Reintegration of street-connected children in Kenya: Evaluation of Agape Children's Ministry's Family Strengthening Program



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BACKGROUND

In Kenya, the number of street-involved children continues to grow, with most recent estimates as high as 250,000 to 300,000.^{1,2} Street-involved children are a highly vulnerable group, susceptible to adverse circumstances including abuse, substance use, early sexual activity, illiteracy, and lack of social supports.³ Services provided to street-connected children are needed to reduce risk and promote family reintegration, but most children who receive services return to the streets.^{4,5} Agape Children's Ministry (Agape) provides time-limited, crisis-oriented services to recently reintegrated families through its *Family Strengthening Program* (FSP), an in-home intervention delivered by social workers.⁶ Agape's FSP, which consists of parent training and family and marriage counseling, seeks to promote long-term family stability.

Christian Alliance for Orphans



Agape Children's Ministry provides comprehensive child and family services, including rescue, rehabilitation, reintegration, and redemption components, with main campus sites located in Kisumu, Kitale, and Nakuru, Kenya. Agape's *Family Strengthening Program*, the focus of this study, delivers time-limited crisis intervention services to high-risk families with children recently returned from the streets in rural Western Kenya. This research was funded in part by the Christian Alliance for Orphans (Center on Applied Research for Vulnerable Children and Families).

STUDY AIMS

Effective family reintegration programs should regularly assess client progress and analyze outcomes for revising, improving, and sharing methods. Toward this end, and to assess whether Agape is achieving intended outcomes (i.e., keeping reintegrated families together), we conducted an exploratory program evaluation of the FSP.

METHODS

Participants comprised a non-probability, purposive sample of 30 families (n = 30 children, 67% = male, 12.9 ± 2.2 years of age; n = 38 caregivers, 75% = female) enrolled in the FSP between September 1, 2022, and October 31, 2022. Family functioning was measured using a modified version of the Family Togetherness Scale (FTS), a 30-item tool validated in Kenya that assesses for family distress. Well-being was measured using the Child Status Index (CSI), a 48-item index that assesses well-being and needs across six domains (food/nutrition; shelter/care; protection; health; psychosocial; and education/skills training). We conducted paired-samples t-tests to determine whether there were significant changes on the FTS and CSI from before receiving Agape's FSP intervention to after receiving the intervention.

RESULTS

✤ The mean of differences on the FTS was 2.49 ± 1.53. Paired-samples t-test indicated that this is significantly greater than zero (t(67) = 13.44, p < .001, 95% CI [2.12, 2.86]) and large in magnitude (d = 1.63).</p>

Families collectively displayed improved functioning following participation.

✤ The mean of differences on the CSI was 0.47 ± 0.27. Paired-samples t-test indicated that this is significantly greater than zero (t(28) = 9.50, p < .001, 95% CI [0.37, 0.57]) and large in magnitude (d = 1.76).</p>

Child well-being improved following participation.

DISCUSSION

Results highlight the importance of using a holistic family-based program that reunites children with their healthiest possible family environment with a plan tailored to their individual needs and unique situations. **Recommendations:** (1) Organizations working with reintegrated families should engage in the intensive work that promotes family organization, emotional closeness, communication, and problem-solving; (2) Organizations working with reintegrated families should ensure attention to the diverse needs of families following reintegration so that well-being continues to increase across domains; (3) Organizations that want to further study the effectiveness of family-based interventions should engage in research that uses randomized controlled trial or quasiexperimental designs to further study the effectiveness of these types of programs.

All but 2 children remained reintegrated with their families at the end of the study period.

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