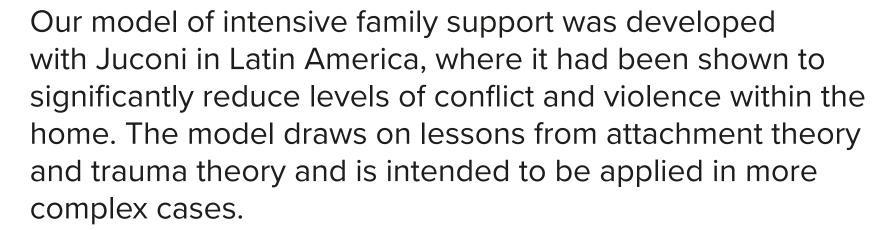
DAILWAY GALDOE

Railway Children works across the world with and for children on the streets. We focus much of our work on family reintegration as we believe that every child needs to grow in a safe, loving family to thrive.

Railway Children Africa (RCA) was established in 2010 in Tanzania, where there are at least 5,000 children sleeping on the streets. Many of them have escaped extreme violence and abuse, with 60% of children having experienced violence from adults.

The safety of children is our primary concern, and at the same time, we know family is the best place for them to grow. In many cases, it is possible to change the situation at home by supporting the needs of the mother, or key caregiver, as much as the children.

Every year, RCA reintegrates more than 300 children from the streets back home with their families. More than 80% of children are thriving and in school a year after the reintegration took place.



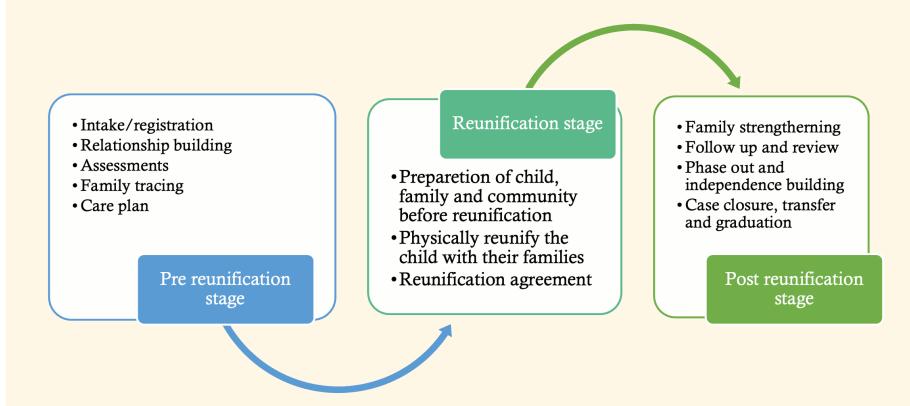
Children from the streets need a safe place to stay while work with families begins and further assessments are made. Increasingly, this is provided through 'fit persons' or emergency foster carers. For some children, reintegration will not take place and alternatives will be sought. As many as 40% of reintegration placements are with kinship carers but relationships with birth parents should have also improved.

Our intensive family work model explores options for safe reintegration with birth parents. This work is applied over several weeks and months. The model recognises that often parents have not experienced consistent, empathetic relationships. Over time, our workers provide that for them – individually at first, then together as a family unit.

Through these relationships, we model more appropriate communication and provide an experience of being cared for. This creates a sense of safety where we support individuals to process their own experiences while introducing new coping strategies and ways of dealing with family conflict.

As we move from individual to family work, the attachments that have been formed between worker and mother, and worker and child, are transferred to each other. This is done through games and creating shared positive experiences. The family is then ready to process their difficult experiences together in a safe and contained environment.

All reintegration work goes through the following stages:



In more complex cases, the intensive family support model is applied:



In 2019, we conducted a study to establish the impact of this approach on the families we work with.

Individual Work

Working with the child and

individual family members

The findings are outlined below.



SUMMARY OF METHODOLOGY

The evaluation was conducted with families that were classed as having 'intensive need' and who were reunified between October 2018 and September 2019 within two projects (Kivuko and CST) based in Mwanza.

A simple pre-test/post-test model was used, with children and caregivers interviewed at one-year intervals. For the sake of comparability, second interviews were only conducted when the caregiver stayed the same.

Families were assessed at baseline and after one year using Kiswahili translations of:

- the International Child Abuse Screening Tool (ICAST) Trial Version, which was tested and used successfully in sub-Saharan Africa (Meinck et al, 2018; Cluver et al, 2018) using a shorter timescale of one month. The tool consisted of two parts:
- ICAST-P for caregivers measures frequency of caregiver's use of physical and emotional violence on the index child, neglectful incidents, and known exposure of the child to contact sexual abuse.
- ICAST-C for children aged 10 or over

 measures frequency of physical and
 emotional abuse and neglect by caregivers,
 sexual harassment and contact sexual abuse
 involving anyone, and violence exposure in the household.
- A small number of children aged under 10
 at the beginning of the study were asked to
 complete a simplified version of the ICAST-C.
- the Conflict Tactics Scale 2 short form (caregiver only) measures intimate partner violence. The CTS2 short form was used to measure change in violence directed towards caregivers by comparing self-reported incidents at two points in time, as well as using a timeframe of the previous month. The tool covers issues of negotiation, psychological aggression, injury, assault, and sexual assault, with two questions in each category.

Additionally, eight interviews with caregivers were conducted to collect their experiences about the intervention – four from Kivuko, and four from CST. The caregivers were sampled based on the pre-test/post-test results, with half selected from the group that showed the greatest reductions in violence and half from those that showed the least reduction.

PARTICIPANTS AND PROCESS

Kivuko recruited 21 families into the study, and CST recruited 24.

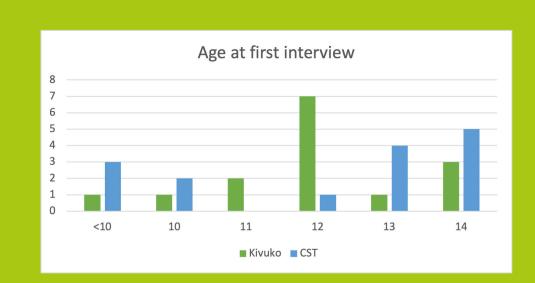
All 45 families had a first interview, but 15 families did not complete second interviews. This was for reasons mostly related to children being moved to live with other relatives – in none of these cases was it because children had returned to the streets. Second interviews were conducted with 30 families (15 from each project).

15 children in each project completed an ICAST-Trial questionnaire twice – shortly after entering the programme and a year later.

• **Gender** – the majority of Kivuko's intake (87%) were male, while the CST intake was more evenly split (46% male and 54% female)

	Kivuko	CST
Male	13	7
Female	2	8

 Age – almost half (46%) of Kivuko's intake were aged 12 at first interview, whereas the most common age for the CST intake was 14 (33%). The age of the CST children at first interview was more evenly distributed across the categories than in Kivuko.



• **Street status** – Kivuko's intake were mostly (80%) on the streets full-time, whereas CST had slightly more (54%) who were on the streets part-time.

Of the eight females in the CST intake, four (50%) reported being on the streets full-time. Despite this, with one exception, females in CST reported being on the streets for a shorter time than males overall.

	Kivuko	CST
On streets full-time	12	7
On streets part-time	3	8

• **Shelter** – four (27%) of the children Kivuko worked with had been or were in a shelter compared to eight (54%) in CST. This is to be expected, as CST run the only shelter in Mwanza for girls who have been subjected to rape.

SUMMARY OF FINDINGS

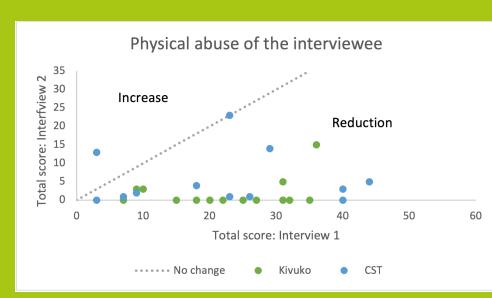
ICAST-Trial (C)

 Children reported that abusive incidents, particularly physical violence, had reduced at second interview in most cases.

10 to 14-year-olds

In Kivuko, there was an 83% reduction overall in the number of abusive incidents reported at the second interview by 10–14-year-olds. In CST, there was a 59% reduction overall.

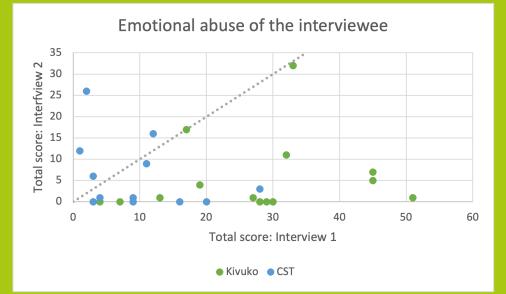
 Physical violence reduced by the most in both projects – 92% in Kivuko and 75% in CST.



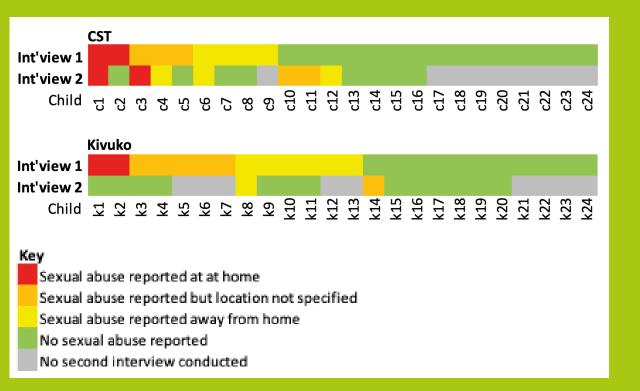
Children aged under 10

The tool used a simpler scale of 'never, sometimes, many times', and the number of sub-categories was reduced.

 Overall, all children under 10 reported some reduction in abusive incidents within the home.



 Children reported that incidents of sexual abuse reduced in almost all cases in Kivuko, with less reduction seen in CST.



• Levels of help-seeking were low even when levels of abuse were high, particularly in Kivuko.

In Kivuko, only 19% of those originally interviewed had asked for help because of emotional or physical abuse.

This was slightly higher in CST; 33% of those originally interviewed had asked for help because of emotional or physical abuse.

It was more common to ask for help because of sexual abuse, though help-seeking was still low in Kivuko, with only 25% who experienced sexual abuse asking for help.

ICAST-Trial (P)

 Caregivers reported reductions in levels of abuse across both projects.

23 primary caregivers (14 working with Kivuko and 11 working with CST) completed the ICAST-Trial (P) survey at the start of the work and approximately one year later; all were female.

 In Kivuko, there was a 64% reduction in the levels of abuse reported at the second interview. CST caregivers reported a 75% reduction in abuse.

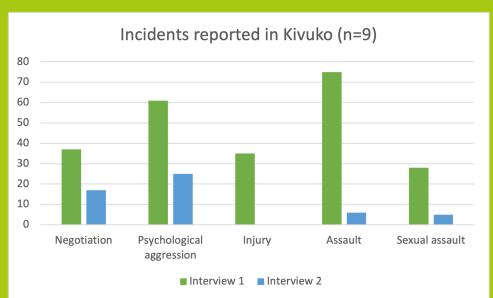
One caregiver reported higher levels of abuse at the second interview, and this was consistent with the work undertaken as the child returned to the centre around this time.

• Where caregivers identified a reduction in abuse, the child had also identified a reduction in abuse.

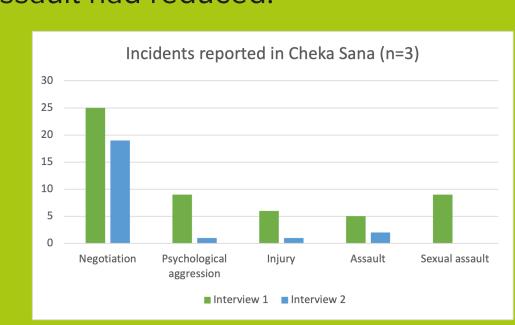
Conflict Tactics Scale (CTS2 Short Form)

• Frequency of all negative behaviours had reduced at the second interview, but not all positive behaviours increased.

In Kivuko, there were no reports of injury in the second interviews, and very significant reductions in physical and sexual assault. Psychological aggression, although reduced, was the most resistant to change. Positive negotiation incidents decreased overall, although showing respect increased.



There were no reports of sexual assault in the second interviews, and psychological aggression and assault had reduced.



 Overall, all negative conflict behaviours reduced significantly, but the severe behaviours reduced the most, by 93% in Kivuko and 90% in CST.

Returning to the streets

 None of the 15 children in each project who had remained in the study were on the streets when checked in August 2021.

To find out more please scan the QR code:



www.railwaychildren.org.uk

LESSONS LEARNT

- With an empathetic, consistent approach that is focused on the parent's needs as well as the children's, it is possible to considerably reduce violence and increase safety in the home.
- The whole family approach will impact all children in the home not just the child that has become separated.
- The approach takes time, commitment and empathy but appears to deliver lasting change in relatively complex families.

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