INTERNATIONAL JOURNAL OF HUMANITIES TECHNOLOGY AND CIVILIZATION
E-ISSN: 2600-8815
VOLUME 11, ISSUE 2, 2026, 142 - 155
DOI: https://doi.org/10.15282/ijhtc.v11i2.14709

RESEARCH ARTICLE

Systematic review of research on street children in Africa: Evidence, methodological trends, and implications for policy and practice

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Abstract: Children in street situations are among the most visible and under-served populations in African cities, yet research on them remains fragmented and geographically skewed. This systematic review synthesised and appraised that research and derived implications for policy and practice. Following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA 2020) guidelines, five databases and grey literature were searched for publications from 2000 to 2024. Of 1,959 records identified, 58 sources (42 empirical studies, 9 reviews, and 7 international organisation reports) met the inclusion criteria and were analysed through thematic synthesis. The literature, drawn mainly from East, West, and Southern Africa, indicates that street involvement is structurally produced by poverty, family conflict and violence, educational exclusion, rapid urbanisation, and weak social protection. Children experience overlapping health, educational, and safety deprivations, and substance use is common, yet they also show considerable agency and resilience. Interventions are rarely rigorously evaluated, the evidence is dominated by qualitative and cross-sectional designs, and girls, younger children, children with disabilities, and Central and North Africa are under-represented. The findings support rights-based, family-centred, and structurally informed responses, alongside longitudinal, regionally inclusive research and rigorous intervention evaluation.

Article History
Received : 6 May 2026
Revised : 28 September 2026
Accepted : 12 October 2026
Published : 30 October 2026

Keywords
Children in street situations
Streetism
Africa
Systematic review
Child protection

1. Introduction

Children in street situations constitute one of the most visible and persistently marginalised populations in urban Africa. Over the past four decades, the phenomenon of children living and working on the streets has drawn sustained scholarly, policy, and humanitarian attention, driven by the scale of the problem and its implications for child rights, development, and social equity. These children are commonly found in major African cities, where they engage in informal economic activities, occupy unsafe public spaces without consistent adult care, and navigate daily environments characterised by poverty, violence, and institutional exclusion. Their presence on the streets is not incidental; it reflects the convergence of deep structural inequalities, inadequate child welfare systems, and the failure of family and institutional systems to provide protection and opportunity. A note on terminology is needed at the outset. The literature uses several overlapping terms, including 'street children', 'street-connected children', 'street-involved children', and 'children in street situations'. The earlier terms have been criticised for defining children by a place and for carrying stigmatising connotations. Following General Comment No. 21 of the United Nations Committee on the Rights of the Child (2017), this review uses 'children in street situations' as its standard term. Other terms are retained only when reporting the wording used by specific studies, in the search strings, and in the review title, where 'street children' is kept because it remains the term most widely used in indexing and searching.

Existing research from several African countries documents that children in street situations experience multiple, overlapping, and mutually reinforcing forms of deprivation, including poor health, limited access to services, violence, and discrimination, which have been described as socially produced health and social inequities (Embleton et al., 2020, 2021). The literature also challenges simplistic victimhood framings, showing that these children are active agents who develop survival strategies, livelihoods, and social networks in response to their circumstances (Goodman et al., 2023; Shand et al., 2015). Understanding this duality of simultaneous vulnerability and agency is central to designing effective responses. The causes of streetism are well documented, in their broad outlines, in the African studies available: household poverty, family conflict and abuse, educational exclusion, and rapid urbanisation converge to push and pull children onto the streets (Cumber & Tsoka-Gwegweni, 2015; Embleton et al., 2016; Oyewole, 2013). However, the evidence base is uneven across these domains. While qualitative, experience-centred research has generated rich insights into children's lived realities, longitudinal studies tracking developmental trajectories, rigorous evaluations of interventions, and comparative research across regions and subgroups remain severely limited.

Several reviews have examined aspects of this evidence base, including the health profile of street children in Africa (Cumber & Tsoka-Gwegweni, 2015), substance use in resource-constrained settings (Embleton, Mwangi, et al., 2013), the causes of child and youth homelessness (Embleton et al., 2016), health and social inequities in sub-Saharan Africa (Embleton et al., 2021), interventions for reintegration (Coren et al., 2013), and non-formal education (Shephard, 2014). However, these reviews each address a single domain, and no recent review has applied PRISMA-compliant methodology to synthesise Africa-specific research across all major thematic domains, appraise methodological quality, and map

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geographic and subgroup coverage. This gap constrains the field's ability to develop coordinated, evidence-informed responses.

This systematic review addresses that gap. The objectives of the review are fourfold: (i) to synthesise empirical evidence and authoritative reports on children in street situations in Africa; (ii) to map dominant thematic domains, methodological approaches, and geographic distribution of the literature; (iii) to critically appraise the quality of included studies using validated tools; and (iv) to derive evidence-informed implications for research design, policy development, and programmatic practice. The review is structured as follows: Section 2 presents the theoretical framework; Section 3 details the methodology; Section 4 presents the findings, comprising the thematic synthesis (Sections 4.1–4.8) and the methodological trends and gaps (Section 4.9); Section 5 presents the discussion; Section 6 addresses limitations; and Section 7 presents conclusions and future directions. Appendix A reports the database search strings, and Appendix B the characteristics of the primary studies and reviews cited in the synthesis.

2. Theoretical Framework

This review is anchored in three complementary theoretical frameworks that together provide the conceptual scaffolding for interpreting and synthesising evidence across its thematic domains. The first is the Child Rights Framework, grounded in the United Nations Convention on the Rights of the Child (United Nations, 1989) and its 2017 General Comment on children in street situations (United Nations Committee on the Rights of the Child, 2017). This framework positions children in street situations as rights-holders rather than problems to be managed, and requires that research, policy, and practice be evaluated against standards of non-discrimination, best interests of the child, the right to life and development, and participation. It provides the normative basis for critiquing punitive and exclusionary policy responses.

The second is the Structural Vulnerability Framework, which locates children's street involvement within broader political-economic processes of inequality, urbanisation, and institutional failure rather than in individual or family pathology (Embleton et al., 2016, 2020). This framework directs analytical attention toward macro-level drivers (poverty, labour market exclusion, migration, and weak social protection) and insists that sustainable solutions must engage structural causes rather than merely address symptoms.

The third is a Resilience and Agency Perspective drawn from positive youth development and capabilities literature (Goodman et al., 2023; Shand et al., 2015). This lens recognises that children in street situations are not passive victims but active agents who develop capacities, strategies, and social bonds under conditions of extreme constraint. It underscores the importance of strength-based, participatory approaches in research and intervention design, and cautions against deficit-only framings that inadvertently reinforce stigma and marginalisation.

Together, these three frameworks enable this review to analyse evidence at multiple levels, from individual experiences and agency to structural conditions and institutional responses, while maintaining a normative commitment to children's rights and dignity throughout the synthesis.

3. Methodology

3.1 Review Design

This study employs a systematic review methodology with thematic synthesis, reported in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA 2020) guidelines (Page et al., 2021). Thematic synthesis was selected as the analytic approach because it is well-suited to integrating findings from heterogeneous bodies of literature, including qualitative, quantitative, and mixed-methods studies, and for generating analytical themes that extend beyond descriptive summation to produce higher-order interpretations of the evidence (Thomas & Harden, 2008).

3.2 Search Strategy

Systematic searches were conducted across five electronic databases: Google Scholar, Scopus, Web of Science, PubMed, and ERIC. In addition, grey literature was sourced from the institutional repositories of UNICEF, the World Health Organization, the International Labour Organization, Save the Children, and the Consortium for Street Children, and from development agency reports. Searches were conducted between October 2024 and January 2025. Figure 1 reports the combined number of records retrieved from the five databases. PRISMA 2020 recommends reporting records separately for each database where feasible (Page et al., 2021); to allow the yield of each database to be reproduced, the database-specific search strings and limits are provided in Appendix A.

Search queries were constructed using Boolean logic combining three concept domains: (i) population terms ("street children" OR "street-connected children" OR "street youth" OR "working children" OR "children in street situations"); (ii) geographic terms ("Africa" OR "sub-Saharan Africa" OR "East Africa" OR "West Africa" OR "Southern Africa" OR "Central Africa" OR "North Africa"); and (iii) thematic terms ("poverty" OR "health" OR "education" OR "substance use" OR "mental health" OR "intervention" OR "reintegration" OR "social protection" OR "policy" OR "resilience" OR "streetism"). Domains were combined using the AND operator, and searches were limited to publications from 2000 to 2024 in English. Reference lists of all included studies were hand-searched to identify additional eligible literature. To support replication, the three concept domains are shown in the syntax of each database in Appendix A.

3.3 Inclusion and Exclusion Criteria

Pre-defined inclusion and exclusion criteria guided the study selection process. Table 1 presents these criteria in full.

Table 1

Inclusion and exclusion criteria for study selection

Inclusion Criteria	Exclusion Criteria
Studies focused on children in street situations (including street-connected and working children) in Africa	Studies conducted outside the African continent
Studies addressing causes, experiences, health, education, or interventions related to children in street situations	Studies not specifically addressing children living/working on the street
Empirical studies (qualitative, quantitative, or mixed methods), systematic reviews, and authoritative policy reports	Opinion pieces, editorials, and conference abstracts without full methodology
Publications from 2000 to 2024 (foundational theoretical works pre-2000 included selectively)	Studies published before 2000 except foundational theoretical works
Publications in English or with full English translation available	Studies without sufficient methodological reporting to assess quality

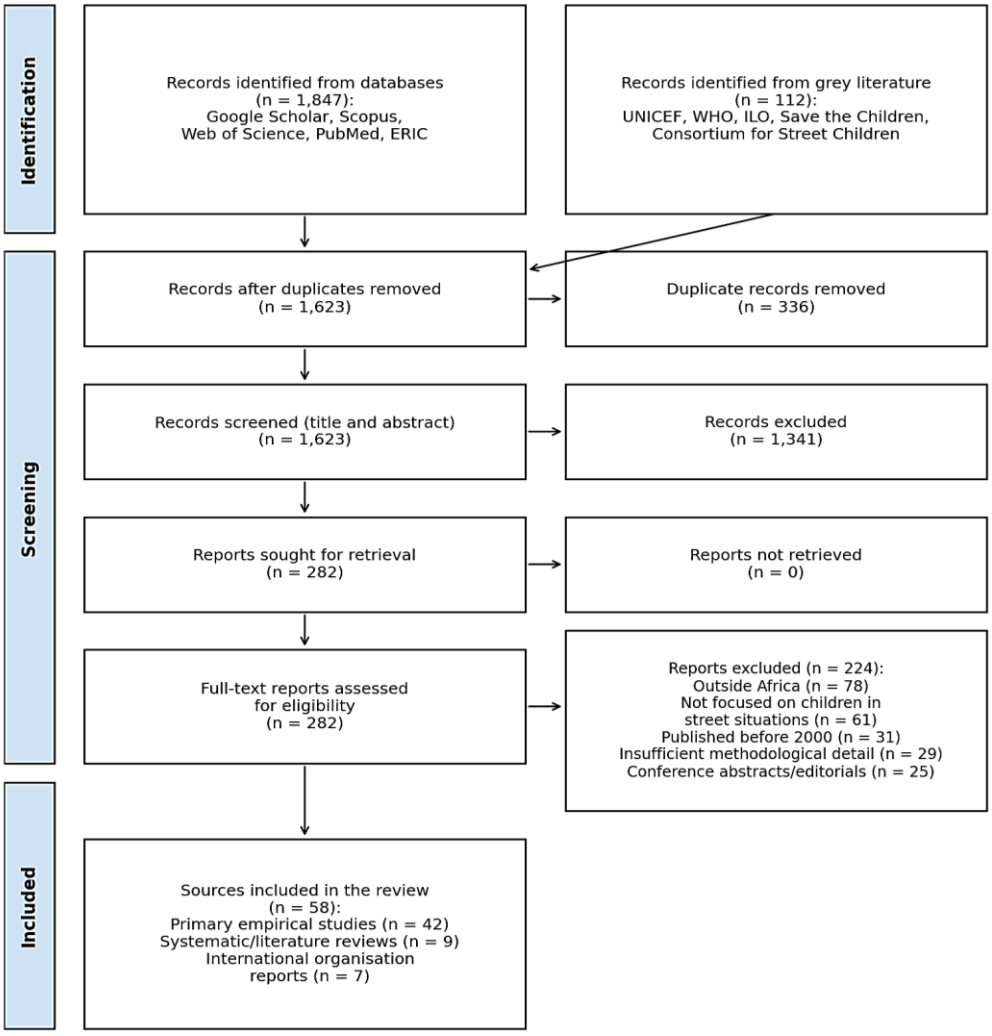
3.4 Study Selection

Following database searching and the removal of 336 duplicate records, the titles and abstracts of 1,623 unique records were screened by the author against the inclusion criteria. Records with titles or abstracts that clearly did not meet the criteria were excluded. Full-text articles of the remaining 282 records were then retrieved and assessed for eligibility. Reasons for exclusion were documented for all articles excluded at full-text stage. Figure 1 presents the PRISMA 2020 flow diagram of the selection process.

The 58 included sources comprised 42 primary empirical studies, 9 systematic or literature reviews, and 7 international organisation reports (Figure 1). The characteristics of the primary studies and reviews cited in the synthesis are presented in Appendix B.

Figure 1

PRISMA 2020 flow diagram of study selection



3.5 Quality Appraisal

The 42 primary empirical studies were appraised with the tool appropriate to their design: The Critical Appraisal Skills Programme (CASP) Qualitative Checklist for qualitative studies (Critical Appraisal Skills Programme, 2018), the Joanna Briggs Institute (JBI) checklist for prevalence studies for cross-sectional quantitative studies (Munn et al., 2015), and the Mixed Methods Appraisal Tool (MMAT) for mixed-methods studies (Hong et al., 2018). The 9 systematic and literature reviews were appraised with AMSTAR-2 (Shea et al., 2017). The 7 international organisation reports, which include normative documents such as General Comment No. 21, were not scored with a design-specific checklist, because the appraisal tools used in this review are designed for empirical study designs and do not apply to normative, policy, or programme documents. Consistent with this, the reports are used in the synthesis only for normative, definitional, and contextual information, and no prevalence estimate or claim of effectiveness in the review rests on them. No source was excluded on quality grounds alone, in line with established practice in social science systematic reviews (Thomas & Harden, 2008). Table 2 summarises the appraisal outcomes by source type.

In the synthesis, quality is taken into account in three ways that are visible in the text. Findings are reported together with the design, setting, and sample of the source study; conclusions resting on a single study, a small or convenience sample, or a design without a comparison group are identified as tentative; and where studies report different results, the differences are stated alongside the characteristics of the studies concerned rather than resolved.

Table 2

Quality appraisal summary by source type

Source Type	Appraisal Tool	Sources (n)	Key Quality Notes
Primary empirical studies (qualitative, cross-sectional quantitative, and mixed methods)	CASP Qualitative Checklist; JBI Prevalence Checklist; MMAT	42	Qualitative studies mostly of moderate to high quality, with reflexivity and transferability often under-reported; cross-sectional studies commonly used small or purposive samples, limiting generalisability; integration of findings in mixed-methods studies variable but generally adequate
Systematic and literature reviews	AMSTAR-2	9	Moderate quality; search strategies not always fully reported
International organisation reports	Not scored: study-design checklists do not apply to normative and policy documents	7	Authoritative sources (UN treaty body and international organisations); used only for normative, definitional, and contextual information, not as evidence of prevalence or effectiveness
Total		58	

3.6 Data Extraction and Thematic Synthesis

Data were extracted from included studies into a standardised matrix capturing: author(s) and year; country and geographic context; study design and sample; thematic focus; key findings; and methodological strengths and limitations. Thematic synthesis proceeded in three iterative stages following Thomas and Harden (2008): first, line-by-line coding of study findings to identify concepts and patterns; second, grouping of initial codes into descriptive themes through iterative comparison; and third, interpretation of descriptive themes through the lens of the three theoretical frameworks to generate analytical themes with explanatory value beyond individual studies. The characteristics of the primary studies and reviews cited in the synthesis are presented in Appendix B.

Codes were derived inductively from the findings of each source. Because the quantitative studies used different definitions, populations, and measures, their results were not pooled statistically but were integrated narratively into the relevant themes, and differences between their estimates are reported in the synthesis. The synthesis produced eight analytical themes. Table 3 presents the resulting thematic synthesis map.

4. Findings

4.1 Conceptualisation and Definitions of Children in Street Situations

One of the most persistent methodological challenges in research on children in street situations in Africa is definitional inconsistency. Early scholarship and international policy documents relied primarily on a binary classification distinguishing between 'children on the street', who work or roam on the streets by day while returning to family at night, and 'children of the street', who live and sleep on the streets with limited or no family contact (Cumber & Tsoka-Gwegweni, 2015; Embleton, Atwoli, et al., 2013). This dichotomy gained wide adoption in African research because of its operational simplicity and policy relevance, and it facilitated comparisons across diverse settings where children's circumstances were otherwise difficult to categorise.

However, empirical research from several African countries has increasingly challenged the adequacy of binary categorisation. Studies from Nigeria, Kenya, Ghana, the Democratic Republic of Congo, and Zimbabwe document that children's engagement with the street is fluid and responsive to changing household and contextual conditions, and that it changes as children grow up on the streets (Oyewole, 2013; Shand et al., 2015; Sorber et al., 2014). Many children move between street environments and family homes in response to economic fluctuations, family conflict, or schooling availability, resisting stable classification at any given point. This fluidity means that binary categorisation can

misrepresent the population, understate the continuum of risk, and complicate prevalence estimation and comparison across studies.

Reflecting this complexity, more recent scholarship conceptualises street involvement along a continuum, ranging from part-time street work while retaining family ties through to full-time residence on the streets. In Eldoret, Kenya, Sorber et al. (2014) found that youth on the street full-time differed from part-time youth in important respects, being more likely to have been arrested, to have left home because of violence, and to name friends on the street as a major source of support. General Comment No. 21 (United Nations Committee on the Rights of the Child, 2017) adopted the term 'children in street situations' to capture this range and to reduce stigma by focusing on children's circumstances rather than on dispositional categories.

The definitional challenge has important analytical consequences. Inconsistent definitions across studies make cross-country comparison of prevalence estimates unreliable, limit the development of standardised data collection instruments, and complicate the design of policies intended to reach all children in street situations regardless of their specific configuration of street involvement. Moving toward a shared, continuum-based definition, operationalised flexibly at the country level to reflect local contextual realities, represents a foundational requirement for advancing the field. The growing consensus around 'children in street situations' as the appropriate umbrella framing offers a promising step in this direction.

Table 3

Thematic synthesis map

Theme	Key Studies	Core Synthesised Finding
Conceptualisation & definitions	Cumber & Tsoka-Gwegweni (2015); Embleton, Atwoli, et al. (2013); Sorber et al. (2014); United Nations Committee on the Rights of the Child (2017)	Continuum model supersedes binary on-street/of-street classification; definitional inconsistency persists and undermines comparative research
Prevalence & distribution	Cumber & Tsoka-Gwegweni (2015); Greeson et al. (2024); Sorber et al. (2014); Thomas de Benítez (2011)	No reliable continental estimate; boys predominate in most samples, but girls can form a substantial minority; enumeration hampered by mobility and inconsistent definitions
Causes of street involvement	Abate et al. (2022); Cumber & Tsoka-Gwegweni (2015); Embleton et al. (2016); Oyewole (2013)	Poverty is the primary structural driver; family conflict, abuse, educational exclusion, and urbanisation interact as compounding pathways
Lived experiences & survival strategies	Goodman et al. (2023); Shand et al. (2015); Sorber et al. (2014)	Children are active economic agents; peer networks provide informal support; arrest, violence, and exploitation are common
Health outcomes	Cumber & Tsoka-Gwegweni (2015); Embleton, Mwangi, et al. (2013); Kacheyo & Nyirenda (2024); Oppong Asante & Nefale (2021); Shegaw et al. (2022); Zewude et al. (2023)	High disease burden; substance use common (pooled lifetime drug use 60% in resource-constrained settings); mental health under-studied; access to care constrained by stigma and mistrust
Educational experiences & outcomes	Oyewole (2013); Shephard (2014)	Educational exclusion is both cause and consequence of street involvement; non-formal education is widespread but its effectiveness is unevaluated
Interventions & policy responses	Coren et al. (2013); Goodman et al. (2023); Greeson et al. (2024); United Nations Committee on the Rights of the Child (2017)	Family-strengthening and community-based reintegration models are promising but evaluated only in small or non-randomised Kenyan studies; punitive responses conflict with children's rights
Methodological trends & gaps	Coren et al. (2013); Embleton et al. (2021); Embleton, Mwangi, et al. (2013); Shephard (2014)	Dominance of qualitative and cross-sectional designs; Kenya, Ethiopia, Nigeria, Ghana, Zimbabwe, and South Africa over-represented; Central and North Africa, girls, children with disabilities, and younger children under-studied

4.2 Prevalence and Distribution of Children in Street Situations in Africa

Establishing the true prevalence of children in street situations in Africa is a task fraught with methodological and logistical difficulties. The transient, mobile, and often concealed nature of these children's lives renders formal enumeration unreliable, and available estimates are typically derived from local headcounts, programme records, or cross-sectional surveys in particular urban locations (Thomas de Benítez, 2011). None of the sources reviewed provides a reliable continental estimate; published figures are local or national, such as the estimate of 250,000 to 300,000 street-involved children in Kenya cited by Greeson et al. (2024).

In the studies reviewed, children in street situations were studied mainly in large and medium-sized cities, including Eldoret and Meru County in Kenya; Addis Ababa, Harar, and Bahir Dar in Ethiopia; Lilongwe and Zomba in Malawi; Accra in Ghana; Harare in Zimbabwe; Bukavu in the Democratic Republic of Congo; and Ibadan in Nigeria (Abate et al., 2022; Banda et al., 2024; Goodman et al., 2023; Kacheyo & Nyirenda, 2024; Oyewole, 2013; Shand et al., 2015; Shegaw

et al., 2022; Sorber et al., 2014; Zewude et al., 2023). Rapid urbanisation, informal settlement expansion, and socio-economic inequality in such cities are associated in this literature with growing numbers of children in street situations. Children are often drawn to cities by perceived economic opportunities (Oyewole, 2013); in Harar, for example, looking for work was among the most common reasons children gave for moving to the street (Abate et al., 2022).

Gender distribution is a consistently documented dimension of the prevalence literature. Boys form the majority of street children in most African samples (Cumber & Tsoka-Gwegweni, 2015), although girls can form a substantial minority: 41% of the 200 street youth sampled in Eldoret were female (Sorber et al., 2014). Because most studies recruit participants in public spaces, girls whose street involvement is less visible, for example in domestic work, informal trade, or transactional sex, are likely to be under-counted, and recognising this is important if prevalence data and policy responses are not to overlook girls. Samples in the studies reviewed are concentrated in early and middle adolescence (for example, a mean age of 16.3 years in Eldoret; Sorber et al., 2014), a developmental period of heightened vulnerability and critical importance for long-term educational and social outcomes.

4.3 Causes of Street Involvement among Children in Africa

The causes of children's movement to and sustained presence on the streets constitute one of the most extensively researched domains in the African literature on children in street situations. Across the national contexts and methodological approaches represented, a consistent causal pattern emerges: poverty operates as the primary structural driver, with family instability, educational failure, and urban structural conditions operating as intersecting pathways. Household poverty is the factor most consistently identified across the literature as driving children's entry into street life. Families unable to consistently provide food, shelter, clothing, or schooling represent the most common context from which children enter street environments, and a review of studies from 16 African countries found that children had mainly left home because of poverty and abuse (Cumber & Tsoka-Gwegweni, 2015; see also Abate et al., 2022; Embleton et al., 2016; Oyewole, 2013). In many documented cases, children's street activity is explicitly income-directed: they engage in begging, vending, or casual labour to supplement household income rather than for their own exclusive benefit. This framing challenges simplistic narratives of individual children escaping dysfunctional families and situates street involvement within broader household economic survival strategies in contexts of chronic deprivation.

Family-related factors constitute a second critical cluster of causes operating both independently and in interaction with poverty. A systematic review and meta-analysis found family conflict, abuse, and poverty to be among the most frequently reported reasons for street involvement across settings (Embleton et al., 2016). In Eldoret, youth living on the street full-time were more likely than part-time youth to have left home because of violence (Sorber et al., 2014), and quarrels with parents were among the most common reasons reported in Harar (Abate et al., 2022). These accounts suggest that children often move to the streets not because of a single precipitating event but in response to an accumulation of adversities that progressively erode the protective function of the family. The street, in this framing, is not the problem; it is a survival response to an already-failed family environment.

Educational exclusion constitutes a third causal pathway. When schools are inaccessible because of cost, distance, perceived irrelevance, or hostile environments, they lose their protective function of keeping children in structured, supervised settings (Oyewole, 2013). The relationship appears to be reciprocal: most street children and youth in developing countries have been forced to leave formal education (Shephard, 2014), and street involvement in turn reduces the likelihood of school re-engagement. This feedback loop amplifies long-term developmental disadvantage. At the broadest structural level, these individual- and family-level pathways are embedded within macro-structural conditions, including rapid urbanisation, inadequate affordable housing, labour market exclusion, and the underfunding of social protection systems. Qualitative research in Kenya has shown how the health and social inequities of street-connected children and youth are produced and maintained by structural and social determinants, including systemic discrimination and the non-fulfilment of their rights (Embleton et al., 2020; see also Embleton et al., 2021; Oyewole, 2013). This structural perspective implies that interventions focused solely on individual children or their families will be insufficient unless complemented by structural reforms that address poverty, inequality, and governance failures at national and sub-national levels.

4.4 Lived Experiences and Survival Strategies of Children in Street Situations

Qualitative and ethnographic research constitutes the methodological backbone of evidence on the lived experiences of children in street situations, providing detailed and contextually grounded accounts of daily realities, survival strategies, social relationships, and subjective meaning-making. Across this body of evidence, several consistent themes emerge, while important contextual variation is also documented. Children in street situations in the countries studied engage in a wide range of informal economic activities as their primary survival mechanism, working on the fringes of the formal and informal urban economy, and their earning strategies change as they grow into adulthood (Abate et al., 2022; Shand et al., 2015). These activities provide daily income but are characterised by irregularity, exploitation, and physical risk. Many children sleep in exposed settings such as half-destroyed houses, abandoned buildings, under bridges, and in the open air, where they face harsh weather and health risks (Cumber & Tsoka-Gwegweni, 2015).

Violence is a pervasive and defining feature of street life. Contact with the police is common: in Eldoret, youth on the street full-time were more likely than part-time youth to have been arrested, and boys were more likely than girls to have been arrested or jailed (Sorber et al., 2014). In Ghana and South Africa, experiences of victimisation, including sexual assault, physical beating, and robbery, were associated with substance use (Oppong Asante & Nefale, 2021). Sexual violence is a particularly acute risk: in Zomba, Malawi, street children who had been sexually abused rarely obtained

emergency care because of limited knowledge of the services, negative perceptions of them, shame, fear of discrimination, and mistrust of health workers (Kacheyo & Nyirenda, 2024). Girls face additional gender-specific risks, including early pregnancy (Wachira et al., 2016).

Despite this pervasive adversity, the research literature documents children's agency, adaptability, and resilience. Children in street situations are not passive victims; they actively develop livelihoods, coping strategies, and supportive peer relationships within the street environment (Goodman et al., 2023; Shand et al., 2015). Peer networks can function as an informal safety net: in Eldoret, youth on the street full-time were more likely than part-time youth to name friends on the street as a major source of support (Sorber et al., 2014). Goodman et al. (2023), reporting on a reintegration programme in Meru County, Kenya, note that the time a child spends on the streets shapes how far he or she is socialised into street norms, attitudes, and behaviours, which underlines the importance of early intervention.

Recognising children's agency has important methodological and programmatic implications. Research that frames these children solely as victims obscures the strengths and capacities that effective interventions need to build upon. Participatory approaches that actively involve children in research design and data collection not only yield more accurate findings but also model the respect for children's voice and agency that rights-based policy frameworks require.

4.5 Health Outcomes of Children in Street Situations

4.5.1 Physical health

The physical health of children in street situations in the African studies reviewed is shaped by poverty, homelessness, environmental hazards, and restricted access to care. The literature review by Cumber and Tsoka-Gwegweni (2015), which drew on 17 databases and studies from 16 African countries, concluded that street children carry a greater disease burden than children living at home because of their homeless lifestyle. The mixed-methods study by Abate et al. (2022), with 220 street children in Harar, Ethiopia, assessed their health status alongside the reasons they had moved to the street. Access to healthcare is constrained: in Addis Ababa, street children's responses to illness combined self-care with visits to health facilities (Zewude et al., 2023), and in Zomba, shame, fear of discrimination, and mistrust of health workers deterred sexually abused children from seeking care (Kacheyo & Nyirenda, 2024). Qualitative evidence from Kenya links these barriers to systemic discrimination against street-connected children and youth (Embleton et al., 2020).

4.5.2 Substance use

Substance use represents one of the most extensively documented health concerns in the literature on children in street situations. A systematic review and meta-analysis of 50 studies from 22 resource-constrained countries estimated a pooled lifetime drug use prevalence of 60% (95% CI 51–69%) and a pooled inhalant use prevalence of 47%, with inhalants the most commonly used substances, followed by tobacco, alcohol, and cannabis (Embleton, Mwangi, et al., 2013). Estimates from individual African studies vary with population, age range, and measure, and are not directly comparable: 85.7% of street youth in Bahir Dar, Ethiopia, reported lifetime use of at least one substance (Shegaw et al., 2022), and 68.2% of street children surveyed in Addis Ababa reported sniffing glue or benzene (Zewude et al., 2023). The cross-country comparison study by Oppong Asante and Nefale (2021), conducted with 376 children and adolescents in street situations in Ghana and South Africa using purposive samples, found that substance use was common in both countries and was associated with experiences of victimisation, although the pattern of correlates differed between the two countries. Banda et al. (2024), through qualitative exploration in Lilongwe, Malawi, identified familial absence and emotional void, societal normalisation and peer pressure, economic hardship, coping, and the easy availability of substances as key themes, and Embleton, Atwoli, et al. (2013) described barriers to and facilitators of drug use cessation among street children and youth in Western Kenya. These findings caution against pathologising substance use without acknowledging its function as an adaptive, if harmful, response to extreme deprivation.

4.5.3 Mental health

Mental health remains comparatively under-researched in the literature on children in street situations. The meta-analysis by Embleton, Mwangi, et al. (2013) identified a dearth of data on the physical and mental health outcomes associated with street children's substance use. The studies reviewed nonetheless link emotional distress to family loss and violence: in Lilongwe, children described substance use as a response to familial absence and emotional void (Banda et al., 2024). In a commentary on northern Nigeria, Adekeye (2024) argued that health inequalities undermine the mental health of street children and proposed measures to address them. The recognition of mental health needs in the literature is yet to translate into systematic programmatic responses, representing a major gap in the current evidence and intervention landscape.

4.6 Educational Experiences and Outcomes

Educational exclusion is simultaneously a cause and a consequence of street involvement, creating a self-reinforcing cycle that limits children's long-term developmental prospects and social reintegration. Most street children and youth in developing countries have been forced to leave formal education (Shephard, 2014), and schooling costs have been identified as a factor promoting streetism in Ibadan, Nigeria (Oyewole, 2013). Multiple and intersecting barriers to education are identified in the literature. Direct and indirect schooling costs (fees, uniforms, books, and transport) represent prohibitive barriers for children and households operating at subsistence level (Oyewole, 2013). The temporal incompatibility between school hours and the demands of street-based income generation creates an additional barrier:

older children in particular may face a direct trade-off between school attendance and the earnings necessary for daily survival.

In response to these barriers, non-formal education programmes, including bridge schools, flexible learning centres, street education outreach, and skills-based learning, have spread widely as a means of reaching street children. However, their effectiveness has not been established: a systematic review that searched 35 databases and screened 9,271 titles identified no prospective effectiveness study with a counterfactual (Shephard, 2014). Embedding flexible and non-formal provision within national education systems, with pathways to certification, is therefore a reasonable priority, but one that needs rigorous evaluation before it can be regarded as evidence-based.

4.7 Interventions and Policy Responses

4.7.1 Typology of interventions

The intervention landscape for children in street situations in the African literature is diverse in form but consistent in its documented limitations. Common programmatic responses include temporary shelter and drop-in or rehabilitation centres; vocational and skills training; formal and non-formal education; health outreach and referral; family tracing and reunification; and psychosocial support (Coren et al., 2013; Goodman et al., 2023; Greeson et al., 2024; Shephard, 2014). Services are delivered by governments, non-governmental organisations, and community-based organisations, yet in Kenya most children who receive services have been reported to return to the streets (Greeson et al., 2024).

4.7.2 Evidence on effectiveness

The evidence on intervention effectiveness is limited in volume and mixed in conclusions. The Cochrane and Campbell systematic review of interventions for promoting reintegration and reducing harmful behaviour among street-connected children and young people found the available evidence insufficient to identify any intervention as clearly more effective than others (Coren et al., 2013), and a systematic review of non-formal education found no prospective effectiveness study with a counterfactual (Shephard, 2014).

Among the most promising evidence is that on family-strengthening and community-based reintegration models, all of it from Kenya. The exploratory evaluation of Agape Children's Ministry's Family Strengthening Programme by Greeson et al. (2024), involving 30 families (30 children and 38 caregivers), found statistically significant and large improvements in family functioning and child well-being from before to after the intervention, and all but two children remained reintegrated at the end of the study period. Goodman et al. (2023) reported reintegration outcomes of the Flourishing Community model in Meru County, which integrates economic, social, health, and educational support for families and communities, using routinely collected programme data from 2016 to 2022. Neither study used a randomised comparison group, and the Greeson et al. evaluation was small, so their findings are promising but tentative. Both nonetheless underscore the importance of addressing economic and social conditions at household and community levels, rather than focusing exclusively on the individual child.

In contrast, punitive and institutional responses, including forced removal of children from streets, criminalisation of street presence, and placement in detention or institutional care, are regarded as violations of children's rights by the United Nations Committee on the Rights of the Child (2017), and arrest is a common experience for youth on the street full-time (Sorber et al., 2014). Such approaches disrupt protective peer and family relationships and fail to address the conditions that produce street involvement, and qualitative evidence from Kenya links the treatment of street-connected children by authorities to the social production of their health inequities (Embleton et al., 2020). The literature reviewed is consistent on this point: punitive approaches appear to exacerbate rather than resolve the problem, although no controlled evaluation of such approaches was identified.

4.7.3 Rights-based and participatory approaches

An emerging consensus in the intervention literature emphasises rights-based, child-centred, and participatory approaches as the most ethically and programmatically appropriate frameworks for working with children in street situations (United Nations Committee on the Rights of the Child, 2017). These approaches require that children be involved as active participants in the design, implementation, and evaluation of programmes affecting them, not merely as beneficiaries of adult-determined interventions. They also require that interventions engage the structural economic and social drivers of streetism, not only its individual manifestations.

4.8 Gender, Age, and Subgroup Dimensions

While the broader literature on children in street situations in Africa has generated substantial evidence on the phenomenon as a whole, analysis of specific subgroups remains underdeveloped. Gender represents the most critical dimension of this gap. Because most studies recruit participants in public spaces, girls whose street involvement is less visible, for example in domestic work, informal trade, or transactional sex, are likely to be under-represented in research and data. This has serious policy consequences: programmes and policies designed primarily with the 'typical' (male) child in street situations in mind may fail to reach, protect, or support girls.

The available studies document specific risks for girls in street situations, including sexual abuse and barriers to post-abuse care (Kacheyo & Nyirenda, 2024) and early pregnancy (Wachira et al., 2016). In Eldoret, girls made up 41% of a sample of street youth, and their experiences differed from those of boys in some respects, for example in the likelihood of arrest (Sorber et al., 2014). Younger children, below the early and middle adolescent ages that dominate most samples, are similarly under-researched, although time spent on the streets shapes socialisation into street life (Goodman et al.,

2023), which suggests that early entry may increase long-term risk. Children with disabilities are perhaps the most invisible subgroup of all: none of the studies cited in this synthesis examined them specifically.

Addressing these subgroup gaps requires deliberate methodological choices: research designs that actively seek out less visible populations, sampling strategies that do not depend exclusively on public-space enumeration, and analytic frameworks that treat gender, age, and disability as analytical categories rather than background variables.

4.9 Methodological Trends and Research Gaps

A systematic examination of the methodological profile of research on children in street situations in Africa reveals a field characterised by qualitative dominance, cross-sectional designs, and significant geographic concentration. These characteristics generate rich contextual knowledge about lived experiences but constrain the field's capacity to establish causal relationships, track longitudinal trajectories, evaluate interventions rigorously, or develop findings that can be generalised across the continent.

Qualitative approaches, primarily semi-structured interviews, focus group discussions, and ethnographic observation, dominate the empirical literature (e.g., Banda et al., 2024; Embleton, Atwoli, et al., 2013; Shand et al., 2015). Their appropriateness for exploring the lived realities of children in highly dynamic and sensitive circumstances is well founded; they offer depth, flexibility, and alignment with participatory principles. However, their dominance means that quantitative prevalence data are sparse and rely heavily on purposive or convenience samples (e.g., Oppong Asante & Nefale, 2021; Sorber et al., 2014), intervention evaluations lack rigorous counterfactuals, and the evidence base cannot yet meet the threshold expected by governments and funders for large-scale programmatic investment.

Geographic coverage is profoundly uneven. Studies from Kenya, Ethiopia, Nigeria, Ghana, Zimbabwe, and South Africa account for the substantial majority of Africa-specific research, reflecting concentrations of active research institutions, NGO infrastructure, and English-language publication cultures in these countries. Central Africa and North Africa, whose populations of children in street situations face distinct political, cultural, and economic conditions, are strikingly under-researched. This imbalance means that a literature presented as 'African' in fact reflects a limited number of mainly East, West, and Southern African urban contexts, and the findings of this review should be read in that light.

Longitudinal research is particularly scarce. Studies that follow children's trajectories into, through, and out of street life over time, capturing the processes of socialisation, developmental change, and exit or entrenchment, would provide information of unique value for intervention design, yet they remain rare exceptions rather than disciplinary norms. The time, resources, and logistical challenges of maintaining cohort contact in highly mobile populations partially explain this gap, but it does not eliminate the need for methodological innovation to address it.

Intervention evaluation quality is a further critical gap. While multiple programmes are documented in the literature, rigorous evaluations employing comparison groups, validated outcome measures, and long-term follow-up are rare. Coren et al. (2013) and Shephard (2014) identified this as the defining evidentiary problem in the field, and the more recent Kenyan evaluations reviewed here remain small or non-randomised (Goodman et al., 2023; Greeson et al., 2024). Without better evaluation evidence, it is impossible to distinguish what is effective from what is merely active.

5. Discussion

This systematic review synthesises 58 studies and reports to produce a critically appraised map of research on children in street situations in Africa. Because this evidence is concentrated in a small number of countries, mainly Kenya, Ethiopia, Nigeria, Ghana, Zimbabwe, and South Africa, the insights below describe the available African literature rather than the continent as a whole. Several overarching analytical insights emerge from the synthesis that merit explicit discussion.

First, the evidence reviewed indicates that streetism in the African contexts studied is fundamentally a structural phenomenon produced by intersecting failures of economic systems, welfare institutions, and family support structures, rather than a consequence of individual deviance or family pathology. This structural reading is not merely an academic framing choice; it has direct implications for where interventions should be directed. Programmes that focus exclusively on individual children while leaving structural conditions unaddressed will produce short-term relief without durable change. Sustainable progress requires complementary action at structural levels: poverty reduction, social protection expansion, inclusive urban planning, and educational system reform.

Second, the duality of vulnerability and agency emerges as perhaps the most analytically important finding across the literature. Children in street situations are simultaneously among the most deprived and most adaptive individuals in the societies studied. They develop economic skills, social networks, and coping strategies under conditions of extreme constraint. Intervention frameworks that fail to build on these capacities, treating children as passive beneficiaries rather than active participants, are ethically deficient under the UNCRC framework (United Nations, 1989) and are likely to be less effective. The early evidence from family-strengthening and community-based reintegration models is promising but still limited.

Third, the evidence consistently points to the harms of punitive and criminalising policy responses. The cycle of forced removal, temporary containment, and return to the streets is not only ineffective but actively harmful: it disrupts whatever protective relationships children have formed, exposes them to institutional violence, and signals to children that the state regards them as threats rather than rights-holders. Governments that continue to rely on policing and removal as their primary response to visible populations of children in street situations are acting against the available evidence and against international human rights obligations. Although most of this evidence is qualitative and observational, its consistency across settings and its alignment with the UNCRC make it a sufficient basis for policy caution.

Fourth, the methodological profile of the field (qualitatively rich but quantitatively weak, geographically skewed, and evaluatively thin) represents a structural constraint on the field's capacity to generate the evidence that would enable optimal policy responses. Addressing this constraint requires not just more research but different research: longitudinal designs, mixed-methods integration, rigorous intervention evaluations, and deliberate inclusion of under-represented regions, countries, and subgroups.

6. Limitations

This review has several limitations that should be considered when interpreting its findings. First, the restriction to English-language publications may have introduced a language bias, excluding potentially relevant studies published in French, Portuguese, Arabic, or Swahili, languages in which a significant portion of African scholarship is produced; this restriction is also likely to have contributed to the under-representation of Francophone Central Africa and of North Africa. Second, as a single-author review, the screening, quality appraisal, and thematic synthesis processes were not independently validated by a second reviewer, which increases the risk of selection and interpretation bias; dual review is the recommended standard (Page et al., 2021). Third, records are reported as a combined total across the five databases rather than separately for each database, quality appraisal outcomes are summarised by source type rather than for each individual study, and Appendix B describes the primary studies and reviews cited in the synthesis rather than every included source; these features limit the reproducibility of the review. Fourth, publication bias in the underlying literature may mean that the evidence base overstates intervention effectiveness and understates the scale of negative outcomes in some domains. Fifth, the heterogeneity of included studies in context, design, population, and measurement constrained the depth of comparative analysis possible within individual thematic domains and precluded meta-analysis. Sixth, the evidence is concentrated in a small number of countries, so the findings cannot be assumed to apply equally to under-researched regions and countries. Finally, the search covered publications up to December 2024 and was completed in January 2025, so relevant studies published since then are not included. These limitations restrict the certainty with which the review's conclusions should be applied across all African contexts.

7. Conclusions and Future Directions

This systematic review has generated a critically appraised synthesis of research on children in street situations in Africa across eight thematic domains. The key conclusions, which reflect the available literature and its geographic concentration, are as follows. Streetism in the African contexts studied is a structurally produced phenomenon driven by poverty, family instability, educational exclusion, urbanisation, and systemic social protection failures. Children in street situations experience severe, multi-dimensional vulnerability across health, education, safety, and legal protection domains while simultaneously demonstrating significant adaptive agency. Existing interventions are predominantly NGO-delivered, short-term, and poorly evaluated, and punitive approaches, which remain common, are consistently reported as ineffective and harmful. The methodological landscape of the field is characterised by qualitative dominance, geographic concentration, and a near-absence of longitudinal and rigorous evaluation designs.

Four strategic priorities for future research follow from these conclusions. First, longitudinal studies tracking children's pathways into, through, and out of street life, ideally using mixed methods to capture both quantitative trajectories and qualitative experience, are urgently needed to build the evidence base for effective intervention design. Second, the geographic scope of research must be deliberately expanded to include Central and North Africa and smaller cities outside the dominant research hubs. Third, subgroup-focused studies, particularly on girls in street situations, children with disabilities, and very young children, are essential for ensuring that responses are equitable and inclusive. Fourth, rigorous evaluations of promising intervention models, employing validated outcome measures and long-term follow-up, are among the most important contributions the field can make to improving the lives of children in street situations in Africa.

In the domain of policy, the available evidence, although dominated by qualitative and cross-sectional designs, supports a clear direction: punitive and criminalising approaches should be replaced by rights-based, child-centred, and structurally informed frameworks that treat children in street situations as rights-holders, build on their capacities, engage their families and communities, and address the economic and institutional conditions that sustain their vulnerability. Governments, funders, and international agencies should direct resources toward family strengthening, social protection, inclusive education, and community-based reintegration models, which are supported by the most promising, though still limited, evidence, and should build rigorous evaluation into these programmes from the outset so that the evidence base grows alongside them.

Acknowledgements

The author gratefully acknowledges the support and assistance provided by the University of Ibadan, Ibadan, Oyo State, Nigeria.

Funding

This study was not supported by any grants from funding bodies in the public, private, or not-for-profit sectors.

Declaration of Competing Interests

The author declares no conflicts of interest.

CRediT Author Contribution Statement

O. Oyewole: Conceptualisation; Methodology; Investigation; Data curation; Formal analysis; Writing – original draft; Writing – review & editing.

Availability of Data and Materials

The database search strings are provided in Appendix A, and the characteristics of the primary studies and reviews cited in the synthesis are provided in Appendix B. The study selection matrix and coding framework generated during the current study are available from the corresponding author on reasonable request.

Ethics Statement

This study is a secondary analysis of publicly available published research and did not involve human participants or animal subjects. Ethical approval was therefore not required for this research.

Generative Artificial Intelligence Disclosure

The generative artificial intelligence tool Claude Opus 5.5 (Anthropic) was used solely to format the manuscript according to the journal template, including page layout, heading styles, table layout, and reference formatting. It was not used to generate, analyse, or interpret content, or to create or modify figures or other visual elements. The author reviewed the formatted manuscript and takes full responsibility for its content. All intellectual content is original and solely attributable to the author.

References

Abate, D., Eyeberu, A., Adare, D., Negash, B., Alemu, A., Beshir, T., Deressa Wayessa, A., Debella, A., Bahiru, N., Heluf, H., Abdurke Kure, M., Abdu, A., Oljira Dulo, A., Bekele, H., Bayu, K., Bogale, S., Atnafe, G., Assefa, T., Belete, R., … Dessie, Y. (2022). Health status of street children and reasons for being forced to live on the streets in Harar, eastern Ethiopia. Using mixed methods. *PLOS ONE*, *17*(3), e0265601. https://doi.org/10.1371/journal.pone.0265601.

Adekeye, A. P. (2024). Effects of health inequalities on the mental health of street children in northern Nigeria and the way forward. *International Journal of Social Psychiatry*, *70*(2), 406–407. https://doi.org/10.1177/00207640231179820.

Banda, L. O. L., Banda, J. T., Banda, C. V., Mwaene, E., & Msiska, C. H. (2024). Unraveling substance abuse among Malawian street children: A qualitative exploration. *PLOS ONE*, *19*(5), e0304353. https://doi.org/10.1371/journal.pone.0304353.

Coren, E., Hossain, R., Pardo, J. P., Veras, M. M., Chakraborty, K., Harris, H., & Martin, A. J. (2013). Interventions for promoting reintegration and reducing harmful behaviour and lifestyles in street-connected children and young people. *Evidence-Based Child Health: A Cochrane Review Journal*, *8*(4), 1140–1272. https://doi.org/10.1002/ebch.1923.

Critical Appraisal Skills Programme. (2018). *CASP qualitative checklist*. https://casp-uk.net.

Cumber, S. N., & Tsoka-Gwegweni, J. M. (2015). The health profile of street children in Africa: A literature review. *Journal of Public Health in Africa*, *6*(2), 566. https://doi.org/10.4081/jphia.2015.566.

Embleton, L., Atwoli, L., Ayuku, D., & Braitstein, P. (2013). The journey of addiction: Barriers to and facilitators of drug use cessation among street children and youths in western Kenya. *PLOS ONE*, *8*(1), e53435. https://doi.org/10.1371/journal.pone.0053435.

Embleton, L., Ayuku, D., Atwoli, L., & Braitstein, P. (2021). The health and social inequities of street-connected children and youth in sub-Saharan Africa: A systematic review. *International Journal of Environmental Research and Public Health*, *18*(9), 4471. https://doi.org/10.3390/ijerph18094471.

Embleton, L., Lee, H., Gunn, J., Ayuku, D., & Braitstein, P. (2016). Causes of child and youth homelessness in developed and developing countries: A systematic review and meta-analysis. *JAMA Pediatrics*, *170*(5), 435–444. https://doi.org/10.1001/jamapediatrics.2016.0156.

Embleton, L., Mwangi, A., Vreeman, R., Ayuku, D., & Braitstein, P. (2013). The epidemiology of substance use among street children in resource-constrained settings: A systematic review and meta-analysis. *Addiction*, *108*(10), 1722–1733. https://doi.org/10.1111/add.12252.

Embleton, L., Shah, P., Gayapersad, A., Kiptui, R., Ayuku, D., & Braitstein, P. (2020). Characterizing street-connected children and youths' social and health inequities in Kenya: A qualitative study. *International Journal for Equity in Health*, *19*, 147. https://doi.org/10.1186/s12939-020-01255-8.

Goodman, M. L., Seidel, S. E., Springer, A., Elliott, A., Markham, C., Serag, H., Keiser, P., Raimer, B., Raimer-Goodman, L., Gatwiri, C., Munene, K., & Gitari, S. (2023). Enabling structural resilience of street-involved children and youth in Kenya: Reintegration outcomes and the Flourishing Community model. *Frontiers in Psychology*, *14*, 1175593. https://doi.org/10.3389/fpsyg.2023.1175593.

Greeson, J. K. P., Gyourko, J. R., Wasch, S., & Page, C. S. (2024). Reintegration of street-connected children in Kenya: Evaluation of Agape Children's Ministry's Family Strengthening Programme. *Child & Family Social Work*, *29*(4), 1008–1021. https://doi.org/10.1111/cfs.13154.

Hong, Q. N., Fàbregues, S., Bartlett, G., Boardman, F., Cargo, M., Dagenais, P., Gagnon, M.-P., Griffiths, F., Nicolau, B., O'Cathain, A., Rousseau, M.-C., Vedel, I., & Pluye, P. (2018). The Mixed Methods Appraisal Tool (MMAT)

version 2018 for information professionals and researchers. *Education for Information*, *34*(4), 285–291. https://doi.org/10.3233/EFI-180221.

Kacheyo, S. M., & Nyirenda, L. (2024). Factors associated with access and utilization of sexual abuse emergency healthcare services among street children in Zomba, Malawi: A qualitative study. *BMC Health Services Research*, *24*, 1410. https://doi.org/10.1186/s12913-024-11902-3.

Munn, Z., Moola, S., Lisy, K., Riitano, D., & Tufanaru, C. (2015). Methodological guidance for systematic reviews of observational epidemiological studies reporting prevalence and cumulative incidence data. *International Journal of Evidence-Based Healthcare*, *13*(3), 147–153. https://doi.org/10.1097/XEB.0000000000000054.

Oppong Asante, K., & Nefale, M. T. (2021). Substance use among street-connected children and adolescents in Ghana and South Africa: A cross-country comparison study. *Behavioral Sciences*, *11*(3), 28. https://doi.org/10.3390/bs11030028.

Oyewole, O. (2013). *Social, cultural and economic factors promoting streetism*. LAP Lambert Academic Publishing.

Page, M. J., McKenzie, J. E., Bossuyt, P. M., Boutron, I., Hoffmann, T. C., Mulrow, C. D., Shamseer, L., Tetzlaff, J. M., Akl, E. A., Brennan, S. E., Chou, R., Glanville, J., Grimshaw, J. M., Hróbjartsson, A., Lalu, M. M., Li, T., Loder, E. W., Mayo-Wilson, E., McDonald, S., … Moher, D. (2021). The PRISMA 2020 statement: An updated guideline for reporting systematic reviews. *BMJ*, *372*, n71. https://doi.org/10.1136/bmj.n71.

Shand, W., van Blerk, L., & Hunter, J. (2015). Economic practices of African street youth: The Democratic Republic of Congo, Ghana, and Zimbabwe. In T. Abebe, J. Waters, & T. Skelton (Eds.), *Labouring and learning* (Vol. 10). Springer. https://doi.org/10.1007/978-981-4585-97-2_5-1.

Shea, B. J., Reeves, B. C., Wells, G., Thuku, M., Hamel, C., Moran, J., Moher, D., Tugwell, P., Welch, V., Kristjansson, E., & Henry, D. A. (2017). AMSTAR 2: A critical appraisal tool for systematic reviews that include randomised or non-randomised studies of healthcare interventions, or both. *BMJ*, *358*, j4008. https://doi.org/10.1136/bmj.j4008.

Shegaw, M., Fekadu, W., Beka, M., Menberu, M., Yohannes, K., Yimer, S., Seid, M., Necho, M., Moges, S., & Anbesaw, T. (2022). Problematic substance use and its associated factors among street youth in Bahir Dar city, Ethiopia. *Frontiers in Psychiatry*, *13*, 930059. https://doi.org/10.3389/fpsyt.2022.930059.

Shephard, D. D. (2014). Nonformal education for improving educational outcomes for street children and street youth in developing countries: A systematic review. *International Journal of Social Welfare*, *23*(4), 349–361. https://doi.org/10.1111/ijsw.12080.

Sorber, R., Winston, S., Koech, J., Ayuku, D., Hu, L., Hogan, J., & Braitstein, P. (2014). Social and economic characteristics of street youth by gender and level of street involvement in Eldoret, Kenya. *PLOS ONE*, *9*(5), e97587. https://doi.org/10.1371/journal.pone.0097587.

Thomas, J., & Harden, A. (2008). Methods for the thematic synthesis of qualitative research in systematic reviews. *BMC Medical Research Methodology*, *8*, 45. https://doi.org/10.1186/1471-2288-8-45.

Thomas de Benítez, S. (2011). *State of the world's street children: Research* (Street Children Series 2). Consortium for Street Children. https://www.eenet.org.uk/resources/docs_nondb/State_of_the_Worlds_Street_Children_Research_final_PDF_online.pdf.

United Nations. (1989). *Convention on the Rights of the Child* (Treaty Series, Vol. 1577, p. 3). https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child.

United Nations Committee on the Rights of the Child. (2017). *General comment No. 21 (2017) on children in street situations* (CRC/C/GC/21). Office of the United Nations High Commissioner for Human Rights (OHCHR). https://digitallibrary.un.org/record/1304490.

Wachira, J., Kamanda, A., Embleton, L., Naanyu, V., Ayuku, D., & Braitstein, P. (2016). "Pregnancy has its advantages": The voices of street connected children and youth in Eldoret, Kenya. *PLOS ONE*, *11*(3), e0150814. https://doi.org/10.1371/journal.pone.0150814.

Zewude, B., Siraw, G., Engdawork, K., & Tadele, G. (2023). Health seeking behavior of street connected children in Addis Ababa, Ethiopia. *Frontiers in Sociology*, *8*, 1188746. https://doi.org/10.3389/fsoc.2023.1188746.

Appendix A. Database Search Strings

The three concept domains described in Section 3.2 (population AND geography AND theme) are shown below in the syntax of each database, with the limits applied, to allow the search to be replicated.

A1. Scopus

TITLE-ABS-KEY ("street children" OR "street-connected children" OR "street youth" OR "working children" OR "children in street situations") AND TITLE-ABS-KEY ("Africa" OR "sub-Saharan Africa" OR "East Africa" OR "West Africa" OR "Southern Africa" OR "Central Africa" OR "North Africa") AND TITLE-ABS-KEY ("poverty" OR "health" OR "education" OR "substance use" OR "mental health" OR "intervention" OR "reintegration" OR "social protection" OR "policy" OR "resilience" OR "streetism") AND PUBYEAR > 1999 AND PUBYEAR < 2025 AND (LIMIT-TO (LANGUAGE, "English"))

A2. Web of Science Core Collection

TS=("street children" OR "street-connected children" OR "street youth" OR "working children" OR "children in street situations") AND TS=("Africa" OR "sub-Saharan Africa" OR "East Africa" OR "West Africa" OR "Southern Africa" OR

"Central Africa" OR "North Africa") AND TS=("poverty" OR "health" OR "education" OR "substance use" OR "mental health" OR "intervention" OR "reintegration" OR "social protection" OR "policy" OR "resilience" OR "streetism"). Refined by: Publication Years 2000 to 2024; Languages: English.

A3. PubMed
("street children"[tiab] OR "street-connected children"[tiab] OR "street youth"[tiab] OR "working children"[tiab] OR "children in street situations"[tiab]) AND ("Africa"[tiab] OR "sub-Saharan Africa"[tiab] OR "East Africa"[tiab] OR "West Africa"[tiab] OR "Southern Africa"[tiab] OR "Central Africa"[tiab] OR "North Africa"[tiab] OR "Africa"[MeSH Terms]) AND ("poverty"[tiab] OR "health"[tiab] OR "education"[tiab] OR "substance use"[tiab] OR "mental health"[tiab] OR "intervention"[tiab] OR "reintegration"[tiab] OR "social protection"[tiab] OR "policy"[tiab] OR "resilience"[tiab] OR "streetism"[tiab]) AND ("2000/01/01"[dp] : "2024/12/31"[dp]) AND English[lang]

A4. ERIC
("street children" OR "street-connected children" OR "street youth" OR "working children" OR "children in street situations") AND ("Africa" OR "sub-Saharan Africa" OR "East Africa" OR "West Africa" OR "Southern Africa" OR "Central Africa" OR "North Africa") AND ("poverty" OR "health" OR "education" OR "substance use" OR "mental health" OR "intervention" OR "reintegration" OR "social protection" OR "policy" OR "resilience" OR "streetism"). Limits: publication date 2000 to 2024; English.

A5. Google Scholar
("street children" OR "street-connected children" OR "street youth" OR "working children" OR "children in street situations") AND ("Africa" OR "sub-Saharan Africa" OR "East Africa" OR "West Africa" OR "Southern Africa" OR "Central Africa" OR "North Africa") AND ("poverty" OR "health" OR "education" OR "substance use" OR "mental health" OR "intervention" OR "reintegration" OR "social protection" OR "policy" OR "resilience" OR "streetism"). Custom date range 2000 to 2024. Because Google Scholar limits query length, the string may need to be entered in shorter combinations of the same terms.

A6. Grey literature
The institutional repositories of UNICEF, the World Health Organization, the International Labour Organization, Save the Children, and the Consortium for Street Children were searched using the population terms combined with "Africa", limited to 2000 to 2024. The reference lists of all included studies were hand-searched.

Appendix B. Characteristics of the Primary Studies and Reviews Cited in the Synthesis

Table B1

Characteristics of the primary studies and reviews cited in the synthesis

No.	Source	Country / Setting	Publication Type	Design	Sample	Thematic Focus
1	Abate et al. (2022)	Ethiopia (Harar)	Peer-reviewed article	Sequential mixed methods: cross-sectional survey and phenomenological interviews	220 street children	Health status; reasons for street life
2	Adekeye (2024)	Nigeria (northern)	Peer-reviewed commentary	Commentary	Not applicable	Mental health; health inequalities
3	Banda et al. (2024)	Malawi (Lilongwe)	Peer-reviewed article	Qualitative: phenomenological, semi-structured interviews	Street children; convenience, purposive, and snowball sampling	Substance use
4	Coren et al. (2013)	Global	Systematic review	Cochrane and Campbell systematic review	Intervention evaluations	Interventions; reintegration
5	Cumber & Tsoka-Gwegweni (2015)	16 African countries	Literature review	Literature review of 17 databases	Studies from 16 countries	Health profile
6	Embleton, Atwoli, et al. (2013)	Kenya (Eldoret)	Peer-reviewed article	Qualitative	Street-involved children and youth aged 10 to 19	Substance use cessation
7	Embleton, Mwangi, et al. (2013)	22 resource-constrained countries	Systematic review	Systematic review and meta-analysis	50 studies	Substance use prevalence
8	Embleton et al. (2016)	Developed and developing countries	Systematic review	Systematic review and meta-analysis	Published studies	Causes of homelessness
9	Embleton et al. (2020)	Kenya	Peer-reviewed article	Qualitative: focus groups, interviews, archival and policy review	100 community participants	Structural determinants; health inequities
10	Embleton et al. (2021)	Sub-Saharan Africa	Systematic review	Systematic review	Published studies	Health and social inequities
11	Goodman et al. (2023)	Kenya (Meru County)	Peer-reviewed article	Programme evaluation using routinely collected data, 2016 to 2022	Children and youth enrolled in the programme	Reintegration
12	Greeson et al. (2024)	Kenya	Peer-reviewed article	Exploratory pre-post programme evaluation	30 families (30 children, 38 caregivers)	Family strengthening; reintegration
13	Kacheyo & Nyirenda (2024)	Malawi (Zomba)	Peer-reviewed article	Qualitative: phenomenological, in-depth interviews, 2022 to 2023	Street children who had experienced sexual abuse	Sexual abuse; access to health services
14	Oppong Asante & Nefale (2021)	Ghana; South Africa	Peer-reviewed article	Two cross-sectional surveys, purposive samples	376 children and adolescents	Substance use; victimisation
15	Oyewole (2013)	Nigeria (Ibadan)	Research monograph	Empirical study	Urban street children	Causes of streetism
16	Shand et al. (2015)	Ghana (Accra); DR Congo (Bukavu); Zimbabwe (Harare)	Book chapter	Participatory longitudinal qualitative research	Street children and youth	Livelihoods; survival strategies
17	Shegaw et al. (2022)	Ethiopia (Bahir Dar)	Peer-reviewed article	Community-based cross-sectional survey, 2020	Street youth	Substance use
18	Shephard (2014)	Developing countries	Systematic review	Systematic review of 35 databases	9,271 titles screened; no eligible effectiveness study	Non-formal education
19	Sorber et al. (2014)	Kenya (Eldoret)	Peer-reviewed article	Cross-sectional survey, convenience sample	200 youth aged 12 to 21 (41% female)	Social and economic characteristics; gender
20	Wachira et al. (2016)	Kenya (Eldoret)	Peer-reviewed article	Qualitative	Street-connected children and youth	Pregnancy; gender
21	Zewude et al. (2023)	Ethiopia (Addis Ababa)	Peer-reviewed article	Mixed methods: survey and interviews	Street children	Health-seeking behaviour; substance use