson, J. (1981). Solvent encephalopathy. *British Medical Journal*, 2, 663-665.

- Kirk, J., & Miller, M. (1986). *Reliability and validity in qualitative Research*. Beverly Hills: Sage Publications.
- Klain, E.J. (1999). *Commercial sex work of children and child-sex tourism: An analysis of domestic and international responses*. Virginia: National Center for Missing and Exploited Children.
- Konarska, J. (2003). Childhood experiences and self-acceptance of teenagers with visual impairment. *International Journal of Special Education*, 18 (2), 52-56.
- Lankenau, E. L., Clatts, M. C., Welle, D., Goldsamt, L.A., & Gwadz, M.V. (2005). Street careers: street childhood, drug use, and sex work among young men who have sex with men (YMSM). *International Journal of Drug Policy*, 16, 10–18.
- Lawton, J. (2001). Gaining and maintaining informed consent: Ethical concerns raised in a study of dying patients. *Qualitative Health Research*, 11, 69-73.
- Lerner, R. M. (1995). *America's youth in crisis: Challenges and options for programs and policies*. Thousand Oaks, CA: Sage.
- Le Roux, J. (1995). *A comparison of the lifeworld experiences of street children in Thailand and South Africa*. Published doctoral thesis. University of Orange Free State, Bloemfontein, South Africa.
- Le Roux, J., & Smith, C.S. (1998a). Is the street child phenomenon synonymous with deviant behaviour? *Adolescence*, 33 (132), 915-926.
- Le Roux, J., & Smith, C.S. (1998c). Causes and characteristics of the street child phenomenon: A global perspective. *Adolescence*, 33 (131), 683-685.
- Lucchini, R. (1996b). Theory, method and triangulation in the study of street children. *Childhood, Global Journal of Child Research*, 3 (2), 167-170.

- Luthar, S. (2006). Resilience in development: A synthesis of research across five decades. In D. Cicchetti, & D. Cohen (Eds.), *Developmental psychopathology: Risk, disorder, and adaptation* (pp. 739-795). New York, NY: John Wiley and Sons.
- Makope, V. (2006). *A Zimbabwean street story*. Harare: German Agro Action.
- Maphatane, M. (1994). Understanding support systems for Black street children and their families: An ecological perspective. *Social Work Practice*, 2 (94), 22-30.
- Marsh, H. W. (1990). A multidimensional, hierarchical model of self-concept: Theoretical and empirical justification. *Educational Psychology Review*, 2, 77-172.
- Marsh, H.W., & Shavelson, R. (1985). Self-concept: Its multifaceted hierarchical structure. *Educational Psychologist*, 20, 107-123.
- Masson, J. (2004). The legal context. In S. Fraser., V. Lewis., S. Ding., M. Kellett., & C. Robinson (Eds.), *Doing research with children and young people* (pp. 43-59). London, UK: Sage.
- McGee, R., & Williams, S. (2000). Does low self-esteem predict health compromising behaviours among adolescents? *Journal of Adolescence*, 23, 569-582.
- Mechanic, D. (1991). Adolescents at risk: New directions. *Journal of Adolescent Health*, 912, 638-643.
- Meter, K.M. (1990). Methodological and design issues: Techniques for assessing the representatives of snowball samples. In Y.E.Lambert (Ed.), *The collection and interpretation of data from hidden populations* National Institute on Drug Abuse Research Monograph 80. (DHHS Publication No. 90-1678, pp. 31-42). Washington, DC: U.S. Government Printing Office.

- Miller, T., & Bell, L. (2002). Consenting to what? Issues of access, gate-keeping and 'informed' consent. In M. Mauthner., M. Birch., J.Jessop., & T. Miller (Eds.), *Ethics in qualitative research* (pp. 53-69). London: Sage.
- Miner, M. H. (1991a). The self-concept of homeless adolescents. *Journal of Youth and Adolescence*, 20 (5), 545-560
- Ministry of Health and Child Welfare. (2005). *National health profile. Zimbabwe national HIV and AIDS estimates, 2005 preliminary report*. Retrieved February 15, 2007, from <http://www.mohcw.gov.zw>.
- Ministry of Youth Development and Employment Creation. (2007). *Unemployment figures*. Retrieved February 4, 2007, from <http://www.mydec.gov.zw/ec.htm>
- Morrill, C. (1999). Toward an organizational perspective on identifying and managing formal gatekeepers. *Qualitative Sociology*, 22, 51-72.
- Muchini, B. (1994). *Morality and street children in Harare*. Unpublished master's thesis, University of Zimbabwe, Harare, Zimbabwe.
- Muchini, B. (2001). *A Study on Street Children in Zimbabwe*. Retrieved February 6, 2007, from http://www.unicef.org/evaldatabase/index_23256.html
- Muchini, B., & Nyandiya-Bundy, S. (1991). *Struggling to survive: A study of street children in Zimbabwe*. Harare: UNICEF-Zimbabwe.
- Murerwa, H. M. (2006). *The national budget statement for 2007*. Harare: Ministry of Finance and Economic Development.
- Muzvidziwa, V. N. (1997). *Urban women's strategies to deal with impoverishment in Masvingo, Zimbabwe*. Unpublished doctoral thesis, University of Waikato, Hamilton, New Zealand.

- Muzvidziwa, V.N. (2004). Reflections on ethical issues: A study of how urban women dealt with impoverishment. *Nordic Journal of African Studies*, 13 (3), 302–318.
- Narayan, D., Patel, R., Schafft, K., Rademacher, A., & Koch-Schulte, S. (1999). *Can anyone hear us? Voices from 47 countries*. Washington, DC: World Bank Poverty Group, PREM.
- Offer, D. (1987). In defence of adolescents. *Journal of the American Medical Association*, 257 (24), 3407-3408.
- Oosterwegel, A., & Oppenheimer, L. (1993a). Development of the self-concept: How children perceive their own and others' ideas about themselves. *Journal of Applied Developmental Psychology*, 14, 443–460.
- Oosterwegel, A., & Oppenheimer, L. (1993b). *The self-system: Developmental changes between and within self-concepts*. Hillsdale, NJ: Lawrence Erlbaum.
- Oosterwegel, A., & Oppenheimer, L. (2002). Jumping to awareness of conflict between self representations and its relation to psychological wellbeing. Hillsdale, NJ: Lawrence Erlbaum. *International Journal of Behavioral Development*, 26 (6), 548–555.
- Osinowo, O.A. (1992). Street children and psychological consequences. *International Journal of Reproductive Health*, 4, 101–108.
- Panter-Brick, C. (2002) Street children, human rights, and public health: A critique and future directions. *Annual Review Anthropology*, 31, 147–171.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods* (2nd ed.). Newbury Park, CA: Sage Publications.
- Plot to dump street kids in youth training camps. (2007, November 11). *The Financial Gazette*. Retrieved November 14, 2007, from <http://www.fingaz.co.zw/>

- Plummer, M. (1994). *Kuleana consultancy report* Unpublished report, Kuleana Center for Children's Rights, Mwanza, Tanzania.
- Police round up street kids. (2006, July 18). *The Herald*. Retrieved July 18, 2006, from <http://www.herald.co.zw/>
- Poverty Assessment Study Survey (2006). *2003 Poverty assessment study survey final main report*. Harare: Ministry of Public Service, Labour and Social Welfare.
- Punch, S. (2002). Research with children: The same or different from research with adults? *Childhood*, 9 (3), 321.
- Raffaelli, M. (1999) Homeless and working street youth in Latin America: A developmental review. *Interamerican Journal of Psychology*, 33 (2), 7-28.
- Raffaelli, M. (2000) Gender differences in Brazilian street youth's family circumstances and experiences on the street. *Child Abuse and Neglect*, 24 (11), 1431-41.
- Ramakrishna, J., Karott, M., & Murthy, R. S. (2003). Experiences of sexual coercion among street boys in Bangalore, India. In S. Bott, S. J. Jejeebhoy, I. Shah, & C. Puri (Eds.), *Towards adulthood: Exploring the sexual and reproductive health of adolescents in Asia* (pp. 95-98). Geneva: World Health Organization.
- Reserve Bank of Zimbabwe. (2005). *The Monetary Policy interventions focusing on the youth and middle aged population of Zimbabwe*. Harare: Author.
- Rice, F.P. (1996). *The Adolescent: development, relationships, and culture* Boston, MA: Allyn and Bacon.
- Richter, L. (1988b). Street children: The nature and scope of the problem in Southern Africa. *The Child Care Worker*, 6 (7), 11-14.

- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.
- Ruparanganda, W. (2008). *The tragedy of procrastinating? A case study of sexual behaviour patterns o street youth of Harare, Zimbabwe: In the era of HIV and AIDS Pandemic*. Unpublished doctoral thesis, University of Zimbabwe, Harare, Zimbabwe.
- Rurevo, R., & Bourdillon, M. (2003). *Girls on the street*. Harare: Weaver Press.
- Santrock, J. W. (2001). *Adolescence*. Boston, MA: McGraw-Hill.
- Santrock, J. W. (2002). *A topical approach to life-span development*. Boston, MA: McGraw-Hill.
- Santrock, J. W. (2004) *Life-span development*. Belmont, CA: McGraw-Hill Higher Education.
- Scheier, L.M., Botvin, G.J., Griffin, K.W., & Diaz, T. (2000). Dynamic growth models of self-esteem and adolescent alcohol use. *Journal of Early Adolescence*, 20, 178–209.
- Schurink, W. (1993). *Street children*. Pretoria, South Africa: Human Science Research Council.
- Shavelson, R. J., Hubner, J. J., & Stanton, G. C. (1976). Self-concept: Validation of construct interpretations. *Review of Educational Research*, 46, 407-441.
- Steinberg, L.D. (2002). *Adolescence*. New York, NY: McGraw-Hill.
- Sterk-Elifson, C. (1995). Determining drug use patterns among women: The value of qualitative research methods. In Y.E.Lambert, R.S. Ashery, & R.H.Needle (Eds.), *Qualitative methods in drug abuse and HIV research*. National Institute on Drug Abuse Research Monograph 157. (DHHS Publication No. 95-4025, pp. 65-83). Washington, DC: U.S. Government Printing Office.
- Tibaijuka, A.K. (2005). *Report of the fact-finding mission to Zimbabwe to assess the cope and impact of Operation Murambatsvina by the UN Special Envoy on human settlements*

- issues in Zimbabwe*. Retrieved September 5, 2005, from http://www.un.org/News/dh/infocus/zimbabwe/zimbabwe_rpt.pdf
- Tudorić-Ghemo, A. (2005). *Life on the street and the mental health of street children – A developmental perspective*. Unpublished master's thesis, University of Johannesburg, Johannesburg, South Africa.
- United Nations Children's Fund. (2003). *Hope never dries up: Facing the challenges. A situational assessment analysis of children in Zimbabwe 2002*. Harare: Author.
- Veale, A., Hegarty, C., & Finucane, S. (1997, July). *An examination of self-concept and self-esteem among Ethiopian street children and children of the travelling community in Ireland*. Fifth European Congress of Psychology, Cross-Cultural Section, Dublin, Ireland.
- Vostanis, P., Grattan, E., & Cumella, S. (1998). Mental health problems of homeless children and families: longitudinal study. *British Medical Journal*, 316 (7135), 899-902.
- Williams, C. (1993). Who are "street children"? A hierarchy of street use and appropriate responses. *Child Abuse and Neglect*, 17, 831-841.
- World Bank. (2007). *World development report 2007: Development and the next generation*. Washington DC: Author.
- Yates, G.L. (1991). A risk profile comparison of homeless youth involved in commercial sex work and homeless youth not involved. *Journal of Adolescence Health*, 12 (7), 545-8.
- Zimbabwe National Council for the Welfare of Children. (2004). *Situation assessment of children living and/or working on the streets in Harare and Chitungwiza*. Retrieved February 3, 2007, from <http://www.kubatana.net/html/archive/chiyou/040701zncwc.asp?sector=URBDEVandyear=2004>

Appendices

Appendix A: Key Informant Interview Guide English Version

Hello! My name is Samson Mhizha. I am a student at the University of Zimbabwe. I am carrying out a research on the life of children living and working in the streets. I will be asking interesting and personal questions. What we will discuss will be held in confidence. I will not write down your name but will be writing what we will be discussing. You are free to stop responding at any stage. Shall we start?

Demographics

Age, marital status, religious affiliation, job title, organization, tenure, work on children, educational level, siblings.

Street Children (on-and of-street) Definitions

Self-image definition and indicators *How do street children define themselves? How do they evaluate themselves? Why?*

Nature of Self-image *How do they view themselves? Why do they evaluate view themselves in that way? Why they define themselves that was?*

Effects of Self-image *Do their self-evaluations affect them? In what ways, do their self-evaluations affect their behaviours?*

What must be done to correct these?

Do you have anything else to say?

Debriefing

Thank you for your cooperation. The purpose of this study is to know the indicators, nature and effects of adolescent self-image among street children. Once again, no one will know how you responded to these questions.

Appendix B: Key Informant Interview Guide Shona Version

Kwaziwa Shamwari! Ndinonzi Samson Mhizha, ndinodzidza pa University of Zimbabwe. Ndiri kuda kuti tiite nhaurirano yeupenyu hwevana vanogara nekushanda mudhorobha. Ndichakubvunza mibvunzo inonakidza uye isina kuoma. Zvatichataura hazvingoudzwi vanhu. Zita rako handinyori pasi asi ndichange ndichinyora zvatinenge tichitaura. Wakasununguka kurega kupindura paunenge waona. Tichitanga zveduka?

Mamiriro ako

Makore ekuzvarwa, wakawanikwa, chitendero chako, basa, kambani yako, nguva pabasa, basa revana, dzidzo, mhuri.

Vana vanogara nekushanda mumigwagwa yemumadhorobha *Dura zvazvinoreva?*

Mazvionero avanozviita vanhu uye zvinongedzo/nhivi dzemazvionero avanozviita.

Zvinorevei? Doma zvinongedzo/nhivi, zviratidzo

Chimiro chemazvionero avanozviita *Panhivi dzawapa, panazvose, zviratidzo zvacho*

Zvinokonzerwa nemazvionero avanozviita *Paupenyu, pamaitiro, panezvimwe zvipi?*

Zvii zvingaitwa maererano nezvinokonzerwa nemazvionero avanozviita?

Zvirikuitwa izvozvi, zvirikusara, zvaunoona zvingaitwa

Zvimwewo zvaungataura?

Debriefing

Ndinokutenda nekupindura mibvunzo iyi kwawaita. Chinangwa cheongororo iyi kuda kuona nhivi, chimiro nezvingakonzerwa nemazvionero anoita vana vemumudhorobha vava mhandara kana majaya. Ndinopamhidzazve kukuudza kuti zvichabuda apa hazvishambadzwi zvichishandisa zita rako.

Appendix C: In-depth Interview and Focus Group Discussion Guides English Versions

Hello! My name is Samson Mhizha. I am a student at the University of Zimbabwe. I am carrying out a discussion on the life of children living and working in the streets. I will be asking interesting and personal questions. What we will discuss will be held in confidence. I will not write down your name but will be writing what we will be discussing. You are free to stop responding at any stage. Shall we start?

Can you give details of your age, marital status, religious affiliation, reasons why in the street, tenure in the street, educational level reached, parental status, economic activity, and siblings.

Street Children (on-and of-street) Definitions

Self-image definition and indicators *Who are you? How do you view yourself? What areas or dimensions of your life define you or are very important to you?*

Nature of Self-image *Why did you give the response you gave on the above question/ How do you view yourself? Why do you view yourself that way? Why you define yourself that way?*

Effects of Self-image *Does your self-evaluations or self-definitions affect you and your behaviours? In what ways, do the self-evaluations affect you and your behaviour?*

What must be done to correct these?

Do you have anything else to say?

Debriefing

Thank you for your cooperation. The purpose of this study is to know the indicators, nature and effects of adolescent self-image among street children. Once again no one will know how you responded to these questions.

Appendix D: In-depth Interview and Focus Group Discussion Guides Shona Versions

Kwaziwa Shamwari! Ndinonzi Samson Mhizha, ndinodzidza pa University of Zimbabwe. Ndiri kuda kuti tiite nhaurirano yeupenyu hwevana vanogara nekushanda mudhorobha. Ndichakubvunza mibvunzo inonakidza uye isina kuoma. Zvatichataura hazvingoudzwi vanhu. Zita rako handinyori pasi asi ndichange ndichinyora zvatininge tichitaura. Wakasununguka kurega kupindura paunenge waona. Tichitanga zveduka?

Ndiudzewo chimiro chako pane zvivera; *makore ekuzvarwa, wakawanikwa, chitendero chako, base rako, basa raunorarama naro, chimiro chavabereki vako, nguva mumugwagwa, mhuri yekwenyu.*

Kuti vana vanogara nekushanda mumigwagwa yemumadhorobha zvinorevei?

Ndiudzewo zvinongedzo/nhivi dzemazvionero amunozviita sevana vanogara nekushanda mumugwagwa?.

Ndiudzewo chimiro chemazvionero amunozviita sevana vanogara nekushanda mumugwagwa?

Ndezvipi zvinokonzerwa nemazvionero amuzviita sevana vanogara mumugwagwa?

Zvimwewo zvaungataura?

Debriefing

Ndinokutenda nekupindura mibvunzo iyi kwawaita. Chinangwa cheongororo iyi kuda kuona nhivi, chimiro nezvingakonzerwa nemazvionero anoita vana vemumudhorobha vava mhandara kana majaya. Ndinopamhidzazve kukuudza kuti zvichabuda apa hazvishambadzwi zvichishandisa zita rako.

Appendix E: Participant and Non-Participant Observation Guide

What can be inferred on the indicators, nature and effects of adolescent self-image amongst on-the-street and of-the-street children from the following?

- a) **Settings:** The physical aspects of the places in where the adolescent street children work and live.
- b) **People:** What are the characteristics and accessories' of the adolescent street children who are present and why are they there?
- c) **Activities:** What activities are occurring in the setting?
- d) **Signs:** Are there any clues that provide evidence about meanings and behaviours?
- e) **Behaviour:** What are the adolescent street children doing? Are there any verbal and non-verbal behavioural implications?
- f) **Events:** Is what is being observed a regular occurrence or a special "one-off" event?
- g) **Time:** In what order, at what times and for how long do behaviours and events occur? Is there a reason for this?
- h) **Goals:** What are the adolescent street children in the setting trying to accomplish?
- i) **Connections:** What is the relationship between the adolescent street children in the setting?
Does it change over time?

Appendix F: Introductory Letter

P.O Box MP 167
Mount Pleasant
Harare
Zimbabwe

Telephone: 303211
Telex: 26580 UNIVZ ZW
Telegrams: **UNIVERSITY**
Fax :(263) (4)333407



DEPARTMENT of PSYCHOLOGY UNIVERSITY OF ZIMBABWE

05 December 2006

To Whom It May Concern

Re: Request for Assistance in Research on the Lives of Children Working and Living in the Streets

This letter serves to inform you that the bearer of this letter, **Samson Mhizha** is a **Master of Philosophy Social Studies (Psychology)** degree student with the Department of Psychology at the University of Zimbabwe. He is carrying out a study **on the Life of Children Working and Living in the Streets in Harare**. The research involves observations, focus group discussions, key informant interviews and in-depth interviews. Your assistance in this research endeavour is greatly appreciated.

The research will be helpful in adding literature and suggesting recommendations on children working and living in the streets from a psychological perspective in Zimbabwe.

Thank You in Advance

Yours Sincerely

Tinashe Muromo (Chairman of Psychology Department and Supervisor)

Mobile Number: 011728615

Email: tmuromo@sociol.uz.ac.zw