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 JOURNAL OF
 ADOLESCENT
 HEALTH

www.jahonline.org

Review article

The Health Status of Street Children and Youth in Low- and Middle-Income Countries: A Systematic Review of the Literature

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Article history: Received June 19, 2012; Accepted March 14, 2013

Keywords: Review; Adolescent; Homeless youth; Street children; Health status; Developing countries

 A B S T R A C T

The health of the tens of millions of street children globally is understudied. We undertook a systematic review of the existing quantitative literature regarding the health status of street children and youth in low- and middle-income countries to summarize available knowledge, identify underexplored areas of research, and inform the future research agenda regarding the health of this population. A total of 108 articles met our inclusion criteria. Demographic data and structural factors associated with street life are summarized. Although data in specific regions or diseases are sparse, the literature review illustrates that youth's survival behaviors and the exposures associated with poor shelter have resulted in disproportionate morbidity in the areas of infectious illness, psychiatric disease, reproductive health, and perhaps to a lesser extent, growth. Vast areas of health that may disproportionately affect street children in childhood or later on as adults have not been investigated, including chronic diseases and cognitive deficits. Studies of specific diseases or conditions vary considerably by region. Strengths and limitations of the literature are discussed and principles for future research in this area are proposed.

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 IMPLICATIONS AND
 CONTRIBUTION

Our literature review systematically documents areas of street child health that are understudied or not studied at all as well as the limitations of current research. Informed by our findings, our principles for further research can inform the future study of this vulnerable population.

A *street child*, as defined by UNICEF, is one “for whom the street (in the widest sense of the word, i.e., unoccupied dwellings, wasteland, etc.) more than their family has become their real home, a situation in which there is no protection, supervision, or direction from responsible adults” [1]. Although the number of children and youth who live on the streets of the world's cities is unknown, existing estimates suggest that tens of millions of children are street-based and that their numbers are rising secondary to global population growth, the HIV epidemic,

migration, and increasing urbanization [2]. The vast majority of the world's children, and of the world's street children, live in low- and middle-income countries [3], yet existing research regarding street children and youth has overwhelmingly been conducted in high-income countries.

UNICEF defines two overlapping groups of street children: *on-the-street* children, who are street-based but primarily sleep at home, and *of-the-street* children, who rarely, if ever, return home. There is general agreement in the literature that most street children are on-the-street rather than of-the-street [4–7]. Though these terms have been widely and appropriately critiqued, they remain the most currently used and provide an important distinction. As has been well documented, disconnection from family, community, and social capital is associated with poorer health outcomes [8–11]. Thus, an of-the-street child may experience substantively different challenges and health outcomes than his or her on-the-street counterpart. There is

Tables 1, 2, and 3 are available in the online edition of this article, which can be accessed through the DOI number below.

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a longstanding history of qualitative research regarding the survival strategies and lived experience of street children. However, quantitative research regarding the health status of both of- and on-the-street children in low- and middle-income countries is limited.

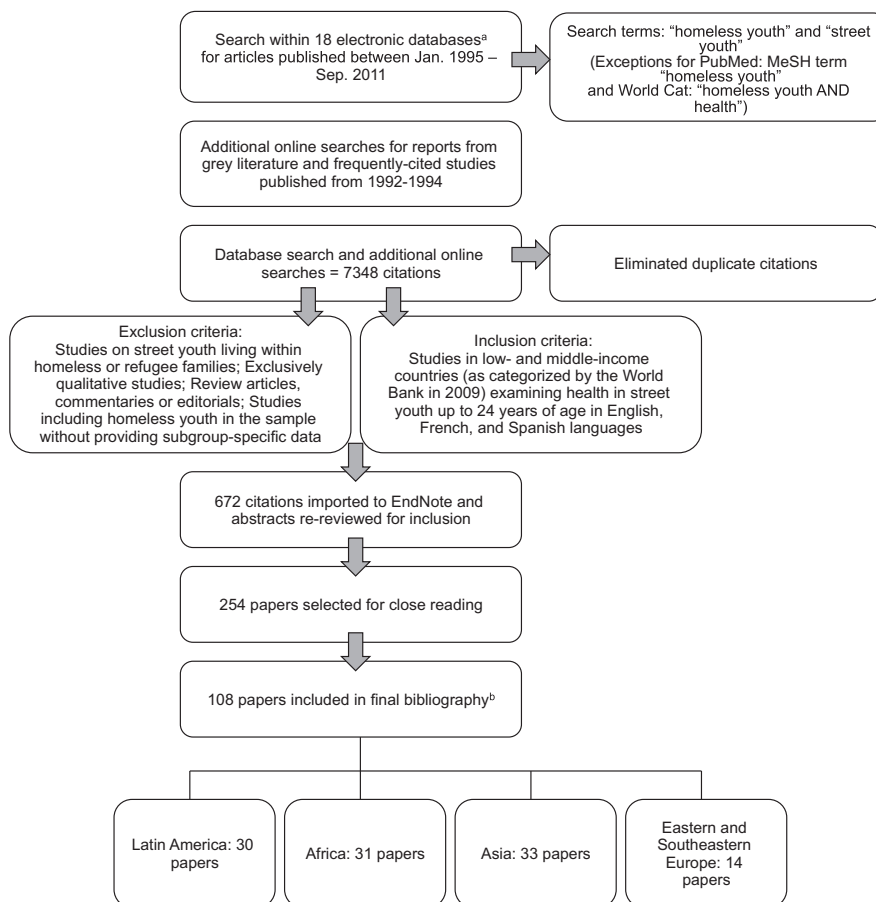
As emphasized in recent reviews of adolescent health, adolescence is a critical period of development, during which many of the health-related behaviors that will affect young people both in the present and into adulthood are initiated. Investment in adolescent health has lasting impacts on a country's overall health and economic wellbeing [12]. The goal of this review is to summarize available knowledge and identify underexplored areas of the health of street children in order to encourage and inform interventions and the future research agenda regarding street children in resource-limited settings. Our approach was informed by an ecological framework, consistent with the World Health Organization's definition of health as "a state of complete physical, mental, and social well-being" [13]. Our review therefore included studies that examined a range of health outcomes among street children, including both

traditional health indicators such as nutritional and growth status, and globally recognized, broader determinants of adolescent health, such as experiences of violence, substance use, and mental health [14].

Methods

Figure 1 summarizes our literature search. We performed a systematic search of 18 databases for articles published between January 1995 and September 2011 using the key words *homeless youth* and *street youth*. We complemented our formal search with reports from the gray literature (i.e., non-peer-reviewed reports from nongovernmental organizations or national or international bodies) found online or referenced in other sources. A few frequently cited studies coincident with the escalating HIV epidemic and published in 1994 were also included. A total of 7,348 citations were found in the database searches and gray literature and reviewed for inclusion.

Inclusion criteria included: quantitative measures of the health of street children and youth up to 24 years of age; publication in an



* AnthroPlus, Article First, CINAHL, Clase Periodica, Contemporary Women's Health eBooks, ECO, EconLit, eHRAF World Cultures, Francis, GenderWatch, PapersFirst, Proceedings, PsycInfo, PubMed, Scopus, Web of Science, WorldCat, WorldCat Dissertations

^b Countries covered: Argentina, Bangladesh, Bolivia, Brazil, Cameroon, Colombia, Costa Rica, Ecuador, Egypt, Ethiopia, Ghana, Guatemala, Guyana, Honduras, India, Indonesia, Iran, Kenya, Mexico, Mongolia, Namibia, Nepal, Nigeria, Pakistan, Peru, Philippines, Russia, Rwanda, South Africa, Sudan, Tanzania, Thailand, Turkey, Uganda, Ukraine, Zimbabwe

Figure 1. Literature search algorithm.

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