



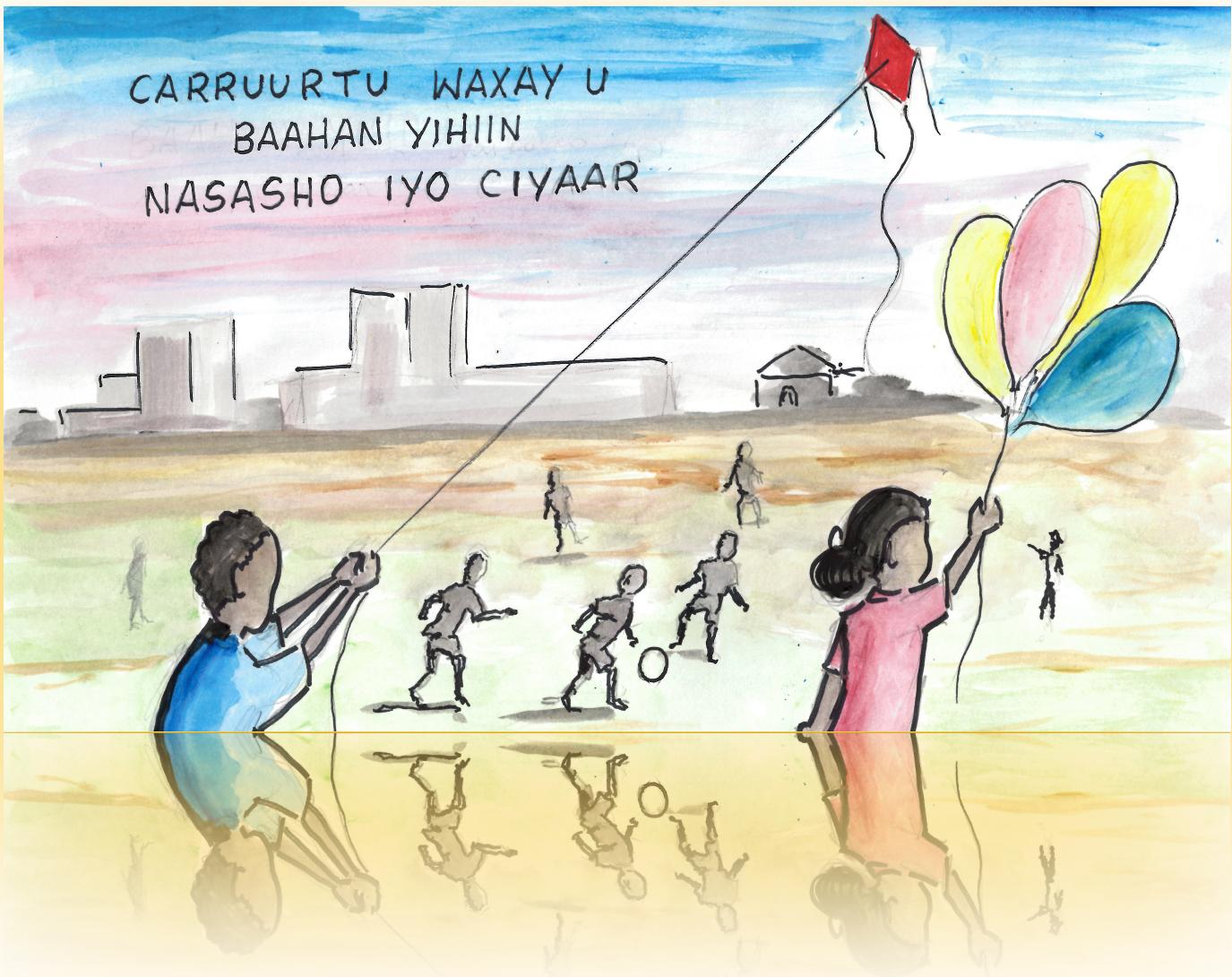
Federal Government of Somalia

*Ministry of Women and
Human Rights Development*

A RAPID ASSESSMENT OF

DRUG AND SUBSTANCE ABUSE AMONG CHILDREN IN STREET SITUATIONS IN SOMALIA

OCTOBER 2020



‘Every CHILD has
the RIGHT to
rest and leisure’

Convention on the Rights of the Child, ARTICLE 31

ACKNOWLEDGEMENTS

The Ministry would like to thank Jane Waithira Mbugua for designing and conducting this Rapid Assessment, Wilo Abdulle Osman, Senior Child Protection Adviser of the Federal Ministry of Women and Human Rights Development for providing over all guidance, Save the Children International (Somalia) for the financial support as well as all of the respondents and collaborating organizations that contributed to this work. The Rapid Assessment is highly welcome and Ms. Mbugua's findings will contribute to our deeper understanding of the phenomenon of children in street situations and how all stakeholders can address the challenges they face. The Ministry notes that views and findings in the Rapid Assessment are those of Ms. Mbugua and her team and do not necessarily reflect the official policy or position of the Ministry.

FOREWORD

Our family friend, who I will refer to as M, began living on the streets of Mogadishu when he was only ten years old. In Somali, the name for him would have been "*Ciyaal Darbi Jiiif*" which literally means "children sheltering against the wall". He would tell me that he left the rural area he was born in because he was "tired of chasing little goats", the only occupation available to him amid scant opportunities for education or work. In Mogadishu he survived by shining shoes on the street. "That was my elementary school", he would tell me. M then moved on to washing cars. For a time, he slept on the grounds of the sports club "Circolo Centro Sportivo". Ultimately, he learned to play tennis there. Through the sport, he met people who recognized his talent and lent him a helping hand. Thanks to this support, combined with his own hard work, he became a volunteer in the public service and moved on to a successful professional career, transforming his own life and the lives of his many children and grandchildren.

The story of M reminds us that all children, including children living on the street, have enormous potential. They can and will shape the future of our country. However, they need someone to see their needs and lend a hand. Despite this, too often, children living on the streets have been invisible. Very little data is available on the challenges they face. As a result, they often fall through the net of efforts to protect and support Somali children.

Given this, I am very pleased to present this report as a first step to give more voice and visibility to Somali children living on the streets. While the rapid assessment sheds light on a range of challenges faced by these children, it offers a more detailed analysis of the specific issue of drug and substance abuse among children in street situations in Somalia. The assessment is based on a survey of 107 children living on the streets in Mogadishu, Galkaio, Baidoa and Kismaio, as well as key informant interviews. It provides an initial basis of data to help all actors and partners provide more effective support to Somali children.

The results provide a stark reminder of the extreme challenges faced by children in street contexts. Almost half of the children we spoke to, lived on the streets alone, the vast majority of them for many years. Most of them did not attend school, with over 80 percent unable to read and write. In addition to multiple forms of insecurity, poverty and health risks, they face stigma and discrimination by the community, with attitudes towards children living on the streets still largely negative and non-supportive of their well-being. Often unaware of the serious health consequences, many turn to drugs as an escape from this reality.

These children have a right to a better life. Despite the many challenges that they face, they continue to hope for opportunities. For example, over 80 percent of the children in street situations surveyed expressed a desire to go back to school. However, the research found that interventions, including rehabilitation services, to support the children are limited or are provided in an uncoordinated or ad hoc manner, depriving the children of possibilities for a brighter future.

Circumstances on the streets are harsher today than they were when our family friend lived as one of the "Ciyaal Darbi Jiif" in the late 1960s and early 1970s, and children's opportunities to find support and mentorship are smaller. However, his story is proof of what we can achieve for our children and all of our society when these conditions improve.

Our work towards this goal has to start now. How we treat our children, all of them, defines who we are as a society today - and the limits of what we can become.

DEQA YASIN,
Minister of Women and Human Rights Development,
Federal Republic of Somalia



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ACRYNOMS

| | |
|--------|--|
| AIDS | Acquired Immune Deficiency Syndrome |
| CBO | Community Based Organization |
| CSOs | Civil Society Organizations |
| FBO | Faith Based Organization |
| FGD | Focus Group Discussion |
| HIV | Human Immunodeficiency Virus |
| IDP | Internally Displaced Person |
| FGS | Federal Government of Somalia |
| INGOs | International Non-governmental Organizations |
| KII | Key Informant Interview |
| MoWHRD | Ministry of Women and Human Rights Development |
| MoE | Ministry of Education |
| NDP | National Development Plan |
| NGO | Non-Governmental Organization |
| TB | Tuberculosis |
| UN | United Nations |
| UNHCR | United Nations High Commission for Refugees |
| UNICEF | United Nations Children's Education Fund |

EXECUTIVE SUMMARY

This assessment aims at understanding the levels of drug abuse among children connected to the streets¹ of Mogadishu, Galkaio, Baidoa and Kismaio, four urban settings in Somalia. In doing so, it also sought to identify the measures that different stakeholders have undertaken to address this challenge. The specific objectives were as follows:

1. Assess the extent of drug and substance abuse among children in street situations;
2. Identify current governmental and non-governmental programs and activities targeting the children; and
3. Set forth recommendations for appropriate interventions.

The survey targeted a total of 107 children in street situations from four cities: Mogadishu (45 children or 42.1%), Kismaio (17 children or 15.9%), Galkaio (20 children or 18.7%) and Baidoa (25 children or 23.4%). Most were boys (78.5%), with the remaining 21.5%, girls. Half of the children in street situations (50.8%) surveyed were born in the cities that they currently reside. Half (50%) lived with their mothers only, slightly less than half (46.2%) lived alone, while the remaining respondents (3.8%) lived with their grandfathers only. Slightly over half of the children surveyed (52.9%) had both parents alive, while slightly less than half (47.1%) were orphans. Around 80.2% of the children could not read with only 18.7% reporting that they attend school. Most surveyed (83.2%) expressed a desire to go back to school.

Drug and substance abuse among the children in street situations are a major challenge in the four cities surveyed. Community attitudes towards children in street situations are still largely negative and non-supportive of their well-being. Similarly, interventions, including rehabilitation services, to support the children are limited or are provided in an uncoordinated or ad hoc manner, depriving the children of possibilities for a brighter future.

The children gave different reasons for ending up on the street which makes designing policy and subsequent programming that addresses prevention challenging. However, the children gave ideas on what they needed now that they are on the streets. This is an important starting point, and also demonstrates that it is vital to engage with the children to understand their perspectives and what they see as appropriate and effective responses. Given this, the report recommends a policy framework to allow for appropriate and contextual programmatic responses as well as an intense and sustained engagement with the children, authorities, communities and parents/guardians.

¹ Since the 1990s, the term “street child” is generally considered to carry negative connotations and does not reflect the complexity of this phenomenon. The UN Human Rights Council in its resolution 16/12 uses the terms “children working and/or living on the street”, and the UN Committee on the Rights of the Child has adopted the term “children in street situations.” This phrase recognizes that the children “engage in numerous activities on the street and that if there is a “problem” it is not the child, but rather the situations in which s/he finds her/ himself.:<https://www.ohchr.org/Documents/Issues/Children/Study/OHCHRBrochureStreetChildren.pdf?embed=1&embed=1>

1 INTRODUCTION

1.1 BACKGROUND TO THE RAPID ASSESSMENT SURVEY

Children under 18 make up over half of the population of Somalia. The situation of children in Somalia is improving, with more children surviving, being vaccinated, going to school and their births being registered, while an increasing number of families have sustainable water supply systems and access to health care.²

The Federal Government of Somalia (FGS) has strived to ensure realization of child rights in Somalia through signing of international treaties, and development of national legislation and policies meant to enhance realization of these rights. For example, the FGS ratified the United Nations Convention on the Rights of the Child in 2015 and the Convention on the Rights of Persons with Disabilities, in 2019, which includes specific obligations on children, and is working on their implementation. The Ministry of Women, Human Rights Development (MoWHRD) prioritized the completion of the Government's Initial State Party Report, submitted to the Committee on the Rights of the Child in 2019. This is the first report in 35 years that the Government of Somalia has submitted to the UN treaty bodies. As of the date of this assessment, the Committee is considering the report and its recommendations will inform the Ministry's future direction, including a National Action Plan on Children.

Similarly, the FGS launched the process of drafting the Child Rights Bill in September 2017 and this is currently before the cabinet for approval. The National Development Plan 9 (NDP9) and other child-centered policies have been or are being developed, including Anti-FGM Bill, Sexual Offences Bill, Juvenile Justice Bill, the National Action Plan (NAP) on Ending Sexual Violence and the Alternative Care Policy through the Islamic kafalah system.³ Somalia is in the process of ratifying the African Charter on the Rights and Welfare on the Child among other documents to ensure that child protection in Somalia is fully realized.

However, little has been done with regard to the ever-worsening situation of children living and working on the streets of the cities and towns of Somalia.⁴ While there is very little information on the level of drug abuse among these children, the media is awash with stories and pictures of dazed children sniffing glue on these same streets. In its 2018 publication, Child Notice Somalia⁵, UNICEF acknowledges that it could not find any reliable recent data on children in street situations in Somalia, while it reported that there is a widely-held view that the number of separated children and unaccompanied minors is increasing with the increasing concentrations within internally displaced person communities and settlements.⁶

This prompted the Ministry to commission this Assessment to enable a minimum understanding that could support responses to this growing phenomenon, and initiate interest in the subject.

² Situation Analysis of Children in Somalia, UNICEF, 2016, at 3. <https://www.unicef.org/somalia/reports/situation-analysis-children-somalia-2016-0>

³ Provision of alternative care for children deprived of a family environment.

⁴ See UN Committee on the Rights of the Child, General Comment No. 21 (2017) on children in street situations 21 June 2017, CRC/C/GC/21 https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC/C/GC/21&Lang=en

⁵ UNICEF Child Notice Somalia (2018), at 55.

<https://www.unicef.nl/files/UNICEF%20Rapport%20Child%20Notice%20Somalia%202018%20-%20final.pdf>

⁶ UNICEF, *supra* note 2, 77.

1.2 OBJECTIVES OF THE RAPID ASSESSMENT

The overall aim of the Rapid Assessment was to explore drug and substance abuse among children in street situations in Mogadishu, Galkaio, Baidoa and Kismaio in Somalia. It also sought to identify the measures that different stakeholders have undertaken to address this challenge.

The specific objectives were as follows:

- Assess the extent of drug and substance abuse among children in street situations by mapping out areas of their concentrations, the types of drugs and substances abused, the magnitude and patterns of drug abuse;
- Identify current governmental and non-governmental programs and activities targeting the children; and
- Set forth recommendations on appropriate interventions.

1.2.1 SCOPE OF THE RAPID ASSESSMENT SURVEY

- a. Review and analysis of literature on child protection and drug abuse among children in street situations in Mogadishu, Baidoa, Galkaio, and Kismaio;
- b. Review and analysis of the capacity of child protection service providers with regard to services targeting children in street situations; and
- c. Recommend the way forward for interventions by MoWHRD and its partners.

1.3 METHODOLOGY AND APPROACHES FOR THE RAPID ASSESSMENT

The Assessment used both primary and secondary data gathering methods as follows:

1.3.1 DESK REVIEW

The consultant reviewed all relevant secondary material, which included, among others, legislation, policies, and Government documentation, such as the National Development Plan, the Convention on the Rights of the Child Initial State Party report, assessments, child protection reports from Somalia produced by various UN bodies, human rights organizations and records from NGOs and CBOs currently undertaking child protection programs in Somalia.

1.3.2 KEY INFORMANT INTERVIEWS

The consultant carried out interviews with persons who have vital perspectives and insights on issues concerning child protection in Somalia based on an initial mapping of key stakeholders. Some key informants that were interviewed included relevant government officials in the Ministry of Women and Human Rights Development, Local Administrations, the Benadir Regional Women's Association, the Ministry of Education; NGOs and CBOs already working in the Child Protection cluster in the four towns and religious groups catering for children in need.

1.3.3 FIELD SURVEY

A survey using a structured questionnaire was administered to children in street situations (boys and girls) in the four cities. The survey covered 45 children in street situations in Mogadishu, 25 children in Baidoa, 20 children in Galkaio and 17 children in Kismaio.

1.3.4 FOCUS GROUP DISCUSSIONS

Focus Group Discussions (FGDs) with children in street situations, traders and other street people from the four cities were carried out for the purpose of examining their level of knowledge, awareness and practice regarding drug and substance abuse among the children in street situations in the cities. The FGDs were also used to validate the information obtained from the Key Informants and survey respondents. The groups responded to a checklist of issues, focusing on drug abuse among the children in street situations.

1.4 LIMITATIONS OF THE ASSESSMENT

The findings of the Assessment cannot be generalized as the sample size for the survey component was too small and was not selected through probability-based randomized process. Similarly, since there has been no population census in Somalia for the past 40 years, the numbers are estimates. The Assessment provides information on drug and substance abuse among children in street situations expressed by the children themselves, selected persons deemed to possess critical information on children in street situations from the government, CSOs and communities. By its nature, the Assessment did not aim to provide an in-depth study, but flags key challenges the children face, the drugs that they use and the interventions that have been undertaken so far.

2 RAPID ASSESSMENT FINDINGS

2.1 DEMOGRAPHICS

2.1.1 SURVEY RESPONDENTS BY CITY

The survey targeted a total of 107 children in street situations from four cities in Somalia, namely Mogadishu (45 children or 42.1%), Kismaio (17 children or 15.9%), Galkaio (20 children or 18.7%) and Baidoa (25 children or 23.4%), as shown in Chart 1.

Chart 1 DISTRIBUTION OF RESPONDENTS BY CITY



2.1.2 GENDER AND AGE OF THE RESPONDENTS

Most of the children in street situations in the survey were boys (84 or 78.5%), while 23 or 21.5% were girls as shown in Chart 2.

Most of the children in street situations who participated in the survey were aged between 7 and 14 years (62.6%), followed by those aged between 15 and 18 years (26.2%). Those aged below 6 years were 11.2% of the respondents in the survey, as shown in Chart 2.

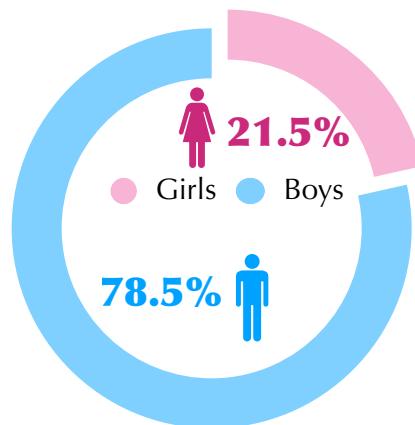
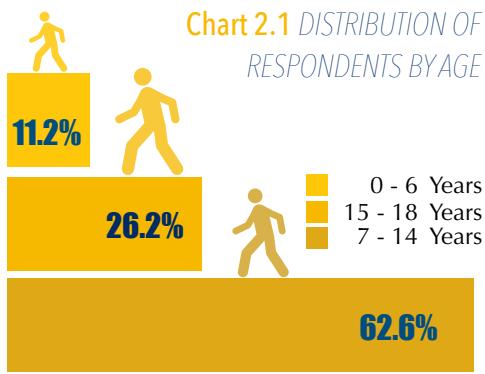


Chart 2 DISTRIBUTION OF RESPONDENTS BY GENDER

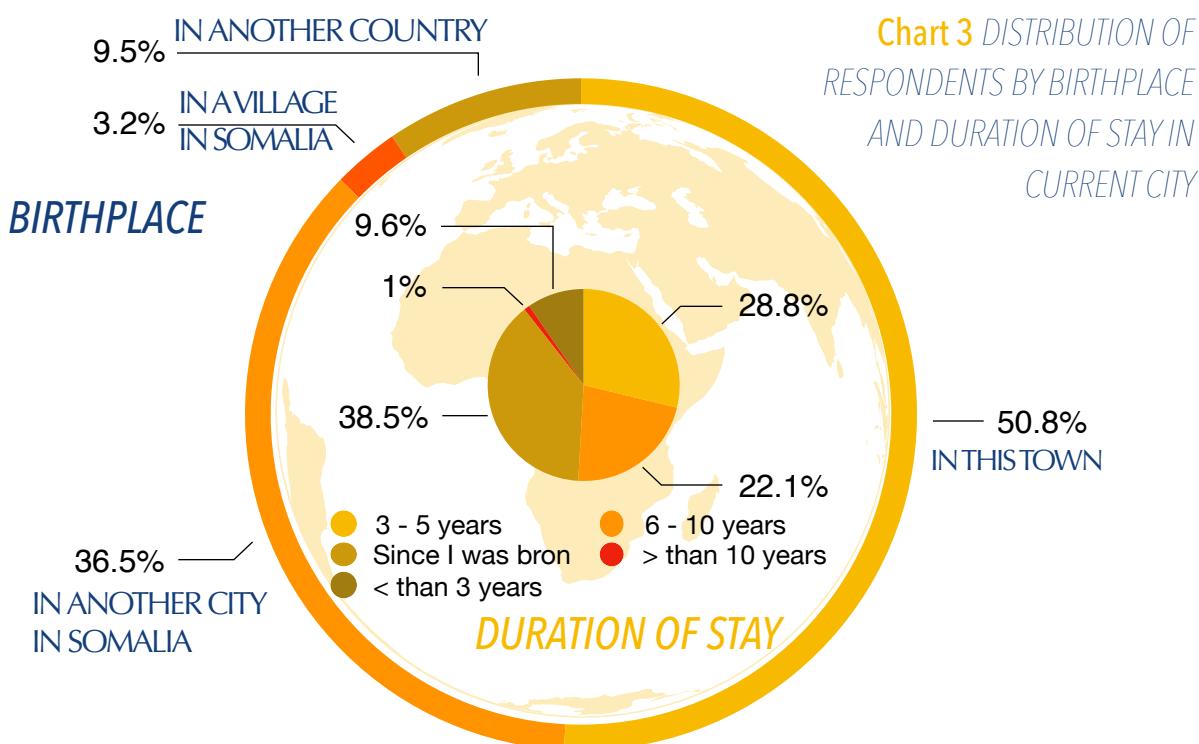


Discussions with key informants in the four cities revealed that the children are often aged between 6 and 18 years. In Mogadishu, the children are mainly boys as young as three years of age, while the oldest children are up to 18 years of age. In Galkaio, the youngest children in street situations are aged between 6 and 7 years, while the oldest are aged from 20 to 25 years. The youngest in Baidoa are aged 6 years, while the oldest ones are aged around 18 years. In Kismaio, the children are aged between 6 and 13 years.

Some girls have been spotted on the street of Mogadishu, but still number less than boys. The larger number of boys than girls in Galkaio was attributed to the fact that boys are considered to be outdoor creatures, while girls tend to stick at home. No girls were spotted on the streets of Baidoa. Key informants in Kismaio also stated that girls are rare on the streets because of higher security risks for them and that they tend to seek shelter off the streets as soon as they can get it.

2.1.3 CHILDREN IN STREET SITUATIONS RESIDENCE

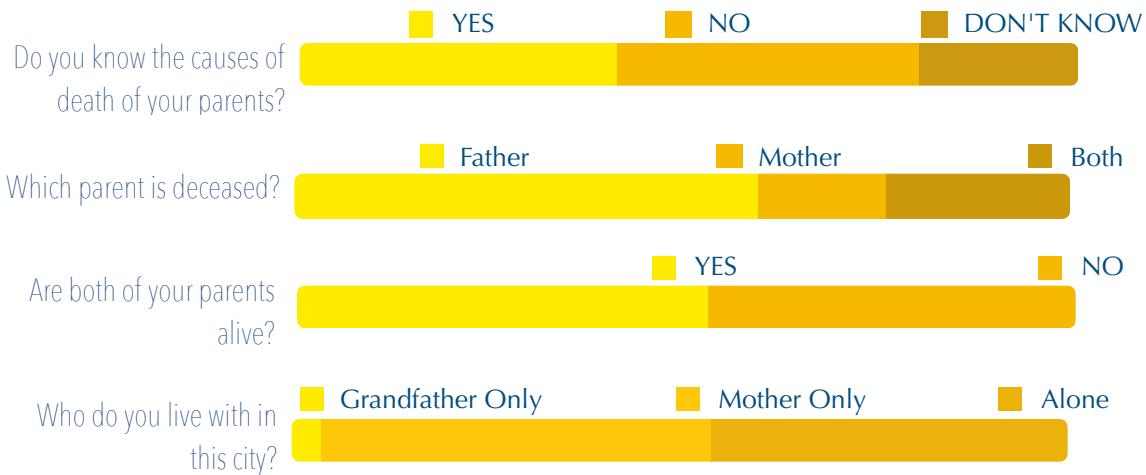
Half of the children in street situations (50.8%) surveyed were born in their current towns of residence, slightly over a third (36.5%) were born in other towns but migrated to their current towns of residence, while only a small proportion (9.5%) were born in other countries but migrated to Somalia, as shown in Chart 3. When further asked to state the length of time they have lived as children in street situations in their current towns of residence, 38.5% said they had lived there since birth, 28.8% had lived in the towns for between three and five years, while 22.1% had lived in the towns for between six and ten years. Less than a tenth of the children (9.6%) have lived in the towns for less than three years, while only one percent have lived in the towns for more than ten years, as shown in Chart 3.



2.1.4 STATUS OF CHILDREN IN STREET SITUATIONS GUARDIANSHIP

Half (50%) of the children surveyed lived with their mothers only, 46.2% lived alone, while the remaining 3.8% lived with their grandfathers only, as shown in Chart 4.

Chart 4 RESPONDENTS' PARENTAL STATUS



Slightly over half of the children in street situations surveyed (52.9%) had both parents alive, while another half (47.1%) said they were orphans. Among the orphans, 59.5% said they had lost their fathers, while 16.7% had lost their mothers, and 23.8% reported being total orphans, as shown in Chart 4. When asked further if they knew the causes of the deaths of their parents, 40.9% of the children said they did, while 59.1% said they did not.

2.1.5 LEVEL OF EDUCATION OF CHILDREN IN STREET SITUATIONS

Around 19.8% of the children in street situations said they were able to read and write, while 80.2% could not, as shown in Chart 5. Only 18.7% of the children in street situations who participated in the survey reported that they attended school. Among those who attended school, 5.6% were in grades one to four, while 2.8% were in grades five to seven, as shown in Chart 5.

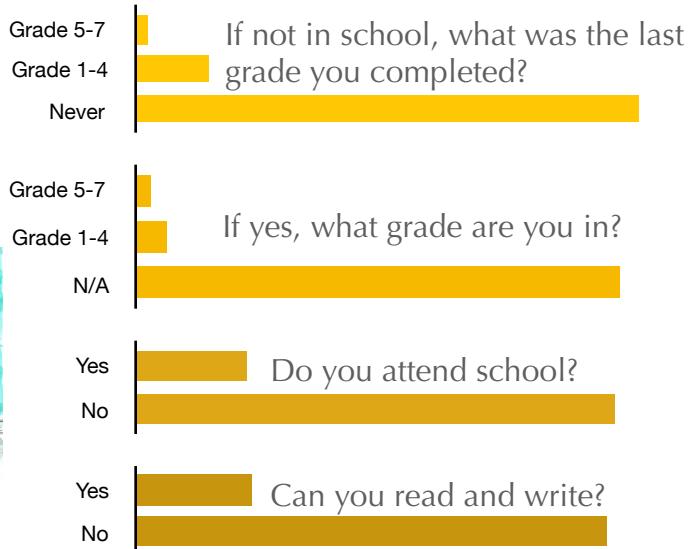
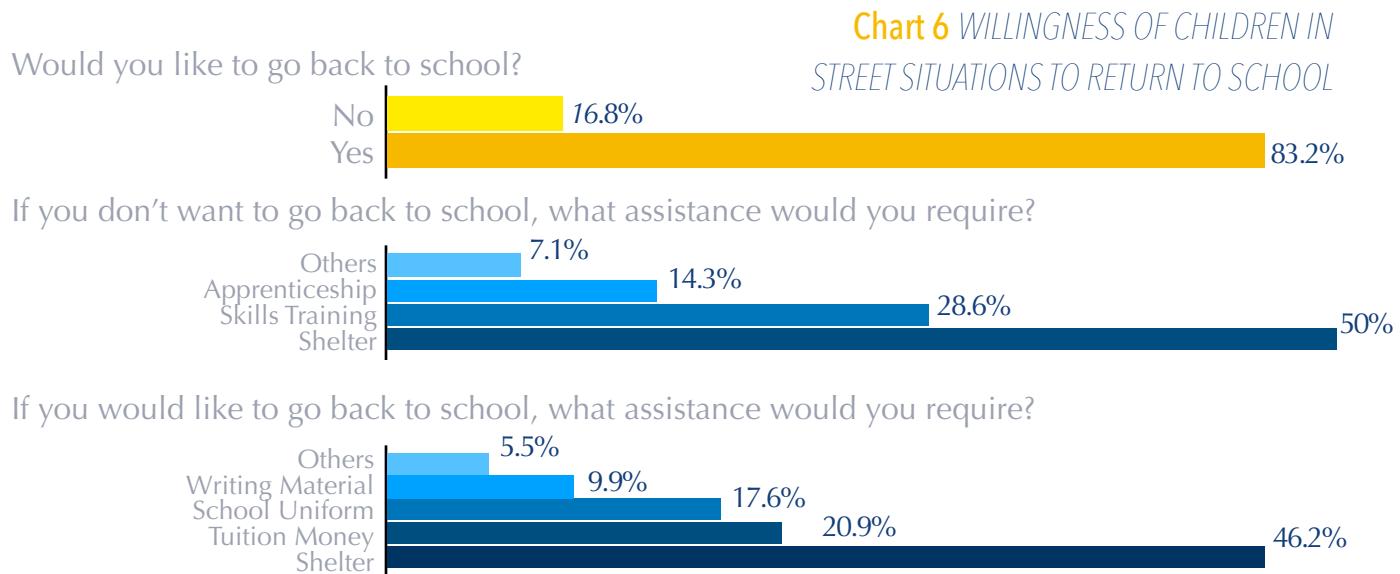


Chart 5 EDUCATION STATUS OF CHILDREN IN STREET SITUATIONS

Most of the children in street situations surveyed (83.2%) expressed a desire to go back to school; whereas 16.8% said they would not like to go back (see Chart 6). Those who wanted to go back to school said they would like assistance with tuition money (46.2%), school uniform (17.6%), writing material (9.9%) among others, as shown in Chart 6.



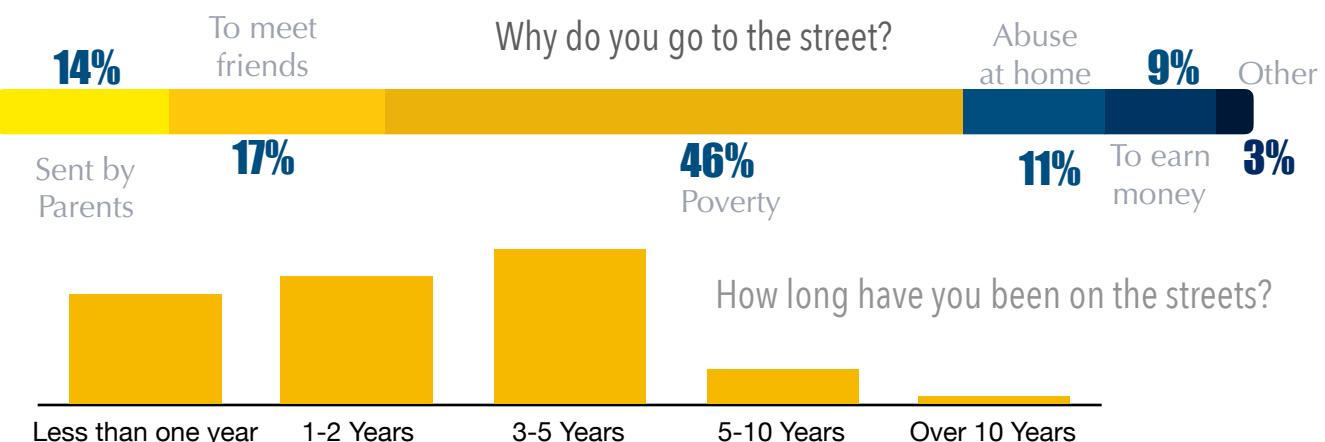
Most of the children in street situations who said they do not wish to go back to school asked to be assisted with skills training (50%), apprenticeship (28.6%) and shelter (14.3%) among other requests as shown in Chart 6.

2.2 WHY CHILDREN ARE ON THE STREET

2.2.1 WHY CHILDREN GO ON THE STREET

There is generalized literature on children connected to the street and the drivers of this phenomenon. However, there is very little information on Somalia, and it is hoped that this assessment will generate interest in this topic to provide much needed data that will in turn inform programmatic responses to support the children. Children in street situations in Somalia are not a homogenous group and move to the streets for different reasons. Forty-six percent of the children surveyed said they were driven to the street by poverty, 17% went to the street to meet their friends, 14% were sent to the streets by the parents to beg or look for food, 11% were driven to the street by abuse at home, while 9% were on the street to earn money, as shown in Chart 7.

Chart 7 WHY CHILDREN GO TO THE STREET



Mogadishu-based key informants gave variety of reasons for the children leaving their homes to live on the streets. They stated that some of the major factors were related to household poverty, including lack of food, attributed to the persistent droughts, and other provisions in the households leading the children to run away to fend for themselves on the street. The other reason given was parental neglect and lack of care for the children. Others attributed the presence of the children in street situations to the breakdown of family units due death, protracted conflict, divorce or separation of the children's parents.

The key informants in Galkaio identified poverty, lack of shelter, negligent parents, lack of centers for children who do not have families and lack of quality education as some of the causes for children living on the streets. Others identified family breakdown due to loss of parents to death (orphans), divorce and separation and parental neglect. Some children end up on the streets after being uprooted by conflict forcing them to flee their places of residence without their parents.



*Children Sheltering Against the Wall,
MOGADISHU 2020*

Key informants in Baidoa identified the effects of the prolonged conflict that led to an increase in IDPs, death of some of parents in bomb explosions and destruction of infrastructure due to war. Displacement, loss of crops and livestock were also identified as drivers of the children in street situations phenomena. Others identified family breakdown due to household poverty leading to neglect by parents who abandon their children when they are still very young, violence at home, parental divorce and separation. They also identified the erosion of the kinship system with fewer relatives willing to take in children who have lost their parents. Similarly, they identified lack of community initiatives to support children whose parents cannot afford to raise their children. Some key informants identified the need for a government policy to deal with neglected children and establish supportive frameworks, such as rehabilitation and childcare centers.

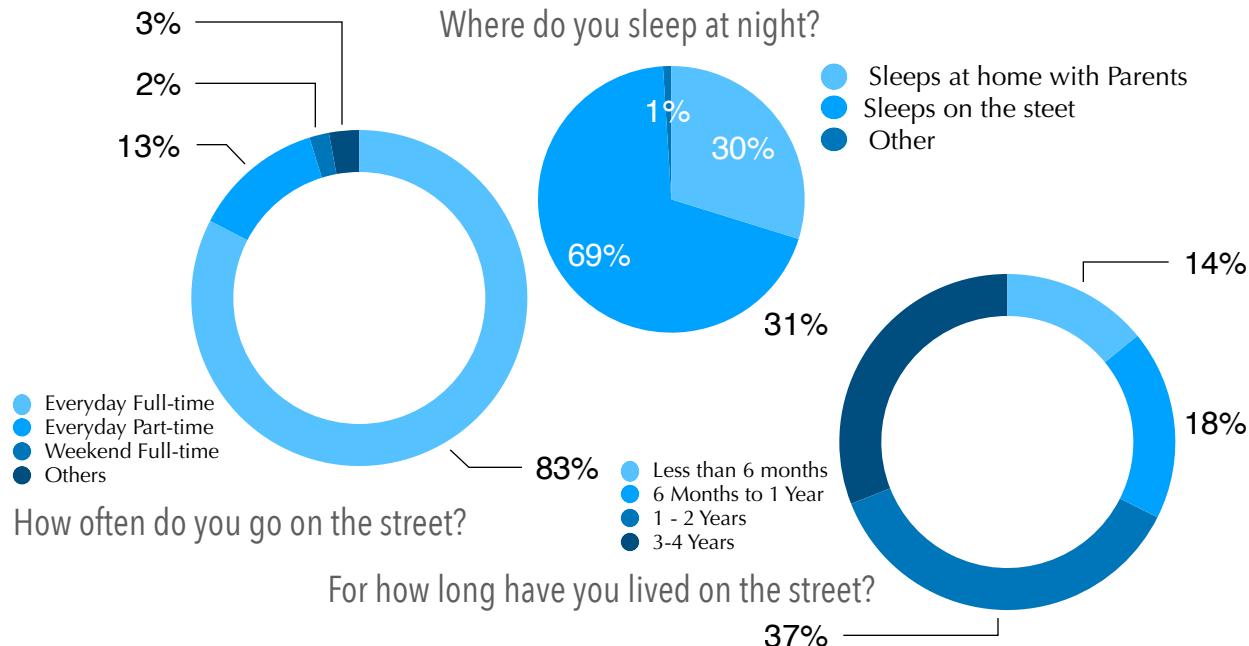
Key informants in Kismaio identified the causes of children in street situations to include displacement due to clan fighting leading to children ending up in the streets; death of parents/caregivers making the children to be total orphans. Family poverty resulting from loss of property/livestock due to robbery or looting leads to family displacement with the children ending up in the streets. Urban poverty also causes children to be neglected and as a result flee to the streets. Others identified lack of free education, parental neglect and the fact that many of the children escape their homes and prefer the streets where they have full freedom.

Some of the children in street situations who participated in the survey (35.4%) have been on the streets for between three and five years, 29.3% for between one and two years, while 25.3% have been there for less than one year. Around 8% have lived on the streets for between five and ten years, while only 2% have lived there for over 10 years (Chart 7).

The majority of the children (82.5%) are full time residents of the streets, 12.6% are there everyday part time, while 1.9% are on the streets full time on weekends, as shown in Chart 8.

Most of the children in street situations surveyed (69.2%) sleep on the streets, while slightly under a third (29.8%) sleep at home with their parents and guardians. Among the children in street situations who sleep on the streets, slightly over a third (36.6%) had done so for between one and two years, 31% for between 3 and 4 years, while 18.3% have slept on the street for between 6 months and 1 year. 14.1% have slept on the street for less than six months, as shown in Chart 8.

Chart 8 *LIFE ON THE STREET*



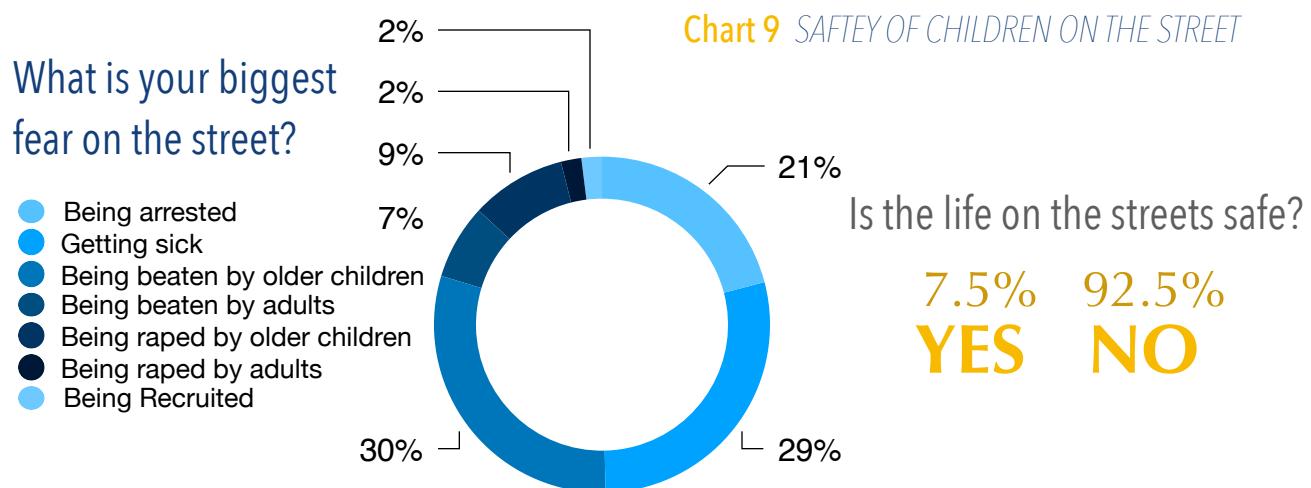
2.2.2 CHILDREN IN STREET SITUATIONS ENGAGEMENTS ON THE STREET

The key informants in Mogadishu, Galkaio and Kismaio identified the activities carried out by the children in street situations to include shoe-shining and car-washing as the most popular. Others are engaged in casual labor like cleaning compounds, restaurants, kiosks, markets, streets and other business premises; collecting garbage from restaurants; household cleaning and dishwashing. Others peddle sweets and miraa/khat on the streets; working in roadside tea kiosks. Some children in street situations were identified to be peddling drugs on the streets. Similar activities were reported in Baidoa. In Baidoa, the children were accused of being used by older persons to break in and steal from shops and business centers. Others were accused of snatching mobile phones on the street. Others noted that they sleep on the street, beg on the street and beat up other children.

The key informants in Mogadishu, Galkaio and Kismaio further noted the gendered activities between boys and girls, where the boys are reported to sell miraa/khat, collect garbage from restaurants, work in restaurants, clean cars, work as porters and clean shoes. On the other hand, the girls are reported to help the boys sell miraa/khat sometimes, sell sweets, work as domestic workers in people's houses where they clean dishes and clothes, clean restaurants and wash clothes in homes. In Baidoa, all the children in street situations were reported to be boys. Key informants in Kismaio noted that female children in street situations work more in the homes as opposed to the streets.

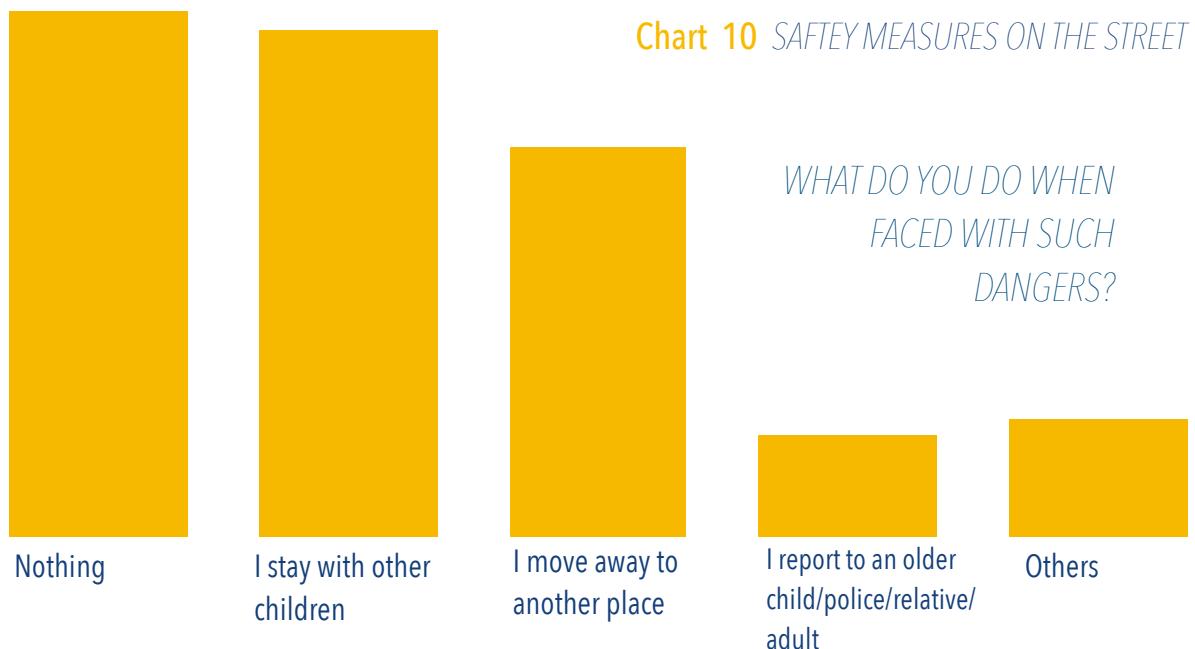
2.2.3 CHALLENGES FACED BY CHILDREN IN STREET SITUATIONS

When asked if they considered life on the street to be safe, an overwhelming majority of the children in street situations (92.5%) reported that it is not. Only 12.3% said that the streets were safe for them, as shown in Chart 9.



When prompted to name their fears on the street, most of the children feared being beaten by older children (44.2%), getting sick (42.3%) and being arrested (30.8%). The other fears they have include being raped by older children (13.5%), being beaten by adults (10.6%), being raped by adults (2.9%) and being recruited into armed groups (2.9%) (see Chart 9).

When further asked how they react when they find themselves in fearful situations, slightly less than a third of them (32%) said that they do nothing, 30.9% stayed with other children to avoid the problems, 23.7% said they moved away from the sources of their fears, while 6.2% said that they reported the challenges to older children, the police, religious leaders and adults, as shown in Chart 10.



The key informants in Mogadishu identified the problems faced by children in street situations in the city to include: gun fire wounds, accidents, injuries from incessant fights, exposure to danger and cold due to outdoor sleeping, drug abuse, health issues like asthma, vomiting and malnutrition and starvation. They pointed out that the children in street situations are always at high risk of death on the street. Similar sentiments were shared by key informants in Galkaio who noted that the children suffer as a result of poor sanitation and hygiene and lack of access to education. They also suffer from stress due to discrimination, disappointment and verbal/physical assault by community members.

The Baidoa key informants noted that the children in street situations kill and rape each other and they also suffer discrimination, are insulted, pelted with stones, and are humiliated by the community members and business people, who often chase them from their sleeping places on the street, while other children in the community fight them. They are also denied entry to public places like markets by property owners. They also lack food, health services, education and dedicated institutional care. Health wise, the children in street situations in Baidoa suffer from conditions associated with the effects of drug abuse, poor hygiene, lack basic needs including food and shelter. In Kismaio, it was noted that the children in street situations lack shelter, especially during bad weather and poor living conditions. Some children get killed, while others get sick with no care as they are alone on the street.

2.3 DRUG AND SUBSTANCE ABUSE AMONG CHILDREN IN STREET SITUATIONS IN SOMALIA

2.3.1 THE EXTENT OF DRUG AND SUBSTANCE ABUSE

Though various studies have been conducted on the existence and extent of drug abuse in Somalia, there is very little literature on the patterns and dynamics of drug abuse among children in street situations.⁷ These gaps

have led to lack of appropriate strategies and preparedness to address such abuse. All the key informants interviewed in Mogadishu agreed that drug and substance abuse among the children is a major challenge in the city. Some acknowledged that the problem is much bigger than what people think, while others noted that older children aged between 16 and 18 years were at much higher risk of drug abuse and that the problem is creeping into the wider community in the city. Similarly, key informants in Galkaio agreed that drug abuse was a major challenge among children in street situations in the city and pointed out that there is need for the community to deal with it urgently. Baidoa key informants acknowledged that drug abuse was a major problem among the children and is slowly developing into a crisis within the community, which if left unattended may run out of control in the future. Kismaio key informants concurred that drug abuse among children in street situations is a significant problem, with the majority doing some form of drugs. They, however, noted that it is a recent phenomenon as drugs can now be easily found on the streets.



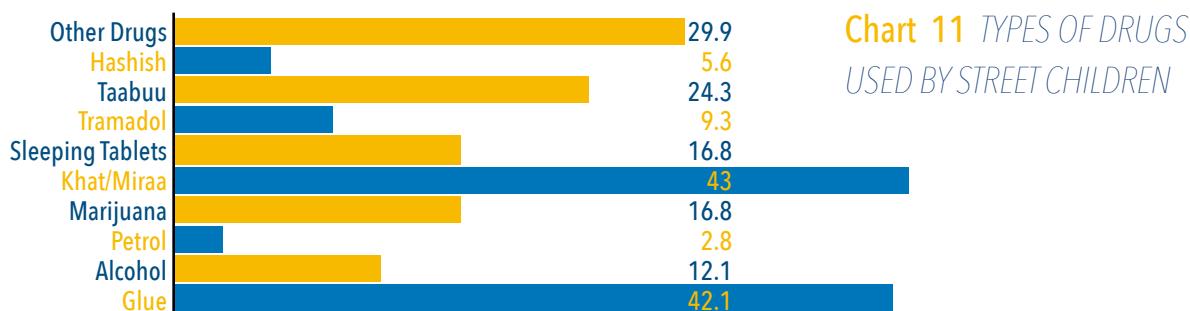
Children Sheltering Against the Wall, MOGADISHU 2020

⁷ UNICEF, supra note 2.

2.3.2 TYPES OF DRUGS AND SUBSTANCES ABUSED BY CHILDREN IN STREET SITUATIONS

Studies on children in street situations and their drug abuse habits in Somalia have been limited largely to describing the prevalence and types of drugs being abused by these children in street situations. Despite studies reporting the use within certain areas, there are limited data available on the use and types of drugs used by children in street situations in Somalia's urban centers like Mogadishu. Glue inhalation and khat chewing are particularly a problem in Mogadishu, which can result in damage to the teeth and respiratory systems of the users. The following are the types of drugs abused by the children:

- a) The main drug abused by the children in street situations in urban areas of Somalia was **KHAT**, the leaves of which have stimulating properties. In Somalia, miraa/khat is not classified as an illegal drug and is sold in large quantities in Somalia and mainly in Mogadishu where its market is readily available. Forty-three percent of the children in the survey acknowledge that they abuse khat, as shown in Chart 11.
- b) **GLUE** is readily available for abuse by the children in street situations in the cities of Somalia. Among the children in street situations who participated in the survey, glue was found to be the second most abused drug, with 42.1% acknowledging that they use it (Chart 11). Glue, petrol and sleeping pills were identified as the most commonly used drugs among the children in the four cities.
- c) **TAABUU⁸** was the third most abused drug among the children in street situations in Somalia, with 24.3% of the children acknowledging that they used it (Chart 11). The key informants in the four cities also acknowledged that the drug is widely used by the children in street situations in Somalia.
- d) There are two types of **ALCOHOL** being sold in Mogadishu city - a locally concocted brew, popularly known as *calaq*, and imported beers and spirits which have made many children to become alcoholic and later on becoming drug addicts, hence landing on the streets. The main challenge in dealing with alcohol traders was their ability to move their establishments from place to place. Areas around the Bakara market (Mogadishu's main market) and the districts of Hamar Jajab, Hodan, Hamar Weyne and Shangani in south Mogadishu, accounted for most of the children in street situations and alcohol and drug related issues. In the survey, alcohol was ranked fifth (12.2%) most abused substance by the children.
- e) During the survey, children in street situations in the four cities indicated that they also used **OTHER NARCOTICS** such as marijuana (16.8%), sleeping tablets (16.8%), alcohol (12.1%), tramadol (9.3%), Hashish (5.6%) and petrol, as shown in Chart 11. The key informants in the four cities also identified cigarettes, taabuu, hashish, marijuana, local alcohol/traditional beer, sleeping tablets, calaq, tramadol and petrol.



⁸ Taabuu is a nicotine-based type of smokeless tobacco, referred to as chewing tobacco. <https://www.youtube.com/watch?v=UE9dLUh9xI8>

2.3.3 SOURCES OF DRUGS USED BY CHILDREN IN STREET SITUATIONS

Slightly over half the children in street situations in the survey (58%) said that they were given the drugs that they abuse, 32.1% bought theirs, while 8.6% confessed stealing the drugs. As shown in Chart 12.

Chart 12 HOW CHILDREN IN THE STREET SOURCE THE DRUGS THEY USE

HOW DO YOU OBTAIN SUBSTANCE THAT YOU USE?

| | | | |
|----------------------------|-------------------------------|-----------------------------|---------------------------|
| 58% GIVEN | BOUGHT 32.1% | 1.2% STOLE | N/A 8.6% |
|----------------------------|-------------------------------|-----------------------------|---------------------------|

HOW DO YOU OBTAIN SUBSTANCE THAT YOU USE?

| | | | |
|-------------------------------|-------------------------------|-----------------------------|---------------------------|
| 45.5% WORKED | BEGGED 45.5% | 4.5% STOLE | N/A 4.5% |
|-------------------------------|-------------------------------|-----------------------------|---------------------------|

Among the 26% who bought their drugs, 45.5% worked for the money, another 45.5% begged for the money, while 4.5% said they stole the money to buy the drugs, as shown in Chart 12.

The key informants in Mogadishu identified the sources of the drugs that the children use to include business centers, begging, shops and pharmacies/chemist shops and friends. In Galkaio, the sources included small shops, garbage collection areas, business places and on the streets where they live; while in Baidoa the key informants identified the sources to include small shops, gas stations (glue and petrol) pharmacies, khat/miraa sellers, drug peddlers on the street, and child peddlers. Key informants in Kismaio noted that the children get the drugs they use through stealing or robbing people, while others buy the drugs using money acquired from their activities in the streets.

2.3.4 FACTORS CONTRIBUTING TO DRUG AND SUBSTANCE ABUSE AMONG CHILDREN IN STREET SITUATIONS

The key informants in Mogadishu noted that the children in street situations turn to drugs to get relief from pain and problems, to feel happy and escape from their many problems, to see themselves as real people, to sleep easily and to rest. Others turn to drugs due to peer pressure and to feel relaxed and due to addiction.

In Galkaio, Baidoa and Kismaio, the key informants identified the drivers of drug abuse among the children in street situations in the city to include relief from the pressures of the street, peer pressure and as a measure to withstand physical pain and hunger. In Baidoa and Kismaio, key informants added that it allowed them to sleep easier. Other key informants in Kismaio noted that the children mainly use drugs to get relief from the harsh conditions they live in, to pass time, while others said it was for entertainment after which they get addicted. In Kismaio, some informants pointed out that since the children do not have other positive activities to make themselves busy with, drug and substance abuse becomes widely common among these children.

2.3.5 HEALTH RISKS ASSOCIATED WITH DRUG ABUSE AMONG CHILDREN IN STREET SITUATIONS IN SOMALIA

The key informants in Mogadishu noted that children in street situations using drugs are exposed to health risks, such as neurological and psychological effects, lung cancer, low blood pressure, bleeding, running noses, damage to and loss of teeth, loss of appetite, heart attacks, kidney problems, blood poisoning and death. Socially, the use of drugs exposed the children to discrimination by the community due to the bad image they project to the community. The key informants in Galkaio also agreed that they are exposed to mental health problems but also identified other health challenges like throat cancer, HIV/AIDS and other transmittable diseases, TB and injury related diseases due to fights among the children in street situations.

The Baidoa, key informants noted that the children in street situations are generally vulnerable to all sorts of illness such as skin diseases, physical injuries from fights, hygiene and sanitation related diseases, malaria, tuberculosis, typhoid, measles and tetanus as the most common among the children. In Baidoa, one khat seller noted that drug use puts the children in greater danger because when they become extremely aggressive after taking the drugs, and fight to the point of hurting and/or killing each other.

In Kismaio, the key informants identified lung problems, physical and mental health challenges, communicable diseases. Others noted that it is associated with deterioration of children's health in general and physical injuries that the children may sustain. The drugs also make them to engage in other negative behaviors such as theft or robbery.

Many of the key informants interviewed in Mogadishu, Galkaio and Baidoa noted that the children in street situations are not aware of the negative effect of the drugs they are abusing. This lack of understanding was attributed to two key factors: the absence of awareness-raising by institutions or individuals to help them understand; their general lack of education. Others mistakenly believe that the drugs are an antidote to pressure and the pain they have to endure on the streets. Other key informants in the four locations said that the children know the effects, but they still just use them because they have no other choices as they are poor orphans with no shelter and food. They, therefore, underscored the urgent need for awareness creation among the children in street situations to make them understand the negative side effects of the drugs and substances that they abuse.

2.4 INITIATIVES TO ADDRESS CHILDREN IN STREET SITUATIONS CHALLENGES

2.4.1 COMMUNITY INTERVENTIONS

COMMUNITY ATTITUDES AND RESPONSE

Mogadishu-based key informants identified the challenges that come to the community with the proliferation of the children in street situations as major threat, due to fighting among themselves which can lead to death and/or injury, disturbing businesses (blocking entrances to shops and shoplifting), beating people, teaching other children bad behavior, giving drugs to others and undertaking criminal activity.

Mogadishu-based key informants also noted that the community disapproves the drug use by the children, leading to their stigmatization. The children are therefore treated as negative community influences, rather than being supported. Children found using drugs are verbally abused by community members; or if they are very young, then the community tries to intervene. A limited number of community members give the children clothes, blankets and food.

Key informants in Galkaio concurred with those in Mogadishu and pointed out that the children worrying the parents, litter the environment with garbage and pollution, misbehave and commit crimes. In Baidoa, the children in street situations were accused of beating and killing each other committing rape, and robberies.

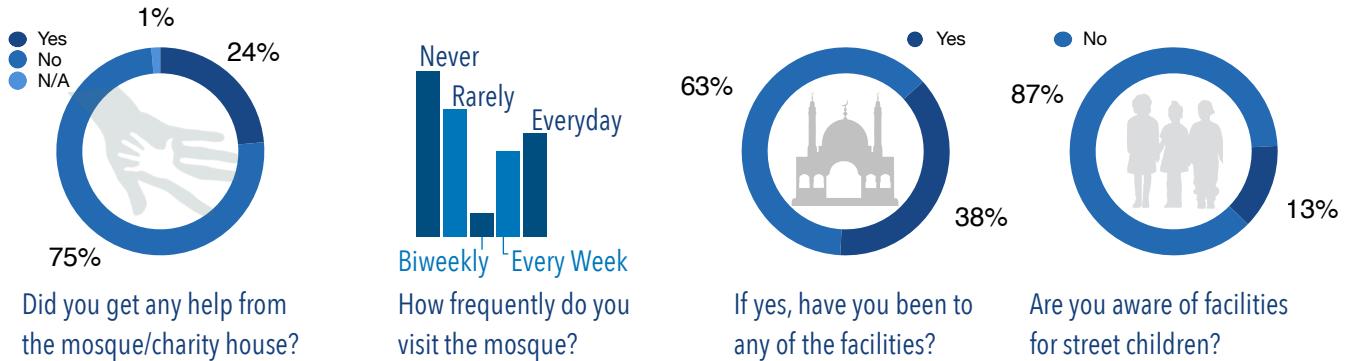
Community response is similar in Galkaio and Baidoa, who largely believe that it is the responsibility of the government to address the problem. In Galkaio, the children using drugs are discriminated, insulted and are at times beaten for using drugs. Similarly, community members in Baidoa are reported to discriminate, beat and insult children using drugs as a way of encouraging them to stop. Other community members in Baidoa educate the children about the dangers of using drugs. Key informants in Baidoa revealed that individual sheikhs in the community had established rehabilitation centers for the children in street situations, but most have closed down because of lack of funds. One khat seller stated that they beat the children when they try to collect khat residue from under the tables.

Similarly, the community members in Kismaio are generally against drug abuse by the children in street situations, but have not turned their public disapproval into action. Others noted that many community members in the town do not understand the phenomenon. The key informants in Kismaio acknowledged that children in street situations cause a lot of problems to the residents of the city. They said that the children are the leading cause of theft and robbery in the market and in the neighborhoods. Others say that due to their poor hygiene practices they pose health challenge to the community at large. They are also blamed for the insecurity in the town especially in the town center and suburbs. The police officer interviewed noted that the streets where the children sleep and gather are the most insecure areas of the town. The police usually have difficulty in dealing with children in street situations, since they do not have child-friendly or appropriate places to keep them once they arrest them. It was also noted that the children also pose health problems for themselves since they do not have health care, shelter and adequate hygiene. A few key informants in the four towns, however, noted that most of the children are still young and are therefore not dangerous, while others noted that the children pose no problem to the community, but are only a danger to themselves.

2.4.2 CHILDREN'S FACILITIES

When the children in street situations were asked if they know of any facilities and centers for them, most of them (86.8%) said they did not. Only 13.2% of the children said they were aware of the existence of such centers, as shown in Chart 13.

Chart 13 SOURCES OF HELP FOR THE STREET CHILDREN



When further asked if they have been to any of the centers, only 37.5% of the street boys stated that they had.

2.4.3 MOGADISHU

The child protection programs and policies in Mogadishu, include those initiated at the Federal level, such as the MoWHRD's Strategy on a Child Rights, and the MoE's Back to School Program. The Ministry of Internal Security, with its supervision of the police service, has a role in child protection, and have a system for child protection focal points and according to key informants, have on several occasions intervened to protect the children. In addition, certain NGOs have initiatives that support the children, for example, Kadare Street Children Rehabilitation and Orphanage Centre.

2.4.4 GALKAO

There are no formal initiatives towards fighting drug and abuse by the children nor are there rehabilitation services for children in street situations in Galkaio. However, students and other youth in the city have initiated their own anti-drug campaigns without support from the Government, local authorities, religious groups or NGOs. However, these youth organizations and groups face funding challenges which does make the initiatives sustainable. Religious sheiks in the city as well as schools have also been giving awareness sessions on the issues of children in street situations and drug abuse.

2.4.5 BAIDOA

The MoWHRD of South West State has drafted and is advocating for the Child Protection Policy (CPP). The Ministry is also planning to work with the business community to raise funds for the children's needs including building a center for them.

The South West State authorities have no direct program for the children in street situations, but have done some planning to ensure that they do not engage in crime. The police collect and solve the children's cases, especially with regard to drug abuse. The Governor's office has acknowledged the community concerns regarding children in street situations and is in the process of planning on how to deal with it.

The NGOs in the city have raised funds in collaboration with the business community and have distributed clothes and food to them, especially during Eid celebrations. The NGOs have also given them skills training for gainful employment to enable them to move out of the street and are also working with IDPs to prevent the IDP children from going to the streets.

Religious leaders in Baidoa are continuously creating awareness on the issue of children in street situations and drug abuse on Fridays, where they remind the community to take care of the children in the same way they do for their own children. They also talk about religious perspectives of drug abuse and the community's obligation to take care of problems facing it, including in relation to children in street situations.

The community in Baidoa is unable to do much for children in street situations given that it is still dealing with the long years of conflict. There are private rehabilitation centers in Baidoa, but these are too expensive for the children.

ARTICLE 2, NON-DISCRIMINATION



2.4.6 KISMAIO

The local government, some NGOs, religious and community groups in Kismaio provide variety of programs for children in street situations, while community organizations have conducted some form of awareness raising programs on their challenges. There are also some education programs to support children in street situations who cannot afford to go to school, including awareness raising programs.

2.4.7 EFFICACY OF PROGRAMS ON DRUG ABUSE

Discussions with different stakeholders in the four cities revealed that even though there are sporadic interventions to deal with the challenges facing the children in street situations, it is not still adequate. The key informants in Mogadishu and Kismaio noted that the current programs are not likely to contain the problem of children in street situations in the near future. Similarly, key informants in Galkaio felt that the existing programs are not effective due to lack of coordination between the authorities and those running the programs as well as a lack of funding. In Baidoa, the key informants noted that the programs are not effective because there is no enforcement of anti-drug laws, and a lack of programs to address drug abuse. The stakeholders in the four cities, however, pointed out that awareness raising and rehabilitation programs by religious leaders and other non-state actors are starting points that should be strengthened and scaled up.

3 CONCLUSIONS AND RECOMMENDATIONS

3.1 CONCLUSIONS

There are many children in street situations in the towns and cities of Somalia and community attitudes towards them are still largely negative and not supportive of the children and their well-being. In addition, there is a need for a policy framework to support interventions and measure, including rehabilitation services, to help the children's needs.

Any response should be guided by a child-rights approach which "ensures respect for the dignity, life, survival, well-being, development, participation and non-discrimination of the child as a rights holder.⁹" In this regard and mindful that this is an initial Assessment, the following recommendations are proposed.

3.2 RECOMMENDATIONS

RECOMMENDATIONS TO GOVERNMENT

- Develop a mechanism to consult with the children to facilitate their participation and gather their views about their circumstances, experiences and aspirations;
- Guided by the UN Convention on the Rights of the Child, develop and adequately resource a policy framework to address children in street situations, with a specific focus on drug and substance abuse. This policy framework should guide programmatic interventions which must, at a minimum, comprise the following:
 - Promote dialogue with the children, the community and relevant authorities;
 - School return initiatives for children in street situations willing to go back to school to do so;
 - Skills/vocational training programs for those children who may not be able to go back to school;
 - Suitable rehabilitation services/centers for the children on the street, especially the orphans. These centers should provide food, health and education facilities.
 - Sensitization campaigns to raise public and community awareness on children in street situations and drug and substance abuse;
 - Mainstream drug and substance abuse prevention initiatives in the school curriculum.
- Work with partner child protection organizations, communities and families to support reunification of children in street situations with their families, subject to the do no harm principle;
- Foster partnerships between all child protection partners to support children in street situations and combat drug and substance abuse. Strategies should be devised in close collaboration with the communities;
- Initiate in-depth research on the situation of children in the streets and identify appropriate and effective prevention and response options, including sharing rights-based policies and practices;
- Training for law-enforcement officers on child rights and child protection, particularly train-the-trainer programmes to ensure that the knowledge and understanding is spread throughout the Somali police service; and

⁹ General Comment, supra note 4, para. 10.

- Developing capacity-building and/or training initiatives to strengthen the capacity of judges, social workers, teachers, doctors and others responsible for protecting children's rights.

RECOMMENDATIONS TO UN AND OTHER DEVELOPMENT PARTNERS

- Support the Government to initiate in-depth research on the situation of children in the streets and identify appropriate and effective prevention and response options, including sharing rights-based policies and practices;
- Support the Government to develop a mechanism to consult with the children to facilitate their participation and gather their views about their circumstances, experiences and aspirations;
- Ensure that child-rights, with a particular focus on children in street situations, are mainstreamed into all UN and development partner programmes, particularly Rule of Law and Security;
- Support dialogue among children, CBOs, CSOs, the Government and other relevant actors to identify evidence-based interventions for prevention and response.

RECOMMENDATIONS TO COMMUNITIES AND PARENTS

- Undertake community sensitization to enable them accept and support children in street situation's reabsorption. Such sensitization should have a focus on drug and substance abuse;
- Cooperate with the mosques, especially those that are already dealing with the issues that children in street situations face, to support them;
- Community groups could initiate and encourage community fundraisers within the community to mentor the children and support them in addressing their problems;
- Encourage parents to engage with children to mentor them and to understand their problems so that they can identify early signs of lack of self-esteem, negative peer pressure and be supported to find solutions.





Federal Government of Somalia
Ministry of Women and Human Rights Development
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